



**NOTICE OF PUBLIC MEETING – County of Santa Cruz  
MENTAL HEALTH ADVISORY BOARD**

**MARCH 16, 2023 ♦ 3:00 PM-5:00 PM**

**HEALTH SERVICES AGENCY**

**1400 EMELINE AVENUE, BLDG K, ROOM 207, SANTA CRUZ, CA 95060**

**THE PUBLIC MAY JOIN THE MEETING BY CALLING (831) 454-2222, CONFERENCE ID 311 318 08#**

Xaloc Cabanes Chair 1 <sup>st</sup> District	Valerie Webb Member 2 <sup>nd</sup> District	Michael Neidig Member 3 <sup>rd</sup> District	Serg Kagno Co-chair 4 <sup>th</sup> District	Jennifer Wells Kaupp Member 5 <sup>th</sup> District
Laura Chatham Member 1 <sup>st</sup> District	Stephen T. Busath Member 2 <sup>nd</sup> District	Hugh McCormick Member 3 <sup>rd</sup> District	Antonio Rivas Member 4 <sup>th</sup> District	Jeffrey Arlt Secretary 5 <sup>th</sup> District

Felipe Hernandez Board of Supervisor Member	
Tiffany Cantrell-Warren Behavioral Health Director	Karen Kern Adult Behavioral Health Services Director

**IMPORTANT INFORMATION REGARDING PARTICIPATION IN THE  
MENTAL HEALTH ADVISORY BOARD MEETING**

The public may attend the meeting at the Health Services Agency, 1400 Emeline Avenue, Room 207, Santa Cruz. All individuals attending the meeting at the Health Services Agency will be required to use face coverings regardless of vaccination status. Individuals interested in joining virtually may click on this link: [Click here to join the meeting](#) or may participate by telephone by calling (831) 454-2222, Conference ID 311 318 08#. All participants are muted upon entry to prevent echoing and minimize any unintended disruption of background sounds. This meeting will be recorded and posted on the Mental Health Advisory Board website.

If you are a person with a special need, or if interpreting services (English/Spanish or sign language) are needed, please call 454-4611 (Hearing Impaired TDD/TTY: 711) at least 72 hours in advance of the meeting in order to make arrangements. Persons with disabilities may request a copy of the agenda in an alternative format.

Si usted es una persona con una discapacidad o necesita servicios de interpretación (inglés/español o Lenguaje de señas), por favor llame al (831) 454-4611 (Personas con Discapacidad Auditiva TDD/TTY: 711) con 72 horas de anticipación a la junta para hacer arreglos. Personas con discapacidades pueden pedir una copia de la agenda en una forma alternativa.

## MENTAL HEALTH ADVISORY BOARD AGENDA

3:00 Regular Business	
I.	Roll Call
II.	Public Comment (No action or discussion will be undertaken <i>today</i> on any item raised during this Public Comment period except that Mental Health Board Members may briefly respond to statements made or questions posed. Limited to 3 minutes each)
III.	Board Member Announcements
IV.	<i>Approval of February 16, 2023 minutes*</i>
V.	Secretary's Report
3:15 Public Hearing	
Mental Health Services Act 3-Year Plan Fiscal Years 23/24 – 26/27 Karen Kern, Adult Services Director	
3:50 Standing Reports	
I.	Board of Supervisors Report – Supervisor Felipe Hernandez
II.	Behavioral Health Report – Tiffany Cantrell-Warren, Behavioral Health Director and Karen Kern, Adult Services Director
III.	Committees
A.	Standing Committees
1.	Budget
2.	Community/Publicity – <i>Dissolve standing committee status and become ad hoc*</i>
B.	Ad Hoc Committees
1.	Peer Support Certification
2.	9-8-8
3.	Ideal Crisis System
IV.	Patients' Rights Report – George Carvalho, Patients' Rights Advocate for Advocacy, Inc.
4:30 New Agenda Items	
I.	Retreat 2023
II.	Kaiser and Behavioral Health Unit Discussion
III.	Santa Cruz Mental Health Advisory Youth
IV.	<i>Vote on Letter to Board of Supervisors*</i>
4:55 Future Agenda Items	
5:00 Adjourn	

*Italicized items with \* indicate action items for board approval.*

---

**NEXT REGULAR MENTAL HEALTH ADVISORY BOARD MEETING IS ON:**

**APRIL 20, 2023 ♦ 3:00 PM – 5:00 PM**

**HEALTH SERVICES AGENCY**

**1400 EMELINE AVENUE, BLDG K, ROOMS 206-207**

**SANTA CRUZ, CA 95060**

**MINUTES – Draft**

**MENTAL HEALTH ADVISORY BOARD**

FEBRUARY 16, 2023 ♦ 3:00 PM - 5:00 PM  
1400 EMELINE AVE, ROOMS 206-207, SANTA CRUZ  
Microsoft Teams Meeting (831) 454-2222, Conference 624 238 186#

**Present:** Antonio Rivas, Hugh McCormick, Jeffrey Arlt, Jennifer Wells Kaupp, Laura Chatham, Michael Neidig, Serg Kagno, Stephen Busath, Valerie Webb, Xaloc Cabanes, Supervisor Felipe Hernandez  
**Absent:** None  
**Staff:** Karen Kern, Jane Batoon-Kurovski

- I. Roll Call – Quorum present. Meeting called to order at 3:05 p.m. by Chair Xaloc Cabanes.
- II. Public Comments
  - Richard Gallo from Access CA – announced slots are available for peers to join the CA Association of Peer Professional, which is a statewide organization for peers. Regarding the MHSA 3-year plan, Richard stated it is critical that the County makes sure they get adequate feedback about gaps in services in the mental health community, which includes the unhoused who utilize the service center in Santa Cruz, MHCAN, NAMI Santa Cruz.
  - BJ Nadeau – stated that the County failed to include treatment as an intervention, so when the County received the SAMHSA grant, they contracted with the applied crisis training to provide gatekeeper, assessing, and mitigating risk trainings, all critical tools and strategies, but they are not treatment for suicidal thoughts and behaviors.
  - Nicholas Whitehead – presented two issues:
    - 1) CARE Court – he requested to discuss at a future meeting if haven't discussed in previous meeting.
    - 2) Homeless at the Benchlands – County moved them out due to flooding, however he stated it was not carried out in a humanitarian way. Nicholas requested to put this item on future agenda.
  - Perry Spencer from Up To Peace – stated they are cultivating change in the way people think and speak. Perry is reaching out to MHAB for advice on how to connect with mental health issues. He announced the pop-up Art Café will be held on August 4<sup>th</sup> at 3pm on Cooper Street.
  - Steve Dille, Executive Director of the Veterans Art Project – Steve stated the project is an innovation funded statewide project by MHSOAC and is partnering up with Up To Peace. He is looking for Santa Cruz County veterans who are artists and will participate in zoom meetings and artist trainings. He stated that working in the art space is a means for mental health and wellness and the arts centered tools help veterans thrive.
  - Tonya, Director of Advocacy for the Veterans Arts Projects – stated that art is the new healing to modality and veterans need the human interaction, opportunities to be around other veterans. The arts and pop-up cafes provide an opportunity to hear the veterans stories.

- Dean Kashino, Retired Physician – asked what the County plans are for implementation of CARE Court. He also asked about the accounting plans and how it will be implemented.
- III. Board Member Announcements
- AB361 no longer applies to meetings. Starting March 1, 2023, the board will be required to attend meetings in person.
  - Xaloc attended the Board of Supervisors meeting on February 14, 2023 to talk about the Data Notebook.
  - New Board Member – Stephen Busath is a 6-year resident in Santa Cruz County. He stated he is a police officer but not representing the agency.
  - MHCAN tour with Sarah Leonard is done. MHCAN is working on a project and hope they will do a presentation in the next few months. MHCAN can't provide certain services due to restrictions imposed by the City of Santa Cruz.
- IV. Business / Action Items
- A. Approve January 19, 2023 Minutes.  
Motion/Second: Jeffrey Arlt / Antonio Rivas  
Ayes: Antonio Rivas, Hugh McCormick, Jeffrey Arlt, Jennifer Wells Kaupp, Laura Chatham, Michael Neidig, Serg Kagno, Stephen Busath, Valerie Webb, Xaloc Cabanes  
Abstain: Supervisor Felipe Hernandez  
Motion passed.
- V. Reports
- A. Secretary's Report
- Attendance – no issues
  - Trainings – asking board members to consider alternate method of tracking trainings.
- B. Board of Supervisors Report – Supervisor Felipe Hernandez  
Supervisor Hernandez introduced himself to the Board. He stated he was previously on City Council for 9 years, and almost 3 years on the Cabrillo College Board of Trustees. He is a Veteran of the Army and was at Dessert Storm. Supervisor Hernandez stated that he wants to be involved with the MHAB and advocate for the veterans that are dealing with mental health issues and for the young people and Latino community as numbers have increased.
- C. Behavioral Health Report, Karen Kern, Adult Services Director
- 1) Adopting the Crisis Now model working with MHSOAC, who is offering free technical assistance to work with a consultant to see whether or not it would fit our community. Crisis Now focuses on three areas: receiving center, 24/7 mobile emergency response, call center. Opportunities for stakeholder feedback will be on Tuesday and Wednesday next week at noon. The meetings will include a quick presentation from our consultant Recovery Innovations International and additional information will be provided about where we are right now in our county with the receiving center, call center and mobile emergency response team that is currently operating.
  - 2) Crisis Continuum - Request For Proposal (RFP) came out. Currently going through the process of reviewing proposals for the crisis stabilization program and the psychiatric health facility.
  - 3) MHSA 3-year Plan is starting up. Hired RDA to assist with the plan. All information is available on the website.
  - 4) Andrea Tolaio provided statistics for 988.  
Calls answered in Santa Cruz County: 1846 calls in 2021 and 2901 calls in 2022 (57% increase). Calls answered means they were engaged with responder. Incoming calls increased 93%, only 698 in 2021 and 5218 in 2022. In terms of responder hours on lifeline, 12,430 hours total in 2022. There are 61 volunteer responders, 14 staff responders and 7 administrative staff.

#### D. Committee Updates

##### 1. Standing Committees

###### a. Budget

- Committee decided to contact other counties and entities to find out specifically how they are financially sustaining their crisis response programs. They will also ask what expenses they are encountering in the cost of equipment and supplies when they are trying to be reimbursed for services (medical, private insurance). The committee will request a copy of their financial report.
- Antonio is going to attend the Pajaro Valley Healthcare District Board meetings. Laura is going to get in touch with Ben Adam Clymer to get information on the financing of mobile crisis response.
- Jeff's personal request is to deny Kaiser Permanente's proposal to build a facility in Santa Cruz unless they have behavioral health services. Discussion on this topic will continue at the next meeting.

- ###### b. Community Engagement/Publicity – Val recommends that the committee should be an ad hoc as the committee doesn't have ongoing items. As events come up, the committee will meet and engage at that time. The board will vote next month to change the status of this committee from standing to ad hoc.

##### 2. Ad Hoc Committees

- ###### a. Peer Support Certification – Hugh completed certification two months ago. He is waiting to take the exam in the next month. He is looking forward to continuing discussions with the people from the Department of Health Care Services, CalMHSA, NAMI and SHARE.
- ###### b. 988 – no update.
- ###### c. Ideal Crisis System – supporting Crisis Now events and getting the word out regarding next week's meetings on Tuesday, February 21st and Wednesday, February 22<sup>nd</sup>, 12pm-1pm.

#### E. Patients' Rights Report – George Carvalho, Patients' Rights Advocate

George was present at the meeting. January report was provided.

George reported that AB2275 is in effect and basically rewrites the 5150 section which provides additional rights for people on hold. If individual is placed on a second 5150, a writ needs to be placed, and must have a hearing similar to 5250. ER's will be affected, parking lot 5150 must wait 12 hours. In 2022, 31 were placed on a second 5150.

#### VI. New Agenda Items

- ##### 1. Retreat – meeting dates and possible topics to be discussed next month.

#### VII. Future Agenda Items

1. CARE Court
2. Kaiser and Mental Health Facility
3. Homeless at the Benchlands
4. Change Publicity Committee status to ad hoc

#### VIII. Adjournment

Meeting adjourned at 5:04 p.m.

Patients' Rights Advocate Report

February 2023

\*\*\*\*\*

**Note: Ms. Davi Schill took authorized leave during the month.**

**Record 13766**

**7<sup>th</sup> Avenue Center**

On February 2, 2023, this writer received a phone report of a resident-to-resident altercation at the 7<sup>th</sup> Avenue facility. The incident began with a verbal altercation which escalated to one resident striking the other in the face area. Sheriffs were notified and took a report from the reported victim. This writer will check in with this person upon my next monitor of the facility. On February 9, 2023, this writer attempted to speak with the reported victim. However, this person was not willing to talk about the incident and may have forgotten the matter entirely.

**Record 13778**

**7<sup>th</sup> Avenue Center**

On February 13, 2022, this writer received a phone message from the 7<sup>th</sup> Avenue Center facility of a resident-to-resident altercation. On February 16, 2022, this writer interviewed the reported victim. This writer witnessed bruising around the left jaw of the resident. The resident responded slowly and with some effort however did understand English and moved her mask upon my request. This person chose not to contact local law enforcement. This writer placed 3 calls to the conservator however, as of this date (3/8/2023), the conservator has not returned my calls.

**Record 13781**

**7<sup>th</sup> Avenue Center**

On February 13, 2023, this writer received a report of resident-to-resident altercation at the 7<sup>th</sup> Avenue Facility. An argument ensued between two residents during smoking break which escalated to the point where one spat at the other. Local law enforcement was contacted, and a case number assigned by the Santa Cruz Sheriffs. On 2/20/2023. This writer checked in with reported victim. No further action was needed nor requested by the reported victim.

**Record 13805**

**7<sup>th</sup> Avenue Center**

On February 22, 2023, this writer received a phone message regarding a resident-to-resident altercation. The reported victim was struck by the alleged perpetrator when she refused to turn down the music on her radio. As of this writing this writer has not received the written report from the facility

**Record 13782**

**7<sup>th</sup> Avenue Center**

On 2/27/23, This writer received a phone message from the mother of a person residing at 7<sup>th</sup> Avenue Center. The mother was concerned that not enough was being done by either the county or the facility to transfer her son to a lower level of care. This writer did speak with the client before his mother contacted our program and was aware of the client's concern. Nevertheless, this writer did place two calls to the mother but was not able to reach her. I spoke with the conservator and advocated for the client's transfer to a lower level of care.

**Record 13777**

**Willowbrook**

On February 13, 2023, this writer spoke with a resident of the Willowbrook facility. This resident received payee services from Benefits Management Corporation. The resident requested my aid in working with this agency to have money returned to him that had been paid for necessary medication. This writer informed the resident that a payee is required to pay for necessary expenditures and encouraged him to work with his treating physician to either stop that medication or find a more cost friendly substitute. The resident understood and agreed with my explanation. I will communicate with the resident to determine whether this issue has been resolved to his satisfaction.

\*\*\*\*\*

ADVOCACY INC.

TELECARE CLIENT CERTIFICATION AND REISE HEARING/PATIENTS' RIGHTS  
REPORT

February 2023

Third Quarter

1. TOTAL NUMBER CERTIFIED	30
2. TOTAL NUMBER OF HEARINGS	30
3. TOTAL NUMBER OF CONTESTED HEARINGS	14
4. NO CONTEST PROBABLE CAUSE	16
5. CONTESTED NO PROBABLE CAUSE	04
6. VOLUNTARY BEFORE CERTIFICATION HEARING	0
7. DISCHARGED BEFORE HEARING	0
8. WRITS	0
9. CONTESTED PROBABLE CAUSE	10
10. NON-REGULARLY SCHEDULED HEARINGS	0

Ombudsman Program & Patient Advocate Program shared 0 clients in this month  
(shared = skilled nursing resident (dementia) sent to behavioral health unit or mental  
health client placed in skilled nursing facility)



*\*The usual scheduled hearing days are Tuesdays and Fridays. Due to the pandemic and the shortage of bed availability throughout the state of California hearings can be scheduled throughout the week to accommodate legal requirements that hearings must occur no later than one week of hospitalization.*

The following is an account of activity February 1, 2023, through February 28, 2023, of representation to clients held at Telecare (Santa Cruz Psychiatric Health Facility) facing Reise Hearings.

Total number of Reise petitions filed: 5

Total number of Reise Hearings conducted: 5

Total number of Reise Hearings lost: 5

Total number of Reise Hearings won: 0

Total number of Reise Hearings withdrawn: 0

Hours spent on Reise Hearings Conducted: 3.5

Hours spent on cancelled Reise hearings: 3.5 hours

\*Reise appeal: 0

Hours spent on all Reise Hearings included those hearings that were cancelled by the hospital:  
1.5 hours.

*The following is an account of 5150 hearing activity February 1, 2023, through February 28, 2023, of representation on behalf clients held at Telecare CSP (Santa Cruz Telecare Crisis Stabilization Program) facing 5150 hearing (AB2275) Hearings.*

*AB 2275 hearing conducted: 0*

Respectfully submitted,

Davi Schill, PRA

George N. Carvalho, PRA

Santa Cruz County Board of Supervisors  
701 Ocean Street, Room 500  
Santa Cruz, CA 95060  
Phone: (831) 454-220

Re: Letter of recommendation to the Santa Cruz County Board of Supervisors to: Ensure that Kaiser Permanente provides Integrated Behavioral Health Services including but not limited to onsite urgent care, ongoing treatment, and therapy for their members at the proposed Specialty Medical Office Building located on 5940 Soquel Avenue.

To Santa Cruz County Board of Supervisors,

The Mental Health Advisory Board of Santa Cruz County strongly recommends that the Santa Cruz County Board of Supervisors take immediate action to ensure that the Kaiser Permanente Medical Office Building at 5940 Soquel Avenue provides integrated behavioral health services including but not limited to onsite urgent care, ongoing treatment, and therapy for their estimated 6000 members.

<sup>1</sup>The project at 5940 Soquel Avenue is designed as a 160,000 square foot, 3 story, Specialty Medical Office Building. It includes advanced medical services, a 24-hour urgent care clinic and medical offices. It is an outpatient facility not a hospital. The project, located on a 4.98 acre site, will include a 730 space, 5 level, parking structure, including 40 EV charging stations, 122 bike rack spaces, and 36 bike lockers.

Not one square inch is dedicated to behavioral health services as currently stated in the project plan,

Behavioral health services are one of Santa Cruz community's top health care needs for adults, transitional age youth, and children as cited in the <sup>2</sup>Santa Cruz County Community Health Improvement Plan 2018-2023. We need all our service providers to partner in meeting the behavioral health care needs of our community.

Again, the Mental Health Advisory Board of Santa Cruz County strongly recommends that the Santa Cruz County Board of Supervisors take immediate action to ensure that Kaiser Permanente provides integrated behavioral health services including but not limited to onsite urgent care, ongoing treatment, and therapy for their members at the proposed Specialty Medical Office Building located on 5940 Soquel Avenue.

Please do not hesitate to contact Xaloc Cabanes, chair of MHAB, should you have any questions.

Sincerely,  
Mental Health Advisory Board of Santa Cruz County

---

<sup>1</sup> <https://www.5940soquelave.com/?pgid=jpx86uxb-1d294ad5-1e9c-4f08-9775-9b05511470b1>

<sup>2</sup> <https://www.santacruzhealth.org/Portals/7/Pdfs/PH%20Accreditation/SantaCruz%20CHIP%202018-2023.pdf>

# Kaiser Permanente Coming To Santa Cruz In 2017

---

NEWS PROVIDED BY

**Kaiser Permanente**

Apr 19, 2016, 01:00 ET

SHARE THIS ARTICLE

---

OAKLAND, Calif., April 19, 2016 /PRNewswire/ -- Residents of Santa Cruz County will soon have access to Kaiser Permanente's unique blend of high quality, affordable health care and award-winning coverage. The Oakland-based nonprofit expects to expand into the Santa Cruz area beginning in January, 2017.

The Santa Cruz area is a natural fit for Kaiser Permanente, which already has more than 5,800 members who live in the area and work in one of the health care provider's existing service areas. In addition, over 500 Kaiser Permanente employees already live in the local communities.

Gregory A. Adams

Kaiser Permanente announces plans to bring affordable, high quality health care to Santa Cruz County

"We are excited to begin bringing our high-quality care and service to the people of Santa Cruz County," said [Gregory A. Adams](#), group president and regional president of Kaiser Foundation Health Plan and Hospitals in Northern California. "Kaiser Permanente has been keeping our members healthy throughout Northern California for 70 years."

Pending regulatory approval, Kaiser Permanente will begin offering commercial and Covered California coverage and care effective January 1, 2017.

By next January, Kaiser Permanente plans to open three medical office buildings located at Crossroads Center in Watsonville, downtown Santa Cruz and the Granite Creek Business Center

in Scotts Valley. Renovations will soon be underway to convert the properties into the welcoming, [integrated](#), convenient medical office building environments that Kaiser Permanente members expect. All three medical office buildings will provide primary care and the Watsonville and Scotts Valley facilities will also feature some specialty services. In addition, all three facilities will offer technology that will facilitate telemedicine visits. The offices in Watsonville and Scotts Valley will also feature laboratory, pharmacy and radiology services.

Santa Cruz members will have access to the full range of health care benefits Kaiser Permanente is known for. Local hospital services and inpatient care will be provided by [Watsonville Community Hospital](#) as well as at nearby Kaiser Permanente medical centers in [Santa Clara](#) and [San Jose](#).

"We are pleased to be selected as Kaiser Permanente's plan hospital for the Santa Cruz area," said [Audra Earle](#), CEO of Watsonville Community Hospital. "We have been caring for this community for over 100 years and look forward to providing high quality care to Kaiser Permanente members."

Over time, Kaiser Permanente plans to continue to expand in Santa Cruz County based on the needs of the community and its members.

"We are national leaders in providing high quality medical care for our patients," said [Robert Pearl, MD](#), executive director and CEO of [The Permanente Medical Group](#). "Our physicians trained at the best programs in the nation, and they offer their patients highly personalized health care in the most technologically advanced ways possible. The result is we are leaders in prevention, chronic disease management and cutting edge surgical and medical interventions."

Kaiser Permanente first signaled its interest in becoming part of the Santa Cruz community when it obtained naming rights for the local basketball arena [in 2012](#). Through Kaiser Permanente's partnership with the [Santa Cruz Warriors](#), during the 2015-2016 season more than 6,000 students at nine local schools participated in programs designed to encourage literacy and math skills.

"Part of Kaiser Permanente's mission is to improve the health of the communities we serve," said [Irene Chavez](#), senior vice president and area manager. "Kaiser Permanente has a long history of working with local schools, nonprofits, community partners and the health care safety net to identify community needs and we look forward to continuing to build strong partnerships with the Santa Cruz community."

Follow Kaiser Permanente in Santa Cruz on Twitter at [@KPSantaCruz](#).

### ***About Kaiser Permanente***

*Kaiser Permanente is committed to helping shape the future of health care. We are recognized as one of America's leading health care providers and not-for-profit health plans. Founded in 1945, Kaiser Permanente has a mission to provide high-quality, affordable health care services and to improve the health of our members and the communities we serve. We currently serve more than 10 million members in eight states and the District of Columbia. Care for members and patients is focused on their total health and guided by their personal physicians, specialists and team of caregivers. Our expert and caring medical teams are empowered and supported by industry-leading technology advances and tools for health promotion, disease prevention, state-of-the-art care delivery and world-class chronic disease management. Kaiser Permanente is dedicated to care innovations, clinical research, health education and the support of community health. For more information, go to: [kp.org/share](http://kp.org/share).*

### **Contact:**

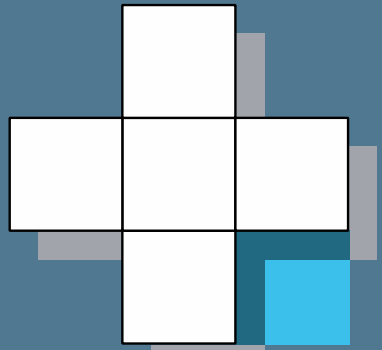
Karl Sonkin, (408) 528-5168

Photo - <http://photos.prnewswire.com/prnh/20160418/356879>

Photo - <http://photos.prnewswire.com/prnh/20160418/356878>

Logo - <http://photos.prnewswire.com/prnh/20130718/SF49717LOGO>

SOURCE Kaiser Permanente



**PMB**

SANTA CRUZ COMMUNITY  
MEETING  
11.3.2021

Please email additional question:  
[5940soquel@gmail.com](mailto:5940soquel@gmail.com)



# PRESENTATION

01. The Project

02. Transportation

03. Proposed Project Improvements

04. Summary

05. Questions



**01.**  
**THE PROJECT**



# 5940 SOQUEL AVE



- 160,000 square-foot Specialty Medical Office Building (MOB).
- It is an outpatient facility, not a hospital.



- The facility will include advanced medical services, urgent care clinic, medical offices, café and spaces for public use.



- Local union construction jobs, and permanent healthcare positions will be created as a result of this project.



- Will be occupied by Kaiser Permanente to serve its existing members in the County.



- 122 bike rack spaces for short-term bicycle parking and an enclosed bike parking area with 36 bike lockers.



- 730-space parking structure, including more than 40 EV ready charging stations.
- Mitigate impacts to street parking and nearby homes and businesses.

# 5940 SOQUEL AVE



- Reduce Vehicle Miles Traveled (VMT) by approx. 20,000+ VMT/Day.
- Many of the traffic trips related to this project will be rerouted healthcare trips, not new trips.



- A comprehensive traffic study was completed as part of the project's Environmental Impact Review (EIR).
- Proposing to add traffic lights, enhance the existing bicycle network and redirect traffic patterns to better manage the area's traffic.



- Reduce traffic impacts and greenhouse gas emissions.
- Transportation Demand Management (TDM).



- LEED Gold certified building.
- Includes trees and other drought-tolerant landscape.

# SITE SELECTION PROCESS



Site geometries can accommodate a minimum of 160,000 SF without underground parking



No ground leases or special ownership requirements (I.e., multiple owners)



Minimum 5 acres of developable land area



Uncumbered by existing legal or biological concerns



Central County location with convenient fwy access for patients and staff



Reviewed many other sites in the County that did not meet the criteria

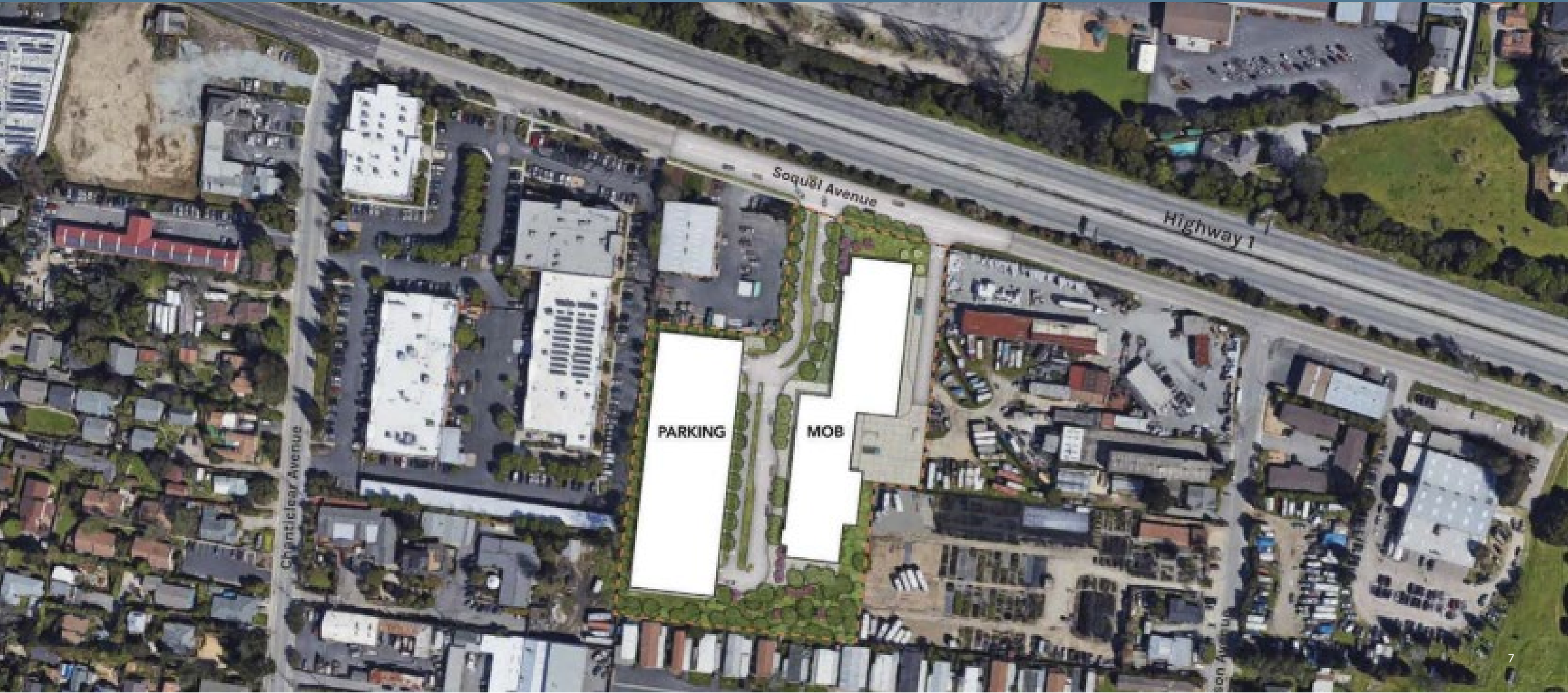


Available for sale at a market value

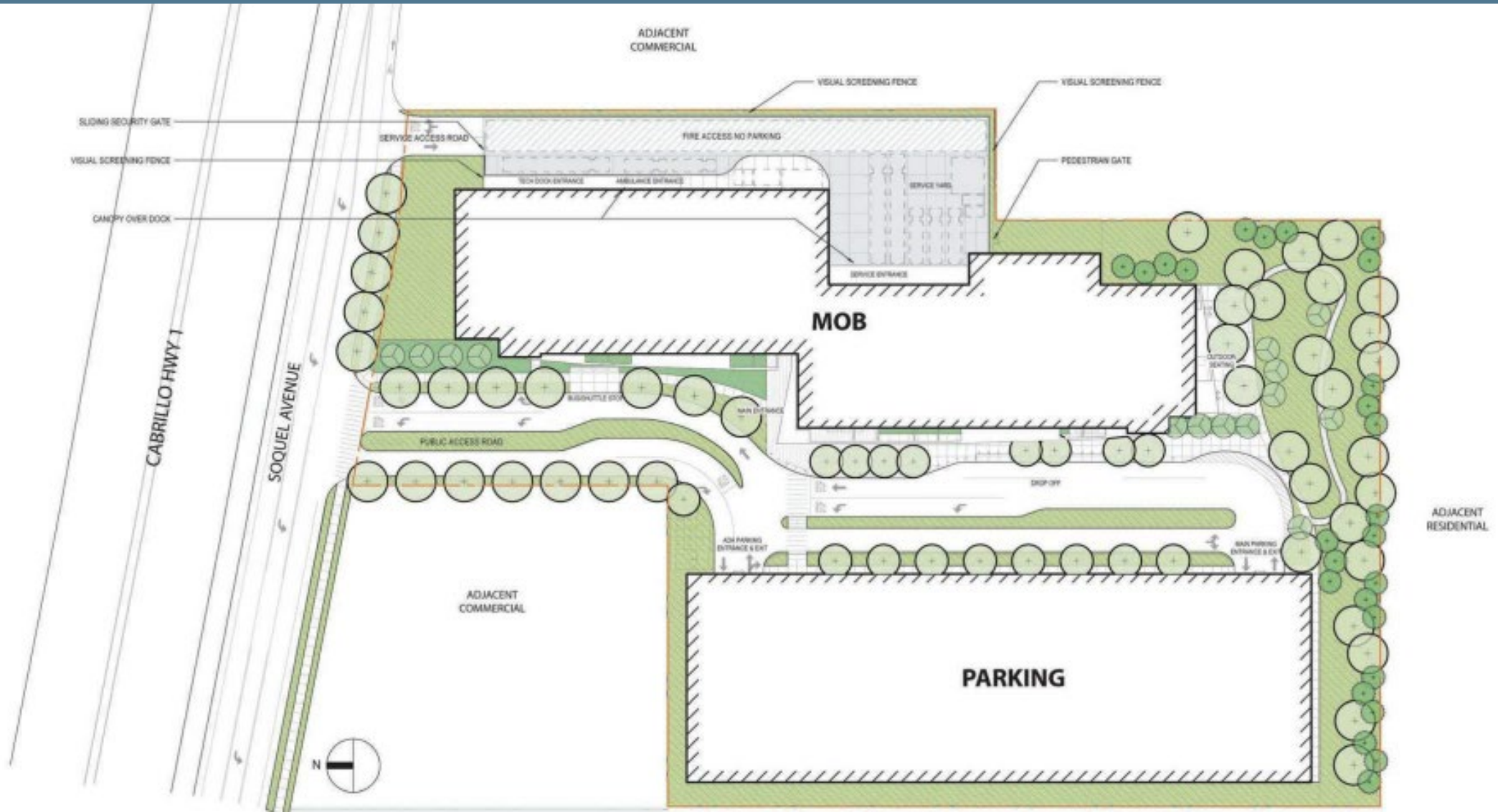


Site has been under contract since 2017

# PROJECT AERIAL



# SITE PLAN



# PROJECT PERSPECTIVE



# PROJECT PERSPECTIVE



# PROJECT PERSPECTIVES

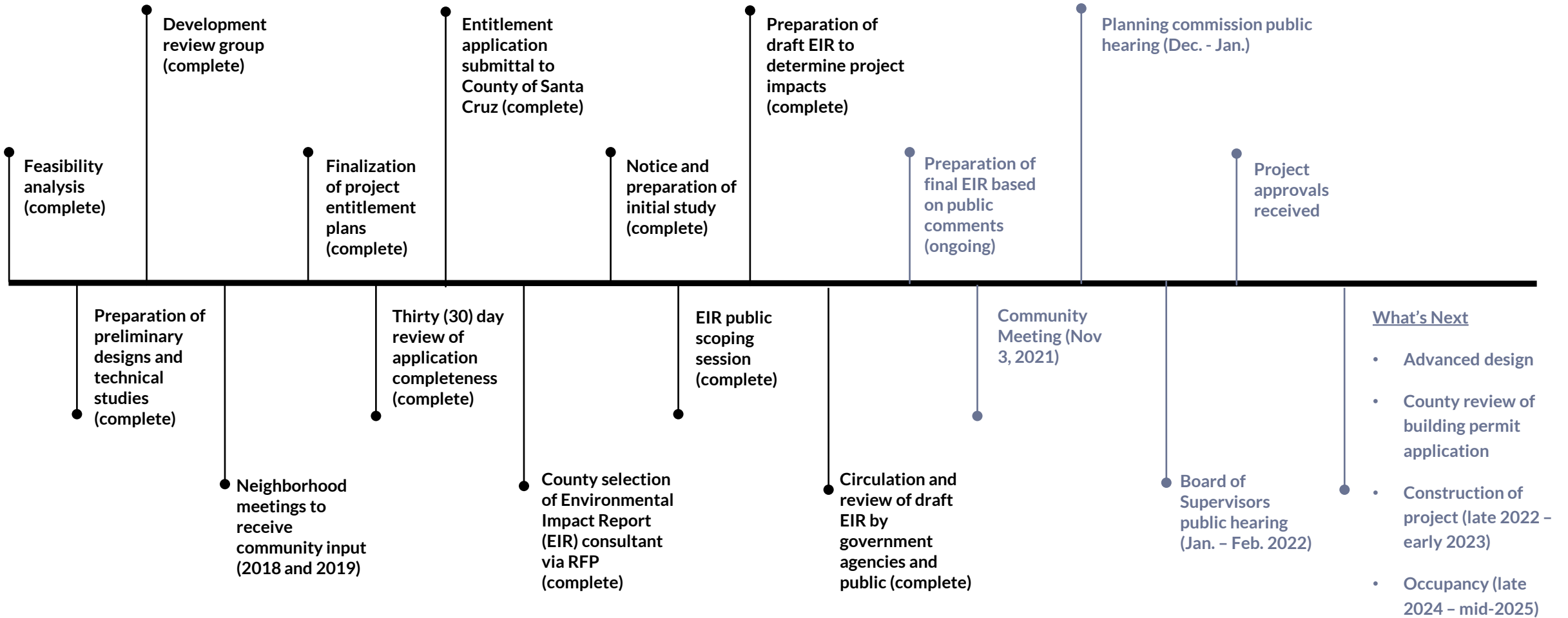




# PROJECT PERSPECTIVE



# DEVELOPMENT PROCESS



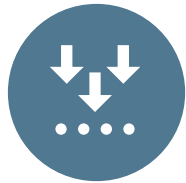
## What's Next

- Advanced design
- County review of building permit application
- Construction of project (late 2022 - early 2023)
- Occupancy (late 2024 - mid-2025)

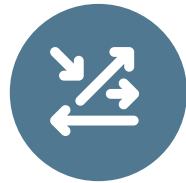
## **02. TRANSPORTATION**

# TRANSPORTATION OVERVIEW

## TRANSPORTATION STUDY SUMMARY



Vehicle Miles Traveled (VMT)  
Reduced (CEQA Analysis)



Trip Distribution



Level of Service (non-  
CEQA Analysis)



Traffic Flow Improvement



Trip Generation



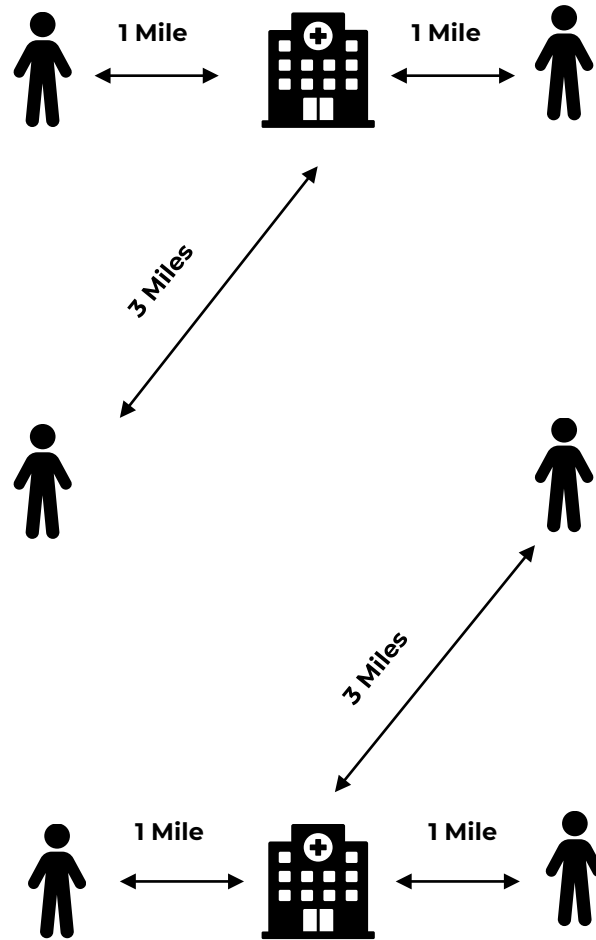
Roadway  
Improvements



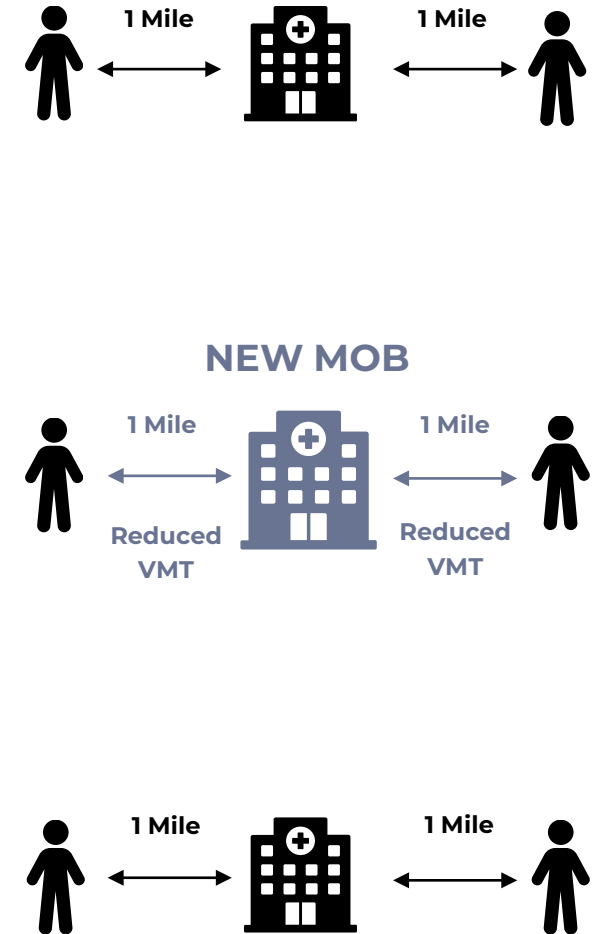
# THE PROJECT REDUCES VMT

The new medical office building (MOB) provides local healthcare services that reduce VMT (Vehicles Miles Traveled).

## CURRENT



## NEW MOB



# NEW MOB REDUCES VMT

FUTURE

CURRENT

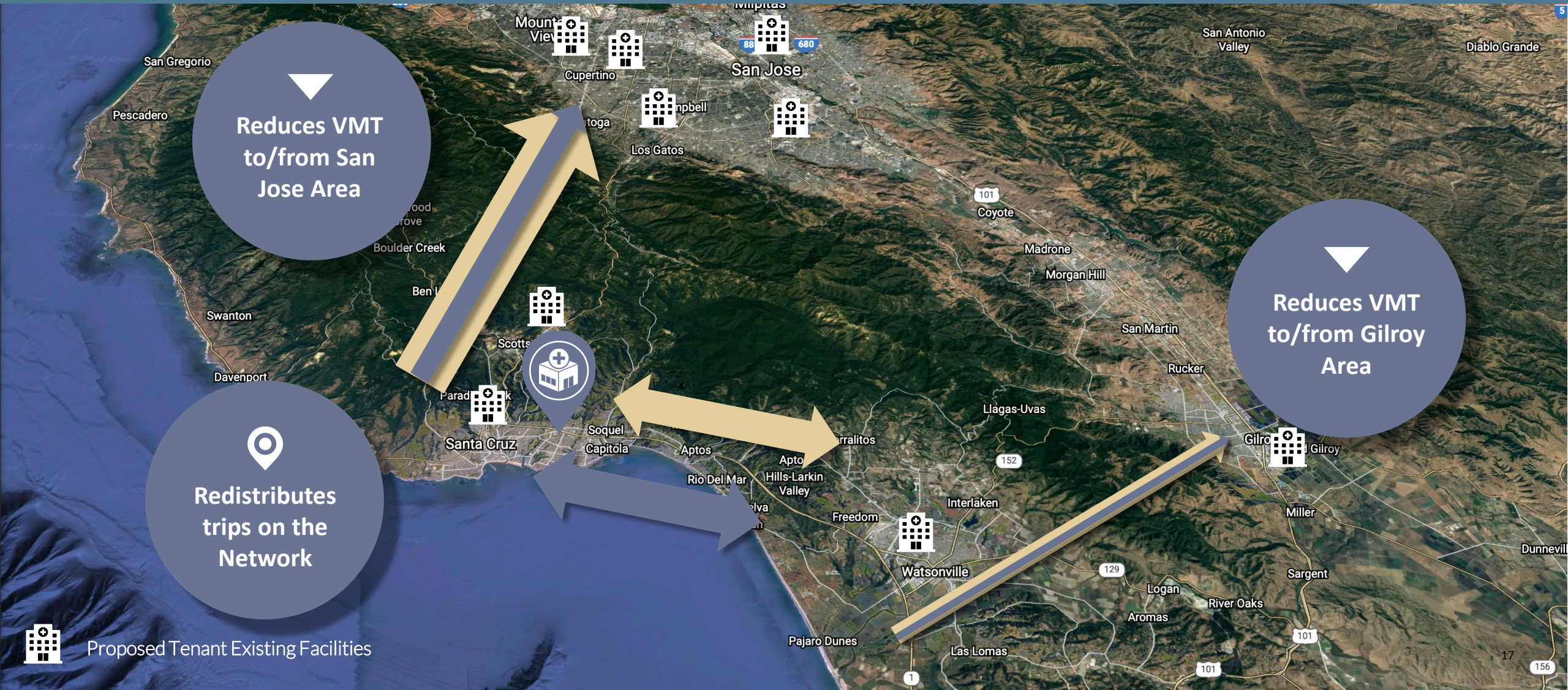
Reduces VMT  
to/from San  
Jose Area

Reduces VMT  
to/from Gilroy  
Area

Redistributes  
trips on the  
Network



Proposed Tenant Existing Facilities



# VMT Discussion

**-20,322**

Reduction in VMT/Day

No Significant CEQA  
Transportation Impact



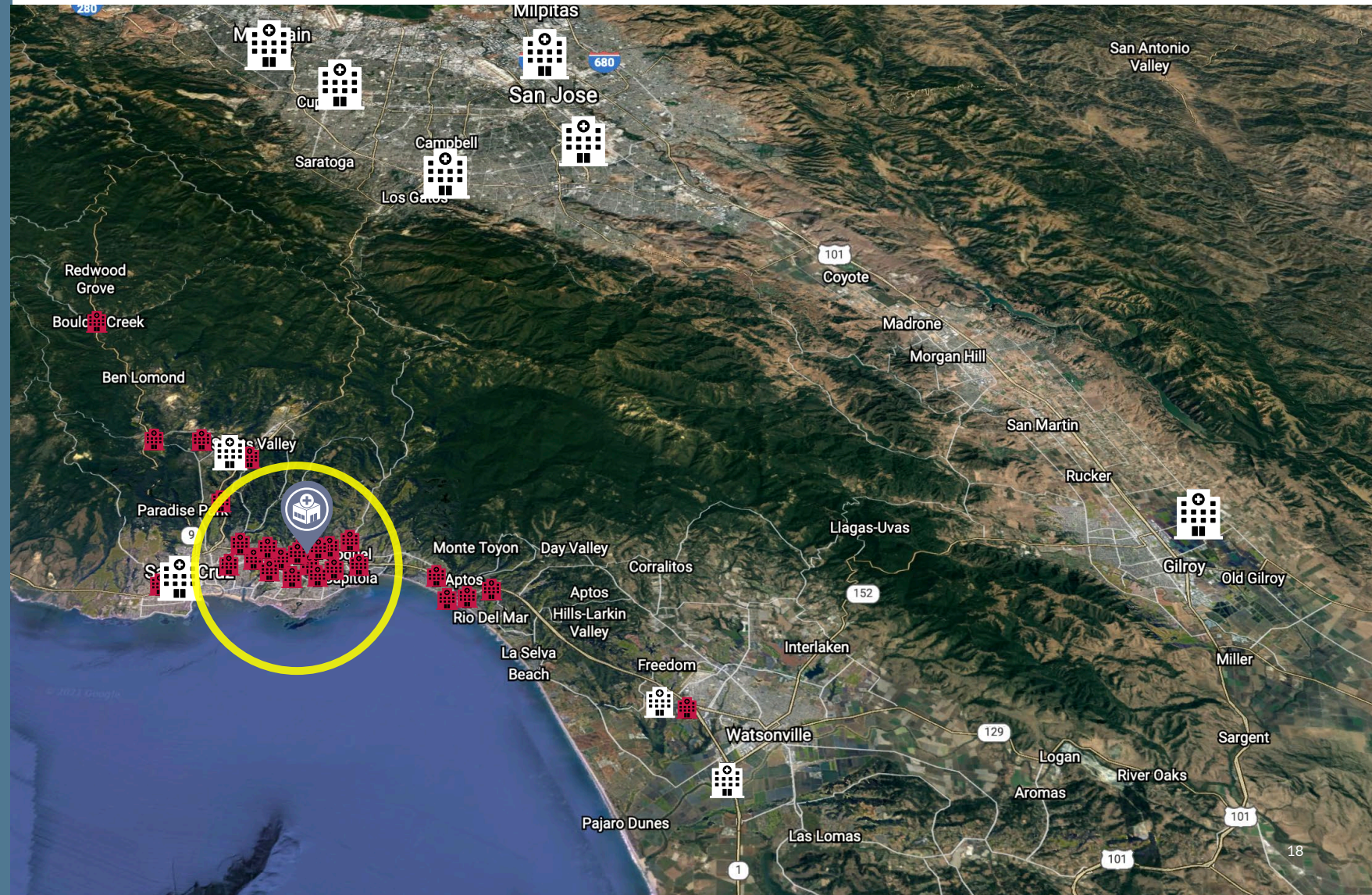
Proposed Tenant Locations



Other Health System Locations

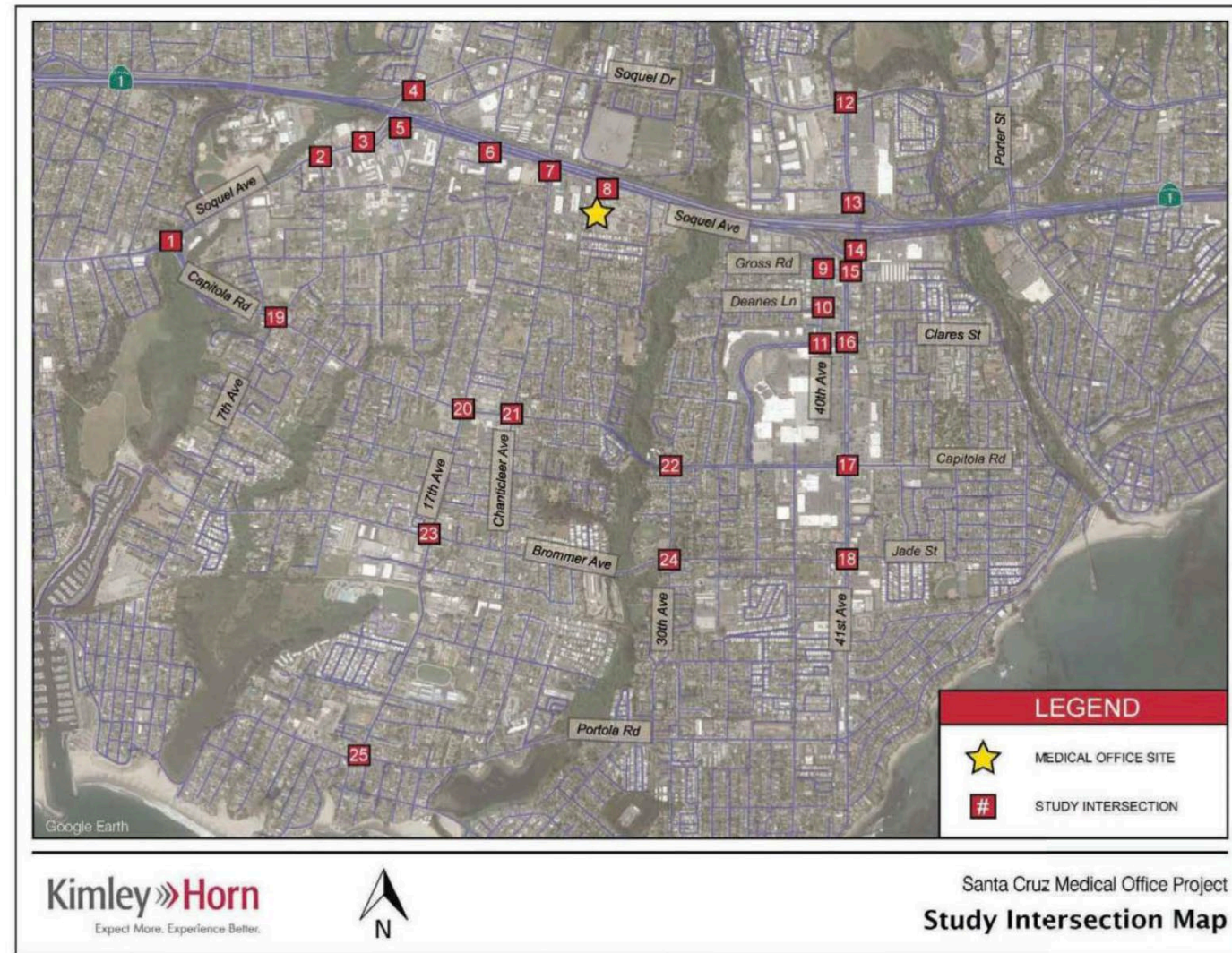


Proposed medical office building



# LEVEL OF SERVICE (NON-CEQA ANALYSIS)

- Traffic Engineer - Kimley-Horn
- Level of service of intersections and roadways that feed to the project
- Conducted additional analysis as a response to Draft Environmental Impact Review comments





# VOLUNTARY TRANSPORTATION DEMAND MANAGEMENT (TDM) STRATEGIES

## Employees

- Commute Management Platform and Rideshare Support
- Emergency Ride Home Program
- TDM Coordinator
- Safe, Well-Lit, and Accessible Pedestrian/Bicycle Facilities along Soquel Avenue
- Bike Share Program

## Members/Visitors

- Virtual care strategy
- Safe, well-lit and accessible pedestrian/bicycle facilities along Soquel Avenue
- Paracruz shared-ride service, providing door-to-door public transportation for people who have a temporary or permanent physical, cognitive, or psychiatric disability
- Lift Line free door-to-door rides to qualifying seniors and people with disabilities needing transportation to medical appointments throughout the County

# TRIP GENERATION COMPARISON

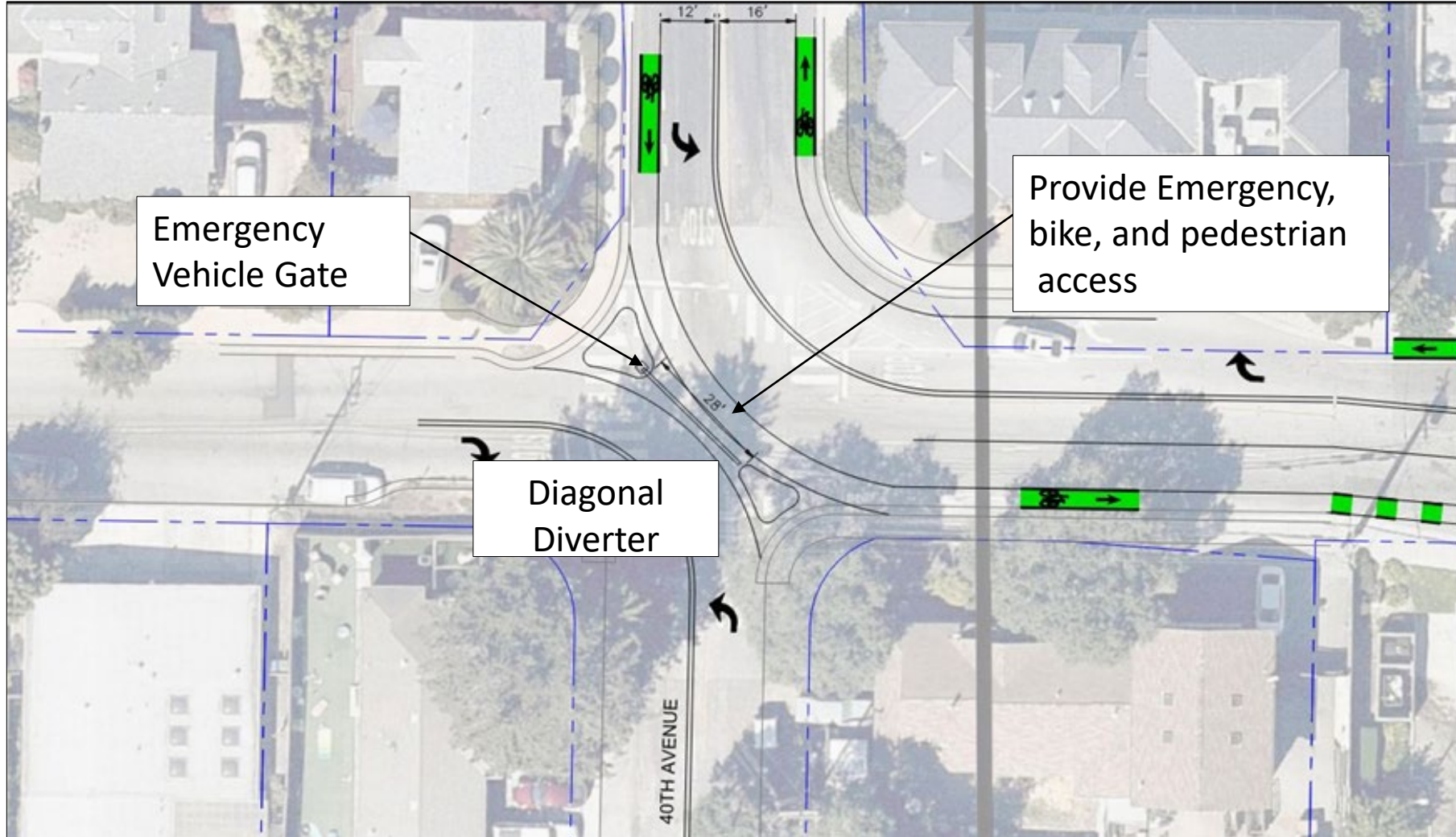
	DEVELOPMENT	DATA SOURCE	AM RATES	PM RATES	PM TRIPS
Proposed Project Analyzed	Medical Office Building	Institute of Traffic Engineers (ITE)	3.69	3.28	525
Similar Sites	Sutter/PAMF (2025 Soquel Ave)	Actual Counts	2.13	1.98	317
	Sutter/PAMF (2907 & 2911 Chanticleer Ave)				
	Skyport MOB (Kaiser)				
	Dublin MOB (Kaiser)				

# EXISTING TRIP CREDITS AND TDM REDUCTION

	DAILY	AM PEAK HOUR	PM PEAK HOUR
Gross Trips (ITE 630 Clinic)	6,106	590	525
Existing Trip Credits	134	26	13
<b>Net Trips (Used for analysis)</b>	<b>5,972</b>	<b>564</b>	<b>512</b>
<b>With approx. 20% TDM Reduction (Not used for analysis)</b>	<b>4,778</b>	<b>451</b>	<b>410</b>

**03.  
PROPOSED  
PROJECT  
IMPROVEMENTS**

# SOQUEL AVENUE & GROSS ROAD PROPOSED IMPROVEMENTS



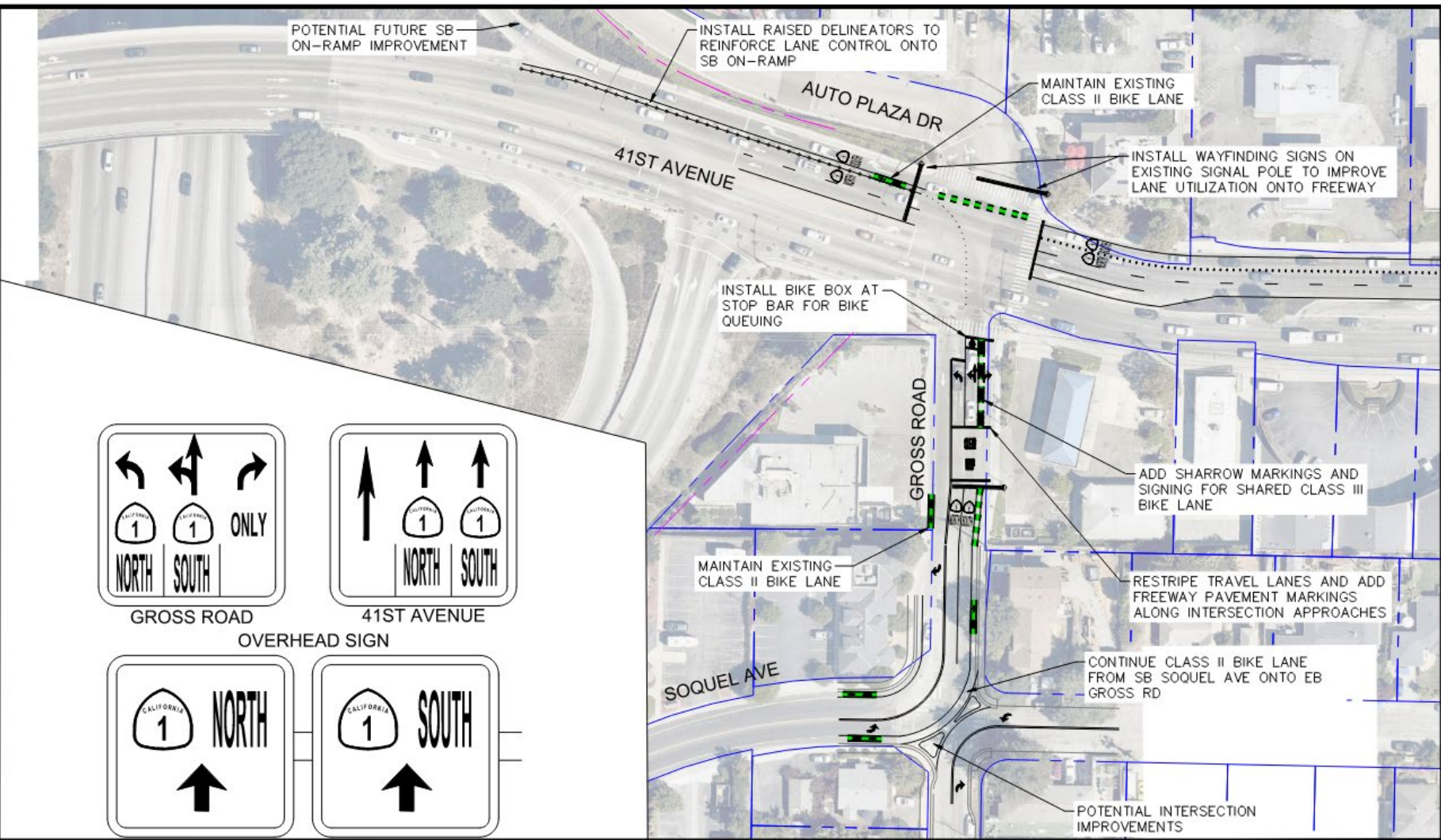
# TRAVEL TIMES & QUEUES ON SOQUEL AVE (PM PEAK)

Travel Time Summary		
Scenario	Travel Time (min)	End of Queue
Existing	8:00	A
Existing Plus Project Plus Diverter	4:59	B



- Existing Conditions
- Existing Plus Project Plus Diverter Conditions

# GROSS ROAD & 41<sup>ST</sup> AVENUE IMPROVEMENTS

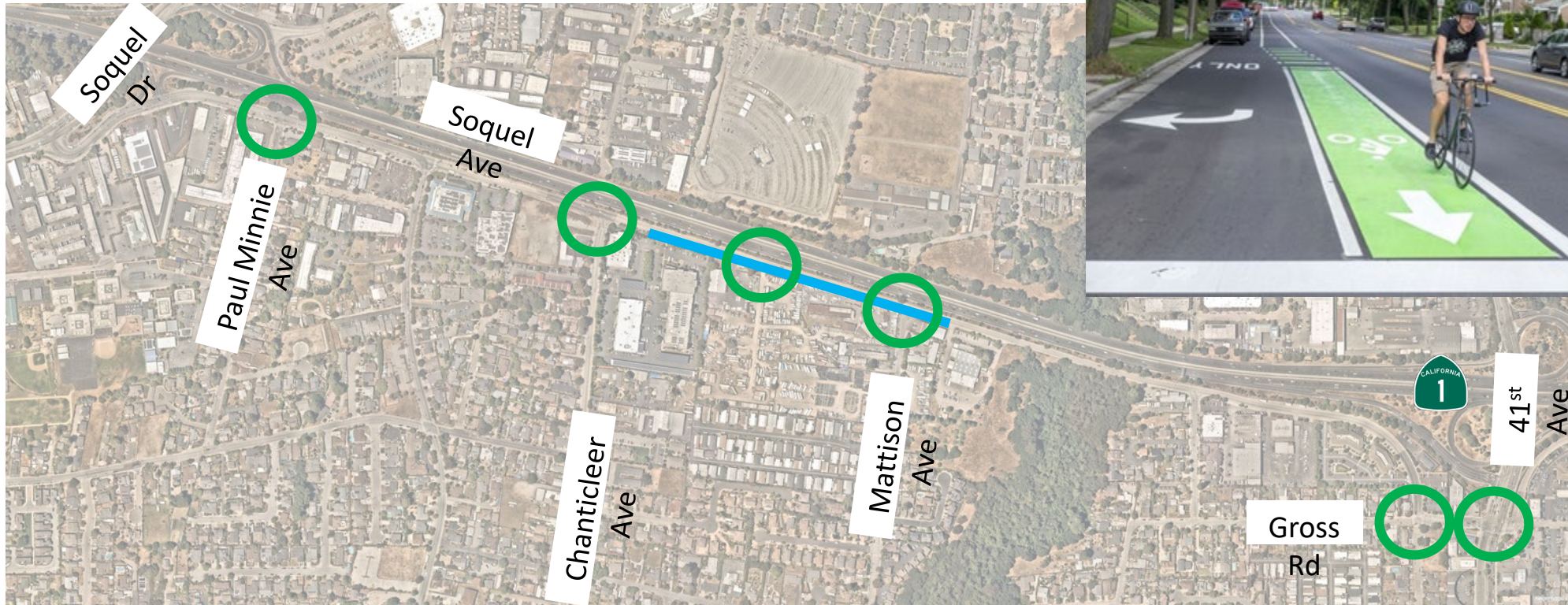


**Adaptive  
Signal  
Improvement**



**Compliments  
Already Funded  
Improvements**

# SOQUEL AVENUE GREEN BIKE LANE IMPROVEMENTS



Green Bike Lane Intersection Improvements



Sidewalk Improvements (Sheriff's Building to east of Mattison Ln)



# SITE FRONTAGE IMPROVEMENTS



**Provide a Left Turn Pocket +  
Sidewalk improvements**



**Install Signal to Create  
Gaps on Soquel**



**Signal will Lower Travel  
Speeds**

# SPEED HUMPS ON MACIEL AVE



# SUMMARY OF PROJECT IMPROVEMENTS

1	<b>Reduce VMT</b>	<p>Project will reduce VMT by approximately:</p> <ul style="list-style-type: none"><li>• Approximately 20,000 vehicle-miles per day</li></ul>
2	<b>Transportation Demand Management (TDM) Program</b>	<p>Project will implement a robust TDM program for employees that includes</p> <ul style="list-style-type: none"><li>• Virtual Care Strategy</li><li>• Commute management platform and rideshare support</li><li>• Emergency ride home benefit</li><li>• TDM coordinator</li><li>• Safe, well-lit, and accessible pedestrian/bicycle facilities along Soquel Ave</li><li>• Bike share</li></ul>
3	<b>Soquel Ave Sidewalk and Crosswalk Construction</b>	<p>Construct ADA-compliant sidewalk and curb ramps on the south side of Soquel Avenue</p>
4	<b>Soquel Ave Class II Bike Lanes</b>	<p>Implements 4,200 ft (.75 miles) of Class II bike lanes from Paul Minnie to just east of Mattison Lane</p>

# SUMMARY OF PROPOSED PROJECT IMPROVEMENTS

5	<b>Construct Traffic Signal at Main Project Driveway</b>	<ul style="list-style-type: none"><li>• Signalize Main Project Driveway</li><li>• Increased gaps for turning onto/or off-of Soquel Ave</li></ul>
6	<b>Soquel Ave Two Way Left Turn Lane (TWLTL)</b>	<ul style="list-style-type: none"><li>• Implement 3,500 ft of TWLTL striping from Paul Minnie to east of Mattison Lane</li><li>• Provides drivers the ability to perform left turns as two-stage movements</li></ul>
7	<b><u>Proposed</u> Soquel Ave &amp; Gross Rd Diverter</b>	<ul style="list-style-type: none"><li>• County is currently reviewing</li><li>• Construct diagonal diverter</li><li>• Reduces vehicle queues and delay</li><li>• Prevents neighborhood cut through traffic</li><li>• Safe for emergency access</li></ul>
8	<b>41st Ave &amp; Gross Rd Overhead Wayfinding Signage</b>	<ul style="list-style-type: none"><li>• Install overhead signs and roadway markings to improve lane selection</li><li>• Install a physical barrier between the limit line and the Highway 1 SB on-ramp</li></ul>

# SUMMARY OF PROJECT IMPROVEMENTS

9	41st avenue	<ul style="list-style-type: none"><li>• Fair-share contribution for long-term planned improvements along the 41st Avenue corridor</li></ul>
10	Brommer St & 30th Ave	<ul style="list-style-type: none"><li>• Pay approximately 14% fair share payment to intersection improvements</li></ul>
11	Install Speed Humps on Maciel Ave.	<ul style="list-style-type: none"><li>• Mattison btw Chanticleer Avenue and Maciel Avenue</li><li>• Maciel btw Mattison Lane and Capitola Road</li></ul>
12	Transportation Improvement Area Fees	<ul style="list-style-type: none"><li>• Pay TIA fees based on ITE trip generation assumptions</li><li>• Total fee: \$3,583,200</li></ul>

# QUESTIONS?

Please email additional questions to [5940soquel@gmail.com](mailto:5940soquel@gmail.com)

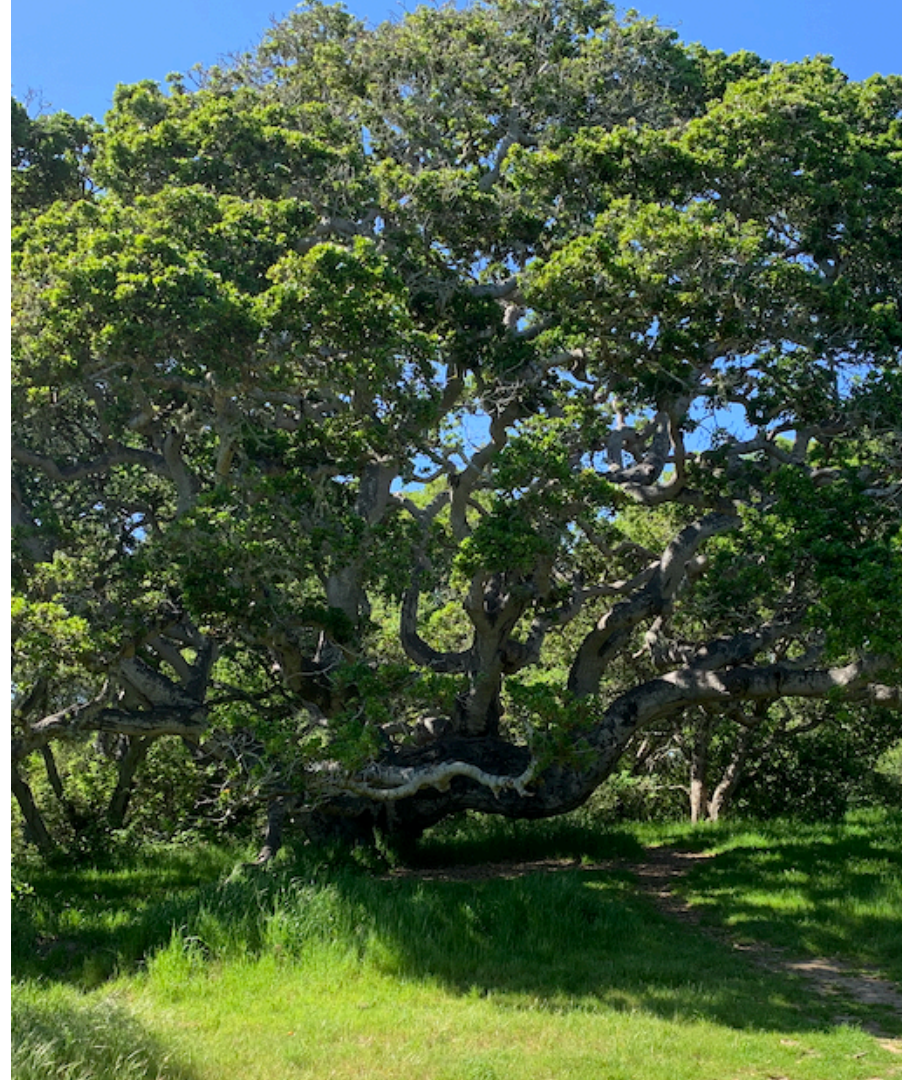
Please visit our project website: [www.5940soquelave.com](http://www.5940soquelave.com)

# Live Oak Town Hall

January 12th, 2023

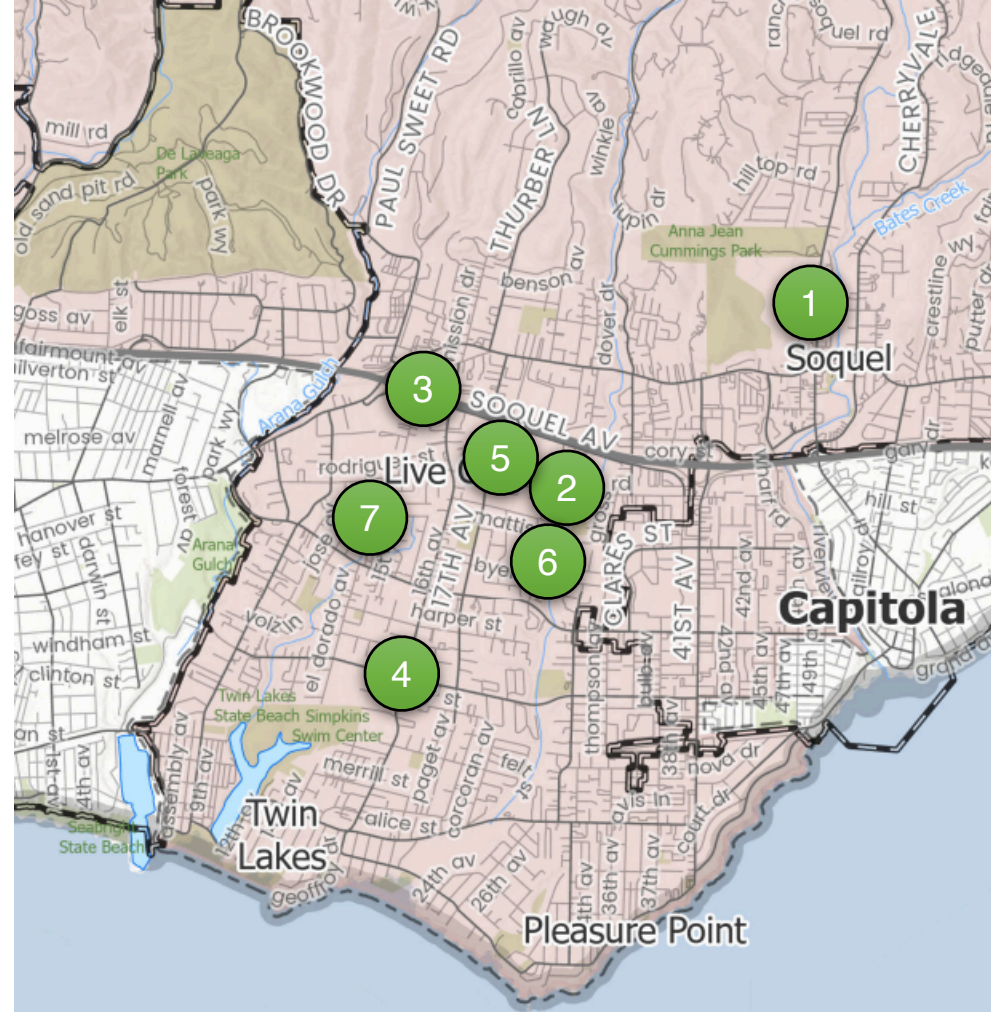


SUPERVISOR  
**Manu Koenig**  
1ST DISTRICT



# Agenda

1. Storm Damage and Recovery
2. Kaiser
3. HWY 1 Ground Breaking
4. Coastal Rail Trail Funding
5. Youth Mental Health Crisis Center
6. 1960 Maciel Ave
7. 841 Capitola Rd
8. Q&A





# Storm Damage

- \$50M+ in county road damage; 65 county road closures
- \$6.8 million in park damage (including 3 coastal access stairs)
- 30,000 people evacuated from Pajaro Valley
- 8 shelters opened
- 132 yellow tags
- 8 red tags
- Emergency repairs to Pajaro River Levee



# Storm Damage



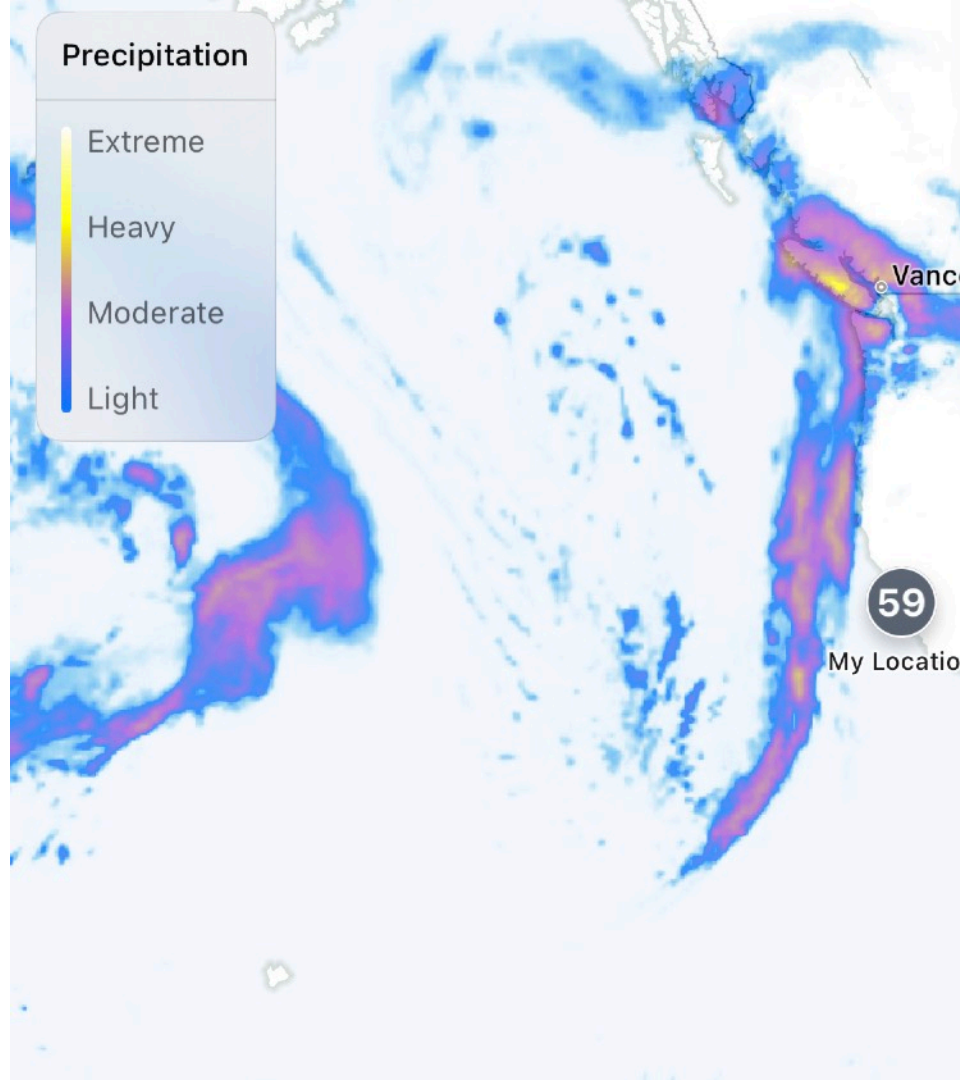
China Grade Rd



Bear Creek Rd

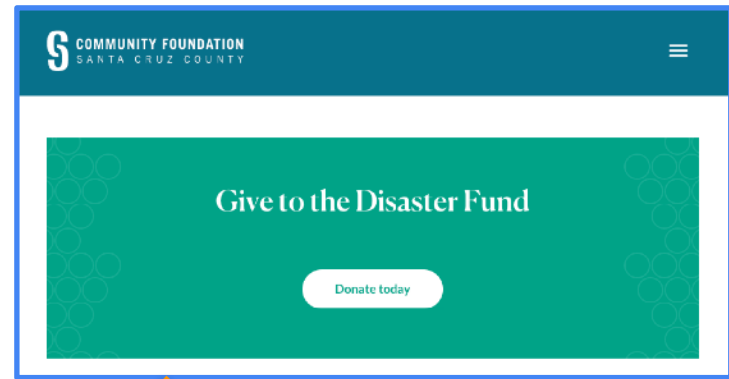
# Rain Continues Through the Weekend

- Two more atmospheric rivers headed our way
- Sheriff has issued a high surf warning for Beach Dr, Las Olas Dr and Potbelly Beach Rd through Saturday 10am.
- 23+ inches of rain since Christmas, any rain will runoff into creeks and rivers.
- <https://www.co.santa-cruz.ca.us/OR3/Emergency.aspx>



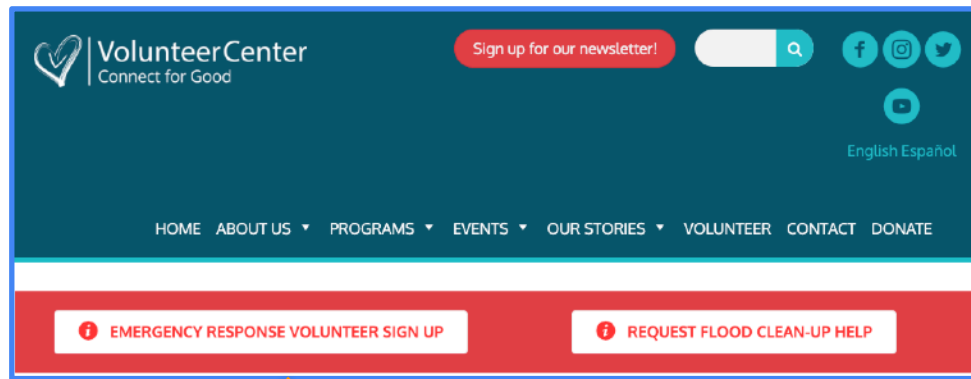
# Storm Recovery

- Newsom proclaimed a state of emergency on Jan 4th, allowing National Guard to be deployed; Biden declared a state of emergency on Jan 8th, freeing FEMA funding; County ratified disaster proclamation on Jan 10th, applying collectively for assistance with cities
- FEMA funding 75% of costs will go to low income residents and public infrastructure (long term)
- County will authorize \$300,000 for dumpsters to aid in clean up. Plan being developed for deployment next Tuesday.
- Residents and businesses should start by documenting damage and claims .
- Community Foundation Disaster Fund being distributed to small businesses and through Family Resource Centers and Community Action Board (short term - 48 hours). Prioritizing people who have lost wages or housing.



# Storm Recovery

- Volunteer to help your neighbors clean up OR Request clean-up assistance:  
[scvolunteercenter.org](http://scvolunteercenter.org)
- Organizing for mobilization  
Monday, MLK Day

A screenshot of a web form titled "Request for Flood Response Volunteers / Solicitud de Voluntarios para ayuda con las Inundaciones". The form includes a description in English and Spanish, a user profile section showing "rskoenig@gmail.com", and two input fields for "Contact Person's Name / Nombre de la Persona de Contacto" and "Contact Person Phone Number / Numero Telefónico de la Persona de Contacto". Each input field has a "Your answer" label and a text input area.

**Request for Flood Response Volunteers / Solicitud de Voluntarios para ayuda con las Inundaciones**

Please fill out this form if you'd like volunteers to come help you with clean-up after the flood or any other support. / Complete este formulario si desea que los voluntarios le ayuden con la limpieza después de la inundación o si necesita otro tipo de apoyo.

rskoenig@gmail.com (not shared) [Switch account](#)

Contact Person's Name / Nombre de la Persona de Contacto.

Your answer \_\_\_\_\_

Contact Person Phone Number / Numero Telefónico de la Persona de Contacto.

Your answer \_\_\_\_\_

# Storm Recovery - Insurance Tips

- **United Policyholders** website is useful for residents looking to better understand the claims process. - [UPhelp.org/2023-ca-storms](https://UPhelp.org/2023-ca-storms)
  - What caused the damage, how to present a claim, tips on working with insurance company.
- **CA Dept. of Insurance** - for free personal assistance with your claims or underinsurance issues call: 831.927.4357 or go to [insurance.ca.gov](https://insurance.ca.gov)
- **For Renters:** file renter insurance claim - it may temporarily cover rent or moving expenses



**Questions?**

# Kaiser

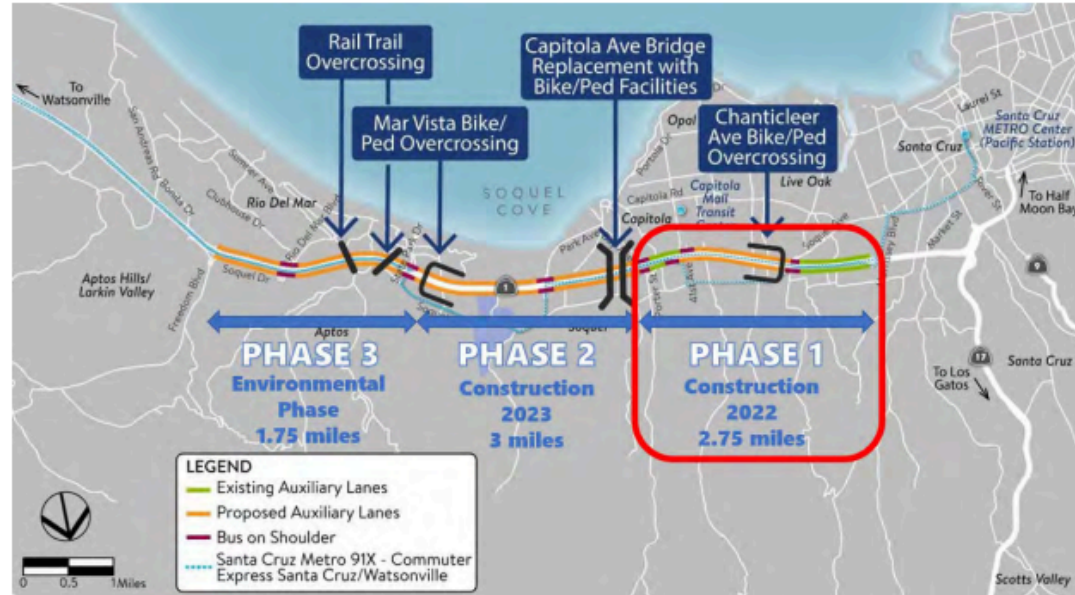
- Jan 29th – Final EIR published
- Jan 31st – Access to Care Agreement at the Board of Supervisors Meeting
- Early Feb – Developer community meeting, incl. proposed traffic impact mitigation projects
- Feb 8th – Planning Commission Meeting
- Feb 28th – Board of Supervisors Meeting
- [5940soquelave.com](http://5940soquelave.com)





# HWY 1 Groundbreaking

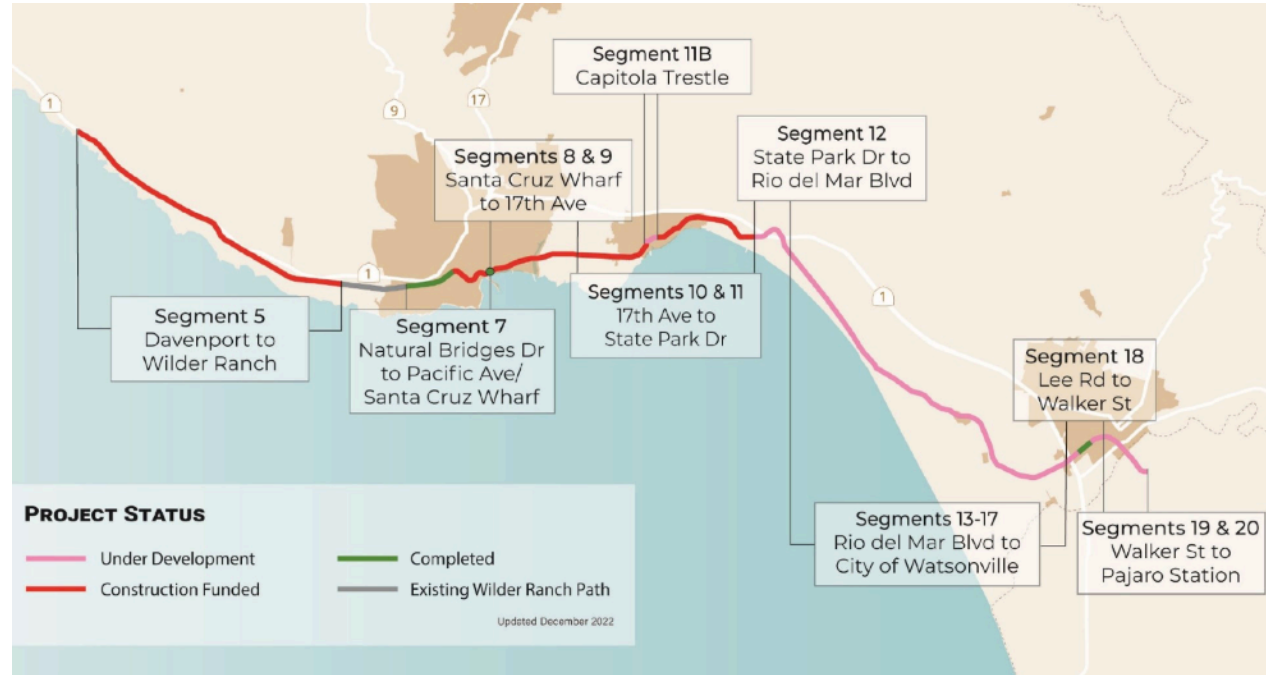
- Phase 1 - February groundbreaking for auxiliary lane/ bus on shoulder project from Soquel Dr to 41st Ave
- Phase 2 - Fully funded, 2023 construction start
- Phase 3 - \$30 million allocated from the Federal Infrastructure and Jobs Act, including 4 all electric buses, from US Dept. of Transportation - one of only 9 “mega grants” nationwide and the only project in CA



**Figure 1 - Phase 1 Project includes auxiliary lanes and a bus on shoulder facility in both directions of Highway 1 (41<sup>st</sup> Avenue to Soquel Drive), retaining walls, soundwalls, and a new bicycle/pedestrian overcrossing at Chanticleer Avenue**

# Coastal Rail Trail Funding

- **\$105 million** state grant award for **6.7 miles** of Rail Trail. Segments 8&9 (\$35.7 million) and Segments 10&11 (\$67.6 million).
- 13% of \$1.02 billion available statewide
- 2016 Measure D played a pivotal role



# Estimated Project Schedule



## Schedules: Segments 8 -12

Project Schedules			
Project	Environmental Review	Final Design	Construction
Segments 7 Phase 2 (Bay Ave to Pacific Ave)	Complete	Complete	2022
Segments 8 & 9 (Pacific Ave to 17th Ave)	Spring 2023	Spring 2023	Fall 2024
Segments 10 & 11 (17th Avenue to St. Park Dr)	Spring 2023	Fall 2024	Spring 2025
Segment 12 (State Park Dr. to Rio Del Mar Blvd.)	Spring 2023	Fall 2024	Spring 2025

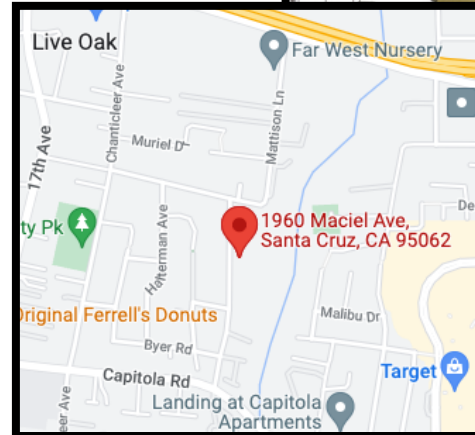
# Youth Mental Health Crisis Center Acquired

- 5300 Soquel Ave
- Currently youth that need long term care are sent out of county
- Total project funds available \$24M
- 16 new residential care beds (0 currently)
- 8 short term stay beds (0-4 chairs currently)
- Will alleviate extreme pressure on Soquel Ave Crisis Stabilization Unit and Dominican Hospital ER
- Doors opening in approximately 1 year



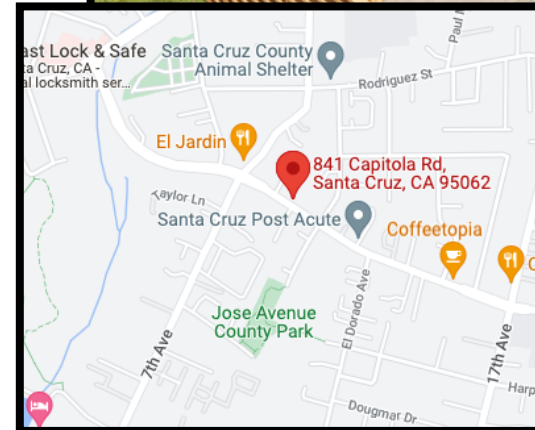
# 1960 Maciel Ave

- Proposal submitted for 21 single family homes
- Builder will be hosting a Zoom community presentation next Tuesday 1/17 at 6:00pm
- Community Room, Sheriff's Center, 5200 Soquel Ave



# 841 Capitola Rd

- Proposal submitted for 15 single family homes
- Builder will be hosting a Zoom community presentation next Wednesday 1/18 at 7:00pm
- <https://us02web.zoom.us/j/81072760471>



A photograph of a diverse group of people in a professional setting, seen from behind. Many individuals have their hands raised, suggesting an interactive session or a Q&A period. The background is slightly blurred, focusing attention on the audience's actions.

**Questions?**

**Ask Me Anything...**



SUPERVISOR

**Manu Koenig**

1ST DISTRICT

# Questions?



First.District@SantaCruzCounty.us



@1stSuperSCC

***Thank You!***



Thursday, March 16, 2023

Dear Board of Supervisors,

The Mental Health Advisory Board recommends that the Board of Supervisors does all in its power to ensure safety and dignity in all shelter services contracted with, and/or sited in, the County, and institute safeguards to address incidents which occur.

On the night of Wednesday, March 1, 2023, the County contracted to provide a Warming Shelter to ensure the safety of our people experiencing homelessness. An agreement was also made with the Santa Cruz Veterans Memorial Building at 846 Front Street for the building's use. On Thursday, March 2, just after 10 am, a member of the Mental Health Advisory Board, while walking past the building's parking lot, witnessed Dave Pedley, assistant building manager of the Santa Cruz Veterans Memorial Building violently and repeatedly attack a client of the shelter. At approximately 6'3", Mr. Pedley towered over the female client who was approximately 5'5". He repeatedly shoved her while cursing and telling her she was trespassing. The MHAB member shouted for the attack to stop and was threatened by Mr. Pedley. The client reported that she had been told that she could use the Porta Potties but had found them locked and was forced to urinate behind them. The attack was captured on the building cameras. The MHAB member assisted the client in calling 9-1-1. Santa Cruz Police arrived, but as often happens, a complaint was not filed. The Mental Health Advisory Board asks the Board of Supervisors to:

1. Affirm the following for all providers of shelter services in the County: Violence against women shall not be accepted. Violence against those who are experiencing homeless shall not be accepted. Violence against those who have mental health or substance use issues shall not be accepted.
2. Direct all County departments to not place future permanent shelter programs, or temporary, emergency, or Winter Shelters at the Santa Cruz Veterans Memorial Building at 846 Front Street while Dave Pedley is an employee.
3. Direct Housing for Health staff to not renew any contracts or partnerships with the Veterans Village program in Ben Lomond while Dave Pedley is a part of the program and allowed on site, and to immediately seek to ways to limit his access to clients while he is an employee of the partnership. If necessary, permit the H4H staff to seek new partnerships to manage the program.
4. Direct H4H staff to create a Grievance System so that any contracted shelter, shelter site, shelter receiving HUD funding, or shelter operating in Santa Cruz County, has a posted policy and procedure so that any client with a complaint can have it sent to H4H for review rather than staying with the agency where the complaint issue occurred. Further, direct staff from H4H to apply for funding to create a new Homeless Advocate staff position, or contract for such a service, to speak with clients and service providers and solve issues that arise through this process. If State and Federal grant funding is not available, the Board of Supervisors is asked to prioritize funding such a position with staff recommendation of where the funding can come from.

We, at the Mental Health Advisory Board, believe, as do you, that the health and wellness of all members of our community are important. Shelter services for those who are experiencing homelessness, or for any gender, or for those with any mental health issue or substance use issue, or who have any other disability or for any vulnerable population whatsoever should not be "separate but equal". Whether the shelter is set up in response to an emergency weather event, a disaster or some other reason, and whether the shelter services are provided by the County itself or another entity, all people deserve safety and dignity. Shelter services should be individualized, well-designed, well-run, and receive proper oversight from the County. We make this recommendation from both a place of compassion as well as a case for better outcomes from our programs and better engagement with some people who choose not to receive services due to these kinds of incidents.

With great appreciation,

Xaloc Cabanes  
Chair of the Mental Health Advisory Board

[ADD LETTERHEAD]

March X, 2023

The Honorable Brian Maienschein, Chair  
Assembly Judiciary Committee  
1020 N Street, Room 104  
Sacramento, California 95814

**Subject: AB 920 (I. Bryan): Discrimination: Housing Status - SUPPORT**

Dear Chair Maienschein,

[ENTITY] is pleased to support AB 920 (I. Bryan). This bill would expand the list of protected categories in California’s anti-discrimination law to include “housing status.” It would protect unhoused people from being targeted or denied access to programs and benefits by the state, or a state-funded agency, simply because they are unhoused.

[QUICK BLURB ABOUT YOUR ORGANIZATION]

Every person in California should have the right to participate fully and equally in society free from discrimination. But this right is denied to many residents simply because they are unhoused. Instead of ensuring that Californians without housing have universal access to a safe, permanent, and affordable place to live, many state and local governments continue to harass, displace, and segregate unhoused people. This disproportionately harms people of color – particularly Black communities who, because of historical and contemporary discrimination in all aspects of life, are unhoused at higher rates.

[Consider adding a story or example of how discrimination against unhoused people has played out in your experience/work/community]

AB 920 will:

- Protect the health, wellbeing, and dignity of unhoused people who are harmed and sometimes killed by discriminatory policies and initiatives;
- Affirm California’s commitment to equal protection under the law and the right of all people to full and equal participation in society; and
- Shift priorities towards real solutions, including safe, affordable, and permanent housing.

For these reasons, we strongly support AB 920 and urge your “Aye” vote.

Respectfully,

[SIGNATURE]

[ADD LETTERHEAD]

[NAME, TITLE]

[ENTITY]

## AB 920 (Bryan) - Housing Status as a Protected Class Act

### SUMMARY

California prohibits discrimination on the basis of multiple factors including sex, race, color, religion, ancestry, mental disability, physical disability, sexual orientation and more. Yet, although people experiencing homelessness are routinely discriminated against based on their housing status, such discrimination is currently lawful. AB 920 would add “housing status” as a protected class to California’s existing anti-discrimination legislation.

### BACKGROUND

“Homelessness” is a universally recognized and deeply stigmatized social category. Cognitive research demonstrates that people experiencing homelessness elicit reactions of contempt and disgust more than any other stigmatized group in the U.S. These dangerous perceptions form the basis for vigilantism, other forms of targeted violence, and discriminatory policies in the public and private sectors.

Discrimination against unhoused people has intensified as local governments and law enforcement throughout California increasingly criminalize people based on their housing status. This discrimination takes various forms: prohibitions from moving freely in public spaces, resulting in criminal and civil penalties for engaging in life-sustaining activities like sitting and sleeping outside; unjust property confiscation and disposal; discrimination in seeking and maintaining employment and housing; and discrimination in medical and social services settings. As shown by recent [research](#) and [reporting](#) from across the state, discrimination against unhoused people in the form of encampment sweeps and criminalizing policies is traumatic, destabilizing, and [ineffective](#) - and may

make homelessness worse. Preventing discrimination against people experiencing homelessness is also a racial justice strategy. Black Californians accounted for 27.6 percent of all people experiencing homelessness in 2020, despite being 5.6 percent of the state’s population.

Prohibiting discrimination against people experiencing homelessness will combat unfair policing, discriminatory local ordinances, criminal prosecution, arbitrary exclusion from public spaces, seizure of persons and property without probable cause, and shutting people out of housing and employment opportunities.

### SOLUTION

AB 920 would advance the goals of protecting the civil rights of people experiencing homelessness and advancing an affirmative right to safe, supportive, affordable housing. Amending California’s anti-discrimination laws to recognize housing status as a protected category will make unequal treatment of this group unlawful, and provide critical tools to protect unhoused people from discrimination and will apply to any discriminatory activities that are administered, funded, or overseen by the state. AB 920 will pivot state and local entities towards policies and initiatives that invest in proven solutions, including affordable housing and services that our communities need.

### SPONSORS

ACLU California Action  
Disability Rights California  
Housing California  
Public Advocates  
Western Center on Law and Poverty



## AB-920 Discrimination: housing status. (2023-2024)

SHARE THIS:



Date Published: 02/14/2023 09:00 PM

CALIFORNIA LEGISLATURE— 2023–2024 REGULAR SESSION

### ASSEMBLY BILL

NO. 920

Introduced by Assembly Member Bryan

February 14, 2023

An act to amend Sections 11135 and 12926 of the Government Code, relating to discrimination.

#### LEGISLATIVE COUNSEL'S DIGEST

AB 920, as introduced, Bryan. Discrimination: housing status.

Existing law prohibits discrimination in any program or activity that is conducted, operated, or administered by the state, or by any state agency, that is funded directly by the state, or that receives any financial assistance from the state, based upon specified personal characteristics.

This bill would also prohibit discrimination based upon housing status, as defined.

Vote: majority Appropriation: no Fiscal Committee: yes Local Program: no

THE PEOPLE OF THE STATE OF CALIFORNIA DO ENACT AS FOLLOWS:

**SECTION 1.** Section 11135 of the Government Code is amended to read:

**11135.** (a) No person in the State of California shall, on the basis of sex, race, color, religion, ancestry, national origin, ethnic group identification, age, mental disability, physical disability, medical condition, genetic information, marital status, *housing status*, or sexual orientation, be unlawfully denied full and equal access to the benefits of, or be unlawfully subjected to discrimination under, any program or activity that is conducted, operated, or administered by the state or by any state agency, is funded directly by the state, or receives any financial assistance from the state. Notwithstanding Section 11000, this section applies to the California State University.

(b) With respect to discrimination on the basis of disability, programs and activities subject to subdivision (a) shall meet the protections and prohibitions contained in Section 202 of the federal Americans with Disabilities Act of 1990 (42 U.S.C. Sec. 12132), and the federal rules and regulations adopted in implementation thereof, except

that if the laws of this state prescribe stronger protections and prohibitions, the programs and activities subject to subdivision (a) shall be subject to the stronger protections and prohibitions.

(c) The protected bases referenced in this section have the same meanings as those terms are defined in Section 12926.

(d) The protected bases used in this section include a perception that a person has any of those characteristics or that the person is associated with a person who has, or is perceived to have, any of those characteristics.

**SEC. 2.** Section 12926 of the Government Code is amended to read:

**12926.** As used in this part in connection with unlawful practices, unless a different meaning clearly appears from the context:

(a) "Affirmative relief" or "prospective relief" includes the authority to order reinstatement of an employee, awards of backpay, reimbursement of out-of-pocket expenses, hiring, transfers, reassignments, grants of tenure, promotions, cease and desist orders, posting of notices, training of personnel, testing, expunging of records, reporting of records, and any other similar relief that is intended to correct unlawful practices under this part.

(b) "Age" refers to the chronological age of any individual who has reached a 40th birthday.

(c) Except as provided by Section 12926.05, "employee" does not include any individual employed by that person's parent, spouse, or child or any individual employed under a special license in a nonprofit sheltered workshop or rehabilitation facility.

(d) "Employer" includes any person regularly employing five or more persons, or any person acting as an agent of an employer, directly or indirectly, the state or any political or civil subdivision of the state, and cities, except as follows:

"Employer" does not include a religious association or corporation not organized for private profit.

(e) "Employment agency" includes any person undertaking for compensation to procure employees or opportunities to work.

(f) "Essential functions" means the fundamental job duties of the employment position the individual with a disability holds or desires. "Essential functions" does not include the marginal functions of the position.

(1) A job function may be considered essential for any of several reasons, including, but not limited to, any one or more of the following:

(A) The function may be essential because the reason the position exists is to perform that function.

(B) The function may be essential because of the limited number of employees available among whom the performance of that job function can be distributed.

(C) The function may be highly specialized, so that the incumbent in the position is hired based on expertise or the ability to perform a particular function.

(2) Evidence of whether a particular function is essential includes, but is not limited to, the following:

(A) The employer's judgment as to which functions are essential.

(B) Written job descriptions prepared before advertising or interviewing applicants for the job.

(C) The amount of time spent on the job performing the function.

(D) The consequences of not requiring the incumbent to perform the function.

(E) The terms of a collective bargaining agreement.

(F) The work experiences of past incumbents in the job.

(G) The current work experience of incumbents in similar jobs.

(g) (1) "Genetic information" means, with respect to any individual, information about any of the following:

(A) The individual's genetic tests.

(B) The genetic tests of family members of the individual.

(C) The manifestation of a disease or disorder in family members of the individual.

(2) "Genetic information" includes any request for, or receipt of, genetic services, or participation in clinical research that includes genetic services, by an individual or any family member of the individual.

(3) "Genetic information" does not include information about the sex or age of any individual.

(h) "Labor organization" includes any organization that exists and is constituted for the purpose, in whole or in part, of collective bargaining or of dealing with employers concerning grievances, terms or conditions of employment, or of other mutual aid or protection.

(i) "Medical condition" means either of the following:

(1) Any health impairment related to or associated with a diagnosis of cancer or a record or history of cancer.

(2) Genetic characteristics. For purposes of this section, "genetic characteristics" means either of the following:

(A) Any scientifically or medically identifiable gene or chromosome, or combination or alteration thereof, that is known to be a cause of a disease or disorder in a person or that person's offspring, or that is determined to be associated with a statistically increased risk of development of a disease or disorder, and that is presently not associated with any symptoms of any disease or disorder.

(B) Inherited characteristics that may derive from the individual or family member, that are known to be a cause of a disease or disorder in a person or that person's offspring, or that are determined to be associated with a statistically increased risk of development of a disease or disorder, and that are presently not associated with any symptoms of any disease or disorder.

(j) "Mental disability" includes, but is not limited to, all of the following:

(1) Having any mental or psychological disorder or condition, such as intellectual disability, organic brain syndrome, emotional or mental illness, or specific learning disabilities, that limits a major life activity. For purposes of this section:

(A) "Limits" shall be determined without regard to mitigating measures, such as medications, assistive devices, or reasonable accommodations, unless the mitigating measure itself limits a major life activity.

(B) A mental or psychological disorder or condition limits a major life activity if it makes the achievement of the major life activity difficult.

(C) "Major life activities" shall be broadly construed and shall include physical, mental, and social activities and working.

(2) Any other mental or psychological disorder or condition not described in paragraph (1) that requires special education or related services.

(3) Having a record or history of a mental or psychological disorder or condition described in paragraph (1) or (2), which is known to the employer or other entity covered by this part.

(4) Being regarded or treated by the employer or other entity covered by this part as having, or having had, any mental condition that makes achievement of a major life activity difficult.

(5) Being regarded or treated by the employer or other entity covered by this part as having, or having had, a mental or psychological disorder or condition that has no present disabling effect, but that may become a mental disability as described in paragraph (1) or (2).

"Mental disability" does not include sexual behavior disorders, compulsive gambling, kleptomania, pyromania, or psychoactive substance use disorders resulting from the current unlawful use of controlled substances or other drugs.

(k) "Veteran or military status" means a member or veteran of the United States Armed Forces, United States Armed Forces Reserve, the United States National Guard, and the California National Guard.

(l) "On the bases enumerated in this part" means or refers to discrimination on the basis of one or more of the following: race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical



condition, genetic information, marital status, sex, age, sexual orientation, reproductive health decisionmaking, or veteran or military status.

(m) "Physical disability" includes, but is not limited to, all of the following:

(1) Having any physiological disease, disorder, condition, cosmetic disfigurement, or anatomical loss that does both of the following:

(A) Affects one or more of the following body systems: neurological, immunological, musculoskeletal, special sense organs, respiratory, including speech organs, cardiovascular, reproductive, digestive, genitourinary, hemic and lymphatic, skin, and endocrine.

(B) Limits a major life activity. For purposes of this section:

(i) "Limits" shall be determined without regard to mitigating measures such as medications, assistive devices, prosthetics, or reasonable accommodations, unless the mitigating measure itself limits a major life activity.

(ii) A physiological disease, disorder, condition, cosmetic disfigurement, or anatomical loss limits a major life activity if it makes the achievement of the major life activity difficult.

(iii) "Major life activities" shall be broadly construed and includes physical, mental, and social activities and working.

(2) Any other health impairment not described in paragraph (1) that requires special education or related services.

(3) Having a record or history of a disease, disorder, condition, cosmetic disfigurement, anatomical loss, or health impairment described in paragraph (1) or (2), which is known to the employer or other entity covered by this part.

(4) Being regarded or treated by the employer or other entity covered by this part as having, or having had, any physical condition that makes achievement of a major life activity difficult.

(5) Being regarded or treated by the employer or other entity covered by this part as having, or having had, a disease, disorder, condition, cosmetic disfigurement, anatomical loss, or health impairment that has no present disabling effect but may become a physical disability as described in paragraph (1) or (2).

(6) "Physical disability" does not include sexual behavior disorders, compulsive gambling, kleptomania, pyromania, or psychoactive substance use disorders resulting from the current unlawful use of controlled substances or other drugs.

(n) Notwithstanding subdivisions (j) and (m), if the definition of "disability" used in the federal Americans with Disabilities Act of 1990 (Public Law 101-336) would result in broader protection of the civil rights of individuals with a mental disability or physical disability, as defined in subdivision (j) or (m), or would include any medical condition not included within those definitions, then that broader protection or coverage shall be deemed incorporated by reference into, and shall prevail over conflicting provisions of, the definitions in subdivisions (j) and (m).

(o) "Race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status, sex, age, sexual orientation, reproductive health decisionmaking, or veteran or military status" includes a perception that the person has any of those characteristics or that the person is associated with a person who has, or is perceived to have, any of those characteristics.

(p) "Reasonable accommodation" may include either of the following:

(1) Making existing facilities used by employees readily accessible to, and usable by, individuals with disabilities.

(2) Job restructuring, part-time or modified work schedules, reassignment to a vacant position, acquisition or modification of equipment or devices, adjustment or modifications of examinations, training materials or policies, the provision of qualified readers or interpreters, and other similar accommodations for individuals with disabilities.

(q) "Religious creed," "religion," "religious observance," "religious belief," and "creed" include all aspects of religious belief, observance, and practice, including religious dress and grooming practices. "Religious dress practice" shall be construed broadly to include the wearing or carrying of religious clothing, head or face coverings, jewelry, artifacts, and any other item that is part of an individual observing a religious creed. "Religious grooming practice" shall be construed broadly to include all forms of head, facial, and body hair that are part of an individual observing a religious creed.

(r) (1) "Sex" includes, but is not limited to, the following:

(A) Pregnancy or medical conditions related to pregnancy.

(B) Childbirth or medical conditions related to childbirth.

(C) Breastfeeding or medical conditions related to breastfeeding.

(2) "Sex" also includes, but is not limited to, a person's gender. "Gender" means sex, and includes a person's gender identity and gender expression. "Gender expression" means a person's gender-related appearance and behavior whether or not stereotypically associated with the person's assigned sex at birth.

(s) "Sexual orientation" means heterosexuality, homosexuality, and bisexuality.

(t) "Supervisor" means any individual having the authority, in the interest of the employer, to hire, transfer, suspend, lay off, recall, promote, discharge, assign, reward, or discipline other employees, or the responsibility to direct them, or to adjust their grievances, or effectively to recommend that action, if, in connection with the foregoing, the exercise of that authority is not of a merely routine or clerical nature, but requires the use of independent judgment.

(u) "Undue hardship" means an action requiring significant difficulty or expense, when considered in light of the following factors:

(1) The nature and cost of the accommodation needed.

(2) The overall financial resources of the facilities involved in the provision of the reasonable accommodations, the number of persons employed at the facility, and the effect on expenses and resources or the impact otherwise of these accommodations upon the operation of the facility.

(3) The overall financial resources of the covered entity, the overall size of the business of a covered entity with respect to the number of employees, and the number, type, and location of its facilities.

(4) The type of operations, including the composition, structure, and functions of the workforce of the entity.

(5) The geographic separateness or administrative or fiscal relationship of the facility or facilities.

(v) "National origin" discrimination includes, but is not limited to, discrimination on the basis of possessing a driver's license or identification card granted under Section 12801.9 of the Vehicle Code.

(w) "Race" is inclusive of traits historically associated with race, including, but not limited to, hair texture and protective hairstyles.

(x) "Protective hairstyles" includes, but is not limited to, such hairstyles as braids, locks, and twists.

(y) "Reproductive health decisionmaking" includes, but is not limited to, a decision to use or access a particular drug, device, product, or medical service for reproductive health. This subdivision and other provisions in this part relating to "reproductive health decisionmaking" shall not be construed to mean that subdivision (r) of this section and other provisions in this part related to "sex" do not include reproductive health decisionmaking.

(z) "Housing status" refers to the status of experiencing homelessness, as defined in paragraph (2) of subdivision (a) of Section 50675.15 of the Health and Safety Code.