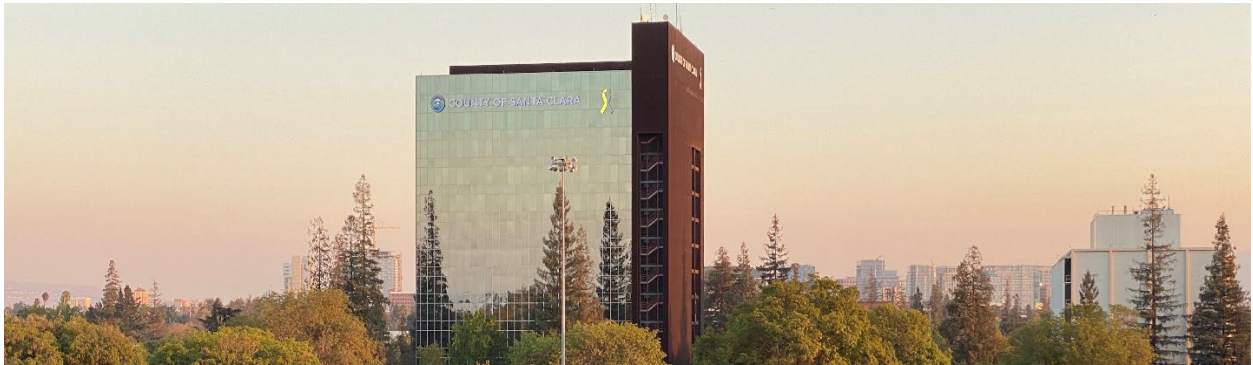


County of Santa Clara, California



Recovery Plan

State and Local Fiscal Recovery Funds

2025 Report



County of Santa Clara, California

2025 Recovery Plan

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GENERAL OVERVIEW

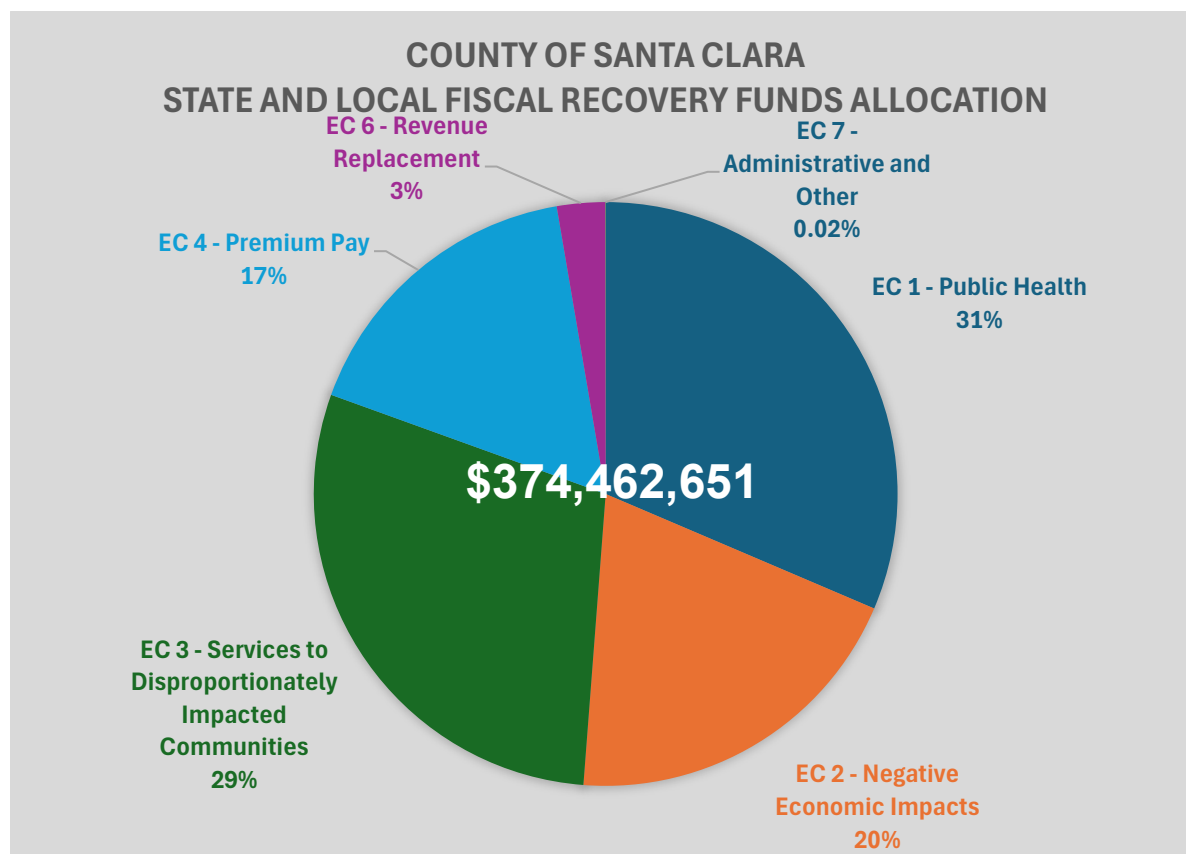
Executive Summary

The American Rescue Plan Act (ARPA) provided \$374.5 million in State and Local Fiscal Recovery Funds (SLFRF) to the County of Santa Clara (County) to support public health response activities and build an equitable economic recovery from the devastating economic impacts caused by the COVID-19 pandemic. The County began appropriating these funds in fiscal year (FY) 2020-2021, with a strategic vision that addressed equity and systemic public health and economic challenges, provided safety net services for the community, and supported the County's continued pandemic response and economic recovery. Currently, the County obligated all funds by December 31, 2024, and anticipates expending them by December 31, 2026. This report intends to build off last year's Recovery Plan (July 2024) and incorporate new program updates, project details, and performance data collected in the previous year.

Over the past five years, with the strategic vision remaining the same, the County continues to refine the allocation of SLFRF funds and stays flexible to invest in programs and initiatives to evolving priorities. The SLFRF funds are applied in a variety of ways to respond to the COVID-19 pandemic and address its public health and negative economic impacts on individuals and families, nonprofits, county operations, and the county at-large in its efforts to recover from the public health emergency. With equity and economic recovery with long-term resilience as the guiding principles, the County focuses specifically on assisting individuals and communities in greatest need, particularly communities that have been historically disadvantaged and have experienced disproportionate impacts of the COVID-19 pandemic. Below is a summary of the use of funds with SLFRF Expenditure Category as of the end of FY 2024-2025. For details of programs for each expenditure category, please refer to the Uses of Funds and Project Inventory.

Expenditure Category (EC)	Number of Programs	Allocation (in millions)	Expenditure To Date (in millions)	Percentage Completed
EC 1. Public Health	11	\$117.6	\$116.9	99.4%
EC 2. Negative Economic Impacts	12	\$74.2	\$54.4	73.3%
EC 3. Services to Disproportionately Impacted Communities: Public Section Capacity	3	\$109.7	\$109.6	99.9%
EC 4. Premium Pay	1	\$62.9	\$62.9	100%
EC 6. Revenue Replacement	1	\$10.0	\$10.0	100%
EC 7. Administrative and Other	1	\$0.10	\$0.10	100%
Total	29	\$374.5	\$353.9	94.5%

The chart below shows the use of funds by percentage.



The County is engaged in a number of public health, negative economic impacts, and public sector capacity projects through multi-departments collaboration and relationship building with community partners. \$117.6 million of SLFRF funds were designated for public health response activities, including temporary medical staffing, contact tracing, non-congregate sheltering and groceries support, isolation and quarantine. The County was able to develop a robust public health response in implementing mitigation and prevention measures to slow the spread of the virus and maintaining adequate medical staffing to meet the high demands on COVID-19 patient care and support at 50 vaccination sites and 44 testing sites throughout the county. The County achieved a successful pandemic response with 95% of its 1.9 million residents vaccinated with at least one dose of COVID-19 vaccine, and 87.6% vaccinated with two doses. More information on the County's COVID-19 vaccine administration can be found at [COVID Vaccinations Dashboard](#). COVID-19 response activities were complete as these have transitioned into the County's ongoing public health operations.

Besides emergency responses, a portion of \$117.6 million was invested in building improvements, HVAC and ventilation improvements for the County's healthcare facilities, expansion of basement space in a mental health facility, upgrade in cardio-respiratory equipment for first responders, contracted service for after office hour call center support for behavioral health services, and wellness screenings and services at schools to support healthy childhood environments. All these spendings resulted in the County to better serve and protect residents now and in the future. Fundings in this expenditure category have been utilized, except reimbursement of the

construction cost for the expansion of basement space and wellness screenings and services at schools anticipated to be completed next fiscal year.

The County appropriated \$74.2 million of SLFRF funds for 12 programs targeted to address negative economic impacts of COVID-19 pandemic experienced in historically disadvantaged and disproportionately impacted communities. Allowable expenses have been spent to build a resilient and equitable economy through assistance to households, nonprofits, and those residing in Qualified Census Tracts (QCTs). Eligible uses of funds include emergency food and housing assistance towards long-term housing security; school-based behavioral health services to address behavioral, social and emotional needs; an infrastructure expansion grant, apprenticeship program and employment support for childcare workforce who were negatively affected by the public health emergency; financial assistance to nonprofits operating in and/or serving communities located in QCTs; implementing guaranteed basic income pilot for justice-involved clients for economic impact assistance. In addition, 6.2% of the funds are allocated for capital expenditure for the construction of a family wellness center for disproportionately impacted communities. At the end of FY2024-2025, four programs have concluded with significant impact on homelessness prevention and improvement on medical facilities serving disproportionately impacted communities. In the coming year, the County will continue these important initiatives and programs to build a strong, resilient, and equitable economic recovery.

\$109.7 million SLFRF funds were earmarked to support public sector workforce and capacity. Funds were utilized to cover the payroll and benefits associated with public health and public safety employees, disaster service workers performing activities related to the COVID-19 pandemic response, and to engage with a university to conduct a needs assessment and develop a strategic plan for addressing the behavioral health workforce needs. In addition, the funds within this expenditure category are being used to assist four community clinics replacing their existing electronic health record systems with the County's OCHIN EPIC Electronic Health Record System (EPIC). This ensures a coordinated system of care across the County's safety net population and allows a better understanding of patient care needs in real time. Both the reimbursement of payroll and benefits and implementation of EPIC for community clinics were complete. Next fiscal year activities will focus on the completion of the behavioral health workforce needs assessment and issuance of the strategic plan.

In recognition of employee's enormous contributions during the COVID-19 pandemic, premium pay of \$62.9 million for eligible County/County Fire Department employees and In-Home Support Services providers was mostly distributed in December 2021.

The County used the standard \$10.0 million authorized allowance in the SLFRF Final Rule and applied the funds to cover the payroll and benefits of employees who worked on COVID-19 related activities that were not eligible for reimbursement through FEMA.

Lastly, the County utilized \$0.1 million on general management of SLFRF grant management, like administrative oversight, accounting, and timely and transparent reporting.

The County has been able to implement the SLFRF funds in an efficient, effective and equitable manner. Into the final years of the SLFRF fundings, the County intends to continue expending funds tactically and complete executing initiatives designated to address the negative economic and disproportionate impacts of the pandemic with a focus on building a long-term resilience and equitable economic recovery. The County is committed to transparency and accountability while utilizing the SLFRF funding and this report is updated annually with updated project information regarding the use of this funding. This report is available on the County's public website at [American Rescue Plan | Controller-Treasurer Department | County of Santa Clara](#).

Uses of Funds

Since the County's strategic vision for the use of SLFRF funds was adopted by the Board of Supervisors on November 2, 2021, the County used an equity lens and a data-driven approach to prioritize spendings and develop programs and initiatives to help support a strong recovery from the COVID-19 pandemic and economic downturn. The table below provides the allocations of \$374.5 million and expenditures to date for each SLFRF expenditure category as of June 30, 2025.

SLFRF EXPENDITURE CATEGORY	BUDGET (in millions)	EXPENDITURE TO DATE (in millions)
EC 1. Public Health <i>COVID-19 Public Health Expenses</i> - Prior and Ongoing Public Health Response Costs (\$36.0M) - Contact Tracing (\$3.2M) - Non-Congregate Housing and Groceries Support (\$2.3M) - Isolation and Quarantine (\$0.03M) <i>Public Health Services</i> - HVAC Improvement for Healthcare Facilities (\$15.6M) - Cardiac monitors/Defibrillators (\$1.4M) - Wellness Screenings and Services for Children (\$3.5M) - Valley Health Center Facility Improvement (\$9.9M) - Wastewater Testing (\$0.2M) <i>Mental Health Services</i> - Building Improvements for Mental Health Facility (\$43.6M) - Behavioral Health Services Department Call Center (\$1.9M)	\$117.6	\$116.9
EC 2. Negative Economic Impacts <i>Homelessness Response</i> - Homeless Prevention System Pilot (\$8.4M) - Urgent Housing Related Assistance (\$8.0M) - Emergency Housing Voucher (\$6.0M) - Heartwood Apartments (\$2.8M) - Homelessness Prevention for Individuals with Substance Use Disorder (\$2.0M) <i>Food Assistance</i> - Direct Food Assistance Program (\$5.6M) <i>Childcare</i> - Childcare Infrastructure Grant Program (\$15.0M) - Childcare Apprenticeship Program (\$5.0M)	\$74.2	\$54.4

SLFRF EXPENDITURE CATEGORY	BUDGET (in millions)	EXPENDITURE TO DATE (in millions)
<i>Assistance to Nonprofits</i> - Grant Program for Community-Based Organizations (\$9.8M) <i>Economic Impact Assistance</i> - Guaranteed Basic Income Pilot for Justice-Involved Clients (\$2.0M) <i>Educational Disparities: Mental Health Services</i> - School-Based Behavioral Health Wellness Center (\$5.0M) <i>Medical Facilities for Disproportionately Impacted Communities</i> - Gardner Family Wellness Center (\$4.6M)		
EC 3. Services to Disproportionately Impacted Communities <i>Public Sector Workforce</i> - Payroll and Benefits for Public Health and Public Safety (\$98.8M) - Behavioral Health Service Workforce Strategic Plan (\$0.25M) <i>Public Sector Capacity: Effective Service Delivery</i> - Electronic Health Record System for Community Clinics (\$10.6M)	\$109.7	\$109.6
EC 4. Premium Pay Pandemic Pay for County/County Fire Employees and In-Home Support Services Providers	\$62.9	\$62.9
EC 6. Revenue Replacement Prior and Ongoing Pandemic Response	\$10.0	\$10.0
EC 7. Administrative Expenses General management of SLFRF Grant Fundings	\$0.1	\$0.1
Total	\$374.5	\$353.9

As noted above, the County's ARPA strategic vision included spending to fortify the system of coordinated care, allow for the continuity of operations during the pandemic response, and provide funding for past and future COVID-19 responses and economic recovery. The projects that the County has undertaken with the help of SLFRF are aligned with these goals and support the strategy in the following areas.

Public Health (EC1)

The County identified \$117.6 million budget in public health strategies for SLFRF funding. A significant portion of the SLFRF funds has been allocated toward prior and ongoing COVID-19 response efforts that covered a range of costs, including:

COVID-19 Emergence Response

- \$36.0 million for contracting temporary medical staffing to meet the high demands on patient care and support at 50 vaccination sites and 44 testing sites throughout the county during the surge of COVID-19, and also, on third party IT support services at vaccination and testing sites to rapidly implement the applications for necessary health record tools and technology which were critical for patient vaccine administration and care.
- \$3.2 million to fund a contract with a public health organization for providing consulting and support services for the design and implementation of a multi-level staffing infrastructure to expand and sustain the County's Public Health Department's COVID-19 case investigation and contact tracing (CICT) program upon the outbreak of COVID-19 pandemic.
- \$2.33 million to reimburse costs incurred for non-congregate housing and groceries support (\$2.3 million), and isolation and quarantine (\$0.03 million) while supporting low-income households who needed to isolate and/or quarantine due to having contracted with COVID-19 during the pandemic.

Public Health Services

- \$15.6 million to reimburse the costs of HVAC improvements and other ventilation projects and generator replacements made in the County healthcare facilities to address COVID-19 and its impact on public health as well as to support the need for increased primary care and urgent care services for patients in the south county communities.
- \$1.4 million to replace and upgrade existing 34 cardiac monitors/defibrillators for County Fire Department with models of advanced features to warrant the highest level of cardio-respiratory care to be delivered in the field to patients suffering from the devastating effects of COVID-19.
- \$3.5 million in support for expanding the wellness screening and health related services at schools for children to promote the health and well-being of school-aged children across the county.
- \$9.9 million in improvements for critical capital infrastructure for medical facilities, including new roofing systems, exterior walls and windows, fire alarm system, and utility system, to support long-term community growth and expand services in disproportionately impacted communities.
- \$0.2 million to cover costs on conducting wastewater testing for monitoring of COVID-19 and increase the ability to continue to process, analyze, and share disease data to protect its 1.9 million residents.

Mental Health Services

- \$43.6 million for the construction project of expanding 21,000 square feet basement space in the County's mental health facility with storage rooms and storage carts to account for additional PPE storage needs during COVID-19 pandemic and adding an additional 103 square feet for an urgent care assessment room intended to provide any patient with comorbidities a separate isolated room to be assessed.
- \$1.9 million to contract a behavioral health services provider for providing critical after-hours behavioral health support to clients to ensure continuity of behavioral health services by extending care beyond traditional business hours (after 5 PM) and enabling 24/7 access to mental health support.

Negative Economic Impacts (EC2)

Homelessness Response

To mitigate the negative economic impacts of the COVID-19 pandemic, the County has designated \$27.2 million in homelessness response. Key investment areas include:

- \$8.4 million to fund homelessness prevention system pilot for extremely low-income households focusing on providing intervention for households experiencing a housing crisis before they enter homelessness.
- \$8.0 million to support urgent housing related assistance to expand temporary housing options for families with children, rental assistance, and supportive services.
- \$6.0 million for emergency housing voucher to provide case management services to households including housing search, financial assistance (rental deposit, first month rent, and furniture), and continued support focusing on housing retention.
- \$2.0 million in homelessness prevention for individuals with substance use disorder.
- \$2.8 million to support the development of affordable and supportive apartments specifically for Transition Age Youth (TAY) and families experiencing or at risk of homelessness.

Equitable Economic Recovery

Economic recovery is focused on creating resilient, sustainable communities that generate long-term economic success. The County has developed \$37.4 million in economic recovery programs funded by SRF, including:

- \$9.8 million in direct grants for economic resiliency and sustainability for community-based organizations that were negatively impacted by the COVID-19 pandemic, focusing on organizations operating in and/or serving communities located in Qualified Census Tracts (QCTs).
- \$20.0 million in childcare infrastructure and workforce development, including \$15.0 million direct grants to support center-based and family childcare home providers to reopen and expand childcare slots to their programs; \$4.9 million for a childcare apprenticeship program and employment support to fill early learning and workforce gaps.
- \$5.6 million for food security programs, including grants to nonprofit food assistance organizations that experienced financial hardship due to the COVID-19 public health emergency, with the intent to reduce food insecurity among vulnerable populations in the county.
- \$2.0 million to support Guaranteed Basic Income Pilot for justice-involved clients aiming to reduce recidivism.

Community Resiliency

The COVID-19 pandemic impacted every community in the county. There are clear deficits in community resources that need to be addressed. The programs in the Community Resiliency portfolio are designed to address a range of impacts and provide additional funding for needed interventions in the community. The current SLFRF allocation for the Community Resiliency response is \$9.6 million, including:

- \$5.0 million for behavioral health support by funding development of school-based behavioral health wellness centers and services in the county public school districts, especially middle and high schools that were significantly impacted by the COVID-19 pandemic. The goal of the program is to increase accessibility to mental health services

for students with behavioral and emotional needs, promote mental health awareness among school districts and communities of diverse populations, and support students in re-engaging with schools following the closures caused by the pandemic.

- \$4.6 million for the construction of Gardner Family Wellness Center providing primary care and behavioral health services for youth and families in disproportionately impacted communities.

Community Engagement

Meaningful community engagement is central to several of the County's programs funded by SLFRF in order to help shape program design, implementation, and achieve collective success. Examples of this are shared below.

A notable example is the Behavioral Health Services Department (BHSD) Call Center program which demonstrates this dynamic. When county staff expressed concerns about operational sustainability and burnout related to maintaining 24/7 call center operations, community members advocated strongly for preserving these extended hours of service. This situation illustrates how SLFRF's community engagement requirements created formal channels for public input on service delivery models, forcing the County to balance operational capacity with community-expressed needs.

The needs assessment for the Behavioral Health Service Workforce Strategic Plan program consisted of conducting interviews and focus groups with key stakeholders, including executives and managers of the County's Behavioral Health Services Department, educational partners, policymakers, community based organizations (CBOs) with which the county contracts, and other behavioral health providers and stakeholders, regarding their perspectives on behavioral health workforce needs and workforce development in Santa Clara County for developing a comprehensive, systemic understanding of the current and desired future state of county public behavioral health network. These listening sessions allowed key stakeholders to provide feedback and input to strengthen the public behavioral workforce pipeline in the county, a community in which they reside and/or work.

For the development of Heartwood Apartments, the County, the City of Mountain View, and nonprofit developer Jamboree led a robust outreach campaign aimed at incorporating resident feedback and providing general education about the project of developing a supportive housing for Transitional Age Youth (TAY) and households experiencing or at risk of chronic homelessness. Prior to selecting a development partner, the County conducted a survey to gain insight into what the community valued. The outreach process began extraordinarily early for this project. Two months after the Mountain View City Council voted to partner with the County, an outreach meeting was held in March 2021. Over the course of the next two years, the County, City, and Jamboree conducted an additional six outreach meetings.

The early and consistent outreach created an extremely transparent process throughout all stages of development. The community was able to offer input and remain informed from predevelopment through construction. As part of the development agreement with Jamboree, even after construction, Jamboree will host an annual outreach meeting to gather community feedback and remain accountable to the assurances previously given.

Community feedback impacted the project in several ways. One of the significant areas of community contribution was determining the resident makeup. The community expressed interest in incorporating TAY, resulting in 13 of the 49 units being set aside for this population. Input also informed the property's security and parking plans.

As part of the County's Food System Workplan for direct food assistance, the County has launched a Resident Advisory Committee (RAC). RAC is a group consisting of 10 local residents from across the county who are leading a process of food system priority setting with support from the Public Health Department and a local food system nonprofit. They meet monthly to discuss

food system policies and programs, bringing their own, and their families, daily interaction with the local food environment to bear.

The Wellness Center Study and Wellness Center Guide for the School-Based Behavioral Health Wellness Center program included recommendations related to outreach and engagement and including student voice in the development and implementation of the school-based wellness center. Grantees were encouraged to develop a group that supports student voice inclusion such as NAMI on Campus Club and Bring Change to Mind. During the development of the wellness centers, students shared ideas, color schemes, furnishing ideas, and what was needed in the wellness center for students to feel safe and welcomed. In Winter 2024 and early 2025, the County and program administrator, Valley Health Foundation, attended grand openings of the school-based wellness across the County along with school district administrators, school faculty, Board of Trustees, City officials, community members, students, families, and community-based organizations. The school site developed a program for each event and attendees received a tour of the wellness center, introduction to the wellness center staff, as well as heard from students' experiences in developing the wellness center and how the wellness center will support students for years to come. Additionally, the community shared their experiences in creating the space for the wellness center through painting, building furniture, and decorating.

The program for Wellness Screenings and Services for Children HKF has embedded community feedback into program design and delivery. Engagement strategies include:

- *School Partner Meetings*: Regular engagement with principals, nurses, and staff to adjust service delivery and scheduling.
- *Bilingual Outreach*: Materials and case management are provided in multiple languages to reflect the community's diversity.
- *Ongoing collaboration* with school administrators, school nurses, and community partners to identify emerging needs.

This continuous feedback loop strengthens trust with families and ensures the programming remains responsive and community centered.

For homelessness response programs, the County has engaged four partner organizations to provide various housing support services and case management. Partner organizations actively seek feedback and input from program participants, surrounding community, and those with lived experience through the following avenues. The intention of these feedback loops is to build a more responsive and collaborative relationship between program leadership, staff, and participants, and to ensure participants who have spent time providing feedback feel valued, seen, and heard. Feedback collection mechanisms are available in multiple languages to facilitate wide-ranging participation.

- In person interviews
- Lived experience advisory committee
- Semi-annual anonymous surveys for participants. Once surveys have been conducted, the data is compiled, and the results are reported to senior level management. Areas with less than 90% satisfaction are prioritized for corrective actions and improvement plans. Results are viewed in comparison to previous surveys to measure progress and effectiveness of corrective action.
- Regularly scheduled community meetings with participants which provide a safe space that empowers participants to meaningfully contribute to program improvements and service offerings, as well as provide a forum for participants to give creative input and engage in problem solving.
- Listening sessions conducted by agency leadership.

- Monthly meetings open to the public and provide an opportunity for neighbors, participants, program staff, elected officials, city staff, law enforcement, and other interested stakeholders to discuss neighborhood opportunities and challenges, program updates, and any other discussion topics relevant to the neighborhood.
- Homelessness Prevention System engages the community through 21 partner organizations and through lived experience advisory committee, which meets twice per month. Participant surveys are conducted annually to seek feedback.

Labor Practices

No update since the last Recovery Plan of 2024.

Use of Evidence

The County encourages conducting program evaluations and evidence gathering efforts on programs funded by SLFRF in order to build evidence of effectiveness and measure performance and impact over time. Many programs have established performance indicators, timeliness, and standardized reporting templates to track progress towards objectives, outcomes, and improve program activities.

A remarkable example is the homelessness response programs. The County maintains a Homeless Management Information System (HMIS) which partner organizations can enter client data into this shared database, allowing the system to track services and outcomes for individual partner agencies and across the entire network. The utilization of HMIS tracks all clients at entry and exit, inputs of all required universal and common data elements by project type, maintain overall data quality in accordance with the County Continuum of Care (CoC) Continuous Data Quality Improvement Process, and maintain the confidentiality and security of client data. Since the network includes four providers that are victim service providers and therefore cannot enter data into HMIS, these organizations track de-identified data outside of HMIS and their aggregate data is manually combined with aggregate data from HMIS into system wide metrics. Network activities, including household enrollments, financial assistance, and case management, are reviewed monthly to ensure progress is on track and allow for course correction, as needed. Performance outcomes are reviewed quarterly. Current progress reflects that as of December 2024, 95% of households assisted through HPS remained stably housed while receiving services and only 6% of households became homeless within one year after exiting Homelessness Prevention System (HPS) services to permanent housing.

It is noteworthy that the HPS has been evaluated through a Randomized Controlled Trial conducted by the Lab for Economic Opportunities at the University of Notre Dame. This study (<https://news.nd.edu/news/targeted-prevention-helps-stop-homelessness-before-it-starts/>), the results of which were published in The Review of Economics and Statistics in May 2023, evaluated the effect of providing emergency financial assistance to households at risk of homelessness through HPS. The study found that people who were offered emergency financial assistance were 81 percent less likely to become homeless within six months of enrollment and 73 percent less likely within 12 months. HPS continues to operate following the service model that was evaluated in the study and found to be effective at preventing homelessness.

The Emergency Housing Voucher program also established performance benchmarks. Benchmarks are updated annually. For FY 2024-2025, the benchmarks are as follows:

- i. The extent to which individuals and families who leave homelessness experience additional spells of homelessness:
 - a. Metric 2a.2 – 8% or fewer of households who exit to permanent housing destinations will return to homelessness within six to twelve months.
 - b. Metric 2b.2 – 14% or fewer of households who exit to permanent housing destinations will return to homelessness within two years.
- ii. Employment and Income Growth for homeless individuals and families:
 - a. Metric 4.1 – 22% or more of households still enrolled during the reporting period will have gained or increased employment income.
 - b. Metric 4.2 – 22% or more of households still enrolled during the reporting period will have gained or increased non-employment cash income.
 - c. Metric 4.3 – 29% or more of households still enrolled during the reporting period will have gained or increased total cash income.

- d. Metric 4.4 – 26% or more of households will gain or improve employment income from program entry to program exit.
 - e. Metric 4.5 – 20% or more of households will gain or improve non-employment cash income from program entry to program exit.
 - f. Metric 4.6 – 35% or more of households will gain or improve total cash income from program entry to program exit.
- iii. Successful housing placement:
 - a. Metric 7b.1 – 73% or more of households will exit to a permanent housing destination.
- iv. Local measures:
 - a. Metric (a) – 94% of housed clients are enrolled in health insurance.
- v. Process measures:
 - a. Metric (a) – 98% or more of households will exit to a known destination.
 - b. Data quality
 - 1. Metric (c1) for all housing types: 0% of clients will have missing values in HUD universal data elements.
 - 2. Metric (c2) for all housing types: 5% of clients or fewer will have Don't Know/Refused answers in HUD universal data elements, excluding Social Security Number, Race, and Exit Destination.

For Urgent Housing Related Assistance, performance outcomes are required for every shelter contract and focused on supporting families to exit into permanent housing. Additionally, the contractor is required to track all case management activities. The following key performance indicators are captured:

- 16% or fewer of households who exit to permanent housing destinations will return to homelessness within six to twelve months.
- 24% or fewer of households who exit to permanent housing destinations will return to homelessness within two years.
- Data quality
- For all housing types: 0% of clients will have missing values in HUD universal data elements.
- For all housing types: 5% of clients or fewer will have Don't Know/Refused answers in HUD universal data elements, excluding Social Security Number, Race, and Exit Destination.

Within the program for Homelessness Prevention for Individuals with Substance Use Disorder, the following key performance indicators are developed:

- 85% of households will receive financial assistance within three (3) working days from the completion of the application.
- Demonstrate that at least 85% of households will remain stably housed while receiving prevention assistance and for at least 12 months after the termination of assistance. Housing retention data will need to be recorded in HMIS.
- 85% of households will not enter or re-enter emergency shelter or transitional housing within two years of termination of prevention assistance.

More information on results of program evaluation will be provided in future Performance Report.

Performance Report

The County is committed in performance management to provide valuable output and outcome measures for programs funded by SLFRF funds. Many programs have key performance indicators intended to show the efficacy and equitable outcomes of public health and economic support investments. This ensures that programs meet their intended outcomes, maximize programmatic impact, and that challenges are addressed promptly. Below are the highlights of performance report for this reporting period.

Electronic Health Record System for Community Clinics



All four community clinics have successfully implemented and transitioned to EPIC system, improving care coordination and exchange of health care data with these clinics and safety-net health care systems, impacting over 150,000 community clinic patients and over 2,000 health care providers and clinic staff. Furthermore, community clinics have improved their clinical quality performance rates by 17%. These HEDIS clinical quality measures are reported by the health plans as part of the health plans Value-Based Performance Programs with their

contracted practices and providers. (Photos of an event recognizing key community health center staff and leadership for their instrumental work in implementing their health centers EPIC systems)

Behavioral Health Services Department Call Center



This investment transforms behavioral health services access by extending care beyond traditional business hours (after 5pm) to a comprehensive 24/7 community resource, directly supporting both individual wellbeing and broader community behavioral health outcomes. It demonstrated measurable operational success during the fiscal year 2024-25 third and fourth quarters (October 2024 - March 2025).

Call Volume Performance

- Total calls processed: 3,420 calls
- Santa Clara County specific calls: 3,400 calls (99.4% of total volume)
- Crisis intervention calls: 82 calls (2.4% of total volume)
- Daily average: 17-19 calls per day for Santa Clara services

Response Time Analysis

- Santa Clara calls: 40-87 second average response time
- Crisis calls: 29-63 second average response time
- Performance trend: Crisis response times improved 54% from Q3 to Q4

Quality Outcomes

- CS staff audit passing rate: 95.73% - 98.95%
- Santa Clara audit averages: 91% - 96.75%
- Continued improvement demonstrated across both quarters

Below is a story reflecting how impactful the program is for a county resident.

Caller 1, a Santa Clara County resident, had been struggling with increasing depression and felt she urgently needed to speak with a mental health professional. As evening approached, her worries about her mental health intensified, and by 6:15 PM on a Tuesday, she realized she couldn't wait another day to get an appointment/referral to see a mental health provider.

With growing anxiety about her situation, Caller 1 dialed the Santa Clara County Behavioral Health Department's call center, expecting to reach an automated message directing her to call back during business hours. To her relief and surprise, a warm, professional voice answered – it was a Carelon after-hours specialist. Caller 1 later shared, "I was so worried that no one would pick up because I thought your lines would be closed after 5 PM. When someone actually answered, I almost cried with relief."

The Carelon specialist listened patiently as Caller 1 described her urgent need for support and her anxiety about scheduling an appointment with a mental health specialist for her depression. Understanding the critical nature of early intervention in mental health care, the specialist was able to access the county's scheduling system and secure Caller 1 a referral with a provider for 10 AM the following morning. The specialist also provided Caller 1 with immediate coping strategies for managing her anxiety overnight and ensured she had crisis resources if her condition worsened.

This investment addressed a critical gap in behavioral health services that has long affected Santa Clara County residents. While the County has staff to cover after-hours calls in the past, these were typically employees who had already worked long shifts during regular business hours. This meant that staff members were often tired and fatigued when handling evening calls, which could potentially affect the quality of services provided during these critical after-hours periods when residents most needed compassionate and focused support.

Direct Food Assistance Program



The allocated funds were awarded to 19 food assistance nonprofit organizations. In total 729,785 households were served through distribution of over 2.4 million meals and grocery boxes, including prepared meals, fresh produce, fresh protein, and shelf-stable pantry items, to the County's most vulnerable residents. These items are distributed at the nonprofit sites, through partner sites, and by home delivery. In addition, two million pounds of the food distributed was recovered from food

service providers, supermarkets, wholesalers, and distributors as part of SB 1383, a new state law designed to address food insecurity and combat climate change.



Childcare Infrastructure Grant Program



As of May 2025, 41 grants have been issued to home-based and center-based childcare providers, eight are being recommended for funding, and six are in the early review process. The program is creating nearly 600 new childcare slots throughout Santa Clara County. To date, a total of 301 children were served through the childcare providers.



Amparo Ríos, owner and operator of Joyful Learning Educational Development Center in South San José, has upgraded her business with the help of a \$400,000 grant.

Ríos has transformed a former recreation center in South San José into a childcare center with the capacity for 100 children. Joyful Learning Educational Development Center is a nonprofit that serves primarily low-income families, and about a quarter of the children who are enrolled there have special needs.

“It’s a surreal feeling,” Ríos said on a recent sunny morning at Joyful Learning, which occupies a 7,000-square building with a sprawling play area in the back. “I always wanted to open up a center, but I really never thought it was going to happen. With the funding, it was possible.”

Ríos received two grants of \$200,000 apiece: one for renovations and the other for operations. She has used the money to bring on new employees, buy furniture and perform a slew of upgrades, such as sprucing up classrooms, installing a new heating and air conditioning system, improving the backyard, and replacing an Americans with Disabilities Act-compliant ramp leading to the play area. Joyful Learning provides a STEM-based curriculum in English and Spanish. It offers a valuable service to low-income families, particularly those who have kids with special needs. Some of the families are homeless.



Bobbi Urbano, executive director of Willow Glen Community Extended Day Enrichment Program, speaks at a press conference at her childcare center about the Childcare Expansion Grant Program.



Hundreds of childcare providers were forced to shut down during the pandemic. Willow Glen Community Extended Day Enrichment Program was one of them. “That was difficult, because these are my employees and my teachers we’ve been working with for a long time,” said Urbano. “I saw a bit of desperation from our community when we had to close. Childcare is vital for a lot of people to survive. They need to know that their children are safe, so that they can work.”

Willow Glen Community Extended Day Enrichment Program was awarded \$498,000 by the County’s grant program. Urbano is using the funds to expand and improve the program. The money is going to new laptops and iPads, which help streamline the check-in and check-out process; a new refrigerator and other equipment; staff salaries; and rent. She is also using the grant proceeds to expand the number of scholarships for very low-income students from three to 15. Those children will attend for free.

“It’s been rough a few years,” Urbano said. “This is really a great push to get us back to a healthy place.”

A \$1.25 million grant is bringing a childcare center to the Morgan Hill School District, helping parents who are returning to school. This investment supports families in South County, one of the areas most in need of expanded childcare options.

Please see below media coverage for the Childcare Expansion Grant Program.

- [County Program Supports Childcare Providers, Helps Low-Income Families | County News Center | Office of Communications and Public Affairs | County of Santa Clara](#)
- [\\$15 million grant will help hundreds of kids access child care in Santa Clara County - ABC7 San Francisco](#)
- [YMCA of Silicon Valley Receives \\$1.75M Grant to Renovate Gavilan's Early Learning Center and Lab School](#)
- [Grant helps expand childcare services in Gilroy | Gilroy Dispatch](#)

Childcare Apprenticeship Program



The first cohort of approximately 40 Associate Teacher apprentices graduated in June 2024, and all were offered permanent employment by FIRST 5's employer partners. The second cohort of approximately 38 apprentices graduated in February 2025, and the third cohort of approximately 29 Teacher apprentices started in January 2025. Employer partners are anticipated to continue to offer permanent positions for the apprentices, demonstrating their commitment to supporting the professional growth and development of these individuals.



Michelle Melendez and Tara, 3, feed a flower to a rabbit.

Participating in the apprenticeship initiative has been inspirational for Melendez, who operates a unique childcare business out of her home in the city of Santa Clara. She cares for both typical children and atypical children who have developmental disorders such as down syndrome.

"It's helping me grow and learn new strategies to help the kids," Melendez said of the program. "It's been an awakening for me. My passion has grown stronger. I want to do this now more than ever."

Below are sharing from two apprenticeship participants and media coverage.

"The apprenticeship program changed my life because it gave me a better start to my future, something that I believed I had lost already since I am a mother. Never thought that there was another opportunity for me to start college & a career. It helped me strengthen my beliefs already as a mother & now as an educator. It made me realize I have a voice & I can use it to advocate for what's right. It helped me to believe in myself." – Apprenticeship participant

"This program helps me [get] back [to] school, getting more knowledge, helping me to combine knowledge and work skills. Also helped me [to] have income to ensure personal and family life. This is an opportunity for me after completing the program I will continue to study higher, I feel confident and independent in my life." – Apprenticeship participant

Please see below media coverage.

- [County Partners with FIRST 5 to Spearhead Innovative Early Learning Apprenticeship to Improve Access to Childcare | County News Center | Office of Communications and Public Affairs | County of Santa Clara](#)
- [First 5 - Early Learning Apprenticeship Program](#)
- [First 5 - Shared Services Alliance](#)

Wellness Screenings and Services for Children



The County contracted with the Healthier Kids Foundation to administer the program. The program delivered a range of services, including vision, dental, and hearing screenings; case management for follow-up care; mental health wellness checks; health insurance enrollment assistance; parent and caregiver education on health habits and nutrition. Over the course of FY 2024-2025, a total of:

- Dental Screenings
 - 21,472 children screened
 - 28.5% (approx. 6,119) referred for follow-up care
 - 60% of referred cases closed
- Vision Screenings
 - 16,569 children screened
 - 15% (approx. 1,272) referred for follow-up care
 - 65% of referred cases closed
- Hearing Screenings
 - 17,169 children screened
 - 6% (approx. 490) referred for further testing
 - 81% of referred cases closed
- Mental Health Wellness Checks
 - 115 children received checks
 - 18 students – borderline
 - 41 students – clinically significant
- Health Coverage Support
 - 117 children identified as needing health insurance
 - 66 children successfully enrolled
 - 99 clients received information on Primary Care Access Program
- Health Education
 - 129 online health education workshops held
 - Reached 1,836 parents and positively impacted 1,788 children
 - Six weeks post-class surveys showed healthier family meal choices

This program has been especially impactful in schools with 50–75% or more students enrolled in the Free and Reduced-Price Lunch Program, helping to address health disparities in underserved communities. Providing screenings directly in schools helps close gaps in routine healthcare by identifying children with unmet dental, vision, hearing, and mental health needs. With the rising

cost of healthcare and transportation challenges faced by many families, school-based screenings ensure that issues are caught early often before a child sees a doctor or dentist. Case management plays a critical role by helping families navigate follow-up care, overcoming barriers such as scheduling, language access, and insurance coverage. As a result, more children can receive timely services that support their health, learning, and long-term success.

Homelessness Prevention System Pilot



Homelessness Prevention System (HPS) enables households who are at risk of homelessness to receive homelessness prevention services which include emergency financial assistance (rental arrears, rental assistance, utility assistance, etc.) and case management. HPS has been evaluated through a randomized controlled trial conducted by the Lab for Economic Opportunities at the University of Notre Dame. This study (<https://news.nd.edu/news/targeted-prevention-helps-stop-homelessness-before-it-starts/>), the results of which were published in The Review of Economics and Statistics in May 2023, evaluated the impacts of providing emergency financial assistance to

households at risk of homelessness through HPS. The study found that people who were offered emergency financial assistance were 81 percent less likely to become homeless within six months of enrollment and 73 percent less likely to become homeless within 12 months. HPS continues to operate following the service model that was evaluated in the study and found to be effective at preventing homelessness. Allocated funds have been expended in fiscal year 2024-2025. As of December 2024, 95% of 1,165 households assisted through HPS remained stably housed while receiving services and only 6% of households became homeless within one year after exiting HPS services to permanent housing.

Supportive Housing Program – Emergency Housing Voucher



309 households have been served since the launch of the program. The program continues to support households providing resources for services such as financial literacy, health and wellness, and benefit connections. Those housed through the supportive housing system have a 98% housing retention rate. Below are a few impact stories demonstrating the effectiveness of the program over the years.

Client 1 - The Client's family experienced intermittent homelessness for approximately seven years prior to receiving their Emergency Housing Voucher (EHV). At the time of enrollment in the EHV program, the family was living in an RV parked at a designated safe parking site in Mountain View, with a total household income of just \$700 per month. They were enrolled in the EHV program for case management and housing search services on August 30, 2022.

Since joining the EHV program, the family has remained stably housed for nearly two years, significantly increased their income, and acquired two vehicles to support their daily needs. The client now works alongside their parent providing residential cleaning services. The client's spouse is employed, and their 18-year-old child works at a local movie theater. The family's combined monthly income is now approximately \$5,000, marking a substantial improvement in financial stability. With the EHV subsidy scheduled to end in December 2026, the family has expressed confidence in their ability to maintain housing independently.

Client 2 - The Client started with EHV in 2022, a survivor of domestic violence, the client was navigating probation requirements and the dependency court system. The EHV program provided the client the support, case management and resources they needed to maintain sobriety and find stability. Through this stability, the client attended all of their court hearings, participated in services and classes and found employment. Step by step, the client accomplished their goals that lead the client to successfully completing their probation and regaining custody of their children. The EHV program played a significant role in the client's success. Today, the client is sober, reunited with their kids, in a healthy relationship and is pursuing their college degree. The client's story is proof of their strength, growth, and resilience.

Urgent Housing Related Assistance



The County contracted with nonprofit organizations to operate additional temporary shelter locations and provide case management services to all clients. Leasing local motels for this purpose resulted in expanding capacity by 55 rooms. This expansion along with other new programs has reduced the family shelter wait list by 50%, and the wait time from 4 months to 5 weeks. 16% or fewer of households who exit to permanent housing destinations will return to homelessness within six to twelve months. 24% or fewer of households who exit to

permanent housing destinations will return to homelessness within two years.

Below are a few impact stories demonstrating the effectiveness of the program over the years.

Client 1 - The client moved into Solaire Apartments in April 2024 and initially struggled to engage with case management. Through the case manager's consistent and persistent outreach, the client began meeting with the case manager on a bi-weekly basis. The case manager was able to build trust and successfully connected the client to behavioral health services to address symptoms of depression. Although the client was initially reluctant to apply for General Assistance (GA), which led to rental arrears, the case manager continued to meet with the client and explain the benefits of GA and the associated rental payment support program. The client has recently agreed to apply for both. HomeFirst will be assisting with the client's current rental arrears. The client has expressed motivation to increase their income and is now working on developing a resume with the case manager's support.

Client 2 - The client moved into Solaire Apartments in April 2024 with their family. While the client was actively engaged with the case manager, the family faced challenges in paying their rent portion. Despite these difficulties, the client remained committed to maintaining housing stability. With the case manager's support, the client established a payment plan to address rental arrears. The client also continued job searching through the CalWORKs

program. As a result, the client received rental assistance through CalWORKs and secured part-time employment. The client has now maintained steady employment since January 2025, demonstrating strong progress toward self-sufficiency.

The Heartwood Apartments



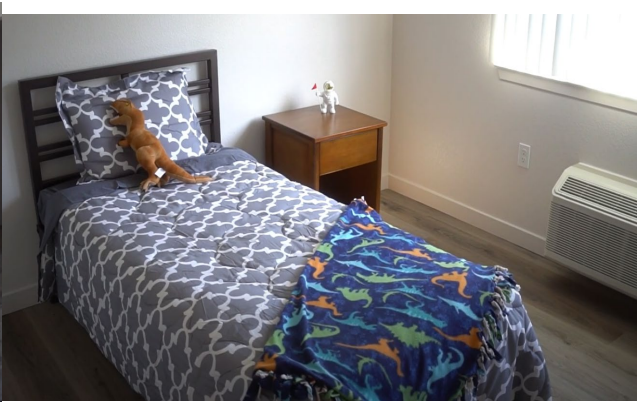
The project of the conversion of a hotel to affordable housing serving a mixed population including Transitional Age Youth (TAY) and households experiencing or at risk of chronic homelessness. Occupancy for the Heartwood Apartments occurred in August 2024. Currently, all 49 units are occupied. Supportive services offered at Heartwood include case management, life skills education, financial empowerment, and opportunities for

social connections and meaningful activities designed to create an inclusive, nurturing environment, paving the path for a hopeful, brighter future for residents.

“To help people secure long-term housing, we have to have affordable units for them to move into. It’s as simple, and challenging as that,” said former County Supervisor Joe Simitian. “Now we have 49 new units for folks to call home. None of that would be possible without our nonprofit and community partners, so a special shout-out and thank you to them.”

“The Heartwood Apartments offer so much more than just a roof and a bed to extremely low-income young adults and members of the Mountain View community who are struggling with housing security,” said HCD Director Gustavo Velasquez. “They offer programs and support to help set people up for employment and sustained success—a model we want to continue to replicate across the state as we move into the new era of Homekey, thanks to voter approval of Proposition 1.”





Please see below media coverage for Heartwood Apartments.

- [08302023 Crestview Recap.mov | Powered by Box](#)
- [The Heartwood Apartments Grand Opening](#)
- [Jamboree Opens The Heartwood Apartments, Offering Stability and Supportive Services](#)
- [The Heartwood Apartments | Affordable Housing Residents in Mountain View](#)
- [Mountain View project converts old hotel into affordable housing – NBC Bay Area](#)

Gardner Family Wellness Center



The County funded the construction of improvements for a behavioral health and primary care clinic of at least 10,000 square feet in East San Jose to serve uninsured Santa Clara residents covered by Medi-Cal. Building improvements commenced in September 2024 and are estimated to be completed August 2025. The new facility is expected to be open in Fall 2025.

Upon completion, the clinic is expected to provide:

- For Primary Care Services:
 - Medical services from two providers with the use of four exam rooms to support approximately 7,300 visits a year.
 - Chiropractic services from one provider with the use of two exam rooms to support 4,320 visits a year.
 - Dental services from two providers will have four workspace/rooms to support 4,752 visits a year.
- Specialty Behavioral Health Services:
 - Office visits, psychiatry sessions, family meetings, individual rehabilitation and therapy, case management linkages, crisis interventions, home visits totaling 14,200 visits per year to support approximately 550 children and families.
 - Approximately 201 clients will be assisted by the staff who will help the clients connect to services, with about 5,000 visits a year.

School-Based Behavioral Health Wellness Center

To date, 26 schools (including charter schools) across 11 Santa Clara County public school districts have received grant funds. Priority was awarded to schools that serve communities in greatest need and reflect the geographic and cultural diversity of the county, including those located in Qualified Census Tracts, moderate or high-risk zip codes, and are a Title 1 school for 2023-2024 school year. The wellness centers will be staffed by an administrator who manages the space and a clinician who can do screenings and assessments, provide counseling, and make referrals to other services. The centers will have a range of activities and features, depending on the site, from books and games to yoga and music. Making the centers a fun place to hang out helps destigmatize behavioral health issues and normalize self-care.

These funds will have an immediate impact on the mental health and well-being of thousands of students as they return to school for the 2025-2026 school year. In October 2024, the County developed and presented to the grantees a guide that incorporated various approaches such as Evidence Based Practices (EBP), Promising Practices, and Community Defined Evidence Practices to engage and provide clinical treatment to students. In addition, the guide includes recommendations on standardized clinical outcome tools to screen and assess mental health needs, and billable scopes of services that should be provided in a school-based wellness center. Data collection will begin in fiscal year 2025-2026 for grantees that have implemented their school-based wellness center and are fully operational. Key Performance Indicators will be used to measure metrics to track progress towards the outcomes. In Winter 2024 and early 2025, the County attended grand openings of the school-based wellness centers across the county.

Alum Rock Union School District: Ocala STEAM Academy Wellness Center Grand Opening December 19, 2024



Fremont High School Wellness Center Grand Opening April 23, 2025



Quote from School District:

“By grounding our efforts in data, student feedback, and inclusive practices, we are building a comprehensive, student-centered system that promotes behavioral health and supports every student’s path to success.”

“One area of success has been building stronger adult-student connections, particularly at the middle school level. Through proactive surveying and intentional outreach, we are working to ensure that every student feels supported by at least one trusted adult on campus. This work is grounded in the understanding that strong relationships are a protective factor for student well-being and long-term success.”

Please also refer to the media coverage.

[Santa Clara County to pump millions into school wellness centers - San José Spotlight \(sanjosespotlight.com\)](#)

[County of Santa Clara Announces That 40 Schools Will Receive Grants for Behavioral Health Wellness Centers | County News Center | Office of Communications and Public Affairs | County of Santa Clara \(santaclaracounty.gov\)](#)

[Alum Rock Union School District: Ocala STEAM Academy](#)

[Fremont Union High School District Wellness Center Grand Opening](#)

Guaranteed Basic Income Pilot for Justice-Involved Clients



From January through June 2025, the County processed 394 applications for 300 spots of the program. 59 of which are funded through ARPA. Throughout the enrollment process, the GBI Team was able to provide clothing, food, hygiene kits, and resources to help address clients' basic needs as they return home from jail or prison. This filled an unmet need for additional support for individuals who are returning home from custody. At release, many are vulnerable with no or limited access to food, shelter, and clothing. By providing such support and a safe environment to come to, the goal is to reduce recidivism which will lead to an overall safer community. During the period from January 31 through June 30, 2025, only 15 clients were reincarcerated; three were released quickly and remained enrolled; one was released quickly but did not reengage; and 11 are still in custody and were dropped from the program. This investment is needed to complete a research study focusing on what support is needed to stabilize individuals exiting custody. Post-pilot focus groups and surveys will be concluded by spring 2027. More information on program performance will be provided in future Performance Report.

PROJECT INVENTORY

To date, the County has undertaken the below projects funded by SLFRF:

ARPA-001	Electronic Health Record System for Community Clinics
Funding Amount	\$10,654,054
Project Expenditure Category	3 - Services to Disproportionately Impacted Communities 3.4 - Public Sector Capacity: Effective Service Delivery
Project Overview	This funding allows four Federally Qualified Health Centers (FQHCs) to transition from their current electronic health record systems to the OCHIN EPIC Electronic Health Record System (EPIC). Funding includes two years of staffing, installation, and training costs. The new EPIC system for these community clinics will ensure a coordinated system of care across the County's safety net population and allow them to better understand patient care needs in real-time. This will translate into improved quality healthcare and emergency services for some of the County's most disproportionately impacted patients.
Use of Evidence	The goal of the implementation of the EPIC system for community clinics is to more effectively provide a coordinated system of care to the safety net population by integrating with the County's Healthcare system - EPIC. This will offer numerous benefits to patient experience, access, care quality, clinical decision-making, reporting, and continuity of care.
Performance Report	Having an integrated electronic healthcare system enables the community clinics to improve care quality by helping specialty, inpatient, and primary care providers better understand patient care needs in real-time. It supports care management by providing a more complete picture of patient risk factors to more effectively guide preventative and early intervention strategies to improve health. It also enhances patient experience by providing better transitions of care, timely access, and easier communication across providers. Overall efficiency across the safety net healthcare delivery system has been improved and, most importantly, improving patient care for communities hardest hit by the pandemic. As of June 30, 2025, all community clinics have successfully implemented and transitioned to EPIC system, impacting over 150,000 community clinic patients and over 2,000 health care providers and health center staff. Furthermore, community clinics have improved their clinical quality performance rates by 17%.

ARPA-002	COVID-19 Pandemic Pay
Funding Amount	\$62,900,383
Project Expenditure Category	4 - Premium Pay 4.1 - Public Sector Employees
Project Overview	The County has relied on its employees and In-Home Support Services (IHSS) Independent Providers not only for the County's COVID-19 response but also for the continuity of County operations that are critical to protect the health and safety of county residents during the COVID-19 pandemic. This funding provides recognition and one-time pandemic pay payments to eligible workers.
Use of Evidence	The pandemic pay is to recognize the enormous contributions from essential workers in supporting urgent COVID-19 response efforts, including managing the impacts of the COVID-19 pandemic from providing critical health care services, implementing health orders intended to limit the spread of the virus, vaccine distribution, contact tracing, testing, protecting the health and well-being of county residents in myriad ways.
Performance Report	The one-time payment was provided for the county employees on paid status as of the pay period starting June 28, 2021, and for those still on paid status as of the start of the November 15, 2021, pay period and listed as an active employee in good standing at the date of payment. The premium pay was provided in December 2021 to 19,842 County employees, 26,596 IHSS Independent providers, and 275 County Fire Department employees as an additional support to essential workers who bear the greatest health risks because of their service in critical sectors.

ARPA-003	Ongoing COVID Response
Funding Amount	\$35,981,801
Project Expenditure Category	1 - Public Health 1.7 - Other COVID-19 Public Health Expenses (including Communications, Enforcement, Isolation/Quarantine)
Project Overview	A total of \$35.9 million of ARPA funds was earmarked for a range of COVID-19 public health response activities, including contracted medical staffing, IT support services at vaccination and testing.
Use of Evidence	Ongoing COVID-19 response costs included: • COVID-19 caused hospital staffing shortages and has made it necessary to increase the use of services provided by nursing registry as well as other medical professionals. Demand for skilled medical professionals was skyrocketing nationwide caused by burnout and lucrative wages for traveling professionals including nurses. Additionally, the pandemic rates for the registry have more than doubled compared to prior pandemic demand. Maintaining an appropriate and vital medical staffing within the County is essential to be able to provide a safe working environment for health care providers and COVID patient care. Hospitals and health care systems within the County found an increase in patient volumes, leading to significant challenges in delivering such a vital service throughout the County. • Laboratory Services across the County provides community, employee and patient COVID testing which required additional medical staffing to meet the demand for testing, vaccine support, and to fill various staffing needs. Throughout the pandemic the demand for vaccination and testing has remained high and the need to staff the testing sites combined with staffing shortage with the medical surge required contract staffing to help provide those services. • The County contracted with third party vendors to provide professional IT services and support at COVID-19 vaccination sites with necessary health record tools and technology for patient vaccine administration and care to ensure timely application build and implementation. Specific tasks included assessment of need, workflow design, build, testing, coordination with training team, migration of new build in coordination with project leads of COVID-19 vaccine workflows and associated build/workflows for downstream department changes.
Performance Report	Reimbursement of \$35.9 million was completed by June 30, 2024. With all the outreach efforts and medical staffing resources, the County was successful in having 95% of its residents vaccinated with at least one dose of COVID vaccine.

ARPA-004	Cardiac Monitors/Defibrillators
Funding Amount	\$1,440,205
Project Expenditure Category	1 - Public Health 1.14 - Other Public Health Services
Project Overview	This funding allows for the replacement and upgrade of 34 cardiac monitors/defibrillators for the County Fire Department. The new defibrillators will ensure the highest level of cardio-respiratory care is delivered in the field to the patients suffering from the devastating effects of COVID-19.
Use of Evidence	The goal is to replace existing monitors/ defibrillators which have all passed the manufacturer life expectancy with models with advanced features.
Performance Report	34 Zoll X-series cardiac monitors/defibrillators were purchased with advanced technology providing the highest level of cardio-respiratory care. Features include: • The ability to measure end tidal CO2 as well as SpO2 oxygen saturation levels of all patients including those who are suffering from respiratory compromise brought on by COVID-19. • Real BVM is a system found only in the Zoll Monitor that provides firefighter paramedics in the field with real time ventilation feedback for both volume and rate, of intubated and non-intubated patients. • Inter-Agency Operability and Compatibility - The ability to interface via WiFi with the County of Santa Clara Emergency Management System (EMS) electronic patient care report to securely upload patient care data, as well as the ability to transmit 12 lead EKGs to STEMI receiving facilities to streamline cardiac emergencies assuring seamless continuity of patient care. All of this secure data utilizes high speed broadband networks in place today in the Fire and EMS system. • Real-Time CPR Quality Analysis which provides real-time feedback to the firefighters that ensures adequate compression and ventilations during a cardiac resuscitation. • See through CPR allows paramedics to determine the patient's cardiac rhythm without interrupting chest compressions. This feature is in line with the current American Heart Association recommendation that delivering consistent, high-quality CPR with minimal interruptions improves the chance of survival in cardiac arrest victims.

ARPA-005	Revenue Replacement
Funding Amount	\$10,000,000
Project Expenditure Category	6 - Revenue Replacement 6.1 - Provision of Government Services
Project Overview	This funding allows the County to pay the salaries and benefits of county employees who worked on COVID-19 related activities that are not eligible for reimbursement through FEMA.
Use of Evidence	A large portion of the County's pandemic related expenditures is comprised of salary and benefit costs of over 4,800 DSWs and the 38 classified positions for ongoing COVID response.
Performance Report	The County used the \$10 million to reimburse the labor costs not eligible for FEMA reimbursement by June 30, 2024.

ARPA-006	Community-Based Organization (CBO) Grant Program
Funding Amount	\$9,824,416
Project Expenditure Category	2 - Negative Economic Impacts 2.34 - Assistance to Impacted Nonprofit Organizations (Impacted or Disproportionately Impacted)
Project Overview	The COVID-19 Nonprofit Resilience and Sustainability Grant Program was implemented to support the County's nonprofit partners that were negatively impacted by the pandemic. The two-year program, administered by the Valley Health Foundation (VHF), is funded with \$9.8 million of ARPA money and designed to assist the immediate economic resiliency and sustainability of nonprofits that were negatively impacted by the pandemic, focusing on organizations operating in and/or serving communities located in Qualified Census Tracts (QCTs).
Use of Evidence	VHF utilized the Preliminary Evidence category, meaning that the program design and implementation were supported by non-experimental studies. VHF utilized results from surveys, published studies and community engagement to help assess the ways that local nonprofits were impacted by the COVID-19 pandemic and to determine what the remaining needs were in order to provide impactful assistance.
Performance Report	The CBO Grant Program received 240 applications totaling more than \$27.0 million in requests and awarded grants to 77 CBOs with all funds distributed by August 31, 2024. Key Performance Indicators include: • 82% of grantees are smaller nonprofits with operating budgets under \$2.0 million. • 100% of the grantees are nonprofits located in QCTs. • 100% of the grantees serve BIPOC and/or Asian American Pacific Islander (AAPI) communities. • 80% of grantees are organizations that have BIPOC and/or AAPI leadership.

ARPA-007	Homelessness Prevention System Pilot
Funding Amount	\$8,368,748
Project Expenditure Category	2 - Negative Economic Impacts 2.2 - Household Assistance: Rent, Mortgage, and Utility Aid
Project Overview	To mitigate the impact of negative economic impact, OSH has continued to provide homelessness prevention services and support to eligible extremely low-income households primarily through the Homelessness Prevention System (HPS) Pilot, which has been designed to focus on providing intervention for households experiencing a housing crisis before they enter homelessness.
Use of Evidence	The pilot includes partnerships with the cities of Mountain View, Morgan Hill, San Jose, and nonprofits such as Destination Home, Project Sentinel, Law Foundation of Silicon Valley. It is administered by Sacred Heart Community Service. The pilot aims to provide additional funding to support 456 households who are at risk of homelessness. This enables them to receive homelessness prevention services which include emergency financial assistance (rental arrears, rental assistance, utility assistance, etc.) and case management. HPS has been evaluated through a randomized controlled trial conducted by the Lab for Economic Opportunities at the University of Notre Dame. This study (https://news.nd.edu/news/targeted-prevention-helps-stop-homelessness-before-it-starts/), the results of which were published in The Review of Economics and Statistics in May 2023, evaluated the effect of providing emergency financial assistance to households at risk of homelessness through HPS. The study found that people who were offered emergency financial assistance were 81 percent less likely to become homeless within six months of enrollment and 73 percent less likely within 12 months. HPS continues to operate following the service model that was evaluated in the study and found to be effective at preventing homelessness.
Performance Report	HPS streamlines and standardizes service delivery, assessments, prioritization, and data collection in Homeless Management Information System (HMIS). The data collected in HMIS tracks the households served, types of services provided, duration of services and outcome measures. HPS operates a 'no wrong door policy' which removes barriers to county residents seeking homelessness prevention services at any participating agencies. This approach has demonstrated strong evidence of effectiveness in preventing homelessness. Allocated funds have been expended in fiscal year 2024-2025. As of December 2024, 95% of 1,165 households assisted through HPS remained stably housed while receiving services and only 6% of households became homeless within one year after exiting HPS services to permanent housing.

ARPA-008	Heartwood Apartments - Supportive Housing for Family Reunification
Funding Amount	\$2,750,000
Project Expenditure Category	2 - Negative Economic Impacts 2.15 - Long-Term Housing Security: Affordable Housing
Project Overview	The County contributed \$2.75 million of ARPA funds as a loan to a nonprofit developer towards a project of converting a hotel in the City of Mountain View into affordable and supportive housing.
Use of Evidence	The use of this funding aligns with the County's goal of the creation and expansion of supportive and affordable housing opportunities throughout Santa Clara County. 49 new affordable apartments were built, dedicated to serving a mixed population including Transitional Age Youth (TAY) and households experiencing or at risk of chronic homelessness.
Performance Report	The nonprofit developer, Jamboree Housing Corporation, commenced construction in April 2023. Project completion and occupancy occurred in August 2024. Currently, all 49 units are occupied. The Heartwood Apartments, spanning 1.36 acres, has been meticulously redesigned to offer 34 studios, 4 one-bedroom apartments, 10 two-bedroom apartments, and one three-bedroom apartment dedicated to the property manager. Each apartment is fully furnished, featuring kitchenettes or full kitchens and private bathrooms, tailored to meet the diverse needs of its residents. The ground floor emerges as a community hub, housing management and services offices, a community room with kitchen, and a spacious laundry room, fostering an environment of support and togetherness. The residential community is developed for individuals and families who earn up to 30% of the Area Median Income. Thirteen of the homes are dedicated to TAY experiencing homelessness. They are typically aged 18 to 25 facing unique challenges as they enter adulthood with little to no job experience or higher education, often lacking the guidance to navigate these pathways. By providing stable and safe housing, Heartwood's goal is to empower TAY, offering them an environment where they can safely move forward in the next phase of their personal and professional lives. Supportive services offered at Heartwood Apartments include case management, life skills education, financial empowerment, and opportunities for social connections and meaningful activities designed to create an inclusive, nurturing environment, paving the path for a hopeful, brighter future for residents. 08302023 Crestview Recap.mov Powered by Box The Heartwood Apartments Grand Opening Jamboree Opens The Heartwood Apartments, Offering Stability and Supportive Services The Heartwood Apartments Affordable Housing Residents in Mountain View Mountain View project converts old hotel into affordable housing – NBC Bay Area

ARPA-009	Supportive Housing Program – Emergency Housing Voucher (EHV)
Funding Amount	\$6,000,000
Project Expenditure Category	2 - Negative Economic Impacts 2.16 - Long-term Housing Security: Services for Unhoused Persons
Project Overview	EHV provides subsidy assistance to unhoused individuals and families in the County. Households are referred from the County's coordinated assessment system and are assigned a case manager through the supportive housing system. Case management services provided to households include housing search, financial assistance (connection to deposit, first month rent, and furniture), and continued support focusing on housing retention.
Use of Evidence	The EHV program is part of the County's supportive housing system and is dedicated to serving unhoused individuals and families by providing them with the opportunity to secure permanent housing using long-term rental assistance. The supportive housing system's housing first approach, an evidence-based practice, recognizes that housing is necessary to give individuals the opportunity to stabilize, improve health, reduce harmful behaviors, and improve qualities of lives.
Performance Report	309 households have been served since the launch of the program. The program continues to support households providing resources for services such as financial literacy, health and wellness, and benefit connections. Those housed through the supportive housing system have a 98% housing retention rate.

ARPA-010	Urgent Housing Related Assistance
Funding Amount	\$8,000,000
Project Expenditure Category	2 - Negative Economic Impacts 2.17 - Housing Support: Housing Vouchers and Relocation Assistance for Disproportionately Impacted Communities
Project Overview	In response to the needs that emerged from the pandemic, additional investment in housing and homelessness has been prioritized. An allocation of \$8.0 million was approved by the BOS on May 7, 2024 for urgent housing related assistance to expand temporary housing options for families with children, rental assistance, and supportive services for families enrolled in rapid rehousing programs.
Use of Evidence	Due to the negative economic impact of the pandemic and the California State Budget reductions to the CalWORKs Housing Support Program, there has been an increase in the demand for family temporary shelter and a growing need for homelessness prevention services.
Performance Report	The County contracted with nonprofit organizations to operate additional temporary shelter locations and provide case management services to all clients. Leasing local motels for this purpose resulted in expanding capacity by 55 rooms. This expansion along with other new programs has reduced the family shelter wait list by 50%, and the wait time from 4 months to 5 weeks. 16% or fewer of households who exit to permanent housing destinations will return to homelessness within six to twelve months. 24% or fewer of households who exit to permanent housing destinations will return to homelessness within two years. As of June 30, 2025, the project has expended \$1 million. More information on program performance will be provided in future Performance Report.

ARPA-011	Childcare Infrastructure Grant Program
Funding Amount	\$15,000,000
Project Expenditure Category	2 - Negative Economic Impacts 2.11 - Healthy Childhood Environments: Childcare
Project Overview	The County uses ARPA funds to support a childcare and early education infrastructure grant program which focuses on supporting center-based and family childcare home providers who were negatively impacted by the COVID-19 pandemic to reopen or add childcare slots to their programs resulting in an increase in childcare capacity. These funds help cover facility and space expansion or improvement, maintenance, or operational costs.
Use of Evidence	Evidence from research and policy institutes have emphasized the need to treat childcare as an essential economic infrastructure that is linked to family stability, school readiness, and economic recovery and growth. The grant program provides financial support for center-based and family childcare home providers who have been negatively impacted by the COVID-19 pandemic to reopen or add more childcare slots to their program. To be eligible to receive funds, providers must meet certain criteria, including but not limited to meeting the State childcare licensing requirements and demonstrating compliance with applicable laws and regulations, and accepting higher numbers or proportions of families using vouchers. Priority is given to licensed childcare residing in areas of the county that were hardest hit during the pandemic and who have plans to expand childcare access for infants and toddlers.
Performance Report	With extensive outreach and connections with various nonprofit partners that led to the submission of 499 applications, totaling a request of over \$85 million. As of May 2025, 41 grants have been issued, eight are being recommended for funding, and six are in the early review process. The program is creating nearly 600 new childcare slots throughout Santa Clara County. To date, the number of children served is 301. Eligible childcare providers who receive grant funding will submit quarterly performance and expenditure reports to the program administrator. Performance reports will include data collection to assess project progression and expenditure reports will track timely expenditures spent for the program. More information on program performance will be provided in future Performance Report. • County Program Supports Childcare Providers, Helps Low-Income Families County News Center Office of Communications and Public Affairs County of Santa Clara • \$15 million grant will help hundreds of kids access child care in Santa Clara County - ABC7 San Francisco • YMCA of Silicon Valley Receives \$1.75M Grant to Renovate Gavilan's Early Learning Center and Lab School • Grant helps expand childcare services in Gilroy Gilroy Dispatch

ARPA-012	Direct Food Assistance Program
Funding Amount	\$5,599,951
Project Expenditure Category	2 - Negative Economic Impacts 2.1 - Household Assistance: Food Programs
Project Overview	The Direct Food Assistance Program was established to increase support for Second Harvest and other food assistance organizations to acquire, receive, recover, organize, store, and distribute food as well as prepare, serve, and deliver meals. As part of implementing this program, the County intends to create a framework and work plan for prioritizing funding for food assistance and envisions reducing food insecurity among children, youth, seniors, and other vulnerable populations and developing a stronger response system to avoid disruption of food assistance during emergencies.
Use of Evidence	The Direct Food Assistance Program has been designed to help non-profit food providers that experienced financial hardship due to the COVID-19 public health emergency. Non-profit organizations funded through the program require individuals receiving food assistance to complete a program intake form, which includes questions about income, ethnicity, and other individual and household demographics that help as evidence for the intervention. The non-profit organizations are required to submit quarterly expenditure reports, as well as mid-term and final narrative reports to the County.
Performance Report	The allocated funds were awarded to 19 food assistance nonprofit organizations. In total 729,785 households were served through distribution of over 2.4 million meals and grocery boxes, including prepared meals, fresh produce, fresh protein, and shelf-stable pantry items, to the county's most vulnerable residents. These items are distributed at the nonprofit sites, through partner sites, and by home delivery. In addition, two million pounds of the food distributed was recovered from food service providers, supermarkets, wholesalers, and distributors as part of SB 1383, a new state law designed to address food insecurity and combat climate change.

ARPA-013	School-Based Behavioral Health Wellness Center
Funding Amount	\$5,000,000
Project Expenditure Category	2 - Negative Economic Impacts 2.26 - Addressing Educational Disparities: Mental Health Services
Project Overview	This project was established to support school-based behavioral health wellness center infrastructure and services in Santa Clara County public school district campuses, specifically middle and high schools that were negatively impacted by the COVID-19 pandemic. This can further enhance existing services and/or open new wellness centers that provide support to improve the student's educational experience. The centers will be staffed by qualified mental health professionals who will work closely with school staff to provide students with behavioral, social, and emotional support, and prevent the escalation of mental health needs.
Use of Evidence	As a result of the COVID-19 pandemic, mental illness and the demand for mental health services are at an all-time high, especially among children. Valley Health Foundation (VHF) administers the program and utilizes the Preliminary Evidence category which means the program design and implementation were supported by non-experimental studies. VHF applied results from surveys, published studies and community engagement to help assess the need for the services to provide impactful assistance. The evidence studies included: • Santa Clara County School-Based Behavioral Health Resources for Youth: Feasibility Report and Implementation Framework (October 30, 2020) • Santa Clara County Wellness Center Study, which includes: ○ SCC Wellness Center Survey (December 2022) ○ Student, family, and community needs surveys ○ Related behavioral health assessment data ○ Review of best practices of 10 CA counties (October 2022) ○ Stakeholder input ○ Review of available and eligible funding sources • The criteria used to support strong evidence are: ○ Schools with high percentage of students eligible for free and reduced-price meals ○ Schools that lack behavioral health services ○ Schools that have space to accommodate a wellness center ○ Middle schools and high schools ○ Degree of chronic absenteeism, suspensions, mental health, and substance abuse risk data by zip code The goal of the project is to increase accessibility to mental health services for students with behavioral and emotional needs, promote mental health awareness among school districts and communities of diverse populations, and support students in re-engaging with schools following the closures caused by the pandemic. Funds will be used to

	launch between 18 to 24 wellness centers and support the existing six created under the pilot to address behavioral health concerns. Eligible schools include public K-6, K-7, K-8, middle schools, and high schools that were negatively impacted by the COVID-19 pandemic.
Performance Report	VHF implements the program in accordance with the California Code of Regulation (CCR) and complies with the reporting requirements of County, State, Federal agencies, and applicable laws and regulations. By increasing capacity on school campuses through the implementation of wellness centers, students can access the support they need in a timely and efficient manner, leading to improved outcomes for students and the overall school community. Performance of the project will be monitored and evaluated on an ongoing basis. To date, 26 schools (including charter schools) across 11 Santa Clara County public school districts have received grant funds. Priority was awarded to schools that serve communities in greatest need and reflect the geographic and cultural diversity of the county, including those located in Qualified Census Tracts, moderate or high-risk zip codes, and are a Title 1 school for 2023-2024 school year. These funds will have an immediate impact on the mental health and well-being of thousands of students as they return to school for the 2025-2026 school year. In October 2024, the County developed and presented to the grantees a guide that incorporated various approaches such as Evidence Based Practices (EBP), Promising Practices, and Community Defined Evidence Practices to engage and provide clinical treatment to students. In addition, the guide includes recommendations on standardized clinical outcome tools to screen and assess mental health needs, and billable scopes of services that should be provided in a school-based wellness center. In Winter 2024 and early 2025, the County and Valley Health Foundation attended grand openings of the school-based wellness centers across the county. Data collection will begin in fiscal year 2025-2026 for grantees that have implemented their school-based wellness center and are fully operational. Key Performance Indicators will be used to measure metrics to track progress towards the outcomes. This investment in the community will have a positive impact on children and youths as these funds will provide school-based behavioral health services during this critical time when mental health needs have increased. Placing behavioral health services within schools will strengthen the County's vision for equity and broaden access to services for underserved communities. More information on program performance will be provided in future Performance Report. Santa Clara County to pump millions into school wellness centers - San José Spotlight (sanjosespotlight.com) County of Santa Clara Announces That 40 Schools Will Receive Grants for Behavioral Health Wellness Centers County News Center Office of Communications and Public Affairs County of Santa Clara (santaclaracounty.gov) Alum Rock Union School District: Ocala STEAM Academy Fremont Union High School District Wellness Center Grand Opening

ARPA-014	Guaranteed Basic Income Pilot for Justice-Involved Clients
Funding Amount	\$2,000,000
Project Expenditure Category	2 - Negative Economic Impacts 2.37 - Economic Impact Assistance - Other
Project Overview	Guaranteed Basic Income (GBI) pilot program is established for justice-involved clients struggling with negative economic impacts caused by the pandemic. The County will provide a monthly guaranteed basic income of \$1,200, for 24 months, for approximately 59 justice-involved individuals.
Use of Evidence	In March 2023, 2,297 individuals were released from Santa Clara County jails. This segment of the county population faces barriers to successful integration with society at every turn. A criminal record means employment and housing options are slim, and even searching for these opportunities may be unattainable when people lack basic stability and resources. The goal of this program aims to not only reduce recidivism and protect County residents from becoming future crime victims but also help keeping program participants from returning to the criminal-legal system. To gauge the efficacy of the GBI program, funding will also be used to incentivize 86 program allies to engage in ongoing evaluation opportunities for three years. The program will have a two-year disbursement phase and then quarterly assessments using surveys and/or other instruments to evaluate participant needs.
Performance Report	The County contracted with Community Financial Resources to administer the financial services for the program and conduct program analytics and evaluation to inform the County's future actions. From January through June 2025, the County processed 394 applications for 300 spots of the program. 59 of which are funded through ARPA. Throughout the enrollment process, the GBI Team was able to provide clothing, food, hygiene kits, and resources to help address clients' basic needs as they return home from jail or prison. This filled an unmet need for additional support for individuals who are returning home from custody. At release, many are vulnerable with no or limited access to food, shelter, and clothing. By providing such support and a safe environment to come to, the goal is to reduce recidivism which will lead to an overall safer community. During the period from January 31 through June 30, 2025, only 15 clients were reincarcerated; three were released quickly and remained enrolled; one was released quickly but did not reengage; and 11 are still in custody and were dropped from the program. This investment is needed to complete a research study focusing on what support is needed to stabilize individuals exiting custody. Post-pilot focus groups and surveys will be concluded by spring 2027. More information on program performance will be provided in future Performance Report.

ARPA-015	Isolation and Quarantine Support Program (IQSP)
Funding Amount	\$26,988
Project Expenditure Category	1 - Public Health 1.7 - Other COVID-19 Public Health Expenses (including Communications, Enforcement, Isolation/Quarantine)
Project Overview	In June 2020, the County created its Isolation and Quarantine Support Program (IQSP) to help reduce the spread of COVID-19 among housed and unhoused individuals by providing a safe place to isolate and quarantine, direct support to housed individuals to isolate or quarantine in place, and to incentivize people to stay home when they were a “case” or “contact” by replacing lost income for low-income families.
Use of Evidence	The IQSP was designed to focus on providing resources for households to isolate and quarantine to prevent the spread of infectious diseases such as COVID-19. Beginning March 2023, the program focused on providing resources and hotel placement to unhoused, unsheltered individuals, as there was not an existing and permanent infrastructure in place within the supportive housing system to provide this service.
Performance Report	The program operated at one or more hotel/motel sites, depending on the needs. Meals were provided and delivered to program participants by a contracted agency. The IQSP hotline staff coordinate transportation to and from the hotel for all program participants when needed.

ARPA-016	Gardner Family Wellness Center
Funding Amount	\$4,618,980
Project Expenditure Category	2 - Negative Economic Impacts 2.21 - Medical Facilities for Disproportionately Impacted Communities
Project Overview	The creation and implementation of the Gardner Family Wellness Center provides medical and mental health services for disproportionately impacted groups. In addition, the program is to support the partnership between School of Arts and Culture (SOAC) and Gardner Health Services – Gardner Family Wellness Center in the development of new services in the areas of primary care and specialty behavioral health services for youth and families in East San Jose.
Use of Evidence	The ARPA funds will be used for the construction of improvements for a behavioral health and primary care clinic of at least 10,000 square feet located at 1747-1785 Alum Rock Avenue in San Jose. The funds will also be used to purchase fixtures, furnishings, and equipment necessary to operate the facility. In addition, Gardner Health Services agrees to operate the facility for at least seven years commencing with the date of opening of the facility to serve uninsured Santa Clara residents covered by Medi-Cal. The construction is currently in progress and estimated to be completed by August 2025.
Performance Report	Upon completion, the clinic is expected to provide: • For Primary Care Services: ○ Medical services from two providers with the use of four exam rooms to support approximately 7,300 visits a year. ○ Chiropractic services from one provider with the use of two exam rooms to support 4,320 visits a year. ○ Dental services from two providers will have four workspace/rooms to support 4,752 visits a year. • Specialty Behavioral Health Services: ○ Office visits, psychiatry sessions, family meetings, individual rehabilitation and therapy, case management linkages, crisis interventions, home visits totaling 14,200 visits per year to support approximately 550 children and families. ○ Approximately 201 clients will be assisted by the staff who will help the clients connect to services, with about 5,000 visits a year. Building improvements commenced in September 2024 and are estimated to be completed by August 2025. The new facility is expected to be opened in Fall 2025. More information on program performance will be provided in future Performance Report.

ARPA-017	Wellness Screenings and Services for Children
Funding Amount	\$3,485,000
Project Expenditure Category	1 – Public Health 1.14 – Other Public Health Services
Project Overview	This funding allows the County to expand the wellness screening and services for children for various child health related services, including preventive physical and wellness screening (dental, vision, and hearing), individualized care coordination, healthy lifestyle workshops, parenting classes, and health insurance enrollment services in the county through the Healthier Kids Foundation (HKF). In addition, the program focuses on providing universal, school-based wellness checks and personalized care coordination. Through individualized care coordination, families receive assistance in accessing behavioral health services and essential resources for meeting basic needs.
Use of Evidence	HKF utilized results from surveys and community engagement to help assess the ways the community were impacted by the COVID-19 pandemic and to determine what the remaining needs were to provide evidence-based intervention and impactful assistance. Evidence shows increased dental and vision referrals observed post-pandemic. HKF identifies uninsured children and assists with their enrollment into subsidized health insurance so that they may access medical, dental, vision, hearing, and mental health care to promote health and wellness. Broad geographic access will be covered, prioritizing screenings in schools where 75% of children are eligible for the Free and Reduced-Price Lunch Program.
Performance Report	The program delivered a range of services, including vision, dental, and hearing screenings; case management for follow-up care; mental health wellness checks; health insurance enrollment assistance; parent and caregiver education on health habits and nutrition. Over the course of FY 2024-2025, a total of: • Dental Screenings ○ 21,472 children screened ○ 28.5% (approx. 6,119) referred for follow-up care ○ 60% of referred cases closed • Vision Screenings ○ 16,569 children screened ○ 15% (approx. 1,272) referred for follow-up care ○ 65% of referred cases closed • Hearing Screenings ○ 17,169 children screened ○ 6% (approx. 490) referred for further testing ○ 81% of referred cases closed • Mental Health Wellness Checks ○ 115 children received checks ○ 18 students – borderline ○ 41 students – clinically significant • Health Coverage Support ○ 117 children identified as needing health insurance ○ 66 children successfully enrolled

	○ 99 clients received information on Primary Care Access Program • Health Education ○ 129 online health education workshops held ○ Reached 1,836 parents and positively impacted 1,788 children ○ Six weeks post-class surveys showed healthier family meal choices This program has been especially impactful in schools with 50–75% or more students enrolled in the Free and Reduced-Price Lunch Program, helping to address health disparities in underserved communities. Providing screenings directly in schools helps close gaps in routine healthcare by identifying children with unmet dental, vision, hearing, and mental health needs. With the rising cost of healthcare and transportation challenges faced by many families, school-based screenings ensure that issues are caught early often before a child sees a doctor or dentist. Case management plays a critical role by helping families navigate follow-up care, overcoming barriers such as scheduling, language access, and insurance coverage. As a result, more children can receive timely services that support their health, learning, and long-term success.
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ARPA-018	Valley Health Center (VHC) – Facility Improvement Project
Funding Amount	\$9,897,821
Project Expenditure Category	1 – Public Health 1.14 – Other Public Health Services
Project Overview	The \$9.8 million ARPA funds were used to reimburse costs of critical capital infrastructure that enabled the rehabilitation of the VHC-Morgan Hill to support long-term community growth and expand services to the South County.
Use of Evidence	The County has on-going investments for the health and hospital system. A key road map to this is the Santa Clara Valley Healthcare (SCVH) Master Plan. Prioritization was developed with consideration of the following: • Meeting Seismic Safety Compliance regulatory requirements to keep inpatient beds and services licensed. These include both Seismic Performance Standards (SPC) and Non-seismic Performance Standards (NPC). • Achieving efficient operations while supporting long-term growth and sustainability of the SCVH hospital campuses, such as: ○ Meeting community demands, e.g., increasing emergency department treatment bays along with projects to support ancillary services such as diagnostic imaging and laboratory services. ○ Improving patient access, not only to critical care facilities but also to preventive, special care, and behavioral health services. ○ Addressing deferred maintenance needs to ensure compliance with the Joint Commission facility life-safety and infection prevention requirements.
Performance Report	Facility improvements, including installation of new roofing systems, exterior walls and windows, fire alarm system, and utility system, were completed to support long-term community growth and expand services to the South County. During pandemic, it was served as the COVID-19 surge back up for the inpatient services to the community.

ARPA-019	HVAC Improvement Project
Funding Amount	\$15,540,915
Project Expenditure Category	1 - Public Health 1.14 - Other Public Health Services
Project Overview	The \$15.5 million ARPA funds were used to reimburse costs of HVAC improvements and other ventilation projects and generator replacements made in the County healthcare facilities to address COVID-19 and its impact on public health. while improving the experience for the public and employees. Additionally, the funds will be used to reimburse costs of newly added pony chillers to VHC-Gilroy Urgent Care facility and St. Louise Regional Hospital (SLRH) air handling replacements.
Use of Evidence	The HVAC Improvement project has been designed to focus on providing intervention for the increase in inpatient census and Emergency Department growth at SLRH, support the need for increased primary care and urgent care services for patients in the south county communities. For example, one of the County hospitals, St. Louise Regional Hospital (SLRH), was built in 1988 and many of the critical building systems are still the originally installed equipment at the time SLRH was constructed. A consultant confirmed the air handling units at SLRH were nearing the end of their life. Due to both increased patient demand and the normal cycle of equipment aging, improvements were needed to meet the standards of a modern hospital. Another example is the HVAC system at Valley Health Center (VHC) Gilroy which operated at lower efficiency when temperature falls below 85 degrees, and the current chiller exceeded the recommended number of starters per day with an excessive recycling alarm and surging when there was not enough building cooling load. A replacement of the existing chiller was necessary.
Performance Report	The funding was used to reimburse more than 60 completed HVAC improvement projects in the County healthcare facilities. Improvements in HVAC and ventilation greatly reduce the concentration and risk of exposure to aerosols, thus reducing the likelihood of infection with COVID-19. This also enhances the experience for the public and employees.

ARPA-020	Non-congregate Housing and Groceries Support
Funding Amount	\$2,332,059
Project Expenditure Category	1 - Public Health 1.7 - Other COVID-19 Public Health Expenses (including Communications, Enforcement, Isolation/Quarantine)
Project Overview	\$2.3 million of ARPA funds was allocated to reimburse costs incurred while supporting low-income households who needed to isolate and/or quarantine due to having contracted with COVID-19 during pandemic.
Use of Evidence	During the height of the pandemic, the need for non-congregate housing and groceries support for low-income households isolated or quarantined at home were at an all-time high and became evident for intervention. The flexibility to utilize chain stores allowed for greater access to products requested and needed by households, particularly during COVID-19 and enabled the County to provide the highly needed support to households isolated or quarantine at home.
Performance Report	From June 17, 2020, through March 31, 2022, the Non-Congregate Housing and Groceries Support project provided groceries support to 8,649 households that were isolated or quarantined at home at an average cost of \$207.5 per household.

ARPA-021	Wastewater Testing Project
Funding Amount	\$172,214
Project Expenditure Category	1 - Public Health 1.14 – Other Public Health Services
Project Overview	The wastewater testing for COVID-19 project has been designed to focus on monitoring the levels and trends of COVID-19 infections in the community that are based on clinical data and pinpoint areas in the County where the virus is more prevalent. The County allocated \$172,214 to cover part of the project costs incurred through the fiscal year ended June 30, 2024.
Use of Evidence	The County's Public Health Department (PHD) provides an overview of SARS-CoV-2 concentration in wastewater that comprehensively detects the levels of COVID-19 infection within a community and tracks the prominence of new variants. PHD utilized results from surveys and published studies to provide the public and health professionals with early signals as to whether COVID-19 infections are increasing or decreasing within the community.
Performance Report	The wastewater testing samples are collected from four wastewater treatment facilities collectively serving 1.9 million Santa Clara County residents. The testing covered San Jose, Palo Alto, Sunnyvale, and Gilroy. Wastewater samples were tested at extremely high speeds to achieve the pelleting of samples for further processing. For COVID wastewater monitoring data dashboard, please refer to Santa Clara County Respiratory Virus Data Dashboard

ARPA-022	Homelessness Prevention for Individuals with Substance Use Disorder
Funding Amount	\$2,000,000
Project Expenditure Category	2 - Negative Economic Impacts 2.2 - Household Assistance: Rent, Mortgage, and Utility Aid
Project Overview	This program is a Wellness and Housing Stability Program for families or individuals who are at imminent risk of homelessness and are currently enrolled in specialty mental health or substance use treatment and low income (80% of Area Median Income) with priority given to extremely low income (30% Area Median Income). The program provides direct financial assistance (rent and security deposits) and case management services.
Use of Evidence	The funding will be used to provide temporary rental assistance, security deposit, and supportive services. Supportive services will include a housing stability plan and connection to available and eligible resources and benefits.
Performance Report	As of June 30, 2025, the program has served 61 households and expended \$53,000. More information on program performance will be provided in future Performance Report.

ARPA-023	Behavioral Health Service Workforce Strategic Plan
Funding Amount	\$254,083
Project Expenditure Category	3 - Services to Disproportionately Impacted Communities 3.4 - Public Sector Capacity: Effective Service Delivery
Project Overview	The County contracted with the University of California, San Francisco, to conduct a needs assessment and develop a strategic plan for addressing the mental health and substance use disorder (SUD) workforce needs of the county's Behavioral Health Services Department and the community-based organizations (CBOs) with which it contracts to provide services.
Use of Evidence	In February 2023, the California County Behavioral Health Directors Association (CBHDA) released an assessment of the workforce needs of California's county behavioral health agencies and the CBOs with which they contract. The needs assessment found that the county behavioral health safety net's ability to meet its workforce needs is constrained by characteristics of California's overall behavioral health workforce, trends in new graduates from behavioral health professions education programs, labor market, and housing market characteristics. Specific constraints include: • Uneven geographic distribution of behavioral health professionals. • Insufficient numbers of non-whites providers to provide racially/ethnically concordant care. • Insufficient numbers of providers who speak languages other than English. • Aging workforce in some occupations. • Decreases in numbers of new graduates in some occupations. • Inability to offer wages that are competitive with those offered by other employers. • Lengthy hiring processes.

	• High cost of living. The objective of the project is to develop a needs assessment and strategic plan for behavioral workforce development for the County's Behavioral Health Services Department and the CBOs with which it contracts.
Performance Report	The needs assessment consisted of the following activities: ○ Analysis of data from the Integrated Postsecondary Education Data System regarding graduates of behavioral health professions education programs in Santa Clara County and adjacent counties. ○ Analysis of additional pertinent quantitative data from the County of Santa Clara Behavioral Health Services Department (e.g., salary survey findings, vacancy rates) and other sources (e.g., Bureau of Labor Statistics, National Survey on Drug Use and Health). ○ Interviews with key stakeholders, including executives and managers of the County of Santa Clara Behavioral Health Services Department, educational partners, policymakers, CBOs with which the county contracts, and other behavioral health providers and stakeholders, regarding their perspectives on behavioral health workforce needs and workforce development in Santa Clara County. ○ Summary of key findings and themes from the interviews. The strategic plan will be aligned with the major elements of CBHDA's statewide strategic plan and tailored to meet the specific workforce development needs of the County's behavioral health safety net. The needs assessment will build upon the needs assessment HealthForce Center previously conducted for CBHDA by more closely examining data regarding Santa Clara County that were collected for that project and supplementing it with additional information about the County's behavioral health workforce needs. Once the recommendations and strategies in the report are implemented, this report will impact county local network workforce of over 1,500 service providers and over 40,000 beneficiaries served annually. We should see a strengthened workforce pipeline of increased community interest in public behavioral health careers, increased number of interns, enhanced workforce to support and supervise interns, improved staff development and retention, and overall, more effective delivery of services to our beneficiaries. The preparation of the report is in progress. More information on program performance will be provided in future Performance Report.

ARPA-024	Behavioral Health Services Department (BHSD) Call Center
Funding Amount	\$1,867,677
Project Expenditure Category	1 - Public Health 1.12 - Mental Health Services
Project Overview	The BHSD Call Center's primary function is to provide screenings, linkages, referrals and connections to services through the phone. Individuals can access the BHSD Call Center through 988 (for crisis calls) and/or 1-800-704-0900 (non-crisis calls). The BHSD Call Center can provide numerous services including, but not limited to, screenings for behavioral health needs, behavioral health assessment appointments, referrals to behavioral health services, authorization for fee-for-services Medi-Cal visits, information on Assisted Outpatient Treatment (AOT), general information about behavioral health services, and patient navigation services. The \$1.8M funding allows the County to contract with a contractor to provide supportive telephone services for the BHSD Call Center. Currently, BHSD Call Center staff may cover on-call shifts outside the business hours of 8am to 5pm in addition to regular shifts. The contractor would allow the BHSD Call Center to be operational 24 hours a day, seven days a week, while providing additional support and resources to BHSD Call Center staff to reduce the number of on-call/additional shifts.
Use of Evidence	It is evident that call access for behavioral health services is crucial to ensure appropriate linkages, referrals, and connections to services that would prevent the need for higher levels of care. The goal of the program is to enhance social equity and safety by providing access to BHSD Call Center services 24 hours a day, seven days a week for community members in need of behavioral health services.
Performance Report	The County entered an agreement with Carelon Behavioral Health of California (Carelon) in December 2023 to provide call center services after hours support to clients requesting mental health and/or substance use treatment services, including coordinate care and services as appropriate. It demonstrated measurable operational success during the fiscal year 2024-25 third and fourth quarters (October 2024 - March 2025). Call Volume Performance • Total calls processed: 3,420 calls • Santa Clara specific calls: 3,400 calls (99.4% of total volume) • Crisis intervention calls: 82 calls (2.4% of total volume) • Daily average: 17-19 calls per day for Santa Clara services Response Time Analysis • Santa Clara calls: 40-87 second average response time • Crisis calls: 29-63 second average response time • Performance trend: Crisis response times improved 54% from Q3 to Q4 Quality Outcomes • Client service staff audit passing rate: 95.73% - 98.95% • Santa Clara audit averages: 91% - 96.75% • Continued improvement demonstrated across both quarters

ARPA-025	Adolescent Psychiatric Facility (APF) Improvement
Funding Amount	\$43,633,402
Project Expenditure Category	1 - Public Health 1.12 - Mental Health Services
Project Overview	The ARPA funding of \$43.6 million will be used to reimburse the construction costs for the Adolescent Psychiatric Facility and Behavioral Health Services Center (APF-BHSC) for adding 21,000 square feet basement space to account for additional personal protective equipment (PPE) storage needs during COVID-19 pandemic and an urgent care assessment room used as an isolation room for patients with a variety of comorbidities, including COVID-19, or any other contagious virus.
Use of Evidence	During pandemic, there was a surge in cases and public health professionals universally believe that wearing personal protective equipment (PPE) leads to a reduction in the spread of airborne viruses and diseases. The County purchased large quantities of PPE and had an immediate need of storage space for PPE. The expansion of the basement in APF would be a long-term solution.
Performance Report	The basement of APF was expanded from approximately 9,000 square feet to 30,000 square feet to account for additional PPE storage needs. This was an increase of 21,000 square feet with storage rooms and storage carts for a stock of supplies such as respiratory and hand protection against airborne and other viruses. With the expansion of basement space, the County was able to distribute sufficient PPE to County employees, healthcare workers, patients, and clients at the APF-BHSC, thus reducing the spread of potential viruses in the facility and the community. Additionally, an urgent care assessment room was added for an additional 103 square feet, intended to provide any patient with comorbidities a separate isolated room to be assessed.

ARPA-026	Childcare Apprenticeship Program
Funding Amount	\$4,999,997
Project Expenditure Category	2 - Negative Economic Impacts 2.10 - Assistance to Unemployed or Underemployed Workers
Project Overview	The Apprenticeship Program is focused on bringing a diverse set of individuals into the field of early learning and childcare. It creates a two-year “earn and learn” pathway combining paid work experience with college coursework for aspiring childcare teachers to enter an early care and education pathway to receive their associate teacher or teacher permit to provide safe, consistent, and quality childcare options for working families.
Use of Evidence	Evidence from research and policy institutes have emphasized the need to treat childcare as an essential economic infrastructure that is linked to family stability, school readiness, and economic recovery and growth. To address the ongoing challenge of hiring qualified professionals to deliver safe, nurturing, and quality childcare, the Childcare Apprenticeship Program engages diverse individuals in a cohort setting to fill the gap by fostering a well-prepared workforce. The continued coordination of workforce initiatives support individuals to become employed in the early care and education field, thereby enhancing and adding to the workforce. Evidence also shows that childcare providers also need support to continue and maintain their services. Infrastructure support including but not limited to substitute pools, tuition management, and professional development. Components of the program include paid on-the-job training with local preschool and family childcare home employers, no-cost college coursework, embedded tutoring, mentorship, and cohort learning in a community-based location. The two-year program culminates in a wage increase, along with Apprentices earning an associate teacher and/or teacher in child development permit.
Performance Report	The first cohort of approximately 40 Associate Teacher apprentices graduated in June 2024, and all were offered permanent employment by FIRST 5's employer partners. The second cohort of approximately 38 apprentices graduated in February 2025, and the third cohort of approximately 29 Teacher apprentices started in January 2025. Employer partners are anticipated to continue to offer permanent positions for the apprentices, demonstrating their commitment to supporting the professional growth and development of these individuals. More information on program performance will be provided in future Performance Report. County Partners with FIRST 5 to Spearhead Innovative Early Learning Apprenticeship to Improve Access to Childcare County News Center Office of Communications and Public Affairs County of Santa Clara First 5 - Early Learning Apprenticeship Program First 5 - Shared Services Alliance

ARPA-027	Case Investigation and Contact Tracing
Funding Amount	\$3,247,698
Project Expenditure Category	1 - Public Health 1.3 - COVID-19 Contact Tracing
Project Overview	The County allocated the ARPA funds for contracting a nonprofit public health organization for providing consulting and support services for the design and implementation of a multi-level staffing infrastructure to expand and sustain the County's Public Health Department's (SCCPHD) COVID-19 case investigation and contact tracing (CICT) program upon the outbreak of COVID-19 pandemic. The scope of services also included identifying and training a cohort of volunteers for the County's CICT program, assisting SCCPHD in the overall training, human resources, and oversight of County volunteers for the CICT Program, contractor's employees, and the County's Disaster Service Workers.
Use of Evidence	Contact tracing has been an important tool for epidemiologists against infectious disease outbreaks. To mitigate the spread of disease, contact tracing involves interviewing people who are infected to identify which other individuals they might have exposed to the virus, finding those exposed contacts, isolating contacts who are infected, and placing exposed contacts in quarantine until they are not deemed infectious. The County used contact tracing as one strategy among many to break the chain of viral transmission of COVID-19 during the pandemic.
Performance Report	This funding helps the County slow the spread of COVID-19 to protect the health of individuals in the county. The contractor enhanced clinical support for the SCCPHD's CICT program and assisted with communicable disease outbreak investigations and disease control efforts. This included gathering information, interviewing infected and close contact individuals, informing them about their exposure in a confidential manner, and providing guidance on isolation and quarantine procedures. Contractor also provided appropriate training for all individuals assigned to the CICT program prior to their start date and technical support to County's case assignment/record management team. CICT is a proven tool to keep communities safe and pandemic outbreak under control. The CICT program was able to limit the spread of COVID-19 by quickly identifying and isolating potential new cases. It helped reduce the burden on hospitals, slowed community transmission, and supported containment strategies, especially during surges.

ARPA-028	Payroll and Benefits for Public Health and Public Safety
Funding Amount	\$98,804,211
Project Expenditure Category	3 – Services to Disproportionately Impacted Communities 3.1 - Public Sector Workforce: Payroll and Benefits for Public Health, Public Safety, or Human Services Workers
Project Overview	The County allocated \$98.8 million ARPA funds to reimburse the payroll and benefits for public health and public safety employees deployed as essential workers during the pandemic.
Use of Evidence	The public health and public safety workers played critical roles in supporting individuals and communities facing unprecedented challenges during the COVID-19 pandemic. The public health workers were at the forefront of the pandemic response. They tracked the spread of the virus, led testing and vaccination efforts, developed safety guidelines, and educated the public about preventive measures such as handwashing, social distancing, and mask-wearing. They also worked to ensure equitable access to care and resources, especially for high-risk and underserved populations. On the other hand, the public safety workers enforced public health mandates, responded to emergency calls, and supported community outreach efforts. They helped in maintaining orders and ensuring the continuity of essential services. These workers also faced increased risks due to direct exposure and took on expanded roles, such as assisting with vaccine distribution. Together, the pandemic response from public health and public safety workers were critical in managing the pandemic's impact, protecting communities, and saving lives. In addition, since March 2020, over 4,800 County employees were deployed as Disaster Service Workers (DSWs) to support the work of pandemic response. This included leading the regional effort to protect public health and safety, managing and operating non-congregate shelters for isolation and quarantine, contact tracing, testing, and ultimately vaccination, with the addition of many other specialties, such as a powerful public communications effort emphasizing language access inclusion in the five threshold languages. Given the enduring nature of the pandemic, many DSWs served repeatedly throughout the pandemic, and some served continuously to the end of the pandemic since their initial deployment in March 2020. During FY2022-2023, the BOS approved using ARPA funds to create 38 classified positions to provide long-term support to the ongoing COVID-19 pandemic. Most of the positions resided in the Office of Emergency Management.
Performance Report	Reimbursements were completed for the payroll and benefits for a total of 9,065 employees for public health and public safety employees, including over 4,800 DSWs and 38 classified positions deployed for pandemic response work.

ARPA-029	Administrative Expenses
Funding Amount	\$62,048
Project Expenditure Category	7 – Administrative and Other 7.1 - Administrative Expenses
Project Overview	The County allocated \$62,048 ARPA funds to reimburse the payroll and benefits for employees associated with general management of SLFRF grant management, like administrative oversight, accounting, and timely and transparent reporting.
Use of Evidence	During the pandemic, the County incurred personnel costs for employees involved in managing and supporting emergency response programs, such as managing contracts, data tracking, policy coordination, and reporting to ensure accountability and efficient delivery of services. Although these expenses were not direct services costs, they were a vital part of the overall COVID-19 response, helping to maintain an organized, responsive, and scalable systems during a time of crisis.
Performance Report	The allocated funds were fully expended in this reporting period.

End of Report.