



AGENDA

BERKELEY CITY COUNCIL MEETING

Tuesday, December 13, 2022

6:00 PM

SCHOOL DISTRICT BOARD ROOM - 1231 ADDISON STREET, BERKELEY, CA 94702

JESSE ARREGUIN, MAYOR

Councilmembers:

DISTRICT 1 – RASHI KESARWANI

DISTRICT 2 – TERRY TAPLIN

DISTRICT 3 – BEN BARTLETT

DISTRICT 4 – KATE HARRISON

DISTRICT 5 – SOPHIE HAHN

DISTRICT 6 – SUSAN WENGRAF

DISTRICT 7 – RIGEL ROBINSON

DISTRICT 8 – LORI DROSTE

PUBLIC ADVISORY: THIS MEETING WILL BE CONDUCTED IN A HYBRID MODEL WITH BOTH IN-PERSON ATTENDANCE AND VIRTUAL PARTICIPATION

For in-person attendees, face coverings or masks that cover both the nose and the mouth are required. Physically distanced seating will be available. If you are feeling sick, please do not attend the meeting in person.

Live captioned broadcasts of Council Meetings are available on Cable B-TV (Channel 33) and via internet accessible video stream at http://berkeley.granicus.com/MediaPlayer.php?publish_id=1244.

To access the meeting remotely: Join from a PC, Mac, iPad, iPhone, or Android device: Please use this URL <https://us02web.zoom.us/j/81885763338>. If you do not wish for your name to appear on the screen, then use the drop down menu and click on "rename" to rename yourself to be anonymous. To request to speak, use the "raise hand" icon by rolling over the bottom of the screen.

*To join by phone: Dial **1-669-900-9128** or **1-877-853-5257 (Toll Free)** and enter Meeting ID: **818 8576 3338**. If you wish to comment during the public comment portion of the agenda, Press *9 and wait to be recognized by the Chair.*

Please be mindful that the meeting will be recorded and all rules of procedure and decorum apply for in-person attendees and those participating by teleconference or videoconference.

To submit a written communication for the City Council's consideration and inclusion in the public record, email council@cityofberkeley.info.

This meeting will be conducted in accordance with the Brown Act, Government Code Section 54953. Any member of the public may attend this meeting. Questions regarding this matter may be addressed to Mark Numainville, City Clerk, (510) 981-6900. The City Council may take action related to any subject listed on the Agenda. Meetings will adjourn at 11:00 p.m. - any items outstanding at that time will be carried over to a date/time to be specified.

Preliminary Matters

Roll Call:

Land Acknowledgement Statement: *The City of Berkeley recognizes that the community we live in was built on the territory of xučyun (Huchiun (Hooch-yoon)), the ancestral and unceded land of the Chochenyo (Cho-chen-yo)-speaking Ohlone (Oh-low-nee) people, the ancestors and descendants of the sovereign Verona Band of Alameda County. This land was and continues to be of great importance to all of the Ohlone Tribes and descendants of the Verona Band. As we begin our meeting tonight, we acknowledge and honor the original inhabitants of Berkeley, the documented 5,000-year history of a vibrant community at the West Berkeley Shellmound, and the Ohlone people who continue to reside in the East Bay. We recognize that Berkeley's residents have and continue to benefit from the use and occupation of this unceded stolen land since the City of Berkeley's incorporation in 1878. As stewards of the laws regulating the City of Berkeley, it is not only vital that we recognize the history of this land, but also recognize that the Ohlone people are present members of Berkeley and other East Bay communities today. The City of Berkeley will continue to build relationships with the Lisjan Tribe and to create meaningful actions that uphold the intention of this land acknowledgement.*

Ceremonial Matters: *In addition to those items listed on the agenda, the Mayor may add additional ceremonial matters.*

City Manager Comments: *The City Manager may make announcements or provide information to the City Council in the form of an oral report. The Council will not take action on such items but may request the City Manager place a report on a future agenda for discussion.*

Public Comment on Non-Agenda Matters: *Persons will be selected to address matters not on the Council agenda. If five or fewer persons wish to speak, each person selected will be allotted two minutes each. If more than five persons wish to speak, up to ten persons will be selected to address matters not on the Council agenda and each person selected will be allotted one minute each. Persons attending the meeting in-person and wishing to address the Council on matters not on the Council agenda during the initial ten-minute period for such comment, must submit a speaker card to the City Clerk in person at the meeting location and prior to commencement of that meeting. The remainder of the speakers wishing to address the Council on non-agenda items will be heard at the end of the agenda.*

Consent Calendar

The Council will first determine whether to move items on the agenda for "Action" or "Information" to the "Consent Calendar", or move "Consent Calendar" items to "Action." Three members of the City Council must agree to pull an item from the Consent Calendar or Information Calendar for it to move to Action. Items that remain on the "Consent Calendar" are voted on in one motion as a group. "Information" items are not discussed or acted upon at the Council meeting unless they are moved to "Action" or "Consent".

No additional items can be moved onto the Consent Calendar once public comment has commenced. At any time during, or immediately after, public comment on Information and Consent items, any Councilmember may move any Information or Consent item to "Action." Following this, the Council will vote on the items remaining on the Consent Calendar in one motion.

For items moved to the Action Calendar from the Consent Calendar or Information Calendar, persons who spoke on the item during the Consent Calendar public comment period may speak again at the time the matter is taken up during the Action Calendar.

Consent Calendar

Public Comment on Consent Calendar and Information Items Only: *The Council will take public comment on any items that are either on the amended Consent Calendar or the Information Calendar. Speakers will be entitled to two minutes each to speak in opposition to or support of Consent Calendar and Information Items. A speaker may only speak once during the period for public comment on Consent Calendar and Information items.*

Additional information regarding public comment by City of Berkeley employees and interns: Employees and interns of the City of Berkeley, although not required, are encouraged to identify themselves as such, the department in which they work and state whether they are speaking as an individual or in their official capacity when addressing the Council in open session or workshops.

Consent Calendar

- 1. Fair Workweek Ordinance; Adding Berkeley Municipal Code Chapter 13.102**
From: Commission on Labor
Recommendation: Adopt second reading of Ordinance No. 7,846-N.S., the proposed Fair Workweek Ordinance, adding Berkeley Municipal Code Chapter 13.102.
First Reading Vote: Ayes – Kesarwani, Taplin, Bartlett, Harrison, Hahn, Robinson, Arreguin; Noes – None; Abstain – None; Absent – Wengraf, Droste.
Financial Implications: See report
Contact: Margot Ernst, Commission Secretary, (510) 981-5400
- 2. Referral Response: Amendments to the Sign Ordinance to Clarify Procedures and to Establish a Coordinated Sign Design Program, Amending BMC Titles 20 and 23, and Establish a New Fee for Coordinated Sign Design Programs**
From: City Manager
Recommendation: Adopt second reading of Ordinance No. 7,847-N.S. amending the Berkeley Municipal Code (BMC) Title 20 [Signs] to clarify design review procedures for signs, establish an optional Coordinated Sign Design program, and amend Section 20.12.070 [Issuance authorized when] and Section 23.204.070B [Design Review – When required] to provide internal consistency.
First Reading Vote: All Ayes.
Financial Implications: See report
Contact: Jordan Klein, Planning and Development, (510) 981-7400

Consent Calendar

3. Resolution Reviewing and Ratifying the Proclamation of Local Emergency Due to the Spread of a Severe Acute Respiratory Illness Caused by a Novel (New) Coronavirus (COVID-19)

From: City Manager

Recommendation: Adopt a Resolution reviewing the need for continuing the local emergency due to the spread of a severe acute respiratory illness caused by a novel (new) coronavirus (COVID-19) and ratifying the Proclamation of Local Emergency issued by the Director of Emergency Services on March 3, 2020, initially ratified by the City Council on March 10, 2020, and subsequently reviewed and ratified by the Council on April 21, 2020, June 16, 2020, July 28, 2020, September 22, 2020, November 17, 2020, December 15, 2020, February 9, 2021, March 30, 2021, May 25, 2021, July 20, 2021, September 14, 2021, December 14, 2021, February 8, 2022, March 22, 2022, May 10, 2022, June 28, 2022, July 26, 2022, September 20, 2022, and November 3, 2022.

Financial Implications: To be determined

Contact: Farimah Brown, City Attorney, (510) 981-6950

4. Resolution Making Required Findings Pursuant to the Government Code and Directing City Legislative Bodies to Continue to Meet Via Videoconference and Teleconference

From: City Manager

Recommendation: Adopt a Resolution making the required findings pursuant to Government Code Section 54953(e)(3) and determining that as a result of the continued threat to public health and safety posed by the spread of COVID-19, City legislative bodies shall continue to meet via videoconference and teleconference, initially ratified by the City Council on September 28, 2021, and subsequently reviewed and ratified on October 26, 2021, November 16, 2021, December 14, 2021, January 10, 2022, February 8, 2022, March 8, 2022, March 22, 2022, April 12, 2022, May 10, 2022, May 31, 2022, June 28, 2022, July 26, 2022, August 23, 2022, September 20, 2022, October 11, 2022, November 3, 2022, and November 29, 2022.

Financial Implications: To be determined

Contact: Farimah Brown, City Attorney, (510) 981-6950

5. Waiver of the Sanctuary City Contracting Ordinance's Requirements for AG Witt, LLC Contract

From: City Manager

Recommendation: Adopt a Resolution approving a waiver of the Sanctuary City Contracting ordinance's requirements for the City's FEMA Cost-Recovery Contract with AG Witt LLC.

Financial Implications: See report

Contact: Farimah Brown, City Attorney, (510) 981-6950

Consent Calendar

- 6. City of Berkeley 2023 State and Federal Legislative Platform**
From: City Manager
Recommendation: Adopt a Resolution approving the City of Berkeley's State and Federal Legislative Platform
Financial Implications: See report
Contact: Sharon Friedrichsen, Budget Manager, (510) 981-7000
- 7. Adopt a Resolution Authorizing the City Manager to Execute a License Agreement with East Bay Community Energy for Electric Vehicle Fast Charging Stations on Municipal Property**
From: City Manager
Recommendation: Adopt a Resolution authorizing the City Manager or their designee to execute a Master Site License Agreement with East Bay Community Energy (EBCE) for the installation and operation of publicly-available electric vehicle (EV) direct current fast charging stations on municipal property.
Financial Implications: See report
Contact: Paul Buddenhagen, City Manager's Office, (510) 981-7000
- 8. Interactive Kiosk Experience (IKE) Smart City Kiosk Locations, Phase Two**
From: City Manager
Recommendation: Adopt a Resolution, pursuant to Ordinance No. 7,626-N.S. Franchise Agreement with IKE Smart City, LLC approving 22 locations for the second phase of deployment of IKE Smart City Kiosks in Berkeley.
Financial Implications: See report
Contact: Eleanor Hollander, Economic Development, (510) 981-7530
- 9. Contract: Berkeley Fire Medical Director**
From: City Manager
Recommendation: Adopt a Resolution authorizing the City Manager to execute a contract and any amendments, with Herbert Gene Hern, MD to serve as the Berkeley Fire Medical Director for five years from July 1, 2022 until June 30, 2027 in the amount not to exceed \$400,000.
Financial Implications: See Report
Contact: David Sprague, Fire, (510) 981-3473
- 10. Contract: Statewide Prevention and Early Intervention Project FY2023 Participation Agreement – California Mental Health Services Authority**
From: City Manager
Recommendation: Adopt a Resolution authorizing the City Manager or her designee to enter into a Participation Agreement for FY2023 and any amendments with the California Mental Health Services Authority (CalMHSA) to allocate Mental Health Services Act (MHSA) funds in the amount of \$70,907 to participate in the Statewide Prevention and Early Intervention (PEI) Project, for a total amount not to exceed \$70,907 through June 30, 2023.
Financial Implications: Mental Health Services Act Fund - \$70,907
Contact: Lisa Warhuus, Health, Housing, and Community Services, (510) 981-5400

Consent Calendar

11. Contract: Resource Development Associates Specialized Care Unit and Community Crisis Response Services Program Evaluation

From: City Manager

Recommendation: Adopt a Resolution authorizing the City Manager to execute a contract and any amendments with Resource Development Associates (Contractor) to design and implement an evaluation for program effectiveness of the Specialized Care Unit and Community Crisis Response Services (Bridge Services). Services will begin on January 1, 2023 and extend to June 30, 2025 in an amount not to exceed \$150,000.

Financial Implications: See report

Contact: Lisa Warhuus, Health, Housing, and Community Services, (510) 981-5400

12. Contract: Bonita House for Specialized Care Unit Provider

From: City Manager

Recommendation: Adopt a Resolution authorizing the City Manager to execute a contract and any amendments with Bonita House (Contractor) to implement Berkeley's Specialized Care Unit for a two-year pilot. Services will begin on February 1, 2023 and extend to January 30, 2025 in an amount not to exceed \$4,500,000.

Financial Implications: See report

Contact: Lisa Warhuus, Health, Housing, and Community Services, (510) 981-5400

13. Reserving Predevelopment Funds for the Development of Affordable Housing at the North Berkeley BART Station

From: City Manager

Recommendation: Adopt a Resolution: 1. Reserving \$500,000 for the selected development team to support the development of affordable housing at the North Berkeley BART site, contingent on the team's selection and approval by the BART Board at its December 1, 2022 meeting, and the team's timely submission of a completed predevelopment application demonstrating they meet the City's funding criteria. 2. Authorizing the City Manager to execute all original or amended documents or agreements to effectuate this action.

Financial Implications: See report

Contact: Lisa Warhuus, Health, Housing, and Community Services, (510) 981-5400

Consent Calendar

14. Contract: California Constructores for Ohlone Park (East) Playground Replacement and Site Improvements Project

From: City Manager

Recommendation: Adopt a Resolution: 1. Approving the plans and specifications for the Ohlone Park (East) Playground Replacement and Site Improvements Project; and 2. Accepting the bid of the lowest responsive and responsible bidder, California Constructores; and 3. Authorizing the City Manager to execute a contract and any amendments, extensions or other change orders until completion of the project in accordance with the approved plans and specifications, with California Constructores, for the Ohlone Park (East) Playground Replacement and Site Improvements Project at 1933 Hearst Avenue, in an amount not to exceed \$1,120,344 which includes a contract amount of \$933,620 and a 20% contingency in the amount of \$186,724.

Financial Implications: Various Funds - \$1,120,344

Contact: Scott Ferris, Parks, Recreation and Waterfront, (510) 981-6700

15. Contracts: Consultants for On-Call Transportation Planning Services

From: City Manager

Recommendation: Adopt five Resolutions authorizing the City Manager to execute individual contracts and any amendments, each for the period January 1, 2023 through June 30, 2028 for a total amount of all contracts not to exceed \$5,000,000 with the following consultants for On-call Transportation Planning Services:

1. Alta Planning + Design, Inc. for an amount not to exceed \$1,000,000.
2. Community Design + Architecture for an amount not to exceed \$1,000,000.
3. Fehr & Peers for an amount not to exceed \$1,000,000.
4. NN Engineering, Inc. for an amount not to exceed \$1,000,000
5. Toole Design Group, LLC for an amount not to exceed \$1,000,000.

Financial Implications: See report

Contact: Liam Garland, Public Works, (510) 981-6300

16. Contracts: On-Call Architectural Services: ELS Architecture and Urban Design; Noll & Tam Architects; and Siegel & Strain Architects

From: City Manager

Recommendation: Adopt three Resolutions authorizing the City Manager to execute contracts and any amendments with the following firms for on-call architectural design services in support of the City's annual Facilities CIP program, each from January 1, 2023 through December 31, 2025:

1. ELS Architecture and Urban Design (ELS), for an amount not to exceed \$3,333,334.
2. Noll & Tam Architects (N&T), for an amount not to exceed \$3,333,333.
3. Siegel & Strain Architects (SSA), for an amount not to exceed \$3,333,333.

Financial Implications: See report

Contact: Liam Garland, Public Works, (510) 981-6300

Consent Calendar

17. Authorization for an Additional Commission on Disability Meeting in 2022

From: Commission on Disability

Recommendation: Adopt a Resolution authorizing one additional meeting of the Commission on Disability in 2022.

Financial Implications: None.

Contact: Andrew Brozyna, Commission Secretary, (510) 981-6300

18a. Measure FF Budget Recommendation - Expanded Fire Prevention Inspection Program *(Reviewed by the Public Safety Committee)*

From: Disaster and Fire Safety Commission

Recommendation: With the risk of catastrophic wildfire steadily increasing due to climate change, the Disaster and Fire Safety Commission (DFSC) recommends prioritizing wildfire fuel reduction in the FY 23 and FY 24 Measure FF budget by expanding the Fire Department's Fire Prevention Inspection Program and fully enforcing the existing Fire Code to clear vegetation build-up and overgrowth within 100 feet of structures in Berkeley's Very High Fire Severity Zones (VHFSZs) (Fire Zones 2 and 3). In addition, the Fire Code would be strengthened as needed to require removal of hazardous vegetation on the entirety of properties beginning in FY 25. The program would provide for City vegetation management crews to clear vegetation where property owners opt into the program or fail to comply, with no-interest liens placed upon properties to recover direct costs upon transfer. Special emphasis should be placed on eucalyptus groves due to their high flammability and potential to create spot fires. Funding for this expanded program, together with the Fire Department's existing home inspection program, which is focused on creating defensible space around structures, would be supported by devoting 21 percent and 26 percent of Measure FF revenues for FY 23 and FY 24, respectively.

Policy Committee Recommendation: Positive recommendation to adopt the City Manager's recommendation as presented in the companion report.

Financial Implications: See Report

Contact: Keith May, Commission Secretary, (510) 981-3473

18b. Companion Report: Measure FF Budget Recommendation – Expanded Fire Prevention Inspection Program *(Reviewed by the Public Safety Committee)*

From: City Manager

Recommendation: That the Berkeley City Council reaffirms its support for the work being conducted by the Fire Department (Department) and considers the Disaster and Fire Safety Commission's (DFSC) Report during the FY24 budget process if the DFSC so chooses to resubmit an updated version at that time.

Policy Committee Recommendation: Positive recommendation to adopt the City Manager's recommendation as presented in the companion report.

Financial Implications: None

Contact: David Sprague, Fire, (510) 981-3473

Consent Calendar

19. Zero-Emission Vehicle Parking Support Letter

From: Environment and Climate Commission

Recommendation: Refer to the City Manager to send a letter to State Assemblymember Buffy Wicks and State Senator Nancy Skinner asking them to advance a proposal to allow cities to dedicate parking spaces for Zero-Emission Vehicles (ZEVs).

Financial Implications: See report.

Contact: Billi Romain, Commission Secretary, (510) 981-7400

Council Consent Items

20. Berkeley Holiday Fund: Relinquishment of Council Office Budget Funds to General Fund and Grant of Such Funds

From: Mayor Arreguin (Author), Councilmember Hahn (Co-Sponsor)

Recommendation: Adopt a Resolution approving the expenditure of an amount not to exceed \$500 per Councilmember including \$500 from Mayor Arreguin to the Berkeley Holiday Fund's annual campaign with funds relinquished to the City's general fund for this purpose from the discretionary Council Office Budgets of Mayor Arreguin and any other Councilmembers who would like to contribute.

Financial Implications: See report

Contact: Jesse Arreguin, Mayor, (510) 981-7100

Action Calendar

The public may comment on each item listed on the agenda for action as the item is taken up. For items moved to the Action Calendar from the Consent Calendar or Information Calendar, persons who spoke on the item during the Consent Calendar public comment period may speak again at the time the matter is taken up during the Action Calendar.

The Presiding Officer will request that persons wishing to speak line up at the podium, or use the "raise hand" function in Zoom, to determine the number of persons interested in speaking at that time. Up to ten (10) speakers may speak for two minutes. If there are more than ten persons interested in speaking, the Presiding Officer may limit the public comment for all speakers to one minute per speaker. Speakers are permitted to yield their time to one other speaker, however no one speaker shall have more than four minutes. The Presiding Officer may, with the consent of persons representing both sides of an issue, allocate a block of time to each side to present their issue.

Action items may be reordered at the discretion of the Chair with the consent of Council.

Action Calendar – Public Hearings

Staff shall introduce the public hearing item and present their comments. This is followed by five-minute presentations each by the appellant and applicant. The Presiding Officer will request that persons wishing to speak line up at the podium, or use the "raise hand" function in Zoom, to be recognized and to determine the number of persons interested in speaking at that time.

Up to ten (10) speakers may speak for two minutes. If there are more than ten persons interested in speaking, the Presiding Officer may limit the public comment for all speakers to one minute per speaker. Speakers are permitted to yield their time to one other speaker, however no one speaker shall have more than four minutes. The Presiding Officer may with the consent of persons representing both sides of an issue allocate a block of time to each side to present their issue.

Action Calendar – Public Hearings

Each member of the City Council shall verbally disclose all ex parte contacts concerning the subject of the hearing. Councilmembers shall also submit a report of such contacts in writing prior to the commencement of the hearing. Written reports shall be available for public review in the office of the City Clerk.

- 21. Zoning Ordinance Amendments Making Technical Edits and Corrections to Berkeley Municipal Code (BMC) Title 23**
From: City Manager
Recommendation: Conduct a public hearing and, upon conclusion, adopt the first reading of an Ordinance containing technical edits, corrections and other non-substantive amendments to the following sections of the Zoning Ordinance:
- BMC Section 23.108.020 (Zoning Districts)
 - BMC Section 23.202.020 (Allowed Land Uses)
 - BMC Section 23.202.140 (R-SMU District)
 - BMC Section 23.204.150 (R-BMU District)
 - BMC Section 23.204.020 (Allowed Land Uses)
 - BMC Section 23.204.060 (C-U District)
 - BMC Section 23.204.080 (C-E District)
 - BMC Section 23.204.100 (C-SA District)
 - BMC Section 23.206.040 (Use-Specific Regulations)
 - BMC Section 23.406.050 (Variances)
 - BMC Section 23.502.020 (Glossary)
- Financial Implications:** None
Contact: Jordan Klein, Planning and Development, (510) 981-7400

Action Calendar – New Business

- 22. FY 2022 Preliminary Year End Status**
From: City Manager
Contact: Sharon Friedrichsen, Budget Manager, (510) 981-7000
- 23. Amendment: FY 2023 Annual Appropriations Ordinance**
From: City Manager
Recommendation: Adopt first reading of an Ordinance amending the FY 2023 Annual Appropriations Ordinance No. 7,828-N.S. for fiscal year 2023 based upon recommended re-appropriation of committed FY 2022 funding and other adjustments authorized since July 1, 2022, in the amount of \$176,583,851 (gross) and \$170,322,312 (net).
Financial Implications: See Report.
Contact: Sharon Friedrichsen, Budget Manager, (510) 981-7000
- 24. Status Report - Berkeley's Financial Condition (FY 2012 - FY 2021): Pension Liabilities and Infrastructure Need Attention**
From: City Manager
Contact: Sharon Friedrichsen, Budget Manager, (510) 981-7000

Council Action Items

25. **Resolution Supporting Trip Reduction Alternative for BUSD Berkeley High School Tennis and Parking Structure Project**
From: Councilmember Taplin (Author), Councilmember Harrison (Co-Sponsor)
Recommendation: Adopt a Resolution in support of a Trip Reduction Alternative to be included in the scope of the Environmental Impact Report for the Berkeley High School Tennis and Parking Structure Project at 2000 Bancroft Way, and send a copy of Resolution to the Berkeley Unified School District (BUSD) Board of Directors.
Financial Implications: None
Contact: Terry Taplin, Councilmember, District 2, (510) 981-7120

Public Comment – Items Not Listed on the Agenda

Adjournment

NOTICE CONCERNING YOUR LEGAL RIGHTS: *If you object to a decision by the City Council to approve or deny a use permit or variance for a project the following requirements and restrictions apply:*
1) *No lawsuit challenging a City decision to deny (Code Civ. Proc. §1094.6(b)) or approve (Gov. Code 65009(c)(5)) a use permit or variance may be filed more than 90 days after the date the Notice of Decision of the action of the City Council is mailed. Any lawsuit not filed within that 90-day period will be barred.* 2) *In any lawsuit that may be filed against a City Council decision to approve or deny a use permit or variance, the issues and evidence will be limited to those raised by you or someone else, orally or in writing, at a public hearing or prior to the close of the last public hearing on the project.*

Archived indexed video streams are available at:

<https://berkeleyca.gov/your-government/city-council/city-council-agendas>.

Channel 33 rebroadcasts the following Wednesday at 9:00 a.m. and Sunday at 9:00 a.m.

Communications to the City Council are public record and will become part of the City's electronic records, which are accessible through the City's website. **Please note: e-mail addresses, names, addresses, and other contact information are not required, but if included in any communication to the City Council, will become part of the public record.** If you do not want your e-mail address or any other contact information to be made public, you may deliver communications via U.S. Postal Service to the City Clerk Department at 2180 Milvia Street. If you do not want your contact information included in the public record, please do not include that information in your communication. Please contact the City Clerk Department for further information.

Any writings or documents provided to a majority of the City Council regarding any item on this agenda will be made available for public inspection at the public counter at the City Clerk Department located on the first floor of City Hall located at 2180 Milvia Street as well as posted on the City's website at <https://berkeleyca.gov/>.

Agendas and agenda reports may be accessed via the Internet at:

<https://berkeleyca.gov/your-government/city-council/city-council-agendas>

and may be read at reference desks at the following locations:

City Clerk Department - 2180 Milvia Street, First Floor

Tel: 510-981-6900, TDD: 510-981-6903, Fax: 510-981-6901

Email: clerk@cityofberkeley.info

Libraries: Main – 2090 Kittredge Street,
Claremont Branch – 2940 Benvenue, West Branch – 1125 University,
North Branch – 1170 The Alameda, South Branch – 1901 Russell

COMMUNICATION ACCESS INFORMATION:

To request a disability-related accommodation(s) to participate in the meeting, including auxiliary aids or services, please contact the Disability Services specialist at (510) 981-6418 (V) or (510) 981-6347 (TDD) at least three business days before the meeting date.



Captioning services are provided at the meeting, on B-TV, and on the Internet.

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*I hereby certify that the agenda for this meeting of the Berkeley City Council was posted at the display case located near the walkway in front of the Maudelle Shirek Building, 2134 Martin Luther King Jr. Way, as well as on the City's website, on December 1, 2022.*

A handwritten signature in black ink, appearing to read "Mark Numainville".

Mark Numainville, City Clerk

## Communications

*Council rules limit action on Communications to referral to the City Manager and/or Boards and Commissions for investigation and/or recommendations. All communications submitted to Council are public record. Copies of individual communications are available for viewing at the City Clerk Department and through [Records Online](#).*

### North Berkeley BART Development

1. 9 similarly-worded form letters
2. genetic@igc
3. David Brandon
4. Donna DeDiemar
5. Barbara Fisher

### Eviction Moratorium

6. Robert Bahme
7. Kathleen Lee Verani
8. Sarah Davis
9. Ron Edwards
10. Misha

### Cost/Benefit Analysis of City Policies

11. Barbara Gilbert

### Water Leak at Acton and Delaware

12. Gavin Tyler

### Undemocratic Process

13. Ben and Sarah Davis



### **Cyclist Traffic Safety**

14. Marc Hedlund

### **National Whistleblower Center**

15. Boona Cheema

16. Christoverre Kohler

### **Horizons Shelter and SPARK Lease**

17. Elana Auerbach

18. Boona Cheema

### **No Right Turn on Red**

19. Michael Frantz

### **Indigenous Liberation**

20. Sophie

### **Draft Housing Element**

21. Michael Trujillo, on behalf of East Bay Community Law Center

### **Berkeley High School Coach**

22. Ramona Parks

### **Supplemental Communications and Reports**

*Items received by the deadlines for submission will be compiled and distributed as follows. If no items are received by the deadline, no supplemental packet will be compiled for said deadline.*

- **Supplemental Communications and Reports 1**  
Available by 5:00 p.m. five days prior to the meeting.
- **Supplemental Communications and Reports 2**  
Available by 5:00 p.m. the day before the meeting.
- **Supplemental Communications and Reports 3**  
Available by 5:00 p.m. two days following the meeting.



ORDINANCE NO. 7,846-N.S.

FAIR WORKWEEK EMPLOYMENT STANDARDS

BE IT ORDAINED by the Council of the City of Berkeley as follows:

Section 1. That Berkeley Municipal Code Chapter 13.102 is added to read as follows:

**CHAPTER 13.102**

**FAIR WORKWEEK EMPLOYMENT STANDARDS**

**Sections:**

- 13.102.010 Purpose and Intent**
- 13.102.020 Definitions.**
- 13.102.030 Applicability.**
- 13.102.040 Waiver through Collective Bargaining**
- 13.102.050 Advance Notice of Work Schedules.**
- 13.102.060 Notice, Right to Decline, and Compensation for Schedule Changes.**
- 13.102.070 Offer of Work to Existing Employees.**
- 13.102.080 Right to Rest.**
- 13.102.090 Right to Request a Flexible Working Arrangement.**
- 13.102.100 Notice and Posting.**
- 13.102.110 Implementation.**
- 13.102.120 Enforcement.**
- 13.102.130 Retaliation Prohibited**
- 13.102.140 Retention of Records.**
- 13.102.150 City Access.**
- 13.102.160 No Preemption of Higher Standards.**
- 13.102.170 Severability.**

**13.102.010 Purpose and Intent**

This chapter shall be known and may be cited as the “Berkeley Fair Workweek Ordinance”. It is the purpose of this chapter and the policy of the City: (i) to enact and enforce fair and equitable employment scheduling practices in the City of Berkeley; (ii) to provide the working people of Berkeley with protections that ensure employer scheduling practices do not unreasonably prevent workers from attending to their families, health, education, and other obligations; and (iii) to require Employers needing additional hours, whether temporary or permanent, to first offer those hours to current part-time Employees.

### **13.102.020 Definitions**

As used in this chapter, the following terms shall have the following meanings:

- (a) "Building services" means the care and maintenance of property, including, but not limited to, janitorial services, building and grounds maintenance services, and security services.
- (b) "Calendar week" shall mean a period of seven consecutive days starting on Sunday.
- (c) "City" shall mean the City of Berkeley.
- (d) "Covered employer" shall mean an employer subject to the provisions of this chapter, as specified in Section 13.102.030.
- (e) "Department" shall mean the City Manager's Department, as specified in Chapter 2.36, or another department or agency as the City Manager shall designate.
- (f) "Employee" shall mean any person who:
  - (1) In a calendar week performs at least two hours of work within the geographic boundaries of the City of Berkeley for a covered employer;
  - (2) Qualifies as an employee entitled to payment of a minimum wage from any employer under the California minimum wage law, as provided under Labor Code Section 1197 and wage orders published by the California Industrial Welfare Commission. Employees shall include learners, as defined by the California Industrial Welfare Commission; and
  - (3) Is (i) not exempt from payment of an overtime rate of compensation pursuant to Labor Code Section 510; and (ii) is not paid a monthly salary equivalent to at least forty hours per week at a rate of pay of twice the minimum wage required by Berkeley Municipal Code Section 13.99.040.
- (g) "Employer" shall mean any person, as defined in Labor Code Section 18, who directly or indirectly through any other person or employer, employs or exercises control over the wages, hours or working conditions of any Employee, or any person receiving or holding a business license through Title 9 of the Berkeley Municipal Code.
- (h) "Franchise" shall have the meaning in California Business and Professions Code Section 20001.
- (i) "Franchisee" shall have the meaning in California Business and Professions Code Section 20002.
- (j) "Franchisor" shall have the meaning in California Business and Professions Code Section 20003.
- (k) "Good faith" shall mean a sincere intention to deal fairly with others.
- (l) "Healthcare" shall mean either a Hospital, Medical Practitioner Office, Nursing Home, or Supportive Housing as defined in BMC Section 23.502.020, or a facility that provides outpatient maintenance dialysis.
- (m) "Hotel" shall mean Tourist Hotel as defined in BMC Section 23.502.020.

(n) "Manufacturing" shall mean a Manufacturing Use as defined in BMC Section 23.502.020.

(o) "Predictability pay" shall mean wages paid to an employee, calculated on an hourly basis at the employee's regular rate of pay as that term is used in 29 U.S.C. Section 207 (e), as compensation for schedule changes made by a covered employer to an employee's schedule pursuant to Section 13.102.060, in addition to any wages earned for work performed by that employee.

(p) "Restaurant" shall mean a Food Service Establishment as defined in BMC Section 23.502.020.

(q) "Retail" shall mean a Retail Products Store as defined in BMC Section 23.502.020.

(r) "Shift" shall mean the consecutive hours an employer requires an employee to work including employer-approved meal periods and rest periods.

(s) "Warehouse services" shall mean Warehouse Based Non-Store Retail as defined in BMC Section 23.502.020.

(t) "Work schedule" shall mean all of an employee's shifts, including specific start and end times for each shift, during a calendar week.

(u) "Writing" or "written" means a printed or printable communication in physical or electronic format including a communication that is transmitted through electronic mail, text message or a computer system or is otherwise sent and stored electronically.

### **13.102.030 Applicability**

(a) This chapter shall apply to: the City of Berkeley as an employer, and any employer in the City of Berkeley with 10 or more employees in the City of Berkeley that is:

- (1) primarily engaged in the building services, healthcare, hotel, manufacturing, retail, or warehouse services industries, and employs 56 or more employees globally; or
- (2) primarily engaged in the restaurant industry, and employs 100 or more employees globally; or
- (3) a franchisee primarily engaged in the retail or restaurant industries and is associated with a network of franchises with franchisees employing in the aggregate 100 or more employees globally; or
- (4) a not-for-profit corporation organized under Section 501 of the United States Internal Revenue Code in the industries specified under subsection (a)(1), (2), and (3) and employs 100 or more employees globally.

(b) In determining the number of employees performing work for a covered employer during a given week, all employees performing work for the covered employer for compensation on a full-time, part-time, or temporary basis, at any location, shall be counted, including employees made available to work through the services of a temporary services or staffing agency or similar entity.

(c) For the purposes of determining whether a nonfranchisee entity is a covered employer as defined by this chapter, separate entities that form an integrated enterprise shall be

considered a single employer. Within one year of the effective date of the ordinance, the City Manager shall promulgate rules pursuant to the authority provided in Section 13.102.110 to implement this subsection clarifying factors to be considered in determining what constitutes an integrated enterprise.

(d) This chapter shall become operative with respect to employees not subject to a collective bargaining agreement, including employees working for the City of Berkeley and all other employers, one year after the effective date of the ordinance. Unless waived pursuant to Section 13.102.040, with respect to employees subject to a collective bargaining agreement, this chapter shall become operative upon the commencement of a bona fide second or successor collective bargaining agreement or one year after the effective date of the ordinance, whichever is earlier.

### **13.102.040 Waiver through Collective Bargaining**

Except for existing collective bargaining agreements in effect prior to the effective date of this ordinance, as provided for in Section 13.102.030(d), the requirements of all or of specific portions of this chapter may be waived in a bona fide collective bargaining agreement, but only if the waiver is set forth explicitly in such agreement in clear and unambiguous terms.

### **13.102.050 Advance Notice of Work Schedules.**

(a) **Initial Estimate of Minimum Hours.** An employer shall provide each employee with a good faith estimate in writing of the employee's work schedule. The employee may submit a written request to modify the estimated work schedule, and the covered employer in its sole discretion may accept or reject the request and shall notify the employee of covered employer's determination in writing prior to or on commencement of employment.

(b) **Two Weeks' Advance Notice of Work Schedule.** A covered employer shall provide its employees with at least two weeks' notice of their work schedules by doing one of the following:

(1) posting the work schedule in a conspicuous place at the workplace that is readily accessible and visible to all employees; or

(2) transmitting the work schedule by electronic means, so long as all employees are given access to the electronic schedule at the workplace.

For new employees, a covered employer shall provide the new employee prior to or on their first day of employment with an initial work schedule. Thereafter, the covered employer shall include the new employee in an existing schedule with other employees.

(c) An Employee who is a victim of domestic violence or sexual violence as defined in Sections 6211 or 6203 and encompassing the acts described in Section 6320 of the California Family Code may request that the Employee's Work Schedule not be posted or transmitted to other employees. An oral or written request shall be sufficient and implemented immediately and is sufficient until the Employee gives written permission to post the Employee's schedule. An Employer may request a written statement from the Employee that states that the Employee is a victim of domestic violence or sexual

violence. The written statement shall constitute the documentation needed for the Employer to implement the request. The Employer may not require a written statement more than once in a calendar year from any Covered Employee for this purpose.

### **13.102.060 Schedule Changes.**

(a) Notice. A covered employer shall provide an employee written notice of any change to the employee's posted or transmitted work schedule within 24 hours of a schedule change. This notice requirement shall not apply to any schedule changes the employee initiates.

(b) Right to Decline. Subject to the exceptions in subsections (d) and (e) of this section, an employee has the right to decline any previously unscheduled hours that the covered employer adds to the employee's schedule, and for which the employee has been provided advance notice of less than 14 days before the first day of any new schedule.

(c) Predictability Pay for Schedule Changes. Subject to the exceptions in subsections (d) and (e) of this section, a covered employer shall provide an employee with the following compensation per shift for each previously scheduled shift that the covered employer adds or subtracts hours, moves to another date or time, cancels, or each previously unscheduled shift that the covered employer adds to the employee's schedule:

(1) with less than 14 days notice, but 24 hours or more notice to the employee: one hour of predictability pay;

(2) with less than 24 hours notice to the employee,

(i) When hours are cancelled or reduced, four hours or the number of cancelled or reduced hours in the employee's scheduled shift, whichever is less;

(ii) For additions and all other changes, one hour of predictability pay. The compensation required by this subsection shall be in addition to the employee's regular pay for working such shift.

(d) Scheduling Exceptions. The requirements of this section shall not apply under any of the following circumstances:

(1) Mutually agreed-upon work shift swaps or coverage arrangements among employees;

(2) Employee initiated voluntary shift modifications, such as voluntary requests to leave a scheduled shift prior to the end of the shift or to use sick leave, vacation leave, or other policies offered by the Employer. This paragraph shall apply only to the employee initiating the voluntary shift modification; or

(3) To accommodate the following transitions in shifts:

(i) If an employee works no more than thirty minutes past the end of a scheduled shift to complete service to a customer, provided the employee is compensated at their regular rate of pay for the additional work performed by the employee.

(ii) An employee begins or ends their scheduled shift no more than ten minutes prior to or after the scheduled shift, provided the employee is compensated at their regular rate of pay for the additional work performed by the employee.

(e) Operational Exceptions. The requirements of this section shall not apply under any of the following circumstances:

- (1) Operations cannot begin or continue due to threats to covered employers, employees or property, or when civil authorities recommend that work not begin or continue;
- (2) Operations cannot begin or continue because public utilities fail to supply electricity, water, or gas, or there is a failure in the public utilities or sewer system;
- (3) Operations cannot begin or continue due to acts of nature (including but not limited to flood, fire, explosion, earthquake, tidal wave, drought), pandemic, war, civil unrest, strikes, or other cause not within the covered employer's control;
- (4) When, in manufacturing, events outside of the control of the manufacturer result in a reduction in the need for covered employees, including, but not limited to, when a customer requests the manufacturer to delay production or there is a delay in the receipt of raw materials or component parts needed for production; or
- (5) With regard to healthcare employers, in (i) any declared national, State, or municipal disaster or other catastrophic event, or any implementation of an Employer's disaster plan, or incident causing a hospital to activate its Emergency Operations Plan that is reasonably expected to substantially affect or increase the need for healthcare services; (ii) any circumstance in which patient care needs require specialized skills through the completion of a procedure; or (iii) any unexpected substantial increase in demand for healthcare due to large public events, severe weather, violence, or other circumstances beyond the healthcare employer's control.

(f) Nothing in this section shall be construed to prohibit a covered employer from providing greater advance notice of employee's work schedules and/or changes in schedules than that required by this section.

### **13.102.070 Offer of Work to Existing Employees.**

(a) Subject to the limitations in this chapter, before hiring new employees, including hiring through the use of temporary services or staffing agencies, a covered employer shall first offer additional hours of work to existing part-time employee(s) who have worked on behalf of the employer for more than two weeks, if the part-time employee(s) are qualified to do the additional work, as reasonably and in good faith determined by the covered employer, and if the additional hours needed are not the same hours the part-time employee is scheduled to work. This section shall not be construed to require any employer to offer employees work hours paid at a premium rate under Labor Code Section 510 nor to prohibit any employer from offering such work hours. These hours will not be required to be distributed on the basis of seniority.



(b) A covered employer has discretion to distribute the additional work hours among qualified part-time employees consistent with this section; provided, that: (1) the employer's system for distribution of hours must not discriminate on the basis of race, color, creed, religion, ancestry, national origin, sex, sexual orientation, gender identity or expression, disability, age, marital or familial status, nor on the basis of family caregiving responsibilities; and (2) the employer may not distribute hours in a manner intended to avoid an increase in the number of employees working 30 or more hours per week, or with regard to the City of Berkeley, to avoid the granting of any benefits that an employee earns based on hours worked. Additionally, for the City of Berkeley, the offering of these additional hours shall not in themselves confer career status on any non-career employee or confer benefits on any non-benefitted employee, unless required by state or federal law.

(c) A part-time employee may, but is not required to, accept the covered employer's offer of additional work under this section.

(1) Part-time employees shall have 24 hours to accept an offer of additional hours of work under this section, after which time the covered employer may hire new employees to work the additional hours.

(2) The 24-hour period referred to in this subsection begins either when the employee receives the written offer of additional hours, or when the covered employer posts the offer of additional hours as described in subsection (d) of this section, whichever is sooner. A part-time employee who wishes to accept the additional hours must do so in writing.

(d) When this section requires a covered employer to offer additional hours to existing part-time employees, the covered employer shall make the offer either in writing or by posting the offer in a conspicuous location in the workplace or electronically where notices to employees are customarily posted.

### **13.102.080 Right to Rest.**

(a) An employee has the right to decline work hours that occur less than 11 hours after the end of the previous shift.

(b) An employee who agrees in writing to work hours described in this section shall be compensated at one and one-half times the employee's regular rate of pay for any hours worked less than 11 hours following the end of a previous shift.

### **13.102.090 Right to Request a Flexible Working Arrangement.**

An employee has the right to request a modified work schedule, including but not limited to additional shifts or hours; changes in days of work or start and/or end times for the shift; permission to exchange shifts with other employees; limitations on availability; part-time employment; job sharing arrangements; reduction or change in work duties; or part-year employment. Notwithstanding any obligations under Section 13.102.060, an employer may accept, modify, or decline the employee's request. A covered employer shall not retaliate against an employee for exercising their rights under this section or the

rights outlined in the Berkeley Family Friendly and Environment Friendly Workplace Ordinance, Berkeley Municipal Code Chapter 13.101.

**13.102.100 Notice and Posting.**

(a) The Department shall publish and make available to covered employers, in English and other languages as provided in any implementing regulations, a notice suitable for posting by covered employers in the workplace informing employees of their rights under this chapter.

(b) Each covered employer shall give written notification to each current employee and to each new employee at time of hire of their rights under this chapter. Every covered employer shall also provide each employee at the time of hire with the covered employer's name, address, and telephone number in writing. The written notification shall be in English and other languages as provided in any implementing regulations, and shall also be posted prominently in areas at the work site where it will be seen by all employees. Failure to post such notice shall render the covered employer subject to administrative citation, pursuant to the provisions of this chapter. The Department is authorized to prepare sample notices and covered employer use of such notices shall constitute compliance with this subsection.

**13.102.110 Implementation.**

(a) The Department shall be authorized to coordinate implementation and enforcement of this chapter and may promulgate appropriate guidelines or rules for such purposes. Any guidelines or rules promulgated by the City shall have the force and effect of law and may be relied on by covered employers, employees and other parties to determine their rights and responsibilities under this chapter. Any guidelines or rules may establish procedures for ensuring fair, efficient and cost-effective implementation of this chapter, including supplementary procedures for helping to inform employees of their rights under this chapter, for monitoring covered employer compliance with this chapter, and for providing administrative hearings to determine whether a covered employer has violated the requirements of this chapter.

(b) Reporting Violations. An aggrieved employee may report to the Department in writing any suspected violation of this chapter. The Department shall keep confidential, to the maximum extent permitted by applicable laws, the name and other identifying information of the employee reporting the violation; provided, however, that with the authorization of such employee, the Department may disclose their name and identifying information as necessary to enforce this chapter or other employee protection laws.

(c) Investigation. The Department may investigate any possible violations of this chapter by a covered employer. The Department shall have the authority to inspect workplaces, interview persons and subpoena records or other items relevant to the enforcement of this chapter.

(d) Informal Resolution. If the Department elects to investigate a complaint, the City shall make every effort to resolve complaints informally and in a timely manner. The City's investigation and pursuit of informal resolution does not limit or act as a prerequisite for an employee's right to bring a private action against a covered employer as provided in this chapter.

### **13.102.120 Enforcement.**

(a) Enforcement by City. The Department may take any appropriate enforcement action to ensure compliance, including but not limited to the following:

The Department may issue an administrative citation pursuant to Chapter 1.28 of the Berkeley Municipal Code. The amount of this fine shall vary based on the provision of this chapter violated, as specified below:

(1) A fine may be assessed for retaliation by a covered employer against an employee for exercising rights protected under this chapter. The fine shall be \$1,000 for each employee retaliated against.

(2) A fine of \$500 may be assessed for any of the following violations of this chapter:

(i) Failure to provide notice of employees' rights under this chapter.

(ii) Failure to timely provide an initial work schedule or to timely update work schedules following changes.

(iii) Failure to provide predictability pay for schedule changes with less than 24 hours advance notice.

(iv) Failure to offer work to existing employees before hiring new employees or temporary staff or to award work to a qualified employee.

(v) Failure to maintain payroll records for the minimum period of time as provided in this chapter.

(vi) Failure to allow the Department access to payroll records.

(3) A fine equal to the total amount of appropriate remedies, pursuant to subsection (c) of this section. Any and all money collected in this way that is the rightful property of an employee, such as back wages, interest, and civil penalty payments, shall be disbursed by the Department in a prompt manner.

(b) City Access. Each covered employer shall permit access to work sites and relevant records for authorized City representatives for the purpose of monitoring compliance with this chapter and investigating employee complaints of noncompliance, including production for inspection and copying of its employment records, but without allowing Social Security numbers to become a matter of public record.

(c) Any person aggrieved by a violation of this Chapter, any entity a member of which is aggrieved by a violation of this Chapter or any other person or entity acting on behalf of the public as provided for under applicable state law, may bring a civil action in a court of competent jurisdiction against the Employer or other person violating this Chapter and, upon prevailing, shall be awarded reasonable attorneys' fees and costs and shall be entitled to such legal or equitable relief as may be appropriate to remedy the violation including, without limitation, the payment of any back wages unlawfully withheld, the payment of an additional sum as a civil penalty in the amount of \$50 to each Employee or person whose rights under this Chapter were violated for each day that the violation occurred or continued with a maximum penalty of \$1,000 per Employee per year, reinstatement in employment and/or injunctive relief.

This Section shall not be construed to limit an Employee's right to bring legal action for a violation of any other laws concerning wages, hours, or other standards or rights nor shall exhaustion of remedies under this Chapter be a prerequisite to the assertion of any right.

(d) The remedies for violation of this chapter include but are not limited to:

(1) Reinstatement, the payment of predictability pay unlawfully withheld, and the payment of an additional sum as a civil penalty in the amount of \$50 to each employee whose rights under this chapter were violated for each day or portion thereof that the violation occurred or continued, and fines imposed pursuant to other provisions of this chapter or State law.

(2) Interest on all due and unpaid wages at the rate of interest specified in subdivision (b) of Section 3289 of the California Civil Code, which shall accrue from the date that the wages were due and payable as provided in Part 1 (commencing with Section 200) of Division 2 of the California Labor Code, to the date the wages are paid in full.

(3) Reimbursement of the City's administrative costs of enforcement and reasonable attorney's fees.

(4) If a repeated violation of this chapter has been finally determined in a period from July 1 to June 30 of the following year, the Department may require the employer to pay an additional sum as a civil penalty in the amount of \$50 to the City for each employee or person whose rights under this chapter were violated for each day or portion thereof that the violation occurred or continued, and fines imposed pursuant to other provisions of this Code or State law.

(e) The remedies, penalties and procedures provided under this chapter are cumulative and are not intended to be exclusive of any other available remedies, penalties and procedures established by law which may be pursued to address violations of this chapter. Actions taken pursuant to this chapter shall not prejudice or adversely affect any other action, administrative or judicial, that may be brought to abate a violation or to seek compensation for damages suffered.

(f) No criminal penalties shall attach for any violation of this chapter, nor shall this chapter give rise to any cause of action for damages against the City.

### **13.102.130 Retaliation Prohibited.**

An employer shall not discharge, reduce the compensation of, discriminate against, or take any adverse employment action against an employee, including discipline, suspension, transfer or assignment to a lesser position in terms of job classification, job security, or other condition of employment, reduction of hours or denial of additional hours, informing another employer that the person has engaged in activities protected by this chapter, or reporting or threatening to report the actual or suspected citizenship or immigration status of an employee, former employee or family member of an employee to a Federal, State or local agency, for making a complaint to the Department, participating in any of the Department's proceedings, using any civil remedies to enforce their rights, or otherwise asserting their rights under this chapter. Within 120 days of an employer being notified of such activity, it shall be unlawful for the employer to discharge

any employee who engaged in such activity unless the employer has clear and convincing evidence of just cause for such discharge.

**13.102.140 Retention of Records.**

Each employer shall maintain for at least three years for each employee a record of their name, hours worked, pay rate, initial posted schedule and all subsequent changes to that schedule, consent to work hours where such consent is required by this chapter, and documentation of the time and method of offering additional hours of work to existing staff. Each employer shall provide each employee a copy of the records relating to such employee upon the employee's reasonable request.

**13.102.150 City Access.**

Each employer shall permit access to work sites and relevant records for authorized Department representatives for the purpose of monitoring compliance with this chapter and investigating employee complaints of noncompliance, including production for inspection and copying of its employment records, but without allowing Social Security numbers to become a matter of public record.

**13.102.160 No Preemption of Higher Standards.**

The purpose of this chapter is to ensure minimum labor standards. This chapter does not preempt or prevent the establishment of superior employment standards (including higher wages) or the expansion of coverage by ordinance, resolution, contract, or any other action of the City. This chapter shall not be construed to limit a discharged employee's right to bring a common law cause of action for wrongful termination.

**13.102.170 Severability.**

If any part or provision of this Chapter, or the application of this Chapter to any person or circumstance, is held invalid, the remainder of this Chapter, including the application of such part or provision to other persons or circumstances, shall not be affected by such a holding and shall continue in full force and effect. To this end, the provisions of this Chapter are severable.

Section 2. Copies of this Ordinance shall be posted for two days prior to adoption in the display case located near the walkway in front of the Maudelle Shirek Building, 2134 Martin Luther King Jr. Way. Within 15 days of adoption, copies of this Ordinance shall be filed at each branch of the Berkeley Public Library and the title shall be published in a newspaper of general circulation.

At a special meeting of the Council of the City of Berkeley held on November 21, 2022, this Ordinance was passed to print and ordered published by posting by the following vote:

Ayes: Bartlett, Hahn, Harrison, Kesarwani, Robinson, Taplin, and Arreguin.

Noes: None.

Absent: Droste and Wengraf.

ORDINANCE NO. 7,847-N.S.

AMENDING BERKELEY MUNICIPAL CODE (BMC) SECTION 20.12.070 TO MODIFY THE SIGN ORDINANCE, MODIFYING CHAPTER 20.16 TO ADOPT SECTION 20.16.105 INTRODUCING A COORDINATED SIGN DESIGN PROGRAM, AND AMENDING SECTION 23.406.070 OF THE ZONING ORDINANCE FOR CONSISTENCY WITH THE SIGN ORDINANCE.

BE IT ORDAINED by the Council of the City of Berkeley as follows:

Section 1. That BMC Section 20.12.070 is hereby amended to clarify the issuance process and when signs are exempt from Design Review as follows:

**20.12.70 Issuance authorized when.**

A. Applications for proposed signs or alteration/relocation of existing signs are subject to review by the Director of Planning and Development or their designee, including specifications for compliance with all requirements of this title.

B. The Building Official shall determine if a sign requires a Building Permit or Electrical Permit to meet the requirements of the Berkeley Building Code.

C. A building permit and/or an electrical permit for a sign subject to Design Review pursuant to Section 23.406.070 shall not be issued until Design Review approval has been granted and the permit has been found in conformance with the approved design.

D. A Coordinated Sign Design Program may, at the applicant's discretion, be reviewed and approved simultaneously with or subsequent to Design Review for a building.

E. *Exempt Signs.*

1. Approved existing signs may be refaced, re-painted or replaced with the same location, size, and design, subject to review by the Building Official in cases where a Building Permit is required.

2. Signs pursuant to a Coordinated Sign Design Program may be installed and replaced without Design Review and shall be approved with a Zoning Certificate, subject to review by the Building Official in cases where a Building Permit is required.

Section 2. That BMC Section 20.16.105, Coordinated Sign Design Programs, is hereby added as follows:

**20.16.105 Coordinated Sign Design Programs.**

A. *Purpose.*

1. To create a streamlined sign review process for development projects, projects with multiple signs, and projects with multiple tenants.

2. To ensure consistent design, quality and display of signs.

B. *Applicability.* The following projects are eligible for a Coordinated Sign Design Program:

1. Four or more contiguous non-residential tenant spaces.

2. Four or more permanent non-exempt signs associated with one development project, business or Use Permit.

3. Projects with unique characteristics, including but not limited to site visibility and site location, as determined by the Director of Planning and Development or their designee.

*C. Approval and Appeal Authority.*

1. A Coordinated Sign Design Program may be part of preliminary or final Design Review and shall be decided upon by the Design Review Committee or Landmark Preservation Commission, according to their jurisdiction. Appeals shall be heard by the Zoning Adjustment Board whose decision is final.

2. The Building Official shall determine if a sign allowed under a Coordinated Sign Design Program requires a Building Permit or Electrical Permit to meet the requirements of the Berkeley Building Code.

*D. Regulations.*

1. A Coordinated Sign Design Program shall outline regulations including, but not limited to, sign area, number of signs, maximum height, and location.

2. A Coordinated Sign Design Program may include exceptions to the regulations established in this Chapter when deemed necessary or desirable.

*E. Application Requirements.* A Coordinated Sign Design Program shall include all information and materials required in administrative guidelines published by the Planning Department, including the Coordinated Sign Design Program fee in the Fee Schedule.

*F. Findings.* In order to approve a Coordinated Sign Design Program, the following findings shall be made:

1. The Coordinated Sign Design Program complies with the purpose of this Chapter;

2. The Coordinated Sign Design Program ensures proposed signs enhance the overall project;

3. The Coordinated Sign Design Program ensures proposed signs are in harmony with other signs and structures included in the project;

4. The Coordinated Sign Design Program ensures proposed signs are in harmony with surrounding development;

5. The Coordinated Sign Design Program contains provisions to accommodate Change in Use or new tenants; and

6. The Coordinated Sign Design Program complies with the standards of this Chapter and/or includes specific exceptions as deemed necessary or desirable.

*G. Revisions to Coordinated Sign Design Programs.* Revisions to Coordinated Sign Design Programs shall be considered by the original decision-maker.

*H. Binding Effect.*

1. A Coordinated Sign Design Program, once adopted, shall be adhered to unless amended.

2. A Coordinated Sign Design Program shall be enforced in accordance with this Chapter.



Section 3. That BMC Section 23.406.070.B is amended as follows:

**23.406.070.B Design review.**

*B. When Required.*

1. Design Review is required for:
  - a. Projects in all Non-Residential Districts.
  - b. Mixed use and community and institutional projects in the R-3 district within the Southside Plan area. See Figure 23.202-1: R-3 Areas Subject to Design Review; and
  - c. Commercial, mixed-use, and community and institutional projects in the R-4, R-SMU, and R-S districts.
2. As used in Paragraph (1) above, "project" means an activity requiring a building or sign permit that involves any of the following:
  - a. Modifying the exterior of an existing structure.
  - b. Additions to an existing structure.
  - c. Demolishing all or a portion of an existing structure.
  - d. Removing all or part of a building facade fronting the public right-of-way.
  - e. Constructing a new structure.
  - f. Installing a sign or replacing a sign with a different location, size, or design.
  - g. Signs not part of a Coordinated Sign Design Program.

Section 4. Copies of this Ordinance shall be posted for two days prior to adoption in the display case located near the walkway in front of the Maudelle Shirek Building, 2134 Martin Luther King Jr. Way. Within 15 days of adoption, copies of this Ordinance shall be filed at each branch of the Berkeley Public Library and the title shall be published in a newspaper of general circulation.

At a regular meeting of the Council of the City of Berkeley held on November 29, 2022, this Ordinance was passed to print and ordered published by posting by the following vote:

Ayes: Bartlett, Droste, Hahn, Harrison, Kesarwani, Robinson, Taplin, Wengraf, and Arreguin.

Noes: None.

Absent: None.



Office of the City Attorney

CONSENT CALENDAR  
December 13, 2022

To: Honorable Mayor and Members of the City Council  
From: Dee Williams-Ridley, City Manager  
Submitted by: Farimah Faiz Brown, City Attorney  
Subject: Resolution Reviewing and Ratifying the Proclamation of Local  
Emergency Due to the Spread of a Severe Acute Respiratory Illness  
Caused by a Novel (New) Coronavirus (COVID-19)

RECOMMENDATION

Adopt a Resolution reviewing the need for continuing the local emergency due to the spread of a severe acute respiratory illness caused by a novel (new) coronavirus (COVID-19) and ratifying the Proclamation of Local Emergency issued by the Director of Emergency Services on March 3, 2020, initially ratified by the City Council on March 10, 2020, and subsequently reviewed and ratified by the Council on April 21, 2020, June 16, 2020, July 28, 2020, September 22, 2020, November 17, 2020, December 15, 2020, February 9, 2021, March 30, 2021, May 25, 2021, July 20, 2021, September 14, 2021, December 14, 2021, February 8, 2022, March 22, 2022, May 10, 2022, June 28, 2022, July 26, 2022, September 20, 2022, and November 3, 2022.

FISCAL IMPACT OF RECOMMENDATION

To be determined.

CURRENT SITUATION AND ITS EFFECTS

Pursuant to California Government Code section 8630 and Berkeley Municipal Code Chapter 2.88, on March 3, 2020, the City Manager, in her capacity as Director of Emergency Services, proclaimed a local emergency due to conditions of extreme peril to the safety of persons and property within the City as a consequence of the global spread of a severe acute respiratory illness caused by a novel (new) coronavirus (COVID-19), including a confirmed case in the City of Berkeley. As a result of multiple confirmed and presumed cases in Alameda County, the County has declared a local health emergency. The Proclamation of Local Emergency empowers the Director of Emergency Services to make and issue rules and regulations on matters reasonably related to the protection of life and property as affected by such local emergency. Pursuant to Government Code section 8630(b) and Berkeley Municipal Code section

2.88.040.A.1, on March 10, 2020, the City Council ratified the Proclamation of Local Emergency with the passage of Resolution No. 69-312.

Pursuant to Government Code section 8630(c), the City Council must review the need for continuing the local emergency at least once every sixty (60) days. The Council last reviewed and ratified the Proclamation of Local Emergency on May 10, 2022. The Council therefore must review the continuing need for the local emergency by July 9, 2022.

This item requests that the Council review the continued need for the local emergency and again ratify the Proclamation of Local Emergency issued on March 3, 2020, initially ratified by the Council on March 10, 2020, and subsequently reviewed and ratified by the Council on April 21, 2020, June 16, 2020, July 28, 2020, September 22, 2020, November 17, 2020, December 15, 2020, February 9, 2021, March 30, 2021, May 25, 2021, July 20, 2021, September 14, 2021, December 14, 2021, February 8, 2022, March 22, 2022, May 10, 2022, June 28, 2022, July 26, 2022, September 20, 2022, and November 3, 2022. If reviewed and ratified on December 13, 2022, the Council will need to again review and ratify the proclamation by February 11, 2023 in order to continue the local emergency.

If at any time the Council determines that the need for continuing the local emergency has ended, state law directs the Council to terminate the local emergency at the earliest possible date that conditions warrant. (Cal. Gov. Code section 8630(d).)

#### BACKGROUND

On March 1, 2020, Alameda County Public Health Department and Solano County Public Health Department reported two presumptive cases of COVID-19, pending confirmatory testing by the Centers for Disease Control (CDC), prompting Alameda County to declare a local health emergency.

On March 3, 2020, the City's Director of Emergency Services proclaimed a local emergency due to the spread of COVID-19, including a confirmed case in the City of Berkeley and multiple confirmed and presumed cases in Alameda County.

On March 10, 2020, the City Council ratified the Proclamation of Local Emergency. Since that date, there have been over 4,955 confirmed cases of COVID-19 and at least 55 deaths in the City of Berkeley.

Since April 2021, the highly transmissible SARS-CoV-2 B.1.617.2 ("Delta") variant has been detected in the City of Berkeley and is contributing to substantial levels of community transmission.

The City Council has subsequently reviewed and ratified the Proclamation of Local Emergency on April 21, 2020, June 16, 2020, July 28, 2020, September 22, 2020, November 17, 2020, December 15, 2020, February 9, 2021, March 30, 2021, May 25, 2021, July 20, 2021, September 14, 2021, December 14, 2021, February 8, 2022,

March 22, 2022, May 10, 2022, June 28, 2022, July 26, 2022, September 20, 2022, and November 3, 2022.

ENVIRONMENTAL SUSTAINABILITY AND CLIMATE IMPACTS

Not applicable.

RATIONALE FOR RECOMMENDATION

The Resolution would enable the Director of Emergency Services to continue to efficiently allocate resources due to the ongoing and imminent threat to public safety.

ALTERNATIVE ACTIONS CONSIDERED

None.

CONTACT PERSON

Dee Williams-Ridley, City Manager, City Manager's Office (510) 981-7000

Farimah Brown, City Attorney, City Attorney's Office (510) 981-6998

Attachments:

1: Resolution

RESOLUTION NO. –N.S.

RESOLUTION REVIEWING AND RATIFYING THE PROCLAMATION OF LOCAL EMERGENCY

WHEREAS, the Emergency Services Act, Government Code sections 8558(c) and 8630 authorize the proclamation of a local emergency when conditions of disaster or extreme peril to the safety of persons and property within the territorial limits of a city exist; and

WHEREAS, pursuant to Government Code section 8630, such an emergency may be proclaimed by the governing body or by an official designated by ordinance adopted by the governing body; and

WHEREAS, Berkeley Municipal Code section 2.88.040 provides that the City Manager, serving as the Director of Emergency Services, may request that the City Council proclaim the existence of a local emergency; and

WHEREAS, under provision of local law, if the City Council cannot be convened and, in the judgment of the Director of Emergency Services, the circumstances warrant it, a proclamation of local emergency may be issued which must be ratified or nullified by the City Council within seven days of issuance; and

WHEREAS, in accordance with authority granted under the above provisions of state and local law, the Director of Emergency Services beginning on March 3, 2020 did proclaim the existence of a local emergency caused by epidemic in the form of the global spread of a severe acute respiratory illness caused by a novel (new) coronavirus (“COVID-19”), including confirmed cases in California and the San Francisco Bay Area, and presumed cases in Alameda County prompting the County to declare a local health emergency; and

WHEREAS, on March 10, 2020, the City Council ratified the Proclamation of Local Emergency with the passage of Resolution No. 69-312; and

WHEREAS, Government Code section 8630(c) requires that the City Council review the need for continuing the local emergency at least once every sixty (60) days; and

WHEREAS, the City Council subsequently reviewed the need for continuing the local emergency and again ratified the Proclamation of Local Emergency on April 21, 2020, June 16, 2020, July 28, 2020, September 22, 2020, November 17, 2020, December 15, 2020, February 9, 2021, March 30, 2021, May 25, 2021, July 20, 2021, September 14, 2021, December 14, 2021, February 8, 2022, March 22, 2022, May 10, 2022, June 28, 2022, July 26, 2022, September 20, 2022, and November 3, 2022; and

WHEREAS, the City Council does find that the aforesaid conditions of extreme peril continue to exist, and now include over 13,000 confirmed cases of COVID-19 and at least 61 deaths in the City of Berkeley, thereby warranting and necessitating the continuation of the local emergency; and

WHEREAS, the City Council will need to again review the need for continuing the local emergency and ratify the Proclamation of Local Emergency by August 27, 2022;

WHEREAS, the City Council recognizes that the SARS-CoV-2 B.1.617.2 (“Delta”) variant of COVID-19 that is currently circulating nationally and within the City is contributing to a substantial increase in transmissibility and more severe disease; and

WHEREAS, on July 16, 2021, in light of the apparent increased transmissibility of the Delta variant, the City of Berkeley recommended that all individuals including fully vaccinated persons wear masks in public indoor settings; and

WHEREAS, on July 26, 2021, the California State Health Officer issued an order requiring vaccination or routine testing of all employees working in high-risk health care and congregate settings, in light of the fact that current requirements of staff in health care settings, such as universal mask requirements for all staff are not proving sufficient to prevent transmission of the more transmissible Delta variant; and

WHEREAS, on July 27, 2021, the CDC updated its guidance for fully vaccinated persons to reflect new evidence regarding the Delta variant, noting that “[i]nfections in fully vaccinated people (breakthrough infections) happen in only a small proportion of people who are fully vaccinated, even with the Delta variant”; and

WHEREAS, on August 2, 2021, the Health Officer for the City of Berkeley issued an order requiring all individuals to wear masks in all indoor public settings; and

WHEREAS, on August 5, 2021, the California State Health Officer issued an order requiring that workers in healthcare settings be fully vaccinated by September 30, 2021; and

WHEREAS, on August 11, 2021, the City announced its intention to implement a vaccination policy for City employees to protect the health and safety of the City of Berkeley’s employees and community members from the imminent and substantial threat to public health and safety posed by the Delta variant; and

WHEREAS, on September 14, 2021, given the increased and unforeseen risk posed by the Delta variant, as compared to earlier variants of the COVID-19 virus previously present in the City of Berkeley, the City Council found that a Citywide vaccination policy protects public health and reduces the risk of substantial harm to City staff and community members that could result from workplace outbreaks caused by the Delta variant; and

WHEREAS, on September 14, 2021, given the urgency posed by the highly transmissible nature of the Delta variant, the City Council recognized the variant’s existence as creating an emergency of grave character and as warranting immediate adoption of a Citywide vaccination policy.

NOW, THEREFORE BE IT RESOLVED by the Council of the City of Berkeley that it is hereby proclaimed and ordered that the Proclamation of Local Emergency, issued by the Director of Emergency Services on March 3, 2020, initially ratified by the City Council on March 10, 2020, and subsequently reviewed and ratified by the City Council on April 21, 2020, June 16, 2020, July 28, 2020, September 22, 2020, November 17, 2020, December 15, 2020, February 9, 2021, March 30, 2021, May 25, 2021, July 20, 2021, September 14, 2021, December 14, 2021, February 8, 2022, March 22, 2022, May 10, 2022, June 28, 2022, July 26, 2022, September 20, 2022, and November 3, 2022, has been reviewed and is hereby again ratified and confirmed.

BE IT FURTHER RESOLVED that during the existence of this local emergency the powers, functions, and duties of the emergency organization of this City shall be those prescribed by state law, and the Charter, ordinances, resolutions and approved plans of the City of Berkeley.





Office of the City Attorney

CONSENT CALENDAR  
December 13, 2022

To: Honorable Mayor and Members of the City Council  
Madame City Manager

From: Farimah Faiz Brown, City Attorney

Subject: Resolution Making Required Findings Pursuant to the Government Code and Directing City Legislative Bodies to Continue to Meet Via Videoconference and Teleconference

RECOMMENDATION

Adopt a resolution making the required findings pursuant to Government Code Section 54953(e)(3) and determining that as a result of the continued threat to public health and safety posed by the spread of COVID-19, City legislative bodies shall continue to meet via videoconference and teleconference, initially ratified by the City Council on September 28, 2021, and subsequently reviewed and ratified on October 26, 2021, November 16, 2021, December 14, 2021, January 10, 2022, February 8, 2022, March 8, 2022, March 22, 2022, April 12, 2022, May 10, 2022, May 31, 2022, June 28, 2022, July 26, 2022, August 23, 2022, September 20, 2022, October 11, 2022, November 3, 2022, and November 29, 2022.

FISCAL IMPACT OF RECOMMENDATION

To be determined.

CURRENT SITUATION AND ITS EFFECTS

The City Council made the initial findings required under the Government Code on September 28, 2021. The Council must make the findings every thirty days in order to continue to meet exclusively through video conference or teleconference.

Pursuant to California Government Code section 8630 and Berkeley Municipal Code Chapter 2.88.040, on March 3, 2020, the City Manager, in her capacity as Director of Emergency Services, proclaimed a local emergency due to conditions of extreme peril to the safety of persons and property within the City as a consequence of the global spread of a severe acute respiratory illness caused by a novel (new) coronavirus (COVID-19), including a confirmed case in the City of Berkeley. As a result of multiple confirmed and presumed cases in Alameda County, the County has declared a local health emergency. On March 4, 2020, Governor Gavin Newsom issued a Proclamation

of a State of Emergency due to the spread of COVID-19. On March 10, 2020, the City Council ratified the Proclamation of Local Emergency with the passage of Resolution No. 69-312.

On March 17, 2020, Governor Newsom signed Executive Order N-29-20, which suspended certain portions of the Ralph M. Brown Act (Cal. Gov. Code § 54950 et seq.) related to the holding of teleconferenced meetings by City legislative bodies. Among other things, Executive Order N-29-20 suspended requirements that each location from which an official accesses a teleconferenced meeting be accessible to the public. These changes were necessary to allow teleconferencing to be used as a tool for ensuring social distancing. City legislative bodies have held public meetings via videoconference and teleconference pursuant to these provisions since March 2020. These provisions of Executive Order N-29-20 will expire on September 30, 2021.

COVID-19 continues to pose a serious threat to public health and safety. There are now over 4,700 confirmed cases of COVID-19 and at least 55 deaths in the City of Berkeley. Additionally, the SARS-CoV-2 B.1.617.2 (“Delta”) variant of COVID-19 that is currently circulating nationally and within the City is contributing to a substantial increase in transmissibility and more severe disease.

As a result of the continued threat to public health posed by the spread of COVID-19, state and local officials continue to impose or recommend measures to promote social distancing, mask wearing and vaccination. Holding meetings of City legislative bodies in person would present imminent risks to the health and safety of the public and members of legislative bodies, and therefore public meetings cannot safely be held in person at this time

Assembly Bill 361 (Rivas), signed into law by Governor Newsom on September 16, 2021, amended a portion of the Brown Act (Government Code Section 54953) to authorize the City Council, during the state of emergency, to determine that, due to the spread of COVID-19, holding in-person public meetings would present an imminent risk to the health or safety of attendees, and therefore City legislative bodies must continue to meet via videoconference and teleconference. Assembly Bill 361 requires that the City Council must review and ratify such a determination every thirty (30) days. Therefore, if the Council passes this resolution on December 13, 2022, the Council will need to review and ratify the resolution by January 12, 2023.

This item requests that the Council review the circumstances of the continued state of emergency posed by the spread of COVID-19, and find that the state of emergency continues to directly impact the ability of the public and members of City legislative bodies to meet safely in person, that holding public meetings of City legislative bodies in person would present imminent risks to the health and safety of attendees, and that state and local officials continue to promote social distancing, mask wearing and vaccination. This item further requests that the Council determine that City legislative bodies, including but not limited to the City Council and its committees, and all commissions and boards, shall continue to hold public meetings via videoconference

and teleconference, and that City legislative bodies shall continue to comply with all provisions of the Brown Act, as amended by SB 361.

#### BACKGROUND

On March 1, 2020, Alameda County Public Health Department and Solano County Public Health Department reported two presumptive cases of COVID-19, pending confirmatory testing by the Centers for Disease Control (CDC), prompting Alameda County to declare a local health emergency.

On March 3, 2020, the City's Director of Emergency Services proclaimed a local emergency due to the spread of COVID-19, including a confirmed case in the City of Berkeley and multiple confirmed and presumed cases in Alameda County.

On March 4, 2020, Governor Gavin Newsom issued a Proclamation of a State of Emergency due to the spread of COVID-19.

On March 10, 2020, the City Council ratified the Proclamation of Local Emergency. Since that date, there have been over 4,700 confirmed cases of COVID-19 and at least 57 deaths in the City of Berkeley.

On March 17, 2020, Governor Newsom signed Executive Order N-29-20 which suspended certain portions of the Ralph M. Brown Act (Cal. Gov. Code § 54950 et seq.) to allow teleconferencing of public meetings to be used as a tool for ensuring social distancing. As a result, City legislative bodies have held public meetings via teleconference throughout the pandemic. The provisions of Executive Order N-29-20 allowing teleconferencing to be used as a tool for social distancing will expire on September 30, 2021.

#### ENVIRONMENTAL SUSTAINABILITY AND CLIMATE IMPACTS

Not applicable.

#### RATIONALE FOR RECOMMENDATION

The Resolution would enable the City Council and its committees, and City boards and commissions to continue to hold public meetings via videoconference and teleconference in order to continue to socially distance and limit the spread of COVID-19.

#### ALTERNATIVE ACTIONS CONSIDERED

None.

#### CONTACT PERSON

Farimah Brown, City Attorney, City Attorney's Office (510) 981-6998  
Mark Numainville, City Clerk, (510) 981-6908

Attachments:1: Resolution Directing City Legislative Bodies to Continue to Meet Via Videoconference and Teleconference

RESOLUTION NO. –N.S.

RESOLUTION MAKING THE REQUIRED FINDINGS PURSUANT TO GOVERNMENT CODE SECTION 54953(E)(3) AND DIRECTING CITY LEGISLATIVE BODIES TO CONTINUE TO MEET VIA VIDEOCONFERENCE AND TELECONFERENCE

WHEREAS, in accordance with Berkeley Municipal Code section 2.88.040 and sections 8558(c) and 8630 of the Government Code, which authorize the proclamation of a local emergency when conditions of disaster or extreme peril to the safety of persons and property within the territorial limits of a City exist, the City Manager, serving as the Director of Emergency Services, beginning on March 3, 2020, did proclaim the existence of a local emergency caused by epidemic in the form of the global spread of a severe acute respiratory illness caused by a novel (new) coronavirus (“COVID-19”), including confirmed cases in California and the San Francisco Bay Area, and presumed cases in Alameda County prompting the County to declare a local health emergency; and

WHEREAS, on March 10, 2020, the City Council ratified the Proclamation of Local Emergency with the passage of Resolution No. 69-312; and

WHEREAS, on March 4, 2020, Governor Gavin Newsom issued a Proclamation of a State of Emergency pursuant to the California Emergency Services Act, in particular, Government Code section 8625; and

WHEREAS, the Proclamation of a State of Emergency issued by Governor Newsom on March 4, 2020 continues to be in effect; and

WHEREAS, on September 16, 2021, Governor Newsom signed into law AB 361, which authorizes the City Council to determine that, due to the continued threat to public health and safety posed by the spread of COVID-19, City legislative bodies shall continue to meet via videoconference and teleconference; and

WHEREAS, the City Council does find that the aforesaid conditions of extreme peril continue to exist, and now include over 4,700 confirmed cases of COVID-19 and at least 55 deaths in the City of Berkeley; and

WHEREAS, the City Council recognizes that the SARS-CoV-2 B.1.617.2 (“Delta”) variant of COVID-19 that is currently circulating nationally and within the City is contributing to a substantial increase in transmissibility and more severe disease; and

WHEREAS, as a result of the continued threat to public health posed by the spread of COVID-19, state and local officials continue to impose or recommend measures to promote social distancing, mask wearing and vaccination; and

WHEREAS, holding meetings of City legislative bodies in person would present imminent risks to the health and safety of the public and members of legislative bodies, and therefore public meetings cannot safely be held in person at this time; and

WHEREAS, the City Council made the initial findings required by the Government Code on September 28, 2021; and

WHEREAS, the City Council made subsequent findings required by the Government Code on October 26, 2021, November 16, 2021, December 14, 2021, January 10, 2022, February 8, 2022, March 8, 2022, March 22, 2022, April 12, 2022, May 10, 2022, May 31, 2022, June 28, 2022, July 26, 2022, August 23, 2022, September 20, 2022, October 11, 2022, November 3, 2022, November 29, 2022; and

WHEREAS, the City Council will need to again review the need for the continuing necessity of holding City legislative body meetings via videoconference and teleconference by January 12, 2022.

NOW, THEREFORE BE IT RESOLVED by the Council of the City of Berkeley that, pursuant to Government Code section 54953, the City Council has reviewed the circumstances of the continued state of emergency posed by the spread of COVID-19, and finds that the state of emergency continues to directly impact the ability of the public and members of City legislative bodies to meet safely in person, that holding public meetings of City legislative bodies in person would present imminent risks to the health and safety of attendees, and that state and local officials continue to promote social distancing, mask wearing and vaccination.

BE IT FURTHER RESOLVED that City legislative bodies, including but not limited to the City Council and its committees, and all commissions and boards, shall continue to hold public meetings via videoconference and teleconference.

BE IT FURTHER RESOLVED that all City legislative bodies shall comply with the requirements of Government Code section 54953(e)(2) and all applicable laws, regulations and rules when conducting public meetings pursuant to this resolution.





Office of the City Manager

CONSENT CALENDAR  
December 13, 2022

To: Honorable Mayor and Members of the City Council

From: Dee Williams-Ridley, City Manager

Submitted by: Farimah Brown, City Attorney

Subject: Waiver of the Sanctuary City Contracting Ordinance's Requirements for AG Witt, LLC Contract

RECOMMENDATION

Adopt a Resolution approving a waiver of the Sanctuary City Contracting ordinance's requirements for the City's FEMA Cost-Recovery Contract with AG Witt LLC.

FISCAL IMPACT

Likely none as the City will be seeking reimbursement through the Federal Emergency Management Agency (FEMA) Public Assistance Program for the costs of the AG Witt contract.

CURRENT SITUATION AND ITS EFFECTS

Since June 2020, AG Witt, LLC has been providing the City with support in developing and submitting reimbursement requests to the FEMA Public Assistance Program for costs incurred during the COVID-10 pandemic. Due to the urgency surrounding this process and the need to comply with federal contracting rules in place at the time, a Sanctuary City compliance certification was not obtained at the time the contract was initially entered into. Although AG Witt has attested that it does not provide any services prohibited by Chapter 13.105, a retroactive waiver is being sought out of an abundance of caution.

BACKGROUND

As part of the City's COVID-19 response, the City underwent a Request for Proposal process to retain a firm to provide disaster cost recovery consulting services. After a selection process that included interviews with the top two responders, the City's evaluation team consisting of representatives from the offices of the City Manager, City Auditor, City Attorney and the Office of Emergency Services, determined that the best qualified firm meeting the City's needs was AG Witt, LLC. In June 2020, the City entered into a contract with AG Witt.

The work AG Witt has done has been extremely helpful in developing policies and processes related to the COVID-19 response. AG Witt has helped the City to prepare

and submit cost reimbursement requests to the FEMA and the California Governor's Office of Emergency Services.

The Sanctuary City Contracting Ordinance prohibits contracting with an entity that provides “data broker” or “extreme vetting” services to the United States Immigration and Customs Enforcement Department unless a waiver is granted by the Council. An AG Witt LLC representative has attested that it does not provide any of the prohibited services and the City is unaware of any information that would contradict this statement. However, because a notice regarding the Sanctuary City Contracting ordinance was not included in the RFP process and the City did not obtain a formal Sanctuary City compliance certification from AG Witt, LLC, a retroactive waiver is being sought out of an abundance of caution.

The waiver does not conflict with the intent of the Ordinance, because AG Witt, LLC is not a data broker and is not engaged in “extreme vetting.” No reasonable alternative to the City’s actions existed at the time because the President of the United States had repeatedly threatened to withhold FEMA reimbursement to states and localities engaged in “Sanctuary City” activities, and the use of the Sanctuary City Contracting Ordinance notices and affidavit would have likely invited the Trump Administration to deny FEMA reimbursement for the substantial expenses incurred by the City in responding to the pandemic. The City has already applied for approximately \$500,000 in reimbursements and the City has no alternative source for this funding.

ENVIRONMENTAL SUSTAINABILITY AND CLIMATE IMPACTS

None

RATIONALE FOR RECOMMENDATION

Based on the information described above, the waiver is being sought out of an abundance of caution.

ALTERNATIVE ACTIONS CONSIDERED

None

CONTACT PERSON

Farimah Brown, City Attorney, (510) 981-6998

Attachments:

1: Resolution



RESOLUTION NO. ##,###-N.S.

APPROVE A WAIVER OF THE SANCTUARY CITY CONTRACTING ORDINANCE'S REQUIREMENTS FOR THE CITY'S COST-RECOVERY CONTRACT WITH AG WITT, LLC

WHEREAS, Pursuant to Ordinance No. 7650-N.S. and Chapter 13.105, the Sanctuary City Contracting Ordinance, prohibits the City from doing business with a vendor that provides the United States Immigration and Customs Enforcement agency with "data broker" or "extreme vetting" services; and

WHEREAS, the City entered into a contract with AG Witt, LLC to provide valuable services related to the City's COVID -19 cost recovery efforts but a notice regarding the Sanctuary City Contracting ordinance was not included in the RFP process and the City did not obtain a signed declaration from AG Witt, LLC related to its compliance with the Ordinance; and

WHEREAS, a waiver is being sought out of an abundance of caution; and

WHEREAS, the waiver does not conflict with the intent of the Ordinance, because AG Witt, LLC has attested that is does not provide any of the services prohibited by the Ordinance; and

WHEREAS, no reasonable alternative to the City's actions existed at the time because the President of the United States had repeatedly threatened to withhold FEMA reimbursement to "Sanctuary Cities"; and

WHEREAS, the City has applied for significant reimbursements and has no alternative source for this funding; and

NOW THEREFORE, BE IT RESOLVED by the Council of the City of Berkeley that a waiver of the Ordinance's requirements for the City's cost-recovery contract with AG Witt, LLC is approved.





Office of the City Manager

CONSENT CALENDAR  
December 13, 2022

To: Honorable Mayor and Members of the City Council  
 From: Dee Williams-Ridley, City Manager  
 Submitted by: Dee Williams-Ridley, City Manager  
 Subject: City of Berkeley's 2023 State and Federal Legislative Platform

RECOMMENDATION

Adopt a Resolution approving the City of Berkeley's 2023 State and Federal Legislative Platform.

FISCAL IMPACTS OF RECOMMENDATION

Formal adoption and use of a legislative platform, by clearly indicating the City of Berkeley's priorities, may increase the City's effectiveness when competing for federal or state funding opportunities.

CURRENT SITUATION AND ITS EFFECT

On December 14, 2021, the City Council adopted Resolution 70-146-N.S., which approved the City of Berkeley's 2022 State and Federal Legislative Platform. The Proposed 2023 State and Federal Legislative Platform is similar to the prior platform and reiterates the City's priority areas related to homelessness, housing, economic development, transportation and related infrastructure, public safety, sustainability and the environment, and health, as described more fully in Exhibit A.

In addition, the platform supports the City's efforts to seek federal and state funding assistance in the areas of affordable housing and homelessness, infrastructure improvements and climate resiliency including wildfire prevention. Many of these policy and funding priorities support the City's long-term Strategic Plan goals, including providing state-of-the-art, well-maintained infrastructure, providing a financially-healthy government, creating affordable housing and housing support services, creating a resilient and safe city, and continuing to be a global leader in addressing climate change, advancing environmental justice, and protecting the environment.

BACKGROUND

The City of Berkeley's 2023 legislative platform reiterates the priorities adopted by the City Council in 2022. The City Manager and City Department Directors provided input regarding the priority areas and projects to include within the 2023 legislative platform.

In addition, the Budget and Finance Policy Committee reviewed the draft platform during its November 10, 2022 meeting.

ENVIRONMENTAL SUSTAINABILITY AND CLIMATE IMPACTS

While adopting the legislative platform will not directly impact climate or improve environmental sustainability, these items will be supported by the platform through related policy and funding priorities.

RATIONALE FOR RECOMMENDATION

A formally adopted legislative platform clearly indicates the City's policy and funding priorities, allowing for more effective, targeted advocacy for the City's needs at the state and federal level.

ALTERNATIVE ACTIONS CONSIDERED

The City could choose not to formally adopt a legislative platform. This could result in missing funding opportunities and a less clear position, voice or impact during state and federal level policy discussions and decisions.

CONTACT PERSON

Dee Williams-Ridley, City Manager, (510) 981-7000

Attachments:

1: Resolution

Exhibit A: City of Berkeley's 2023 State and Federal Legislative Platform

RESOLUTION NO. ##,###-N.S.

CITY OF BERKELEY 2023 STATE AND FEDERAL LEGISLATIVE PLATFORM

WHEREAS, the City of Berkeley has an interest in indicating to state and federal government the City's own legislative platform; and

WHEREAS, said platform can improve the City's ability to influence state and federal policy; and

WHEREAS, said platform can improve the City's effectiveness when competing for state and federal funding opportunities; and

WHEREAS, the City of Berkeley 2023 State and Federal Legislative Platform clearly outlines the City's policy and funding priorities.

NOW THEREFORE, BE IT RESOLVED by the Council of the City of Berkeley that it approves and adopts Exhibit A, the City of Berkeley's 2023 State and Federal Legislative Platform.

Exhibits

A: City of Berkeley 2023 State and Federal Legislative Platform




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## M E M O R A N D U M

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**To:** The Honorable Jesse Arreguin and Members of the Berkeley City Council  
**CC:** Dee Williams-Ridley, City Manager

**From:** Christopher Townsend, President, Townsend Public Affairs, Inc.  
 Niccolo De Luca, Vice President  
 Ben Goldeen, Federal Advocacy Manager  
 Andres Ramirez, Senior Associate  
 Carly Shelby, Legislative Associate  
 Sammi Maciel, Federal Associate

**Date:** October 28, 2022  
**Subject:** 2023 State and Federal Legislative Agenda

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Townsend Public Affairs, Inc. (TPA) has prepared this initial draft for the City of Berkeley as we move forward to adopt the City's state and federal legislative platform.

The City's legislative platform for 2023 will reflect the priorities of the Mayor, the City Council, and the people of Berkeley. The platform will include advocating for legislation, regulations, and funding that is consistent with the City's adopted goals.

Once adopted, this blueprint will be shared with key stakeholders in the State Legislature and Governor's Administration as well as Congress and the Biden Administration. However, it will be necessary to remain nimble and responsive as we move through the legislative year. Our legislative agenda will be fluid as some issues will be addressed with introduced legislation.

### **Proposed Legislative Priorities for 2023**

In addition to the onset of new laws, next year will mark massive changes in the State Legislature. The decennial redistricting process caused numerous lawmakers to move, battle for new district spots, or retire. This, coupled with the onset of another graduating class of legislators under the new term limit requirements established by Prop. 140 (1990), has prompted many legislators to not seek reelection. As such, 2023 will bring forward a new class of freshman legislators – specifically, 10 new Senators and 19 new Assembly Members.

It is expected that in 2023 the State Legislature will maintain its focus on its recent priorities, including the following topics below.

- **Affordable housing**
- **Climate change**
- **Homelessness**
- **Housing**
- **Transportation and Related Infrastructure**
- **Wildfire prevention**

**Federal and State Legislative Monitoring and Potential Action**

The following legislative priorities are being recommended for monitoring, analysis, and potential action. The City Council may choose to take a position on a piece of legislation, continue to monitor without a position, or determine if any further response is required.

TPA maintains a constantly updated matrix of state legislation and in years past have presented recommendations after session has started then providing rolling updates. TPA will monitor legislative activity in the following areas.

| <b>Homelessness</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
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| <p><u>Policy Priorities:</u></p> <ol style="list-style-type: none"> <li>1) Prevent displacement of tenants and residents</li> <li>2) Expand emergency, transitional, and permanent housing opportunities</li> <li>3) Support legislative efforts that require counties to partner with cities when receiving direct allocation of homeless funds and have a regional focus in the expenditure of state funds</li> <li>4) Support legislative efforts that will allocate State homeless dollars such as the HHAP program and others, based off city point-in-time count numbers</li> <li>5) Support legislative changes to Coordinated Entry requirements that allow local governments to prioritize based on local unsheltered needs for housing placements</li> <li>6) Support legislative efforts that have a focus on keeping people in housing, once placed, for many years which could include legislative changes to emergency shelter crisis declarations</li> </ol>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <p><u>Funding Priorities:</u></p> <ol style="list-style-type: none"> <li>1) Continue the state-funded emergency rent and utility assistance program for those at-risk of becoming homeless</li> <li>2) Expand funding for homeless services (e.g., the wrap around services necessary for transitional and permanent housing), non-congregate shelters and emergency shelters, as well as operating costs for permanent supportive housing</li> <li>3) Funding for permanent housing interventions that reduce and prevent homelessness</li> <li>4) Support for more mental health and behavioral health outreach services; incentivize County provision of In-Lieu of Services in the CalAIM system change</li> <li>5) Funding for targeted homeless prevention programs that provide financial assistance, legal and housing navigation services</li> <li>6) Funding for employment, wage-earning programs for homeless people</li> <li>7) Funding for substance abuse services</li> <li>8) Support funding efforts for non-congregate shelter such as Safe Parking programs and allow existing rent subsidies sources to be used to subsidize the rent at these programs</li> <li>9) Support funding for homeless services (e.g., the wrap around services necessary for transitional and permanent housing) and emergency shelters, as well as operating costs for permanent housing</li> <li>10) Investment in mental health treatment across the continuum of care, including efforts to support or encourage creation of additional board and care beds as well as subacute treatment and psychiatric skilled nursing facilities</li> </ol> |
| <b>Housing</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <p><u>Policy Priorities:</u></p> <ol style="list-style-type: none"> <li>1) Help promote and support housing legislation to enable the construction of more housing at various income levels; fight to repeal Article 34</li> <li>2) Support legislation that advances the creation or funding of affordable housing projects</li> <li>3) Pursue updates to the State building code, if necessary, and to promote innovative forms of housing construction</li> <li>4) Reasonable reform to CEQA to streamline development and housing opportunities</li> <li>5) Support legislative and funding efforts relating to housing preservation and acquisition and operation</li> <li>6) Support legislative efforts to protect tenants and small property owners impacted by the COVID-19 pandemic which includes residential lease terminations</li> </ol>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |

- 7) Support legislative efforts to extend the State rent relief program and to bring back the eviction moratorium/eviction protections
- 8) Support legislative efforts to reduce the voter threshold for passage of affordable housing bonds
- 9) Support legislative efforts to repeal or reform the Ellis Act and the Costa–Hawkins Rental Housing Act
- 10) Work with UC Regents to help support more opportunities for student housing
- 11) Support legislative efforts that clarify recent ADU related legislation and count ADUs towards RHNA goals
- 12) Support efforts that also encourage other forms of housing such as co-ops, land trusts, social housing, public housing, and other efforts
- 13) Seek amendments to ADU legislation to establish additional conditions/protections on ADU construction in high fire hazard zones

Funding Priorities:

- 1) Support for soft-story seismic retrofits
- 2) Funding for housing programs that advance racial equity
- 3) Funding for innovative programs to prevent displacement and address hazardous housing conditions
- 4) Enhance funding of state programs for operating costs that support permanent affordable housing for individuals with area median income up to 120 percent (which includes extremely low-income up to moderate incomes, i.e., workforce housing)
- 5) Enhance funding opportunities for existing state programs to help support bicycle and pedestrian infrastructure in connection to housing
- 6) Develop a state funding program that can support small sites acquisition and rehab (like San Francisco)
- 7) Expand funding for affordable housing on transit agency sites
- 8) Support funding for remediation of hazardous sites (to make viable for housing)
- 9) Support efforts to create more student housing funding opportunities

**Economic Development**

Policy Priorities:

- 1) Support and funding for arts and cultural spaces, arts education, and outdoor commerce
- 2) Measures providing for new tax increment financing opportunities (i.e., business district establishment or Enhanced Infrastructure Financing Districts) to support commercial districts as well as infrastructure and affordable housing
- 3) Efforts to encourage the development of sectors (and real estate sites) that align with quality job opportunities in local manufacturing, light industrial, bioscience, research and development, and other priority industry sectors. This includes environmental remediation of large industrial sites for redevelopment into research and development and/or life sciences use
- 4) Cannabis Tax reform which includes lowering taxes and tax simplification
- 5) Support efforts to address the digital divide
- 6) Support legislation relating to Online Sales Tax Distribution Formula reform
- 7) Support legislative and other efforts for programs that create pathways out of poverty, including guaranteed income programs
- 8) Support legislative efforts to create and expand public banking

Funding Priorities:

- 1) Support for small business recovery, tourism/visitor recovery and other business sectors deeply impacted by the COVID-19 pandemic
- 2) Support funding for environmental remediation at the Pacific Steel site and other toxic sites throughout the City
- 3) Support funding for the seismic retrofit and renovation public landmark buildings (Civic Center, Veterans Building and Civic Center Plaza revitalization)



- 4) Loan access for minority- and women-owned businesses who experience difficulties in accessing loans from private banks

### **Infrastructure**

#### Policy Priorities:

- 1) Support developing climate smart, resilient infrastructure to address growing climate threats and address deferred maintenance
- 2) Funding for programmatic implementation of hardware and software to ensure security
- 3) Funding for programmatic initiatives to advance use of technology in partnership with delivering cutting edge and strategic programs
- 4) Funding for upgrading and updating outdated technological infrastructure
- 5) Measures affecting funding for roads, transit, “last mile” projects and goods movement as well as alternative modes of transportation (bikes, ebikes, scooters, etc.), and support the needs of the disabled community
- 6) Support efforts to help commuters and increase public transportation
- 7) Measures that tax ride sharing networks and help reduce vehicle congestion
- 8) Measures that support data sharing of TNCs with local government
- 9) Support regional transportation projects that would provide a benefit to the City and surrounding communities
- 10) Support for public infrastructure projects including Maudelle Shirek (Old City Hall), Veterans Building, African American Holistic Resource Center, and San Pablo Park and Pool
- 11) Increasing resiliency of public infrastructure from threats of climate change
- 12) Support for public infrastructure that supports ADA access to all City facilities including buildings, Right of Way, and Parks
- 13) Support equity in infrastructure by improving City facilities and amenities in South and West Berkeley

#### Funding Priorities:

- 1) Increased funding for bicycle and pedestrian safety improvements
- 2) Increased funding for utility undergrounding
- 3) Increased funding to address the wildland urban interface and fire safety
- 4) Funding to electrify and add e-charging in public facilities and for the public fleet and to provide public e-charging stations
- 5) Funding for the Safe Routes to School program
- 6) Funding for improving, restoring, and enhancing public infrastructure including landmark sites (e.g., Maudelle Shirek)
- 7) Funding for lifting equity through an African American Holistic Resource Center
- 8) Funding to enhance and build recreation facilities to address neighborhood youth engagement and enrichment. (i.e., San Pablo Park and Pool)
- 9) Funding for cyber security and necessary, related technological improvements
- 10) Funding for riding transit especially when linked to housing

### **Public Safety**

#### Policy Priorities:

- 1) Support automated speed enforcement legislation and to seek alternatives to sworn traffic/parking enforcement
- 2) Support disaster preparedness, training, response, and resilience efforts
- 3) Criminal justice reform
- 4) Support additional efforts to help prevent violence such as mental health services, supporting street outreach teams, focusing on other individuals before they are at risk
- 5) Support efforts that reimagine public safety and incorporate community-based organizations to help address problems
- 6) Support efforts to increase peace officer accountability and provide a means of decertifying police officers who engage in serious misconduct

- 7) Support legislative efforts that seek to legalize safe crossings for pedestrian's aka 'jaywalking', allows cyclists to treat stop signs as yield signs, red lights as stop signs and yield at traffic light intersections if they're making a right-hand turn, and other related efforts
- 8) Support legislative modifications to the CalVIP program to help cities such as Berkeley
- 9) Support legislation and funding to improve fire safety

Funding Priorities:

- 1) Support funding opportunities for alternative traffic enforcement efforts
- 2) Support funding opportunities for violence prevention services
- 3) Support funding opportunities for dispatch and service redesign or expansion
- 4) Support wildland fire mitigation grants to support home hardening, vegetation management and suppression and response such as low or no-interest loan/grant programs to assist homeowners in clearing hazardous vegetation and hardening homes in high fire hazard zones
- 5) Support funding opportunities for community paramedicine and alternative destination protocols
- 6) Support funding/resources for analysis, development and implementation of road network for wildfire evacuation programs
- 7) Support funding for park access and ADA amenities
- 8) Support funding for law enforcement engagement and community-centered collaborative approaches in support of reimagining public safety efforts (Specialized Care Unit)

**Sustainability and the Environment**

Policy Priorities:

- 1) Support legislative efforts to incentivize Low-Carbon Construction: ability to and tools for incentivizing lower-carbon construction with fees from higher-carbon construction projects.
- 2) Support legislative efforts relating to electric bicycles: legislation to subsidize electric bicycle purchase, in coordination with electric vehicle subsidies.
- 3) Support legislative efforts to expand funding for electric vehicle charging in the public right of way
- 4) Measures that provide new tools and potential revenue opportunities to address illegal dumping
- 5) Measures that support regional planning for a climate change strategy which includes sea level rise
- 6) Support efforts that enhance data sharing for utility companies

Funding Priorities:

- 1) Support technological advancements that reduce our draw on paper and nonrenewable resources
- 2) Support development of software infrastructure to support current and emerging initiatives in the most sustainable way possible
- 3) Funding for enhancing capacity in Information Department to support ongoing movement towards sustainable systems that require forward thinking processes and modern technological systems
- 4) Support funding to address sea level rise along waterfront and Aquatic Park (inclusive of state lands)
- 5) Support funding for electrification and seismic retrofitting of care and shelter facilities
- 6) Support for reaching Climate Action Plan, Clean Water, and Resilience Plan goals
- 7) Support funding for Zero Waste efforts
- 8) Support funding for more EV charging stations at apartments and elsewhere

**Health**

Policy Priorities:

- 1) Support legislative efforts that will require counties to partner with cities relating to unspent Prop 63 mental health funds
- 2) Support legislative and other efforts to keep Alta Bates Hospital open and operating as an emergency and acute care hospital

- 3) Support legislative efforts that support and increase psychiatric care facilities and acute care facilities
- 4) Support legislative efforts to protect the rights of women and reproductive health
- 5) Support legislative efforts that increase services such as mental health, substance abuse, treatment beds and other services for people living in encampments and in unsheltered settings
- 6) Support legislative efforts that existing mental health and substance programming prioritize people who are referred by the homeless system
- 7) Support legislative efforts that soften data sharing constraints at the Federal level: HIPAA contains broad information-sharing allowances among “treatment providers” for the purposes of “care coordination”—issue guidance defining homeless encampment or homeless-serving teams as “treatment providers” and making it clear that information can be shared on a need-to-know basis
- 8) Support legislative efforts related to oversight of guardians, receivership, and other forms of care

Funding Priorities:

- 1) Support funding and regulatory changes to advance for emergency readiness, particularly in relation to public health
- 2) Support funding efforts relating to mental health treatment, substance abuse treatment, and other related services

**Miscellaneous**

Policy Priorities:

- 1) Support legislative efforts to make changes to the Brown Act to help encourage greater public participation and further encourage online meetings
- 2) Support legislative efforts to address the way ballot measures are formulated, worded, and advertised
- 3) Support funding for emergency readiness, particularly in relation to public health

**One Time State and Federal Funding Priorities for “Member Request” Consideration**

As we have seen at both the Federal and State level, new initiatives and various funding opportunities have taken form over the last year. This also includes both legislative provisions that direct approved funds to be spent on specific projects, sometimes referred to as “Member Requests” or “Congressionally Directed Spending”.

As it relates to state and federal “Member Requests”/ “Congressionally Directed Spending”, our recommended strategy is for the adopted Legislative Platform to include a handful of funding buckets that capture various project themes. This provides the City with the highest amount of flexibility as it is important to not only reflect the priorities of the state and federal lawmakers who sponsor these requests, but also to ensure that the City’s projects fit the eligibility requirements of the various state and federal funding sources.

These buckets include:

- *Affordable Housing/Homelessness* which could include funding to reduce unsheltered homelessness including outreach and mental health services, non-congregate shelter, housing subsidies and gap funding for affordable housing projects including new construction and acquisition and rehabilitation of housing.
- *Infrastructure Improvements* which could include funding for enhancements to public infrastructure including landmark sites, active transportation enhancements which includes bicycle and pedestrian upgrades at various city locations such as the Telegraph Shared Street project.
- *Climate Resiliency* which could include funding for urban forestry interface, wildfire prevention, cooling centers, HVAC upgrades, and other related items.

**Process for Reporting/Next Steps**

In addition to weekly legislative updates and other communications we send to the City Team, TPA suggests verbal reports to the City Council when the State Legislature is on recess. For example, we would report out in April while they are on Spring Recess, during July while they are on Summer Recess, and in November or December when Session has concluded.

Due to the ever-changing nature of legislation in Sacramento and Washington, TPA will provide monthly updates which can be shared with the City Council.



Office of the City Manager

CONSENT CALENDAR  
December 13, 2022

To: Honorable Mayor and Members of the City Council

From: Dee Williams-Ridley, City Manager

Submitted by: Paul Buddenhagen, Deputy City Manager

Subject: Adopt a Resolution Authorizing the City Manager to Execute a License Agreement with East Bay Community Energy for Electric Vehicle Fast Charging Stations on Municipal Property

RECOMMENDATION

Adopt a Resolution authorizing the City Manager or their designee to execute a Master Site License Agreement with East Bay Community Energy (EBCE) for the installation and operation of publicly-available electric vehicle (EV) direct current fast charging stations on municipal property.

FISCAL IMPACTS OF RECOMMENDATION

The Master Site License Agreement (MSLA) and the siting of charging stations will have no costs to the City's General Fund or other City funds. EBCE will fully fund the cost of the fast charging stations and their installation, operation, and maintenance on municipal property. Staff time will be required for review and approval of a Notice to Proceed prior to the charging station development at each site. The City may see an increase in utility user tax (UUT) revenue as a result of increased electricity use for fueling cars. EBCE estimates that there will be an additional \$400,000-\$600,000 in UUT proceeds annually over next 2-3 years due to existing City policies, and up to \$1.3 million per year by 2025 if Berkeley meets its EV adoption goals.

CURRENT SITUATION AND ITS EFFECTS

This proposal seeks authorization for the City Manager or their designee to execute a Master Site License Agreement (MSLA) with EBCE for the development of publicly available EV direct current fast charging stations on municipal property. As directed by Council Resolution 70,216-N.S. (February 8, 2022), staff has been working with EBCE to identify municipal parking lots and garages, in areas of dense concentrations of multifamily dwelling units, to serve as sites for EBCE fast charging stations.

Staff are negotiating a draft MSLA that identifies these locations as potential charging station sites:

- 4<sup>th</sup> Street and University Avenue (parking stalls on the east and west side of 4<sup>th</sup> Street under the University Avenue overpass)

- Parking lot at the southeast corner of Adeline Street and Alcatraz Avenue<sup>1</sup>

EBCE requires each project site to have a standard design goal of 10 dual-port fast charging stations, requiring approximately 22-23 parking spaces to accommodate charging station spaces (a charging hub), ADA accessibility for the spaces, and space for transformers or other ancillary equipment.

Both of the potential locations in Berkeley can meet EBCE requirements. Both locations are located in areas identified for investment for equitable electric mobility within the Berkeley Electric Mobility Roadmap and as Equity Priority Areas designated by the Transportation Division. Both locations also have sufficient other nearby municipal on-street parking so that no parking constraints in either area are anticipated as a result of developing these fast charging spaces. Once the MSLA is executed, EBCE will conduct detailed engineering assessments, secure project financing, and work with PG&E to provide the additional utility service required for EV charging. A Notice to Proceed, detailing the site design, charging stall descriptions, construction coordination schedule, and site access hours for each site must be still be agreed upon and executed by the City Manager or designee prior to charging hub development.

City owned parking garages, including the Center Street Garage and Telegraph Channing Garage, were also considered but have not been included due to the bond obligations for parking revenue as well as space, electrical, and access constraints.

Key features of the MSLA include:

- A term of 15 years in which EBCE would use designated municipal parking spaces to install and operate fast charging stations, with removal and restoration of the site at the end of the term, or an extension if authorized by Council
- EBCE will pay for the equipment, installation, operation, and maintenance of the charging stations
- The City will provide the parking spaces used for the charging hubs
- EBCE will be responsible for all electricity and communication costs of the charging stations
- Rates for use of the charging stations will be set by EBCE and may change over time at the discretion of EBCE (the City has representation on the EBCE Board of Directors, which will be involved in rate setting)
- EBCE may place signage at the sites for the charging hubs
- The City will issue a Notice to Proceed for each charging hub site before development begins

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<sup>1</sup> Resolution No. 66,829-N.S. (2014) allows the City to allocate up to 40% of the total spaces at this lot to long-term parking exclusively for tenants of 3271 Adeline Street/1835 Alcatraz Avenue. This allocation is currently being used by Satellite Affordable Housing Associates (SAHA).

Creating public EV fast charging hubs is consistent with the Berkeley Electric Mobility Roadmap and is a Strategic Plan Priority Project, advancing our goal to be a global leader in addressing climate change, advancing environmental justice, and protecting the environment. Partnership with EBCE, Berkeley's public power provider, could provide cost-effective public fast charging stations at locations that prioritize equity, providing charging in proximity to multifamily housing and in areas that have less access to transportation options and/or are more highly impacted by pollution, poverty, and other socioeconomic factors.

### BACKGROUND

EBCE is building a network of EV fast charging hubs on behalf of its customers and Joint Power Authority (JPA) member cities. These public fast charging stations will help EBCE's service area meet statewide mandates for zero-emission vehicles and help meet the needs of current and future EV drivers, especially renters who do not have access to at-home charging.

As directed by Resolution 70,216-N.S. (February 8, 2022), staff has been working with EBCE to identify municipal parking lots and garages, in areas of dense concentrations of multifamily dwelling units, to serve as sites for EBCE fast charging stations. EBCE had originally requested non-binding terms that required an annual service fee from the City of \$100,000 per fast charging hub, resulting in annual costs of \$200,000-\$300,000 to the City. This expense may have been offset, and potentially exceeded over time, by a site license fee, paid by EBCE to the City when the project net operating income exceeded EBCE's cost to service the debt.

EBCE has since adjusted its original plans and financing mechanism. Rather than developing the charging hubs directly, with payments from JPA members, EBCE is pursuing private infrastructure capital through a tolling partnership available to the utility industry. EBCE now aims to develop 40-50 public fast charging hubs by 2030 through a tolling structure contract with a counterparty who will finance, construct, and maintain the charging stations over a 10-year period for a fixed monthly payment from EBCE at no cost to the City.

This new model removes risk, uncertainties, and expenses for the City. Original calculations of revenues from EBCE's Site License fees were based on Low Carbon Fuel Standards (LCFS) credit pricing above \$160; in the intervening time LCFS credits have dropped to \$60-70 average sales, which reduces the revenue projections for the chargers by \$1.2M over 10 years. As a result, the City's estimated total revenues of \$50,000 to \$851,000 over the agreement term in EBCE's original proposal would be completely subsumed and the City would not recover the investment made in the project.

EBCE's new model eliminates the capital request to the City, while still delivering the benefit in the form of beginning a robust charging network in Berkeley and across the

County. EBCE will be requesting approval from their Board of Directors to sign contracts with development partners, with an overall program cost not to exceed \$3M/year or \$30M over their 10-year agreements. EBCE hopes not to spend \$30M to provide this charging infrastructure, but is setting expectations with their Board that this program may not earn returns/profits as the market is volatile, costs are shifting, and EBCE wants the flexibility to deliver low cost charging to all customers, which could include discounts for low income customers that would reduce project revenues. Any profits generated by EV charging hubs will be delivered back to EBCE customers and communities through lower electricity rates and/or local programs investments in further electrification projects.

In order to include Berkeley sites as Phase I charging hubs, the City needs to execute the MSLA by the end of the year, so that EBCE can attract private infrastructure capital through a tolling partnership. Hayward and Pleasanton City Councils both authorized their city managers to authorize their MSLAs with EBCE on November 1, 2022.

As of August 2022, there were 184 publicly-available Level 2 EV charging ports and 22 direct current fast charge (DCFC) ports in Berkeley. Approximately 7.5% of registered cars in the community were electric. These values have doubled in the last four years; in late 2018 there were 105 publicly-available EV charging ports and nearly 4% of registered personal vehicles were electric.

In order to meet the Berkeley Electric Mobility goals of increasing the share of light-duty EVs registered in Berkeley to 25% by 2025, 55% by 2030, and 100% by 2045, more public charging is needed to ensure that all residents, especially renters without access to at-home charging, have convenient refueling options. Berkeley's goal is to install at least 100 public DCFC ports by 2025. Partnering with EBCE to site and develop DCFC hubs could result in approximately 40 new public DCFC ports within Berkeley in the next 1-3 years.

#### ENVIRONMENTAL SUSTAINABILITY AND CLIMATE IMPACTS

According to Berkeley's 2020 greenhouse gas emissions (GHGs) inventory, 46% of Berkeley's emissions result from transportation. In addition to increasing the use of public transportation, walking, biking and scooters, replacing internal combustion engine cars with EVs is necessary to reduce transportation emissions. Partnering with EBCE to create new EV direct current charging stations in Berkeley advances equity in line with Berkeley's Climate Action Plan, Electric Mobility Roadmap, and Climate Emergency Declaration. Siting charging in equity priority areas in proximity to multifamily housing and the inclusion of prevailing wage and other labor standards in the MSLA supports the Just Transition to becoming a Fossil Fuel Free City.

#### RATIONALE FOR RECOMMENDATION

In order to include Berkeley sites as Phase I charging hubs, the City needs to execute the MSLA by the end of the year. Partnering with EBCE to site and develop DCFC hubs



could result in approximately 40 new public DCFC ports within Berkeley in the next 1-3 years without cost to the City.

ALTERNATIVE ACTIONS CONSIDERED

None. The City lacks funding, expertise, and staffing develop and operate this scale of fast charging stations. The City could wait for the private market to build fast-charging infrastructure at scale. However, this may not materialize in the timeframe needed to meet state and local climate action goals. Private sector owned fast-charging will not necessarily be sited in convenient or equitable locations that serve renters in multifamily housing. Staff has concentrated on protecting the City's real assets and interests, including maximizing community reinvestment and benefits, while negotiating the MSLA.

CONTACT PERSON

Sarah Moore, Sustainability Program Manager, OESD, Planning, (510) 981-7494  
Farid Javandel, Deputy Director of Transportation, Public Works, (510) 981-7057

Attachments:

- 1: Resolution
- 2: Resolution Establishing City Process for Siting and Developing Public Electric Vehicle DC Fast Charging Hubs (Resolution No. 70,216-N.S.)

RESOLUTION NO. ##,###-N.S.

RESOLUTION AUTHORIZING THE CITY MANAGER TO EXECUTE A LICENSE AGREEMENT WITH EAST BAY COMMUNITY ENERGY FOR PUBLIC ELECTRIC VEHICLE FAST CHARGING STATIONS ON MUNICIPAL PROPERTY

WHEREAS, the State of California has a goal of 7.5 million zero emission vehicles (ZEVs) on California roads and approximately 1.2 million public and shared chargers to meet the fueling demands of those vehicles by 2030; and

WHEREAS, on August 25, 2022, the California Air Resources Board approved a rule requiring 100 percent of new car sales in California to be ZEVs by 2035; and

WHEREAS, the Berkeley Electric Mobility Roadmap targets the development of at least 100 public DC fast charging ports in Berkeley by 2025 to support carbon neutrality by 2045; and

WHEREAS, there are currently 22 DC fast charging ports in Berkeley; and

WHEREAS, the Berkeley Electric Mobility Roadmap includes developing public EV charging on municipal property through partnerships with third-party charging providers as a strategy to achieve zero net carbon; and

WHEREAS, East Bay Community Energy (EBCE), the not-for-profit public power agency which serves Berkeley, aims to deploy 40-50 charging hubs throughout its service area by 2030; and

WHEREAS, in their first phase of development, EBCE is seeking to develop two fast charging hubs in Berkeley, each providing approximately 20 DC fast charging ports, for a total of about 40 new DC fast charging ports; and

WHEREAS, EBCE's fast charging hubs would be installed, operated, and maintained by EBCE on municipal property at no cost to the City of Berkeley; and

WHEREAS, any revenues generated by EBCE's fast charging hubs would be reinvested in programs, including transportation electrification, or used to lower rates, in Berkeley and the other member jurisdictions; and

WHEREAS, additional EV charging infrastructure is needed in Berkeley to meet the current and future needs of residents, particularly renters, and visitors.

NOW THEREFORE, BE IT RESOLVED by the Council of the City of Berkeley that the City Manager or their designee is authorized to execute a Master Site License

December 13, 2022

Agreement with East Bay Community Energy (EBCE) for publicly available EV fast charging stations on municipal property.

## RESOLUTION NO. 70,216-N.S.

RESOLUTION ESTABLISHING CITY PROCESS FOR SITING AND DEVELOPING  
PUBLIC ELECTRIC VEHICLE DC FAST CHARGING HUBS

WHEREAS, the world is facing a grave climate emergency, requiring municipalities to rapidly and justly transition towards a zero-carbon economy by 2030; and

WHEREAS, 60% of Berkeley's sector-based greenhouse gas (GHG) emissions as of 2019 result from the transportation sector, and in addition to public transportation, walking, biking and scooters, replacing internal combustion vehicles with electric vehicles will be a major factor in reducing emissions; and

WHEREAS, transitioning Berkeley's economy will require significant investment on the part of both government and residents and low-carbon technology, including electric vehicle charging infrastructure, which is underdeveloped in Berkeley and can often be out of reach for many households; and

WHEREAS, the primary hurdle to widespread electric vehicle adoption moving forward will be the availability of reliable and convenient fast charging infrastructure for residents who are renters who do not have access to charging at home and commuters, visitors and businesses; and

WHEREAS, City's Electric Mobility Roadmap and Climate Action goals provides a goal of having 15,000 electric light-duty vehicles registered in Berkeley by 2025, which according to California Energy Commission modeling would require a significant investment in public direct current fast charging (DCFC) ports; and

WHEREAS, Alameda County's default public power provider, East Bay Community Energy (EBCE), is proposing a public-public partnership with the City to develop and operate up to three DCFC hubs, that EBCE will own and operate, across Berkeley in areas with a dense concentration of multifamily housing that are near amenities desired by drivers; and

WHEREAS, the proposed public-public partnership would provide Berkeley residents and visitors with state-of-the-art fast charging infrastructure, enabling the transition from internal combustion vehicles for those who were not early adopters and reducing GHG emissions from the transportation sector; and

WHEREAS, EBCE and the City of Berkeley have developed the proposed non-binding term sheet describing how EBCE would develop, operate and market up to three DCFC hubs under a Service Agreement; and

WHEREAS, in parallel EBCE will negotiate a Site License Agreement with the City providing EBCE with access and use of public land for EBCE's DCFC hubs, and once the project is generating revenues above EBCE's annual project costs, EBCE will share revenue with the City via the Site License Agreement; and

WHEREAS, the Site License Agreement revenue payments and Utility Users Tax proceeds, resulting from increased electricity consumption as a transportation fuel at EBCE’s DCFC hubs, can provide the City of Berkeley with new revenue sources; and

WHEREAS, it is in the public interest for the City to proceed to negotiate a Service Agreement with EBCE as generally proposed by the non-binding term sheet.


NOW THEREFORE, BE IT RESOLVED by the Council of the City of Berkeley that the City Manager or their designee is authorized to negotiate a Service Agreement with EBCE subject generally to the non-binding terms included in the attached term sheet and any subsequent amendments or modifications thereto, as the City and EBCE may deem appropriate, and that execution of the Service Agreement is contingent upon Council allocation of funding for the City’s Service Fee as part of the FY 2023-2024 budget process and subsequent adoption of the Service Agreement by Council.

The foregoing Resolution was adopted by the Berkeley City Council on February 8, 2022 by the following vote:

Ayes: Bartlett, Droste, Hahn, Harrison, Kesarwani, Robinson, Taplin, Wengraf, and Arreguin.

Noes: None.

Absent: None.

  
\_\_\_\_\_  
Jesse Arreguin, Mayor

Attest:   
\_\_\_\_\_  
Mark Numainville, City Clerk





Office of the City Manager

CONSENT CALENDAR  
December 13, 2022

To: Honorable Mayor and Members of the City Council  
 From: Dee Williams-Ridley, City Manager  
 Submitted by: Eleanor Hollander, Economic Development Manager  
 Subject: Interactive Kiosk Experience (IKE) Smart City Kiosk Locations, Phase Two

RECOMMENDATION

Adopt a Resolution, pursuant to *Ordinance No. 7,626-N.S. Franchise Agreement with IKE Smart City, LLC* approving 22 locations for the second phase of deployment of IKE Smart City Kiosks in Berkeley (Attachment 1).

SUMMARY

The total number of proposed IKE Kiosk locations is 22; 17 are in within the Downtown, Telegraph, Gilman, and University commercial business districts, and 5 are in gateway commercial district locations (Attachment 2).

FISCAL IMPACTS OF RECOMMENDATION

With 22 Phase Two IKE kiosks deployed, in addition to the operational 9 IKE kiosks from Phase One (Attachment 3), preliminary projections anticipate approximately \$829,374 in general fund revenue will accrue annually to the City of Berkeley according to the *IKE Smart City LLC Franchise Agreement* executed in 2019 (Attachment 4).

CURRENT SITUATION AND ITS EFFECTS

Interactive Kiosk Experience (IKE) is a wayfinding smart city technology platform displayed on a publicly accessible screen or 'kiosk' in the public right of way. In addition to Berkeley, IKE Kiosks have been successfully installed in 15 cities across the country including Denver, Atlanta, Miami, Houston, Detroit, Tempe, and Baltimore. Each interactive kiosk consists of dual-sided touchscreens that provide access to wayfinding resources to navigate the city, including real-time transit information, directory listings for local businesses and non-profit organizations, social services and civic resources, 311, and emergency (911) phone calls. The IKE kiosk network is installed, operated, and maintained wholly by IKE Smart City LLC at no direct cost to the City of Berkeley. The IKE kiosk platform is supported through advertising revenues, and a portion of the revenues generated from the kiosk network are shared back to the city and codified in a 15 years-long franchise agreement (Attachment 4).

On October 30, 2018, the Berkeley City Council adopted Ordinance No. 7,626-N.S. granting a Franchise Agreement to IKE Smarty City, LLC, and modified two sections of the Berkeley Municipal Code to exempt IKE kiosks from regulations of signage and encroachments of the public right-of-way.<sup>1</sup> Visit Berkeley, Berkeley's local destination marketing organization and convention and visitor bureau, has partnered with IKE Smart City, LLC to curate the city-directed and community content on the kiosks in Berkeley. City-directed and community content is provided at no cost to the city on 2 of the 8 advertising slides or "flips" which are displayed when the kiosk is in passive mode.

The City of Berkeley's 2019 Franchise Agreement with IKE Smart City permits thirty (31) IKE digital kiosks throughout the City of Berkeley at major intersections, key points of interest, and heavily foot-trafficked areas. In 2018, the City Council approved 15 locations as part of phase one of kiosk deployment. Of the 15 approved locations; 9 kiosks were installed and the remaining 6 locations were deemed infeasible and were abandoned (Attachment 3). As a result, a total of 22 remaining kiosk locations are proposed. Table 1 below summarizes the installation status of both phase one and phase two.

Table 1. IKE Smart City Kiosk Count & Installation Status

|                                                               |           |
|---------------------------------------------------------------|-----------|
| <b>Total Kiosks Approved per the 2019 Franchise Agreement</b> | <b>31</b> |
| <b>Phase One (I) - Completed</b>                              |           |
| Locations approved                                            | 15        |
| Locations deemed infeasible*                                  | 6         |
| Kiosks installed as of November 2022                          | 9         |
| Remaining locations available                                 | 22        |
| <b>Phase Two (II)</b>                                         |           |
| Locations proposed                                            | 22        |
| Kiosks to be installed                                        | 22**      |
| Remaining locations available                                 | 0         |

\*Infeasible Phase I locations are indicated in gray on *Attachment 3: IKE Smart City Kiosk Installed Locations (Existing & Infeasible), Phase I*. They include three in Downtown Berkeley at the intersections of Shattuck & Berkeley Way, Shattuck & Allston, and Center & Milvia, two in the Telegraph area at the intersections of Dana & Bancroft and Telegraph & Bancroft, and one in the Lorin District at the Ed Roberts Campus entrance at the intersection of Adeline & Woolsey.

\*\*Per the 2019 Franchise Agreement, (page 9, section 8, item L) *Phased Deployment* "Grantee [IKE Smart City] shall conduct a phased deployment of kiosks such that after the first phase of fifteen (15) units are installed no additional units may be installed for six (6) months. The second phase may include up to sixteen (16) kiosks." No more than 31 kiosk units (total) shall be installed in the City of Berkeley.

<sup>1</sup> *Facilitation of the Installation of IKE Smart City Kiosks; Amending Chapters 20.16 and 16.18 of the Berkeley Municipal Code*, Item 30, Berkeley City Council Meeting, October 30, 2018.



*Determining Kiosk Locations – Phase II*

In July through September 2022, the Office of Economic Development (OED), Visit Berkeley, and IKE Smart City conducted community outreach meetings to determine the specific locations for the second phase of deployment of kiosks in the Downtown, Telegraph, Gilman, University, Fourth Street, Solano, North Shattuck and Elmwood commercial districts.<sup>2</sup> As a result of the meetings, and attendant community outreach, the proposed remaining kiosk locations are listed below and included on a citywide map (Attachment 2) along with the approved and installed kiosks from phase one (Attachment 3).

Table 2. IKE Smart City Kiosk Proposed Phase II Locations

| <b>Kiosk Number</b> | <b>Intersection/Location</b> | <b>Commercial District</b> | <b>Council District</b> |
|---------------------|------------------------------|----------------------------|-------------------------|
| 1                   | Gilman St/Fifth St           | Gilman                     | 1                       |
| 2                   | Gilman St/Eighth St          | Gilman                     | 1                       |
| 3                   | Gilman St/San Pablo Ave      | Gilman                     | 1                       |
| 4                   | University Ave/San Pablo Ave | University Ave             | 1&2                     |
| 5                   | University Ave/Sixth St      | University Ave             | 1&2                     |
| 6                   | University Ave/Addison St    | University Ave             | 1&2                     |
| 7                   | University Ave/Sacramento St |                            | 1&2                     |
| 8                   | Ashby Ave/San Pablo Ave      |                            | 2                       |
| 9                   | Ashby Ave/Sacramento St      |                            | 2                       |
| 10                  | Alcatraz Ave/Sacramento St   |                            | 2                       |
| 11                  | Ashby Ave/Telegraph Ave      |                            | 3&8                     |
| 12                  | Shattuck Ave/Blake St        | Downtown                   | 4                       |
| 13                  | Shattuck Ave/Haste St        | Downtown                   | 4                       |
| 14                  | Shattuck Ave/Addison St      | Downtown                   | 4                       |
| 15                  | Shattuck Ave/University Ave  | Downtown                   | 4                       |
| 16                  | Shattuck Ave/Hearst Ave      | Downtown                   | 4                       |
| 17                  | Oxford St/Hearst Ave         | Downtown                   | 4                       |
| 18                  | University Ave/Oxford St     | Downtown                   | 4                       |
| 19                  | University Ave/Milvia St     | Downtown                   | 4                       |
| 20                  | University Ave/Bonita Ave    | Downtown                   | 4                       |
| 21                  | Telegraph Ave/Blake          | Telegraph                  | 7&8                     |
| 22                  | Durant Ave/Bowditch St       | Telegraph                  | 7                       |

City Council approval of the above proposed locations would allow IKE Smart City to proceed to apply for and obtain engineering permits from the City's Public Works department, and subsequently to proceed with kiosk installation. Given the complexity

<sup>2</sup> Berkeley City Council, [Off Agenda Memo](#), *IKE Smart City Kiosks - Proposed Phase 2 Locations for Fulfilment of Executed Franchise Agreement (2019)*, July 25, 2022.

and analysis required for each location, it is difficult to estimate an exact date for installation in each case.

### BACKGROUND

IKE is an interactive wayfinding and communication platform created to help cities and business improvement districts connect with citizens and visitors in new dynamic and engaging ways. Through a system of durable touchscreen displays containing a suite of applications including real-time transit information and wayfinding, IKE aims to enhance the pedestrian experience in the City of Berkeley. IKE generates revenues through digital advertising and is a self-sustaining platform that provides a meaningful recurring revenue stream to the city, and does not require any capital or operational investment from the City.

The first IKE kiosk network was deployed in Denver in 2016 through a partnership with the Downtown Denver Partnership with the goal to develop an interactive wayfinding and city communication tool dedicated to supporting the local business economy. Since then IKE has continued to evolve its capabilities to benefit convention and visitor bureaus including Visit Berkeley. By presenting relevant information along pedestrians' path, it allows cities, business improvement districts and destination marketing organizations to connect with visitors and residents in interactive ways, utilizing smart city technologies. The implementation of the IKE Kiosks in Berkeley is a Strategic Plan Priority Project, advancing two of the city's Strategic Plan goals; *to provide state-of-the-art, well-maintained infrastructure, amenities, and facilities* and *to foster a dynamic, sustainable, and locally-based economy*.

The IKE kiosk screens are LED displays that utilize ambient light sensor technology that automatically dims and brightens the screens in response to environmental factors (e.g. direct sunlight) and provides high contrast picture quality. Further, the kiosks require a low electric power draw to operate, and IKE continually updates and refreshes both the kiosk hardware and software components to ensure the kiosks are adequately maintained. The IKE kiosks are fully compliant with the Americans with Disability Act (ADA) and have a robust multi-lingual capability that offers the following information and features for users in up to 100 languages:

- Directories of local restaurants, stores, and other businesses
- Listings of current local events and attractions
- Turn-by-turn directions, with mobile integration capability, known as "mobile hand off" to transfer directions to a cell phone or tablet (if selected by a kiosk user)
- Real-time information on public transportation, ride sharing services, bike sharing station locations
- Public safety announcements
- Weather updates
- Wi-Fi hotspot
- Job Board, advertising current employment postings

- Public feedback opportunities through public polling or ‘questions of the week’
- Shelter and city services information
- Emergency Service (911) call capability

### *Community Outreach*

Staff collaborated with Visit Berkeley, IKE, commercial district associations, and other stakeholder groups to conduct outreach to members of the community to propose appropriate locations and districts for the kiosks. Community outreach was conducted in accordance with the 2019 *IKE Smart City LLC Franchise Agreement: Section 8(A)(B) Permitting process and Prohibited Locations* (Attachment 4). Staff from the City’s Office of Economic Development hosted two community meetings in each commercial district where the kiosks are proposed to be installed; the community meeting schedule is summarized in Table 3 below. The meetings provided business owners, property owners, residents, and other stakeholders the opportunity to give input on the most appropriate locations for the second phase of kiosk locations. In summary, the majority of the feedback indicated that the most appropriate locations for the IKE kiosks were in the larger commercial business districts as well as districts with major arterial streets.

Table 3. Community Outreach Schedule IKE Phase II, Summer 2022

| <b>District</b>   | <b>Meeting Location</b>                      | <b>Date</b>       |
|-------------------|----------------------------------------------|-------------------|
| Downtown Berkeley | Zoom Meeting ID: 874 1913 5486               | July 7, 2022      |
| University Avenue | Zoom Meeting ID: 858 2560 0114               | July 7, 2022      |
| North Shattuck    | Zoom Meeting ID: 854 6286 8456               | July 7, 2022      |
| Elmwood           | Former Espresso Roma Café, 2960 College Ave  | July 7, 2022      |
| Telegraph         | The Graduate, 2600 Durant Ave                | July 8, 2022      |
| Solano Ave        | Solano Oriental Rug Gallery, 1849 Solano Ave | July 8, 2022      |
| Fourth Street     | Zoom Meeting ID: 834 6400 2234               | July 8, 2022      |
| Gilman            | Zoom Meeting ID: 851 5480 6615               | August 4, 2022    |
| Elmwood           | Zoom Meeting ID: 849 9933 6078               | August 24, 2022   |
| Telegraph         | Zoom Meeting ID: 849 1888 5857               | August 24, 2022   |
| University Avenue | Zoom Meeting ID: 883 3105 7387               | August 25, 2022   |
| Downtown Berkeley | Zoom Meeting ID: 842 9658 3340               | August 31, 2022   |
| Gilman            | Zoom Meeting ID: 891 8686 5266               | September 7, 2022 |

### *Proposed Locations*

Attachment 2 includes maps of the proposed locations for installation of IKE Kiosks in Downtown, Telegraph, Gilman, and University commercial districts as well as five additional locations. Proposed kiosk locations were selected based on the following criteria:

- In the public right-of-way / public property.
- Commercial areas with active frontages and high pedestrian volume.
- Maintain sidewalk accessibility, including a minimum path of travel.

- Proximity to power sources and avoiding conflict with other utilities.
- Avoiding conflict with transportation resources such as bus shelters or bicycle share stations.
- Proximity to public amenities, civic buildings, and arts and cultural institutions and venues.

Locations were refined based on feedback from community members, neighboring business and property owners, input gathered during the community meetings (Table 3), feedback from district Councilmembers, and other direct outreach conducted by city staff, Visit Berkeley and IKE Smart City through phone calls, in person site meetings, and electronic mail.

#### ENVIRONMENTAL SUSTAINABILITY

IKE Kiosks will feature real time transit information which will reinforce the City's commitment to sustainable transportation services.

#### RATIONALE FOR RECOMMENDATION

Pursuant to Ordinance No. 7,626-N.S. granting a Franchise Agreement with IKE Smart City, LLC, the City of Berkeley will permit the installation of up to thirty-one (31) IKE digital kiosks throughout the City of Berkeley at major intersections, key points of interest and heavily foot-trafficked areas. The agreement requires the locations for the second phase of deployment of IKE Smart City Kiosks be submitted to the City Council on the consent calendar for approval after conducting the requisite community outreach stipulated in the 2019 *IKE Smart City LLC Franchise Agreement: Section 8(A)(B) Permitting Process and Prohibited Locations* (Attachment 4).

#### ALTERNATIVE ACTIONS CONSIDERED

Several other locations throughout Berkeley were considered; including placements in the Solano, North Shattuck, Fourth Street, Elmwood and Northside commercial districts, but were rejected due to negative community feedback.

#### CONTACT PERSON

Kieron Slaughter, Office of Economic Development, 510-981-2490

#### Attachments:

- 1: Resolution: Identifying Phase II locations for IKE Kiosks in Berkeley
- 2: IKE Smart City Kiosk Proposed Locations, Phase II
- 3: IKE Smart City Kiosk Installed Locations (Existing & Infeasible), Phase I
- 4: IKE Smart City LLC Franchise Agreement, 2019

**Attachment 1**

**RESOLUTION NO. –N.S.**

**IDENTIFYING 22 REMAINING LOCATIONS FOR IKE KIOSKS IN BERKELEY IN ACCORDANCE WITH THE 2019 IKE SMART CITY LLC FRANCHISE AGREEMENT**

WHEREAS, per Ordinance No. 7,626-N.S. the city executed a franchise agreement (2019) with IKE Smart City LLC to install and operate wayfinding kiosks in Berkeley consisting of 31 kiosks on public sidewalks and other public property, for no less than 15 years; and

WHEREAS, Visit Berkeley (formerly the Convention and Visitors Bureau) entered into a contract with IKE Smart City LLC to install and operate wayfinding kiosks; and

WHEREAS, the kiosks provide various public benefits, including real-time transportation information, job listings for Berkeley residents and youth, promotion of local retail, city service information, including public health and safety information and notifications; and

WHEREAS, nine wayfinding kiosks are currently located on the City’s public rights of way and are generating revenue for Visit Berkeley and the City of Berkeley; and

WHEREAS, community outreach was conducted in 2022 accordance with the *IKE Smart City LLC Franchise Agreement: Section 8(A)(B) Permitting Process and Prohibited Locations* to identify 22 remaining appropriate locations known as Phase II, and are listed below:

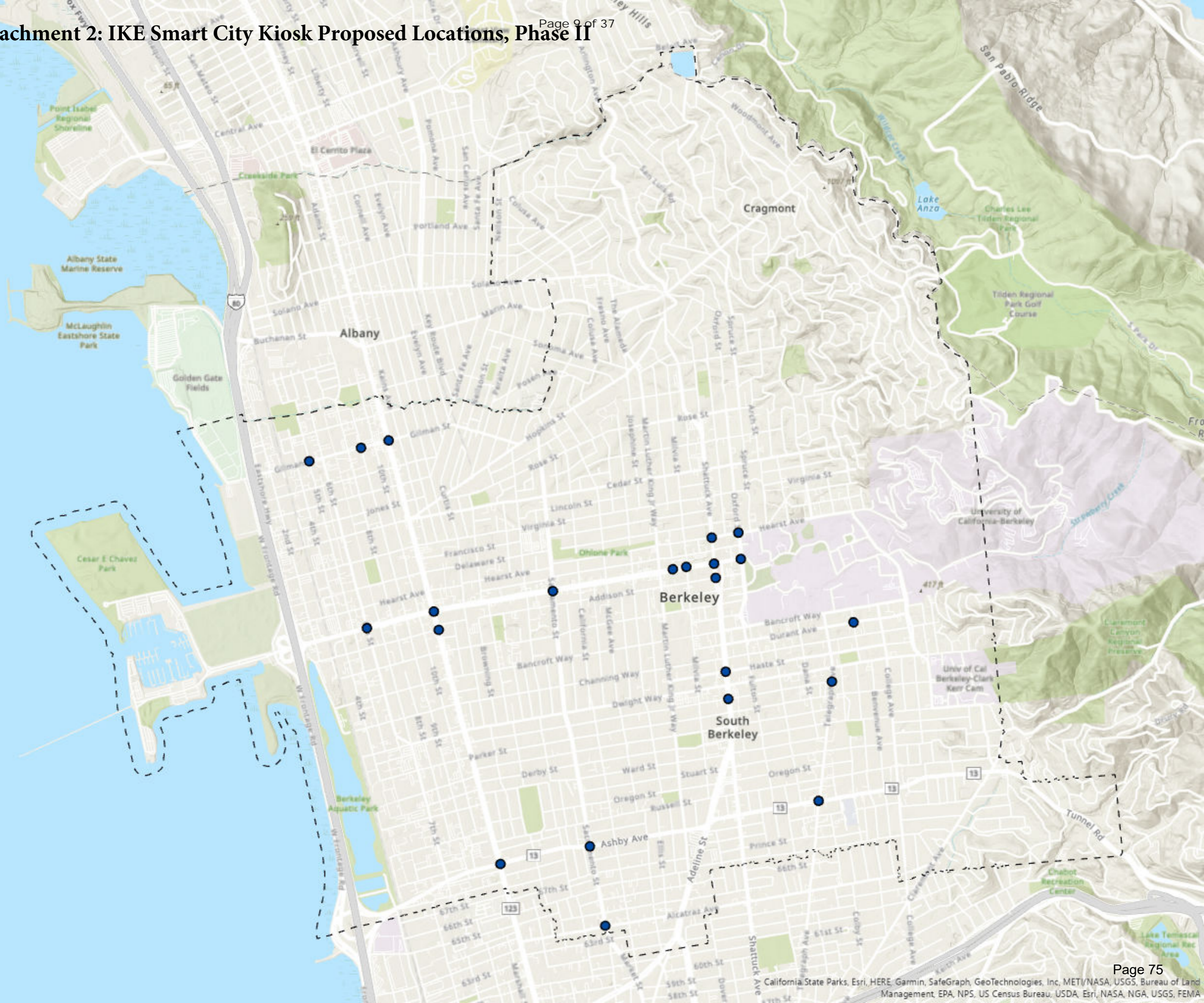
**IKE Smart City Kiosk Phase II Locations**

| <b>Kiosk Number</b> | <b>Intersection/Location</b> |
|---------------------|------------------------------|
| 1                   | Gilman St/Fifth St           |
| 2                   | Gilman St/Eighth St          |
| 3                   | Gilman St./San Pablo Ave     |
| 4                   | University Ave/Sacramento St |
| 5                   | University Ave/San Pablo Ave |
| 6                   | University Ave/Sixth St      |
| 7                   | University Ave/Addison St    |
| 8                   | Ashby Ave/San Pablo Ave      |
| 9                   | Ashby Ave/Sacramento St      |
| 10                  | Alcatraz Ave/Sacramento St   |
| 11                  | Ashby Ave/Telegraph Ave      |
| 12                  | Shattuck Ave/Blake St        |

| <b>Kiosk Number</b> | <b>Intersection/Location</b> |
|---------------------|------------------------------|
| 13                  | Shattuck Ave/Haste St        |
| 14                  | Shattuck Ave/Addison St      |
| 15                  | Shattuck Ave/University Ave  |
| 16                  | Shattuck Ave/Hearst Ave      |
| 17                  | Oxford St/Hearst Ave         |
| 18                  | University Ave/Oxford St     |
| 19                  | University Ave/Milvia St     |
| 20                  | University Ave/Bonita Ave    |
| 21                  | Telegraph Ave/Blake St       |
| 22                  | Durant Ave/Bowditch St       |

NOW THEREFORE, BE IT RESOLVED by the Council of the City of Berkeley that the remaining twenty-two locations for IKE Kiosks pursuant to the *IKE Smart City LLC Franchise Agreement* (2019) are identified and approved for planning and installation.







## Berkeley IKE – Phase II Locations

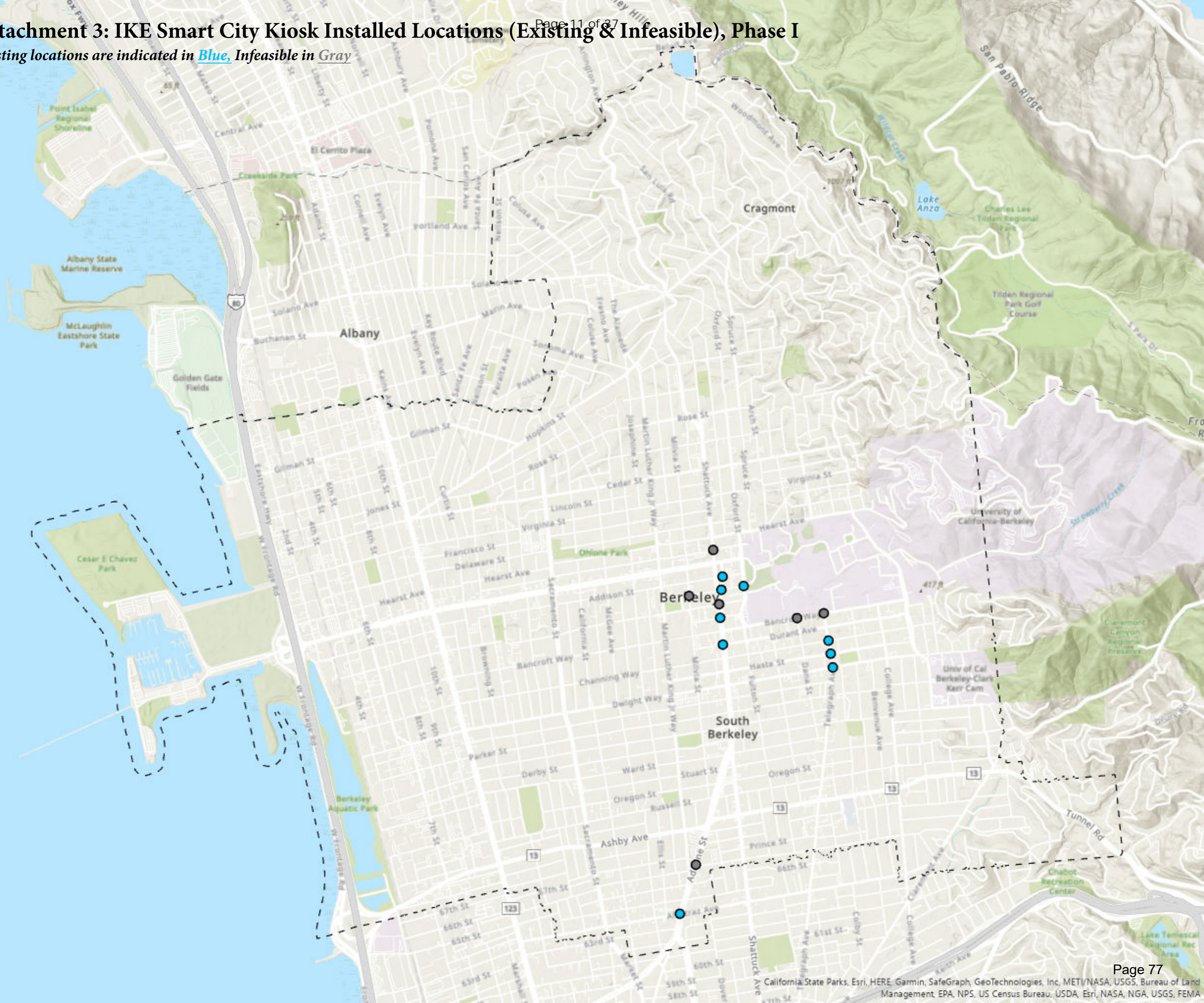
- **Downtown Berkeley**
  - University & Oxford
  - Shattuck & Hearst
  - Shattuck & Blake
  - University & Bonita
  - University & Milvia
  - Hearst & Oxford
  - Shattuck & University
  - Shattuck & Haste
  - Shattuck & Addison
  
- **Telegraph**
  - Telegraph & Blake
  - Bowditch & Durant
  
- **University Avenue**
  - San Pablo & University
  - San Pablo & Addison
  - University & 6<sup>th</sup>
  
- **Gilman**
  - Gilman & 9<sup>th</sup>
  - Gilman & 5<sup>th</sup>
  - Gilman & San Pablo
  
- **Gateway Locations** (outside of a commercial district)
  - Alcatraz & Sacramento
  - Ashby & Telegraph
  - Ashby & Sacramento
  - Ashby and San Pablo
  - University & Sacramento

22 locations



# Attachment 3: IKE Smart City Kiosk Installed Locations (Existing & Infeasible), Phase I

Existing locations are indicated in **Blue**, Infeasible in **Gray**







### **Berkeley IKE – Phase I Existing Installed IKE Smart City Kiosk Locations**

- **Downtown Berkeley**
  - Shattuck & Addison
  - Kala Bagai Way & Center
  - Center & Oxford
  - Shattuck & Kittredge
  - Shattuck & Durant
  
- **Telegraph**
  - Telegraph & Channing
  - Telegraph & Haste
  - Telegraph & Dwight
  
- **Lorin**
  - Adeline & Alcatraz

9 locations

**IKE SMART CITY LLC FRANCHISE AGREEMENT**

July **THIS agreement** is made and entered into this 5<sup>th</sup> day of July, 2019 by and between the City of Berkeley, a municipal corporation ("City"), and IKE SMART CITY LLC, an Ohio limited liability company ("Grantee").

**WHEREAS**, pursuant to Chapter 9.60 of the Berkeley Municipal Code (BMC), Grantee has applied to City for a Franchise ("Franchise") to install advertising and wayfinding kiosks on sidewalks in the City of Berkeley; and

**WHEREAS**, on September 25, 2018, the City Council held a public hearing for the purpose of hearing persons in favor of or in opposition to the granting of such Franchise; and

**WHEREAS**, the City Council has determined that the grant of such Franchise to Grantee is in the public interest; and

**WHEREAS**, City and Grantee desire to enter into a Franchise Agreement ("Agreement") in order that Grantee may provide advertising and wayfinding kiosks in the City of Berkeley;

**NOW, THEREFORE**, City and Grantee do hereby agree as follows:

**1. GRANT OF FRANCHISE**

By Ordinance No. 7626-N.S. City granted to Grantee an exclusive Franchise authorizing Grantee to install advertising and wayfinding kiosks in the City of Berkeley and to use the public rights of way for such purpose. Grantee acknowledges that this Franchise is subject to the terms and conditions specified in the City Charter, the terms and conditions specified in Ordinance No. 7626-N.S., the provisions of Chapter 9.60 of the Berkeley Municipal Code, the terms and conditions of this Agreement, and the terms and conditions of the IKE agreement between Grantee and Visit Berkeley (formerly known as the Berkeley Convention and Visitors Bureau) dated February 27, 2018 and as amended ("IKE Visit Berkeley Agreement"), incorporated herein by reference. A copy of the IKE Visit Berkeley Agreement is attached hereto as Exhibit A.

**2. TERM OF FRANCHISE**

Subject to Section 11 of this Agreement, the Franchise shall be 15 years.

**3. RELATIONSHIP OF GRANTEE TO CITY**

A. Grantee shall be deemed at all times to be a franchisee and shall be wholly responsible for the manner in which Grantee performs the services required of Grantee by the terms of this Agreement. Grantee shall be liable for the acts and omissions of it, its employees and its agents. Nothing contained herein shall be



construed as creating an employment or agency relationship between City and Grantee.

- B. Terms in this Agreement referring to direction from City shall be construed as providing for direction as to policy and the result of Grantee's services only and not to the means by which such a result is obtained.
- C. Nothing in this Agreement shall operate to confer rights or benefits on persons or entities not party to this Agreement.

#### **4. GRANTEE'S RECORDS**

- A. Grantee shall keep and maintain books of account and other records showing all business transactions conducted by Grantee in connection with the Franchise granted to Grantee. Such records shall be kept at Grantee's place of business shown in Section 15 of this Agreement for receipt of notices.
- B. Grantee shall require its subcontractors, if any, who perform any services in connection with the Franchise granted to Grantee to keep and maintain books of account and other records showing all business transactions conducted by such subcontractors in connection with the Franchise granted to Grantee.
- C. Pursuant to Section 61 of the City Charter, all such books of account and other records shall be subject to inspection and/or audit at Grantee's place of business during normal business hours upon request or demand of the City Manager, City Auditor, City Attorney, or other City officer, employee or consultant authorized by any of these officers. The purpose of such inspection and/or audit shall be for verification of any revenues, fees or penalties paid by Grantee, and the accuracy thereof, as well as compliance with the terms and conditions of both this Agreement and the IKE Visit Berkeley Agreement.

#### **5. AUDIT REQUIREMENT**

In the event any audit conducted by City or by City's representative discloses that Grantee has made any misrepresentation with respect to the fees, penalties, or any other payments due to City, or discloses that Grantee has underpaid fees, penalties, or any other payments due to City in an amount greater than Three Thousand Dollars (\$3,000), then in addition to any other remedies available to City, Grantee shall reimburse City for City's costs incurred in the performance of the audit, including any legal fees or expenses incurred. Such reimbursement shall be paid by Grantee within thirty (30) days of the date City notifies Grantee of the amount of City's costs.

#### **6. INDEMNIFICATION**

- A. Grantee shall defend, indemnify, and save harmless City and its respective commissioners, officers, agencies, departments, agents, and employees (each, an "Indemnified Party"; and collectively, "Indemnified Parties") from and against any and all claims, demands, causes of action, proceedings or lawsuits brought by third-parties ("Claims"), and all losses, damages, liabilities, penalties, fines, forfeitures, costs and expenses arising from or incidental to any Claims (including attorneys' fees and other costs of defense) (collectively, with Claims, "Liabilities"), resulting from, or arising out of, the operation of the Kiosk Program

and the provision of services, whether such operation or services is performed or provided by Grantee or by Grantee's subcontractors or any other person acting for or on behalf of Grantee.

- B. Notwithstanding the foregoing, the following shall be excluded from Grantee's indemnification and defense obligations contained in the preceding paragraph:
1. Any Liabilities to the extent resulting from, or arising out of:
    - a. the gross negligence or willful misconduct of any Indemnified Party;
    - b. Grantee complying with the written directives or written requirements of City, if Grantee has previously objected to such written directives or requirements in writing, with respect to (A) the location or configuration of any wayfinding kiosk in relation to the street or sidewalk on which such kiosk is located or to which it adjoins, or (B) a City's standards for alteration or maintenance of sidewalks; or
    - c. the condition of any public property outside of the perimeter of a kiosk and not otherwise controlled by Grantee (and expressly excluding from this clause (c) the condition of the kiosks).
- C. If any Claim against Grantee includes claims that are covered by clause (B)(1)(c) above or claims contesting City's authority to issue a permit for a kiosk then each party shall be responsible for its own defense against such Claims.
- D. Upon receipt by any Indemnified Party of actual notice of a Claim to which such Indemnified Party is entitled to indemnification in accordance with this Section 6, such Indemnified Party shall give prompt notice of such Claim to Grantee. Grantee shall assume and prosecute the defense of such Claim at the sole cost and expense of Grantee. Grantee may settle any such Claim in its discretion so long as such settlement includes an unconditional release of the Indemnified Party.
- E. Nothing in this Agreement shall constitute a waiver or limitation of any rights which City may have under applicable law. All rights and remedies of City, whether under this Agreement or other applicable law, shall be cumulative.

## **7. INSURANCE REQUIREMENTS**

- A. Minimum Coverages. The insurance requirements specified in this section shall cover Grantee's own liability and the liability arising out of work or services performed under this Agreement by any subconsultants, subcontractors, suppliers, temporary workers, independent contractors, leased employees, or any other persons, firms or corporations that Grantee authorizes to work under this Agreement (hereinafter referred to as "Agent"). Grantee shall, at its own expense, obtain and maintain in effect at all times during the life of this Agreement the following types of insurance against claims, damages and losses due to injuries to persons or damage to property or other losses that may arise in connection with the performance of work under this Agreement.

- B. Grantee shall include in every subcontract the requirement that the subcontractor maintain adequate insurance coverage with appropriate limits and endorsements to cover the risks associated with work to be performed by the subcontractor. To the extent that a subcontractor does not procure and maintain such insurance coverage, Grantee shall be responsible for any and all costs and expenses that may be incurred in securing such coverage or in fulfilling Grantee's indemnity obligation under Section 6 as to itself or any of its subcontractors in the absence of such coverage.
- C. In the event Grantee or its subcontractors procure excess or umbrella coverage to maintain certain requirements outlined below, these policies shall also satisfy all specified endorsements and stipulations, including provisions that Grantee's or its subcontractor's insurance, as the case may be, be primary without right of contribution from City.
1. Workers' Compensation Insurance with Statutory limits, and Employer's Liability Insurance with a limit of not less than \$1,000,000 per employee for injury by disease and \$1,000,000 for injury for each accident, and any and all other coverage of Grantee's employees as may be required by applicable law. Such policy shall contain a Waiver of Subrogation in favor of City. Such Workers' Compensation & Employer's Liability may be waived, if and only for as long as Grantee is a sole proprietor or a corporation with stock 100% owned by officers with no employees.
  2. Commercial General Liability Insurance for Bodily Injury and Property Damage liability, covering the operations of Grantee and Grantee's officers, agents, and employees and with limits of liability which shall not be less than \$2,000,000 combined single limit per occurrence with a general aggregate liability of not less than \$4,000,000, and Personal & Advertising Injury liability with a limit of not less than \$2,000,000. Such policy shall contain a Waiver of Subrogation in favor of City. City and its commissioners, directors, officers, representatives, agents and employees are to be named as additional insureds. Such insurance shall be primary and contain a Separation of Insureds Clause as respects any claims, losses or liability arising directly or indirectly from Operator's operations.
  3. Business Automobile Insurance for all automobiles owned (if any), used or maintained by Grantee and Grantee's officers, agents and employees, including but not limited to owned (if any), leased (if any), non-owned and hired automobiles, with limits of liability which shall not be less than \$1,000,000 combined single limit per accident.
  4. Umbrella Insurance in the amount of \$4,000,000 providing excess limits over Employer's Liability, Automobile Liability, and Commercial General Liability Insurance. Such umbrella coverage shall be following form to underlying coverage including all endorsements and additional insured requirements.
  5. Errors and Omissions Professional Liability Insurance for errors and omissions and the resulting damages, including, but not limited to, economic loss to City and having minimum limits of \$3,000,000 per claim. The policy shall provide coverage for all work performed by

Grantee and any work performed or conducted by any subcontractor/consultant working for or performing services on behalf of Grantee. Grantee may delegate the obligation to maintain Errors and Omissions Professional Liability Insurance to a subcontractor, but the failure of such subcontractor to maintain such insurance shall not relieve Grantee of its obligation to maintain such insurance.

6. Property Insurance. Property Insurance covering Grantee's own business personal property and equipment to be used in performance of this Agreement, materials or property to be purchased and/or installed on behalf of City (if any), and builders risk for property in the course of construction (if applicable). Coverage shall be written on a "Special Form" policy that includes theft, but excludes earthquake, with limits at least equal to the replacement cost of the property. Such policy shall contain a Waiver of Subrogation in favor of City.
- D. Acceptable Insurers. All policies will be issued by insurers qualified to do business in California and with a Best's Rating of A-VIII or better.
  - E. Deductibles and Retentions. Grantee shall be responsible for payment of any deductible or retention on Grantee's policies without right of contribution from City. Deductible and retention provisions shall not contain any restrictions as to how or by whom the deductible or retention is paid. Any deductible or retention provision limiting payment to the Named Insured is unacceptable.
  - F. In the event that City is entitled to coverage as an additional insured under any Grantee insurance policy that contains a deductible or self-insured retention, Grantee shall satisfy such deductible or self-insured retention to the extent of loss covered by such policy, for any lawsuit arising from or connected with any alleged act of Grantee, subconsultant, subcontractor, or any of their employees, officers or directors, even if Grantee or subconsultant is not a named defendant in the lawsuit.
  - G. Claims Made Coverage. If any insurance specified above is written on a "Claims-Made" (rather than an "occurrence") basis, then in addition to the coverage requirements above, Grantee shall:
    1. Ensure that the Retroactive Date is shown on the policy, and such date must be before the date of this Agreement or the beginning of any work under this Agreement;
    2. Maintain and provide evidence of similar insurance for at least three (3) years following the expiration or termination of this Agreement, including the requirement of adding all additional insureds; and
    3. If insurance is cancelled or non-renewed, and not replaced with another claims-made policy form with a retroactive date prior to the commencement of any work hereunder, Operator shall purchase "extended reporting" coverage for a minimum of three (3) years after the expiration or termination of this Agreement.
  - H. Failure to Maintain Insurance. All insurance specified above shall remain in force until the expiration or termination of this Agreement. Grantee must notify City if any of the above required coverages are non-renewed or cancelled. The failure to procure or maintain required insurance and/or an adequately funded self-insurance program will constitute a material breach of this Agreement.

- I. Certificates of Insurance. Prior to commencement of any work hereunder, Grantee shall deliver to City Certificates of Insurance verifying the aforementioned coverages. Such certificates shall make reference to all provisions and endorsements referred to above and shall be signed on behalf of the insurer by an authorized representative thereof.
- J. Disclaimer. The foregoing requirements as to the types and limits of insurance coverage to be maintained by Grantee are not intended to and shall not in any manner limit or qualify the liabilities and obligations otherwise assumed by Grantee.

## **8. KIOSKS**

- A. Grantee may install and operate up to thirty one (31) wayfinding kiosks on sidewalks in Berkeley.
- B. Permitting process and prohibited locations.
  - 1. Before Grantee may submit an application for a permit under Berkeley Municipal Code Chapter 16.12 for installation of any kiosks, the City shall host two (2) community meetings in each commercial district where kiosks are proposed to be installed. Such meetings shall be held at least one (1) month apart in time, with broad noticing to the surrounding community, neighborhood organizations, business associations, and other potentially affected stakeholders. At the community meetings, a list of proposed locations for the kiosks, as well as a map showing the proposed locations shall be presented. All proposed locations in a commercial district shall be presented simultaneously.
  - 2. After community meetings have been held, the City Manager shall submit to the City Council a consent item setting forth all locations proposed for installation of kiosks, including the community outreach that was conducted, community responses that were received, and recommendations for locations based upon that outreach and responses.
  - 3. The City Council may approve, modify or deny the proposed location(s). For any approved location(s), Grantee may proceed to apply for permits for such location(s) under Chapter 16.12.
  - 4. Kiosks may only be located in "C" and "M" prefixed zoning districts, except for the MU-R zoning district. In no event may kiosks be located in front of single family residences or K-12 schools.
- C. Construction Period Requirements.
  - 1. Construction shall be coordinated with utility companies and other persons with rights to install or maintain infrastructure in the public right-of-way.
  - 2. Construction shall be scheduled and conducted so as to minimize interference with public use of the right-of-way including access to the right-of-way from private property.
  - 3. Noise-producing site preparation and construction activities shall only occur on weekdays between the hours of 8 am to 5 pm in residential areas and between the hours of 7 am to 7 pm in commercial areas, or as



designated on permit notes or attachments. Construction in residential areas shall be limited to installation of utilities in support of a kiosk.

4. All trucks and equipment shall use the best available noise control techniques and equipment including improved mufflers, intake silencers, ducts, engine enclosures, and noise-reducing shields or shrouds.
  5. Impact tools such as jackhammers, pavement breakers, and noise drills shall be hydraulically or electrically powered wherever feasible to avoid noise associated with compressed air exhaust from pneumatically powered tools. When the use of pneumatic tools is unavoidable, an exhaust muffler shall be used on the compressed air exhaust to lower noise levels.
  6. External jackets shall be used on tools where feasible to achieve noise reductions. To the extent possible, quieter procedures should be used, such as drilling instead of jack hammering.
  7. Stationary noise sources involved in construction should be located as far as possible from sensitive receptors. If location within 20 feet of homes, schools, neighborhood parks, and retail businesses is necessary, stationary sources should be muffled and enclosed with temporary sheds.
  8. Trucks and other vehicles should not be permitted to idle when waiting at or near the construction site.
  9. Affected streets and sidewalks should be swept, if possible with water sweepers using reclaimed water, at the end of each workday if soil, sand, or other material has been carried onto them.
  10. When trenching is necessary, all trenches shall be covered at the end of each workday. The total time that a trench may remain open in any segment of the public right of way should not exceed one week.
- D. Kiosks shall be installed, operated, maintained and removed in compliance with this agreement and shall conform to the requirements of the City Engineer established pursuant to or to implement Berkeley Municipal Code section 16.18.040.H. No kiosk shall be installed or operated without documented conformance with Section 8(B) of this agreement and without written approval from the City Manager or his/her designee. The City Manager at his or her sole discretion may reject any and all proposed locations.
1. The kiosk display shall not display light that is of such intensity or brilliance to cause glare or otherwise impair the vision of a driver. No kiosk display shall display light of such intensity that interferes with the effectiveness of an official traffic sign, signal or device. Any violation of this section will result in the City requiring the kiosk display to turn off the display or show a "full black" image until the display can be brought into compliance.
  2. The kiosk display shall have a default mechanism or setting that will cause the sign to turn off or show a "full black" image if a visible malfunction occurs.
  3. The grantee shall have six (6) hours to turn off the display or show a "full black" image after a malfunction is reported to the grantee.
- E. Permanent Relocation and/or removal of kiosk.
1. Except as provided for in Section F below, no request to permanently relocate or permanently remove a kiosk shall be considered within two

(2) years of the initial installation of that kiosk. The City may request no more than two (2) permanent relocations and/or (1) permanent removal of a kiosk per year.

2. Before the City Council may entertain a request by the public for permanent relocation or permanent removal, a petition shall be signed by at least 30 residents and business owners within a 1,000 foot radius of the location of the kiosk, and shall propose at least two (2) alternative locations in close proximity to the original kiosk location. Grantee, in consultation with the City Manager and City Engineer, shall consider the proposed alternative locations as well as any concerns raised in the petition, in good faith, and shall make reasonable efforts, which may include relocation or removal of the kiosk, to address those concerns.

F. Temporary Relocation and/or removal of kiosk.

1. At its sole discretion the City may require the temporary removal or the permanent relocation of kiosks as reasonably necessary to facilitate streetscape improvements or to address public health or safety concerns. These temporary relocations and/or removals shall be done at no costs to the City.
2. Public utility providers and transit agencies may require the temporary removal or the permanent relocation of kiosks as reasonably necessary to facilitate improvements and/or maintenance of public utilities and transit agency facilities at no costs to the public utility providers or transit agencies.
3. Requests to temporarily relocate or remove a kiosk shall be executed by Grantee within 30 business days of formal notice to the Grantee.

G. Grantee shall comply with all terms of the IKE Visit Berkeley Agreement and its failure to do so shall be considered a breach of this Agreement subject to Section 11. In addition, Grantee shall provide all data specified in Exhibit B of the IKE Agreement to the City on the same terms as it provides that data to the Berkeley Convention & Visitors Bureau.

H. Grantee shall provide security to the City for the removal of kiosks in the form of a performance bond in the minimum amount of \$2 million.

I. Upon the expiration or earlier termination of this Agreement or upon any relocation of a kiosk pursuant to the terms of this Section 8, Grantee shall remove the kiosks and restore the area upon which each such kiosk was located as close as reasonably practicable to the condition the same was in immediately preceding the installation of the kiosk thereon, subject to reasonable wear and tear, and shall do all such work as is reasonably necessary to cap off the utilities serving such kiosks.

J. Grantee will keep the kiosk technology in "best in class" condition including but not limited to a minimum of (1) one software update per month throughout the term. If Grantee fails to keep meet these technical requirements the City will have the right to terminate the agreement if Grantee cannot remedy within (30) days of written notice by the City.

K. Privacy Protections.

Grantee may not activate the pinhole security camera or any other security camera on kiosks unless authorized to do so by action of the City Council. Grantee may activate and use pedestrian counting equipment that is limited to reading MAC addresses from cellular phones within a specified radius, because such addresses are anonymous.

L. Phased deployment.

Grantee shall conduct a phased deployment of kiosks such that after the first phase of fifteen (15) units are installed no additional units may be installed for six (6) months. The second phase may include up to sixteen (16) kiosks.

**9. COMPLIANCE WITH LAW**

Grantee shall perform, implement and manage the installation, operation, maintenance and removal of its kiosks in accordance with applicable federal, state, and local law, in accordance with all regulations promulgated under such laws, and in accordance with the terms and conditions of this Agreement.

**10. PERMITS AND LICENSES**

Grantee shall obtain and maintain, at Grantee's sole cost and expense, all permits and licenses applicable to Grantee's operations under this Franchise, which are required of Grantee by any governmental agency.

**11. TERMINATION OF FRANCHISE**

- A. If at any time City believes Grantee may not be adequately performing its obligations under this Agreement, City may request from Grantee written assurances of performance and a written plan to correct observed deficiencies in Grantee's performance if written notice of the same is provided by City. Failure to provide written assurances constitutes a separate ground to declare a default under this Agreement.
- B. Grantee shall be in default of this Agreement and City may, in addition to any other legal or equitable remedies available to City, terminate the Grantee's right to perform under the Franchise:
1. Should Grantee make a general assignment for the benefit of creditors, admit in writing its inability to pay its debts as they become due, file a voluntary petition in bankruptcy, be adjudged bankrupt or insolvent, file a petition or answer seeking for itself any reorganization, arrangement, composition, readjustment, liquidation, dissolution, or similar relief under any present or future statute, law, or regulation, filing any answer admitting or not contesting the material allegations of a petition filed against Grantee in any such proceeding, or seek, consent to, or acquiesce in, the appointment of any trustee, receiver, custodian or liquidator of Grantee or of all or any substantial part of the properties of Grantee, or if Grantee, its directors or shareholders, take action to dissolve or liquidate Grantee; or
  2. Should Grantee commit a material breach of this Agreement and not cure such breach within ten (10) calendar days of the date of notice from City to Grantee demanding such cure; or, if such failure is curable but not curable within such ten (10) day period, within such period of time as is reasonably necessary to accomplish such cure. (In order for Grantee to avail itself of this time period in excess of 10 calendar days, Grantee must provide City within the 10 day period a written plan acceptable to

- City to cure said breach, and then diligently commence and continue such cure according to the written plan); or
3. Should Grantee violate or allow a violation of any valid law, statute, regulation, rule, ordinance, permit, license or order of any governmental agency applicable to the Franchise and does not cure such violation within ten (10) days of the date of the notice from City to Grantee demanding such cure; or, if such failure is curable but not curable within such ten (10) day period, within such period of time as is reasonably necessary to accomplish such cure. (In order for Grantee to avail itself of this time period in excess of 10 calendar days, Grantee must provide City within the 10 day period a written plan to cure said violation acceptable to City, and then diligently commence and continue performance of such cure according to the written plan.)

## **12. COMPLIANCE WITH AMERICANS WITH DISABILITIES ACT**

Grantee acknowledges that, pursuant to the Americans with Disabilities Act ("ADA"), programs, services and other activities provided by a public entity to the public, whether directly or through a contractor, must be accessible to the disabled public. Grantee shall provide the services specified in this Agreement in a manner that complies with the ADA and any and all other applicable federal, state and local disability rights laws. Grantee will not be responsible for ADA matters which are in the control of City. Grantee agrees not to discriminate against disabled persons in the provision of services, benefits or activities provided under this Agreement and further agrees that any violation of this prohibition on the part of Grantee, its employees, agents or assigns shall constitute a material breach of this Agreement.

## **13. NON-DISCRIMINATION**

In order to minimize the probability of a claim being filed against the City, in the performance of this Agreement, Grantee shall not discriminate against any employee or applicant for employment because of race, color, religion, ancestry, national origin, age (over 40), sex, pregnancy, marital status, disability, sexual orientation or AIDS.

## **14. CITY BUSINESS LICENSE, PAYMENT OF TAXES, TAX I.D. NUMBER**

Grantee has obtained a City business license as required by B.M.C. Chapter 9.04, and its license number is written below; or, Grantee is exempt from the provisions of B.M.C. Chapter 9.04 and has written below the specific B.M.C. section under which it is exempt. Contractor shall pay all state and federal income taxes and any other taxes due. Grantee certifies under penalty of perjury that the taxpayer identification number written below is correct.

## **15. RECEIPT OF NOTICES**

A written notice is deemed served when a party sends the notice in an envelope addressed to the other party to this Agreement and deposits it with the U.S. Postal Service, first class mail, postage prepaid. For purposes of this Agreement, all notices to City shall be addressed as follows:

Office of Economic Development  
City of Berkeley  
2180 Milvia Street  
5<sup>th</sup> Floor  
Berkeley, CA 94704

For purposes of this Agreement, all notices to Grantee shall be addressed as follows:

Adam Borchers  
IKE SMART CITY LLC  
250 N. Hartford Avenue  
Columbus, OH 43222

## **16. GOVERNING LAW/VENUE**

This Agreement shall be deemed executed in the County of Alameda and governed by California law. Venue for any dispute arising under this Agreement shall be in the County of Alameda.

## **17. CONFIDENTIALITY**

- A. Grantee acknowledges and agrees that City is a public entity subject to the provisions of the Public Records Act (Cal. Gov. C. 6250 *et seq.*) Except as otherwise required by law, including the Charter of the City of Berkeley and the Berkeley Municipal Code, City will not disclose trade secrets or proprietary financial information received from Grantee. Any such trade secrets or proprietary financial information which Grantee believes should be exempted from disclosure shall be specifically identified and marked as such. Blanket-type identification by designating whole pages or sections shall not be permitted and shall be invalid. The specific information must be clearly identified as such.
- B. Duty to Defend:  
Upon a request for records regarding this Agreement, City will immediately notify Grantee and specify a time when the records will be made available for inspection. If the Grantee, in a timely manner, identifies any proprietary, trade secret, or confidential commercial or financial information which Grantee determines is not subject to public disclosure, the Grantee will be required to fully defend (including all attorney's fees and costs), in all forums, the City's refusal to produce such information; otherwise, City will make such information available to the extent required by law. To the maximum extent permitted by law, Grantee shall indemnify and hold harmless City from any and all judgments, liabilities, fines or penalties imposed as a result of City's refusal, at Grantee's request, to disclose records regarding this Agreement.

## **18. AMENDMENTS**

The terms and conditions of this Agreement shall not be altered or otherwise modified except by a written amendment to this Agreement executed by City and Grantee.

**19. ENTIRE CONTRACT**

A. The terms and conditions of this Agreement, all exhibits attached and any documents expressly incorporated by reference represent the entire agreement between the parties with respect to the subject matter of this Agreement. This Agreement shall supersede any and all prior contracts, oral or written, regarding the subject matter between City and Grantee. No other contract, statement, or promise relating to the subject matter of this Agreement shall be valid or binding except by a written amendment to this Agreement.

**20. SEVERABILITY**

If any part of this Agreement or the application thereof is declared invalid for any reason, such invalidity shall not affect the other provisions of this Agreement which can be given effect without the invalid provision or application, and to this end the provisions of this Agreement are declared to be severable.

**21. WAIVER**

Failure of City to insist on strict performance shall not constitute a waiver of any of the provisions of this Agreement or a waiver of any other default of Grantee.

**22. ASSIGNMENT**

Grantee may not assign this Agreement without the prior written consent of the City, except that Grantee may assign its right to any money due or to become due hereunder.

**23. SECTION HEADINGS**


The sections and other headings of this Agreement are for convenience of reference only and shall be disregarded in the interpretation of this Agreement.

**WITNESS THE EXECUTION OF this agreement ON THE DATE WRITTEN BELOW EACH SIGNATURE:**

CITY OF BERKELEY

By  \_\_\_\_\_  
City Manager

Countersigned by:

 \_\_\_\_\_

Deputy CITY AUDITOR

Attest:

Rose Throuse

DEPUTY

City CLERK

Approved as to Form:

Michael Woo

Deputy City Attorney

GRANTEE

Pete Scantland

Grantee Representative Name (printed or typed)

By: Pete Scantland  
Signature

Printed name and title of signatory, if different from Grantee Representative name

Tax Identification No. 42-1636136

Berkeley Business License No BL 010056

Incorporated: Yes \_\_\_\_\_ No X

Certified Woman Business Enterprise: Yes \_\_\_\_\_ No X

Certified Minority Business Enterprise: Yes \_\_\_\_\_ No X

If yes, state ethnicity: \_\_\_\_\_

Certified Disadvantaged Business Enterprise: Yes \_\_\_\_\_ No X



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
5/8/2019

**THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.**

**IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).**

|                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                             |                 |                       |       |                   |  |                   |  |                   |  |                   |  |
|-------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|-----------------|-----------------------|-------|-------------------|--|-------------------|--|-------------------|--|-------------------|--|
| <b>PRODUCER</b><br>Overmyer Hall Associates<br>1600 W. Lane Ave., Suite 200<br>Columbus OH 43221                        | <b>CONTACT NAME:</b> Karen Obetz<br><b>PHONE (A/C No., Ext):</b> 614-453-4400 <b>FAX (A/C No.):</b> 614-453-9360<br><b>E-MAIL ADDRESS:</b> ohacertificates@oh-ins.com                                                                                                                                                                                                                                                                                                                                                                  |                                                             |                 |                       |       |                   |  |                   |  |                   |  |                   |  |
| <b>INSURER(S) AFFORDING COVERAGE</b>                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                             |                 |                       |       |                   |  |                   |  |                   |  |                   |  |
| <b>INSURED</b> ORANBAR-01<br>IKE Smart City, LLC<br>Orange Barrel Media, LLC<br>250 N Hartford Ave<br>Columbus OH 43222 | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;"><b>INSURER A:</b> Hartford Insurance Company of the Midwest</td> <td style="width: 20%; text-align: center;">NAIC #<br/>37478</td> </tr> <tr> <td><b>INSURER B:</b> CNA</td> <td style="text-align: center;">35289</td> </tr> <tr> <td><b>INSURER C:</b></td> <td></td> </tr> <tr> <td><b>INSURER D:</b></td> <td></td> </tr> <tr> <td><b>INSURER E:</b></td> <td></td> </tr> <tr> <td><b>INSURER F:</b></td> <td></td> </tr> </table> | <b>INSURER A:</b> Hartford Insurance Company of the Midwest | NAIC #<br>37478 | <b>INSURER B:</b> CNA | 35289 | <b>INSURER C:</b> |  | <b>INSURER D:</b> |  | <b>INSURER E:</b> |  | <b>INSURER F:</b> |  |
| <b>INSURER A:</b> Hartford Insurance Company of the Midwest                                                             | NAIC #<br>37478                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                             |                 |                       |       |                   |  |                   |  |                   |  |                   |  |
| <b>INSURER B:</b> CNA                                                                                                   | 35289                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                             |                 |                       |       |                   |  |                   |  |                   |  |                   |  |
| <b>INSURER C:</b>                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                             |                 |                       |       |                   |  |                   |  |                   |  |                   |  |
| <b>INSURER D:</b>                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                             |                 |                       |       |                   |  |                   |  |                   |  |                   |  |
| <b>INSURER E:</b>                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                             |                 |                       |       |                   |  |                   |  |                   |  |                   |  |
| <b>INSURER F:</b>                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                             |                 |                       |       |                   |  |                   |  |                   |  |                   |  |

**COVERAGES      CERTIFICATE NUMBER: 684983662      REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE                                                                                                                                                                                                                                                                                                  | ADDL INSD | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS                                                                                                                                                                                                                                    |
|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------|---------------|-------------------------|-------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| A        | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY<br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br><br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC<br>OTHER: | Y         | Y        | 33UUNAS7938   | 1/1/2019                | 1/1/2020                | EACH OCCURRENCE \$ 1,000,000<br>DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000<br>MED EXP (Any one person) \$ 10,000<br>PERSONAL & ADV INJURY \$ 1,000,000<br>GENERAL AGGREGATE \$ 2,000,000<br>PRODUCTS - COMP/OP AGG \$ 2,000,000 |
| A        | <input checked="" type="checkbox"/> AUTOMOBILE LIABILITY<br><input checked="" type="checkbox"/> ANY AUTO<br><input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS<br><input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY                          |           |          | 33UUNAS7938   | 1/1/2019                | 1/1/2020                | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000<br>BODILY INJURY (Per person) \$<br>BODILY INJURY (Per accident) \$<br>PROPERTY DAMAGE (Per accident) \$                                                                                 |
| A        | <input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR<br><input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE<br>DED <input checked="" type="checkbox"/> RETENTION \$ 10,000                                                                            | Y         | Y        | 33RHUAS7806   | 1/1/2019                | 1/1/2020                | EACH OCCURRENCE \$ 7,000,000<br>AGGREGATE \$ 7,000,000                                                                                                                                                                                    |
| A        | <input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY<br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below                                                                                         | Y/N       | N/A      | 33UUNAS7938   | 1/1/2019                | 1/1/2020                | <input type="checkbox"/> PER STATUTE <input checked="" type="checkbox"/> OTHER<br>OH Stop Gap<br>E.L. EACH ACCIDENT \$ 1,000,000<br>E.L. DISEASE - EA EMPLOYEE \$ 1,000,000<br>E.L. DISEASE - POLICY LIMIT \$ 1,000,000                   |
| B        | Professional Liability                                                                                                                                                                                                                                                                                             |           |          | 4025451963-03 | 1/1/2019                | 1/1/2020                | Each Wrongful Act Aggregate Deductible<br>3,000,000<br>3,000,000<br>10,000                                                                                                                                                                |

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**  
 City of Berkeley and its commissioners, directors, officers, representatives, agents and employees are Additional Insured per attached General Liability Blanket Additional Insured endorsement HG 0001 09 16. Umbrella follows form the Additional Insured provision. Subject to signed written contract. General Liability coverage is Primary & Non-Contributory to Additional Insured per attached form HG 0001 09 16, when required by written contract. Waiver of Subrogation applies in favor of Additional Insured with respects to General Liability per attached form, HG 0001 09 16, when required by written contract. Umbrella follows form the Waiver of Subrogation provision. Subject to policy terms, conditions, and exclusions.

|                                                                                                                                             |                                                                                                                                                                                                                                |
|---------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>CERTIFICATE HOLDER</b><br><br>Office of Economic Development<br>City of Berkeley<br>2180 Milvia Street<br>5th Floor<br>Berkeley CA 94704 | <b>CANCELLATION</b><br><br>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.<br><br>AUTHORIZED REPRESENTATIVE<br> |
|---------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|



**SECTION II - WHO IS AN INSURED****1. If you are designated in the Declarations as:**

- a. An individual, you and your spouse are insureds, but only with respect to the conduct of a business of which you are the sole owner.
- b. A partnership or joint venture, you are an insured. Your members, your partners, and their spouses are also insureds, but only with respect to the conduct of your business.
- c. A limited liability company, you are an insured. Your members are also insureds, but only with respect to the conduct of your business. Your managers are insureds, but only with respect to their duties as your managers.
- d. An organization other than a partnership, joint venture or limited liability company, you are an insured. Your "executive officers" and directors are insureds, but only with respect to their duties as your officers or directors. Your stockholders are also insureds, but only with respect to their liability as stockholders.
- e. A trust, you are an insured. Your trustees are also insureds, but only with respect to their duties as trustees.

**2. Each of the following is also an insured:****a. Employees And Volunteer Workers**

Your "volunteer workers" only while performing duties related to the conduct of your business, or your "employees", other than either your "executive officers" (if you are an organization other than a partnership, joint venture or limited liability company) or your managers (if you are a limited liability company), but only for acts within the scope of their employment by you or while performing duties related to the conduct of your business.

However, none of these "employees" or "volunteer workers" are insureds for:

- (1) "Bodily injury" or "personal and advertising injury":
  - (a) To you, to your partners or members (if you are a partnership or joint venture), to your members (if you are a limited liability company), to a co-"employee" while in the course of his or her employment or performing duties related to the conduct of your business, or to your other "volunteer workers" while performing duties related to the conduct of your business;
  - (b) To the spouse, child, parent, brother or sister of that co-"employee" or that

"volunteer worker" as a consequence of Paragraph (1)(a) above;

- (c) For which there is any obligation to share damages with or repay someone else who must pay damages because of the injury described in Paragraphs (1)(a) or (1)(b) above; or
- (d) Arising out of his or her providing or failing to provide professional health care services.

If you are not in the business of providing professional health care services:

- (a) Subparagraphs (1)(a), (1)(b) and (1)(c) above do not apply to any "employee" or "volunteer worker" providing first aid services; and
- (b) Subparagraph (1)(d) above does not apply to any nurse, emergency medical technician or paramedic employed by you to provide such services.

**(2) "Property damage" to property:**

- (a) Owned, occupied or used by,
- (b) Rented to, in the care, custody or control of, or over which physical control is being exercised for any purpose by

you, any of your "employees", "volunteer workers", any partner or member (if you are a partnership or joint venture), or any member (if you are a limited liability company).

**b. Real Estate Manager**

Any person (other than your "employee" or "volunteer worker"), or any organization while acting as your real estate manager.

**c. Temporary Custodians Of Your Property**

Any person or organization having proper temporary custody of your property if you die, but only:

- (1) With respect to liability arising out of the maintenance or use of that property; and
- (2) Until your legal representative has been appointed.

**d. Legal Representative If You Die**

Your legal representative if you die, but only with respect to duties as such. That representative will have all your rights and duties under this Coverage Part.

**e. Unnamed Subsidiary**

Any subsidiary, and subsidiary thereof, of yours which is a legally incorporated entity of which you own a financial interest of more than 50% of the voting stock on the effective date of the Coverage Part.

The insurance afforded herein for any subsidiary not named in this Coverage Part as a named insured does not apply to injury or damage with respect to which such insured is also a named insured under another policy or would be a named insured under such policy but for its termination or the exhaustion of its limits of insurance.

### 3. Newly Acquired Or Formed Organization

Any organization you newly acquire or form, other than a partnership, joint venture or limited liability company, and over which you maintain financial interest of more than 50% of the voting stock, will qualify as a Named Insured if there is no other similar insurance available to that organization. However:

- a. Coverage under this provision is afforded only until the 180th day after you acquire or form the organization or the end of the policy period, whichever is earlier;
- b. Coverage A does not apply to "bodily injury" or "property damage" that occurred before you acquired or formed the organization; and
- c. Coverage B does not apply to "personal and advertising injury" arising out of an offense committed before you acquired or formed the organization.

### 4. Nonowned Watercraft

With respect to watercraft you do not own that is less than 51 feet long and is not being used to carry persons for a charge, any person is an insured while operating such watercraft with your permission. Any other person or organization responsible for the conduct of such person is also an insured, but only with respect to liability arising out of the operation of the watercraft, and only if no other insurance of any kind is available to that person or organization for this liability.

However, no person or organization is an insured with respect to:

- a. "Bodily injury" to a co-"employee" of the person operating the watercraft; or
- b. "Property damage" to property owned by, rented to, in the charge of or occupied by you or the employer of any person who is an insured under this provision.

### 5. Additional Insureds When Required By Written Contract, Written Agreement Or Permit

The following person(s) or organization(s) are an additional insured when you have agreed, in a written contract, written agreement or because of a permit issued by a state or political subdivision, that such person or organization be added as an additional insured on your policy, provided the injury or damage occurs subsequent to the execution of the contract or agreement.

A person or organization is an additional insured under this provision only for that period of time required by the contract or agreement.

However, no such person or organization is an insured under this provision if such person or organization is included as an insured by an endorsement issued by us and made a part of this Coverage Part.

#### a. Vendors

Any person(s) or organization(s) (referred to below as vendor), but only with respect to "bodily injury" or "property damage" arising out of "your products" which are distributed or sold in the regular course of the vendor's business and only if this Coverage Part provides coverage for "bodily injury" or "property damage" included within the "products-completed operations hazard".

- (1) The insurance afforded the vendor is subject to the following additional exclusions:

This insurance does not apply to:

- (a) "Bodily injury" or "property damage" for which the vendor is obligated to pay damages by reason of the assumption of liability in a contract or agreement. This exclusion does not apply to liability for damages that the vendor would have in the absence of the contract or agreement;
- (b) Any express warranty unauthorized by you;
- (c) Any physical or chemical change in the product made intentionally by the vendor;
- (d) Repackaging, except when unpacked solely for the purpose of inspection, demonstration, testing, or the substitution of parts under instructions from the manufacturer, and then repackaged in the original container;
- (e) Any failure to make such inspections, adjustments, tests or servicing as the vendor has agreed to make or normally undertakes to make in the usual course of business, in connection with the distribution or sale of the products;
- (f) Demonstration, installation, servicing or repair operations, except such operations performed at the vendor's premises in connection with the sale of the product;
- (g) Products which, after distribution or sale by you, have been labeled or relabeled or used as a container, part or ingredient of any other thing or substance by or for the vendor; or

(h) "Bodily injury" or "property damage" arising out of the sole negligence of the vendor for its own acts or omissions or those of its employees or anyone else acting on its behalf. However, this exclusion does not apply to:

(i) The exceptions contained in Sub-paragraphs (d) or (f); or

(ii) Such inspections, adjustments, tests or servicing as the vendor has agreed to make or normally undertakes to make in the usual course of business, in connection with the distribution or sale of the products.

(2) This insurance does not apply to any insured person or organization, from whom you have acquired such products, or any ingredient, part or container, entering into, accompanying or containing such products.

**b. Lessors Of Equipment**

(1) Any person(s) or organization(s) from whom you lease equipment; but only with respect to their liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your maintenance, operation or use of equipment leased to you by such person(s) or organization(s).

(2) With respect to the insurance afforded to these additional insureds this insurance does not apply to any "occurrence" which takes place after the equipment lease expires.

**c. Lessors Of Land Or Premises**

Any person or organization from whom you lease land or premises, but only with respect to liability arising out of the ownership, maintenance or use of that part of the land or premises leased to you.

With respect to the insurance afforded these additional insureds the following additional exclusions apply:

This insurance does not apply to:

1. Any "occurrence" which takes place after you cease to lease that land; or
2. Structural alterations, new construction or demolition operations performed by or on behalf of such person or organization.

**d. Architects, Engineers Or Surveyors**

Any architect, engineer, or surveyor, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or

omissions of those acting on your behalf:

(1) In connection with your premises; or

(2) In the performance of your ongoing operations performed by you or on your behalf.

With respect to the insurance afforded these additional insureds, the following additional exclusion applies:

This insurance does not apply to "bodily injury", "property damage" or "personal and advertising injury" arising out of the rendering of or the failure to render any professional services by or for you, including:

1. The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; or
2. Supervisory, inspection, architectural or engineering activities.

This exclusion applies even if the claims against any insured allege negligence or other wrongdoing in the supervision, hiring, employment, training or monitoring of others by that insured, if the "occurrence" which caused the "bodily injury" or "property damage", or the offense which caused the "personal and advertising injury", involved the rendering of or the failure to render any professional services by or for you.

**e. Permits Issued By State Or Political Subdivisions**

Any state or political subdivision, but only with respect to operations performed by you or on your behalf for which the state or political subdivision has issued a permit.

With respect to the insurance afforded these additional insureds, this insurance does not apply to:

- (1) "Bodily injury", "property damage" or "personal and advertising injury" arising out of operations performed for the state or municipality; or
- (2) "Bodily injury" or "property damage" included within the "products-completed operations hazard".

**f. Any Other Party**

Any other person or organization who is not an additional insured under Paragraphs a. through e. above, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

- (1) In the performance of your ongoing operations;

- (2) In connection with your premises owned by or rented to you; or
- (3) In connection with "your work" and included within the "products-completed operations hazard", but only if
  - (a) The written contract or agreement requires you to provide such coverage to such additional insured; and
  - (b) This Coverage Part provides coverage for "bodily injury" or "property damage" included within the "products-completed operations hazard".

However:

- (1) The insurance afforded to such additional insured only applies to the extent permitted by law; and
- (2) If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

With respect to the insurance afforded to these additional insureds, this insurance does not apply to:

"Bodily injury", "property damage" or "personal and advertising injury" arising out of the rendering of, or the failure to render, any professional architectural, engineering or surveying services, including:

- (1) The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; or
- (2) Supervisory, inspection, architectural or engineering activities.

This exclusion applies even if the claims against any insured allege negligence or other wrongdoing in the supervision, hiring, employment, training or monitoring of others by that insured, if the "occurrence" which caused the "bodily injury" or "property damage", or the offense which caused the "personal and advertising injury", involved the rendering of or the failure to render any professional services by or for you.

The limits of insurance that apply to additional insureds is described in Section III - Limits Of Insurance.

How this insurance applies when other insurance is available to the additional insured is described in the Other Insurance Condition in Section IV - Commercial General Liability Conditions.

No person or organization is an insured with respect to the conduct of any current or past partnership, joint venture or limited liability company that is not shown as a Named Insured in the Declarations.

### SECTION III - LIMITS OF INSURANCE

#### 1. The Most We Will Pay

The Limits of Insurance shown in the Declarations and the rules below fix the most we will pay regardless of the number of:

- a. Insureds;
- b. Claims made or "suits" brought; or
- c. Persons or organizations making claims or bringing "suits".

#### 2. General Aggregate Limit

The General Aggregate Limit is the most we will pay for the sum of:

- a. Medical expenses under Coverage C;
- b. Damages under Coverage A, except damages because of "bodily injury" or "property damage" included in the "products-completed operations hazard"; and
- c. Damages under Coverage B.

#### 3. Products-Completed Operations Aggregate Limit

The Products-Completed Operations Aggregate Limit is the most we will pay under Coverage A for damages because of "bodily injury" and "property damage" included in the "products-completed operations hazard".

#### 4. Personal And Advertising Injury Limit

Subject to 2. above, the Personal and Advertising Injury Limit is the most we will pay under Coverage B for the sum of all damages because of all "personal and advertising injury" sustained by any one person or organization.

#### 5. Each Occurrence Limit

Subject to 2. or 3. above, whichever applies, the Each Occurrence Limit is the most we will pay for the sum of:

- a. Damages under Coverage A; and
- b. Medical expenses under Coverage C because of all "bodily injury" and "property damage" arising out of any one "occurrence".

#### 6. Damage To Premises Rented To You Limit

Subject to 5. above, the Damage To Premises Rented To You Limit is the most we will pay under Coverage A for damages because of "property damage" to any one premises, while rented to you, or in the case of damage by fire, lightning or explosion, while rented to you or temporarily occupied by you with permission of the owner.

In the case of damage by fire, lightning or explosion, the Damage to Premises Rented To You Limit applies to all damage proximately caused by the same event, whether such damage results from fire, lightning or explosion or any combination of these.

#### 7. Medical Expense Limit

Subject to 5. above, the Medical Expense Limit is the most we will pay under Coverage C for all medical expenses because of "bodily injury" sustained by any one person.

#### 8. How Limits Apply To Additional Insureds

If you have agreed in a written contract or written agreement that another person or organization be added as an additional insured on your policy, the most we will pay on behalf of such additional insured is the lesser of:

- a. The limits of insurance specified in the written contract or written agreement; or
- b. The Limits of Insurance shown in the Declarations.

Such amount shall be a part of and not in addition to Limits of Insurance shown in the Declarations and described in this Section.

The Limits of Insurance of this Coverage Part apply separately to each consecutive annual period and to any remaining period of less than 12 months, starting with the beginning of the policy period shown in the Declarations, unless the policy period is extended after issuance for an additional period of less than 12 months. In that case, the additional period will be deemed part of the last preceding period for purposes of determining the Limits of Insurance.

### SECTION IV - COMMERCIAL GENERAL LIABILITY CONDITIONS

#### 1. Bankruptcy

Bankruptcy or insolvency of the insured or of the insured's estate will not relieve us of our obligations under this Coverage Part.

#### 2. Duties In The Event Of Occurrence, Offense, Claim Or Suit

##### a. Notice Of Occurrence Or Offense

You or any additional insured must see to it that we are notified as soon as practicable of an "occurrence" or an offense which may result in a claim. To the extent possible, notice should include:

- (1) How, when and where the "occurrence" or offense took place;
- (2) The names and addresses of any injured persons and witnesses; and
- (3) The nature and location of any injury or damage arising out of the "occurrence" or offense.

##### b. Notice Of Claim

If a claim is made or "suit" is brought against any insured, you or any additional insured must:

- (1) Immediately record the specifics of the claim or "suit" and the date received; and
- (2) Notify us as soon as practicable.

You or any additional insured must see to it that we receive written notice of the claim or "suit" as soon as practicable.

##### c. Assistance And Cooperation Of The Insured

You and any other involved insured must:

- (1) Immediately send us copies of any demands, notices, summonses or legal papers received in connection with the claim or "suit";
- (2) Authorize us to obtain records and other information;
- (3) Cooperate with us in the investigation or settlement of the claim or defense against the "suit"; and
- (4) Assist us, upon our request, in the enforcement of any right against any person or organization which may be liable to the insured because of injury or damage to which this insurance may also apply.

##### d. Obligations At The Insureds Own Cost

No insured will, except at that insured's own cost, voluntarily make a payment, assume any obligation, or incur any expense, other than for first aid, without our consent.

##### e. Additional Insureds Other Insurance

If we cover a claim or "suit" under this Coverage Part that may also be covered by other insurance available to an additional insured, such additional insured must submit such claim or "suit" to the other insurer for defense and indemnity.

However, this provision does not apply to the extent that you have agreed in a written contract or written agreement that this insurance is primary and non-contributory with the additional insured's own insurance.

##### f. Knowledge Of An Occurrence, Offense, Claim Or Suit

Paragraphs a. and b. apply to you or to any additional insured only when such "occurrence", offense, claim or "suit" is known to:

- (1) You or any additional insured that is an individual;
- (2) Any partner, if you or the additional insured is a partnership;

- (3) Any manager, if you or the additional insured is a limited liability company;
- (4) Any "executive officer" or insurance manager, if you or the additional insured is a corporation;
- (5) Any trustee, if you or the additional insured is a trust; or
- (6) Any elected or appointed official, if you or the additional insured is a political subdivision or public entity.

This duty applies separately to you and any additional insured.

### 3. Legal Action Against Us

No person or organization has a right under this Coverage Part:

- a. To join us as a party or otherwise bring us into a "suit" asking for damages from an insured; or
- b. To sue us on this Coverage Part unless all of its terms have been fully complied with.

A person or organization may sue us to recover on an agreed settlement or on a final judgment against an insured; but we will not be liable for damages that are not payable under the terms of this Coverage Part or that are in excess of the applicable limit of insurance. An agreed settlement means a settlement and release of liability signed by us, the insured and the claimant or the claimant's legal representative.

### 4. Other Insurance

If other valid and collectible insurance is available to the insured for a loss we cover under Coverages A or B of this Coverage Part, our obligations are limited as follows:

#### a. Primary Insurance

This insurance is primary except when b. below applies. If other insurance is also primary, we will share with all that other insurance by the method described in c. below.

#### b. Excess Insurance

This insurance is excess over any of the other insurance, whether primary, excess, contingent or on any other basis:

##### (1) Your Work

That is Fire, Extended Coverage, Builder's Risk, Installation Risk or similar coverage for "your work";

##### (2) Premises Rented To You

That is fire, lightning or explosion insurance for premises rented to you or temporarily occupied by you with permission of the owner;

### (3) Tenant Liability

That is insurance purchased by you to cover your liability as a tenant for "property damage" to premises rented to you or temporarily occupied by you with permission of the owner;

### (4) Aircraft, Auto Or Watercraft

If the loss arises out of the maintenance or use of aircraft, "autos" or watercraft to the extent not subject to Exclusion g. of Section I - Coverage A - Bodily Injury And Property Damage Liability;

### (5) Property Damage To Borrowed Equipment Or Use Of Elevators

If the loss arises out of "property damage" to borrowed equipment or the use of elevators to the extent not subject to Exclusion j. of Section I - Coverage A - Bodily Injury And Property Damage Liability;

### (6) When You Are Added As An Additional Insured To Other Insurance

Any other insurance available to you covering liability for damages arising out of the premises or operations, or products and completed operations, for which you have been added as an additional insured by that insurance; or

### (7) When You Add Others As An Additional Insured To This Insurance

Any other insurance available to an additional insured.

However, the following provisions apply to other insurance available to any person or organization who is an additional insured under this coverage part.

#### (a) Primary Insurance When Required By Contract

This insurance is primary if you have agreed in a written contract or written agreement that this insurance be primary. If other insurance is also primary, we will share with all that other insurance by the method described in c. below.

#### (b) Primary And Non-Contributory To Other Insurance When Required By Contract

If you have agreed in a written contract, written agreement, or permit that this insurance is primary and non-contributory with the additional insured's own insurance, this insurance is primary and we will not seek contribution from that other insurance.

Paragraphs (a) and (b) do not apply to other insurance to which the additional insured has been added as an additional insured.

When this insurance is excess, we will have no duty under Coverages A or B to defend the insured against any "suit" if any other insurer has a duty to defend the insured against that "suit". If no other insurer defends, we will undertake to do so, but we will be entitled to the insured's rights against all those other insurers.

When this insurance is excess over other insurance, we will pay only our share of the amount of the loss, if any, that exceeds the sum of:

- (1) The total amount that all such other insurance would pay for the loss in the absence of this insurance; and
- (2) The total of all deductible and self-insured amounts under all that other insurance.

We will share the remaining loss, if any, with any other insurance that is not described in this Excess Insurance provision and was not bought specifically to apply in excess of the Limits of Insurance shown in the Declarations of this Coverage Part.

**c. Method Of Sharing**

If all of the other insurance permits contribution by equal shares, we will follow this method also. Under this approach each insurer contributes equal amounts until it has paid its applicable limit of insurance or none of the loss remains, whichever comes first.

If any of the other insurance does not permit contribution by equal shares, we will contribute by limits. Under this method, each insurer's share is based on the ratio of its applicable limit of insurance to the total applicable limits of insurance of all insurers.

**5. Premium Audit**

- a. We will compute all premiums for this Coverage Part in accordance with our rules and rates.
- b. Premium shown in this Coverage Part as advance premium is a deposit premium only. At the close of each audit period we will compute the earned premium for that period and send notice to the first Named Insured. The due date for audit and retrospective premiums is the date shown as the due date on the bill. If the sum of the advance and audit premiums paid for the policy period is greater than the earned premium, we will return the excess to the first Named Insured.
- c. The first Named Insured must keep records of the information we need for premium

computation, and send us copies at such times as we may request.

**6. Representations**

**a. When You Accept This Policy**

By accepting this policy, you agree:

- (1) The statements in the Declarations are accurate and complete;
- (2) Those statements are based upon representations you made to us; and
- (3) We have issued this policy in reliance upon your representations.

**b. Unintentional Failure To Disclose Hazards**

If unintentionally you should fail to disclose all hazards relating to the conduct of your business that exist at the inception date of this Coverage Part, we shall not deny coverage under this Coverage Part because of such failure.

**7. Separation Of Insureds**

Except with respect to the Limits of Insurance, and any rights or duties specifically assigned in this Coverage Part to the first Named Insured, this insurance applies:

- a. As if each Named Insured were the only Named Insured; and
- b. Separately to each insured against whom claim is made or "suit" is brought.

**8. Transfer Of Rights Of Recovery Against Others To Us**

**a. Transfer Of Rights Of Recovery**

If the insured has rights to recover all or part of any payment, including Supplementary Payments, we have made under this Coverage Part, those rights are transferred to us. The insured must do nothing after loss to impair them. At our request, the insured will bring "suit" or transfer those rights to us and help us enforce them.

**b. Waiver Of Rights Of Recovery (Waiver Of Subrogation)**

If the insured has waived any rights of recovery against any person or organization for all or part of any payment, including Supplementary Payments, we have made under this Coverage Part, we also waive that right, provided the insured waived their rights of recovery against such person or organization in a contract, agreement or permit that was executed prior to the injury or damage.

**9. When We Do Not Renew**

If we decide not to renew this Coverage Part, we will mail or deliver to the first Named Insured shown in the Declarations written notice of the



**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**NOTICE OF CANCELLATION OR NON-RENEWAL TO DESIGNATED PERSON(S) OR ORGANIZATION(S) OTHER THAN THE NAMED INSURED**

This policy is subject to the following conditions.

| <b>SCHEDULE</b>                                    |                                                       |
|----------------------------------------------------|-------------------------------------------------------|
| <b>Number of Days Notice</b> <u>    30    </u>     |                                                       |
| <b>Name of Person(s) or Organization(s)</b>        | <b>Mailing Address</b>                                |
| Office of Economic Development<br>City of Berkeley | 2180 Milvia Street<br>5th Floor<br>Berkeley, CA 94704 |

If this policy is cancelled or non-renewed, we agree that the person(s) or organization(s) listed in the Schedule above will be notified at least:

- a. 10 days before the effective date of cancellation if we cancel for non-payment of premium; or
- b. The number of days shown in the Schedule above before the effective date of cancellation or non-renewal if we cancel or non-renew for any other reason.

In no event, however, will notice of cancellation or non-renewal be less than the minimum number of days required by the jurisdiction to which this endorsement applies. Also, please note that failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.

If notice is mailed, proof of mailing to the address shown in the Schedule above will be sufficient proof of notice.





## ORDINANCE NO. 7,626-N.S.

AUTHORIZING THE CITY MANAGER TO EXECUTE A FRANCHISE AGREEMENT BETWEEN IKE SMART CITY, LLC AND THE CITY OF BERKELEY TO OPERATE WAYFINDING KIOSKS IN BERKELEY FOR NO LESS THAN 15 YEARS

BE IT ORDAINED by the Council of the City of Berkeley as follows:

Section 1. The Council finds as follows:

- a. Visit Berkeley (formerly the Convention and Visitors Bureau) has entered into a contract with IKE Smart City, LLC (IKE) to install and operate wayfinding kiosks.
- b. The kiosks will provide various public benefits, including real-time transportation information, job listings for Berkeley residents and youth, promotion of local retail, shelter and service information for homeless individuals, and public health and safety information and notifications.
- c. The IKE wayfinding kiosks rely on sponsorship and advertising revenue.
- d. The wayfinding kiosks will be located on the city's public rights of way and will generate revenue for Visit Berkeley and the City of Berkeley.
- e. Up to 31 wayfinding kiosks will be distributed throughout the commercial districts of Berkeley.

Section 2. The City Manager is hereby authorized to enter into a 15 year franchise agreement, which may be extended upon mutual consent with IKE Smart City LLC, as operator of the wayfinding kiosks program. As a contracting agent to the City for marketing, wayfinding and other information, Visit Berkeley is an appropriate party to administer and oversee the IKE kiosk program. The proposed revenue allocation is that IKE will provide 10% of gross revenues to Visit Berkeley in the first two years of the program and 25% in subsequent years of the term. Visit Berkeley may retain the lesser amount of 25% of the revenue share or \$100,000, for its costs for administration of the program, and will distribute the remainder of the revenue share to the City of Berkeley. The revenue will be distributed to the City within 30 days of Visit Berkeley receiving it and preliminary projections anticipate approximately \$829,361 per year in General Fund revenue to the City of Berkeley once the program is fully deployed, or approximately \$26,754 per year per kiosk that is deployed.

Section 3. Copies of this Ordinance shall be posted for two days prior to adoption in the display case located near the walkway in front of Council Chamber, 2134 Martin Luther King Jr. Way. Within 15 days of adoption, copies of this Ordinance shall be filed at each branch of the Berkeley Public Library and the title shall be published in a newspaper of general circulation.

At a regular meeting of the Council of the City of Berkeley held on September 25, 2018, this Ordinance was passed to print and ordered published by posting by the following vote:

Ayes: Bartlett, Droste, Hahn, Harrison, Maio, Wengraf, Worthington and Arreguin.

Noes: None.

Abstain: Davila.

Absent: None.

**RECEIVED**  
JUL 05 2019  
CITY OF BERKELEY  
CITY CLERK DEPARTMENT





Office of the City Manager

CONSENT CALENDAR  
December 13, 2022

To: Honorable Mayor and Members of the City Council  
 From: Dee Williams-Ridley, City Manager  
 Submitted by: David Sprague, Interim Fire Chief  
 Subject: Contract: Berkeley Fire Medical Director

RECOMMENDATION

Adopt a Resolution authorizing the City Manager to execute a contract and any amendments, with Herbert Gene Hern, MD to serve as the Berkeley Fire Medical Director for five years from July 1, 2022 until June 30, 2027 in the amount not to exceed \$400,000.

FISCAL IMPACTS OF RECOMMENDATION

Year one of the contract shall not exceed \$112,000, each subsequent year will shall not exceed \$72,000. The contract will be paid from Measure GG.

CURRENT SITUATION AND ITS EFFECTS

As the Medical Director for the fire department since 2016, Dr. Herbert E. Hern oversaw the implementation of the department's narcotic program. As such, he has deep and specialized knowledge of the program. Over the last six plus years Dr. Hern has directed the execution of the department's Quality Assurance/Quality Improvement (QA/QI) plan, and supervised its annual revision for submission to regulators. This has provided him a unique understanding of the QA/QI program.

The department is on the threshold of implementing the largest transformation of its Emergency Medical Services (EMS) delivery model in four decades. A key to the successful implementation this new delivery model is having a Medical Director with his specific, unique, and direct knowledge of the Berkeley Fire Department's current narcotic and QA/QI programs. This knowledge provides some stability to the Department as it adapts to a new model, as it will be important to know why current systems were created, how to adapt them to current needs while still maintaining compliance with local, state and federal regulators.

The payment in year one of this agreement includes an additional \$40,000 than the subsequent four years to cover work that has been performed from July through December of 2022.

### BACKGROUND

In order for the fire department to provide Advance Life Support (ALS) paramedic services it is required to have a Medical Director. The Medical Director fills several critical functions which include the purchase of medications (including controlled substances), evaluation of novel medical equipment, Quality Assurance / Quality Improvement program oversight, and liaison with receiving hospitals.

Under the Medical Director's Drug Enforcement Agency (DEA) license, the Medical Director is the DEA Registrant for the fire department. As the DEA registrant, the Medical Director authorizes the fire department to purchase and administer medications. Of particular importance, as the DEA registrant, the Medical Director provides oversight of the controlled substance program (Narcotic Program). This oversight includes the approval of the tracking system, reverse distribution (destruction of expired or half used medication), and purchasing.

Serving as the head of the QA / QI program, the Medical Director ensures the fire department is meeting regulator (Alameda County Emergency Medical Services Agency / California Emergency Medical Services Authority) requirements to monitor the care provided by department paramedics by overseeing the creation and maintenance of the QA / QI Plan.

### ENVIRONMENTAL SUSTAINABILITY AND CLIMATE IMPACTS

There is no environmental effect as a result of this Resolution.

### RATIONALE FOR RECOMMENDATION

Dr. Hern has been the medical director for the Department since 2016. As such, he has deep and specialized knowledge of the program. The department is on the threshold of implementing the largest transformation of its Emergency Medical Services (EMS) delivery model in four decades. A key to the successful implementation of a new delivery model is having a Medical Director that with his specific, unique, and direct knowledge of our current narcotic and QA/QI programs.

### ALTERNATIVE ACTIONS CONSIDERED

Conduct a full competitive solicitation.

### CONTACT PERSON

David Sprague, Interim Fire Chief

Attachments:  
1: Resolution

RESOLUTION NO. ##,###-N.S.

CONTRACT: HERBERT GENE HERN, MD FOR BERKELEY FIRE MEDICAL  
DIRECTOR

WHEREAS, as the Medical Director for the fire department since 2016, Dr. Herbert E. Hern oversaw the implementation of the departments narcotic program. As such, he has deep and specialized knowledge of the program, and

WHEREAS, the department is on the threshold of implementing the largest transformation of its Emergency Medical Services (EMS) delivery model in four decades, and

WHEREAS, a key to the successful implementation of a new delivery model is having a Medical Director that with his specific, unique, and direct knowledge of our current narcotic and QA/QI programs, and

WHEREAS, in order for the fire department to provide Advance Life Support (ALS) paramedic services it is required to have a Medical Director.

NOW THEREFORE, BE IT RESOLVED by the Council of the City of Berkeley that the City Manager is authorized to execute a contract and any amendments, with Herbert Gene Hern, MD to serve as the Berkeley Fire Medical Director for five years from July 1, 2022 until June 30, 2027 in the amount not to exceed \$400,000.







Office of the City Manager

CONSENT CALENDAR  
December 13, 2022

To: Honorable Mayor and Members of the City Council

From: Dee Williams-Ridley, City Manager

Submitted by: Lisa Warhuus, Director, Health, Housing and Community Services

Subject: Contract: Statewide Prevention and Early Intervention Project FY2023  
Participation Agreement – California Mental Health Services Authority

RECOMMENDATION

Adopt a Resolution authorizing the City Manager or her designee to enter into a Participation Agreement for FY2023 and any amendments with the California Mental Health Services Authority (CalMHSA) to allocate Mental Health Services Act (MHSA) funds in the amount of \$70,907 to participate in the Statewide Prevention and Early Intervention (PEI) Project, for a total amount not to exceed \$70,907 through June 30, 2023.

FISCAL IMPACTS OF RECOMMENDATION

Funding in the amount of \$70,907 for this PEI Statewide Project, is available in the FY2023 Budget in the Mental Health Services Act Fund (Fund #315).

CURRENT SITUATION AND ITS EFFECTS

Through the City's approved *MHSA Three Year Plans and Annual Updates*, 4% of the City's MHSA funds designated for PEI have been allocated annually to participate in the Statewide PEI Project administered by the California Mental Health Services Authority (CalMHSA). Since 2018, the City has participated in this initiative. In FY2022, CalMHSA began requiring mental health jurisdictions to enter into a Participation Agreement on an annual basis in order to allocate funds and continue to receive services through the Statewide PEI Project. Staff recommend that Council approve executing the Statewide PEI Project Participation Agreement for FY2023 and transfer of funds to CalMHSA to be able to continue to receive information and resources from this project.

California mental health jurisdictions, like the City of Berkeley, can elect to participate in the PEI program by allocating a portion of local MHSA PEI funds on an annual basis to CalMHSA. CalMHSA then contracts for a variety of mental health prevention and early intervention activities which benefit the local jurisdictions.

Funded services have included the distribution of information and resources on suicide prevention, stigma and discrimination reduction, and student mental health for local use. Staff in the Mental Health Division of the Department of Health, Housing and Community Services (HHCS/MH) have also received trainings on client “Sexual Orientation and Gender Identity Expression” (SOGIE) through this project. Most recently, HHCS/MH has distributed materials in the community on the “Take Action for Mental Health” campaign, a new initiative of this project. This PEI funded project enables HHCS/MH to broaden the reach of information and resources to a wider population across the City. MHSA PEI funds are integral in supporting individuals with a variety of mental health needs across the spectrum of care.

### BACKGROUND

The California Mental Health Services Authority (CalMHSA) is a Joint Powers Authority (JPA) that was formed in 2009 to create a separate public entity to provide administrative and fiscal services in support of members mental/behavioral health departments statewide acting alone or in collaboration with other Departments. CalMHSA is governed by a Board of Directors that is comprised of the participating county or city mental/behavioral health director and contributing cities/counties provide direction into the types of initiatives that are implemented.

Since 2018, the amount paid for this initiative on an annual basis has varied from year to year, between \$42,000 to \$66,000, depending on the amount of local PEI revenue. With Resolution No. 70,461-N.S., the City Council approved the *MHSA FY2023 Annual Update* and allocated \$70,907 of local PEI funds in FY2023 for this initiative.

### ENVIRONMENTAL SUSTAINABILITY AND CLIMATE IMPACTS

There are no identifiable environmental effects or opportunities associated with the subject of this project.

### RATIONALE FOR RECOMMENDATION

PEI services were included in the City’s MHSA Plan because of community need and interest. Council previously approved the MHSA Plan which identified using these funds for this purpose. The PEI program is an important resource that provides information, services, and supports to individuals with a variety of mental health needs across the system of care. Authorizing the required agreement will allow the community to access these resources.

### ALTERNATIVE ACTIONS CONSIDERED

The City could opt to stop participating in CalMHSA’s PEI Initiative. Staff do not recommend this course of action because of the high value of these services to the community.

### CONTACT PERSON

Karen Klatt, Community Services Specialist III, HHCS, (510) 981-7644

Attachment:  
1. Resolution

RESOLUTION NO. ##,###-N.S.

STATEWIDE PREVENTION AND EARLY INTERVENTION PROJECT FY2023  
PARTICIPATION AGREEMENT - CALIFORNIA MENTAL HEALTH SERVICES  
AUTHORITY

WHEREAS, the California Mental Health Services Authority (CalMHSA) is a Joint Powers Authority (JPA), that provides administrative and fiscal services in support of Members' Mental/Behavioral Health Departments acting alone or in collaboration with other Departments; and

WHEREAS, the City of Berkeley is a participant in this JPA; and

WHEREAS, since 2018, through City Council-*approved MHSAs Three Year Plans and Annual Updates* the City of Berkeley has allocated four percent of local Mental Health Services Act (MHSAs) Prevention and Early Intervention (PEI) funds to participate in the statewide PEI program; and

WHEREAS, beginning in FY2022 in order to participate and allocate local PEI funds for this initiative, CalMHSA began requiring counties/cities to enter into an annual Participation Agreement; and

WHEREAS, the FY2022 Participation Agreement was executed and funds were allocated to participate in this initiative; and

WHEREAS, per Resolution No. 70,461-N.S., the City Council approved the City's MHSAs FY2023 Annual Update, which allocates \$70,907 of local PEI funds for this initiative; and

WHEREAS, in order to execute the FY2023 Participation Agreement and allocate funds to CalMHSA to continue participation in this initiative, City Council approval is required; and

WHEREAS, funding in the amount of \$70,907 for this PEI Statewide Project, is available in the FY2023 Budget in the Mental Health Services Act Fund (Fund #315).

NOW THEREFORE, BE IT RESOLVED by the Council of the City of Berkeley that the City Manager or her designee is hereby authorized to execute a Statewide PEI Project Participation Agreement for FY2023 and any amendments with CalMHSA, and allocate funds in the amount of \$70,907 for a total amount not to exceed \$70,907, through June 30, 2023.



Office of the City Manager

CONSENT CALENDAR  
December 13, 2022

To: Honorable Mayor and Members of the City Council  
 From: Dee Williams-Ridley, City Manager  
 Submitted by: Lisa Warhuus, Director, Health, Housing and Community Services  
 Subject: Contract: Resource Development Associates Specialized Care Unit and  
 Community Crisis Response Services Program Evaluation

RECOMMENDATION

Adopt a Resolution authorizing the City Manager to execute a contract and any amendments with Resource Development Associates (Contractor) to design and implement an evaluation for program effectiveness of the Specialized Care Unit and Community Crisis Response Services (Bridge Services). Services will begin on January 1, 2023 and extend to June 30, 2025 in an amount not to exceed \$150,000.

FISCAL IMPACTS OF RECOMMENDATION

Funding in the amount of \$150,000 for the Specialized Care Unit program effectiveness evaluation is available in the FY2023 budget in One-Time fund (Fund 336).

CURRENT SITUATION AND ITS EFFECTS

As the City moves closer to implementing the Specialized Care Unit, there needs to be a robust evaluation of the pilot program to identify necessary operational changes and provide a report on the overall effectiveness of this new program for the Berkeley community. Similarly, an evaluation needs to be conducted for the Community Crisis Response Services (“Bridge Services” to the SCU) which have served community members over the last calendar year.

Given their previous engagement on a variety of SCU activities, the Department of Health, Housing and Community Services (HHCS) recommends entering in to new contract with Resources Development Associates (RDA) for the program evaluation services. In its previous work, RDA has gained expertise in the model chosen, provided excellent services and work products, and developed a high degree of trust among SCU stakeholders in the community.

The evaluation for the SCU and the associated Community Crisis Response Services is a Strategic Plan Priority Project, advancing our goal to champion and demonstrate social and racial equity.

## BACKGROUND

In Fall 2020, Resource Development Associates (RDA) was selected through a competitive bid process to provide an extensive research, community engagement, and recommendations to create the framework for the Specialized Care Unit (see Attachments 2-4). This process involved working across multiple Berkeley stakeholder groups, including service utilizers, and in-depth research regarding crisis response systems to best inform a behavioral crisis response model to meet Berkeley's needs.

To oversee and advise on this process, the City formed an SCU Steering Committee consisting of representatives from the Health, Housing, and Community Services Department, the Berkeley Fire Department, appointees of the Mental Health Commission, and community representatives from the Berkeley Community Safety Coalition.

With guidance from the Steering Committee, RDA created three reports. The first report provides detailed information about 37 alternative crisis response models that have been implemented in the United States and internationally. The second report provides information about Berkeley's current crisis response system and also summarizes stakeholder perspectives gathered through a deep community engagement process conducted by RDA; in which input was gathered from utilizers of Berkeley's crisis response services, local community-based organizations (CBOs), local community leaders, and City of Berkeley and Alameda County agencies. RDA's third and final report utilized information gathered in completing the first two reports and makes specific recommendations for an SCU model for Berkeley.

## ENVIRONMENTAL SUSTAINABILITY AND CLIMATE IMPACTS

No environmental sustainability and climate impacts directly associated with this recommendation have been identified.

## RATIONALE FOR RECOMMENDATION

Resource Development Associates (RDA) has been a significant partner on this project for the past two years and is the only contractor that possesses both extensive knowledge about the SCU design process and program model, and has established important and trusting relationships with key stakeholders who are driving SCU implementation.

Given their community engagement and Berkeley-specific expertise about what constitutes a successful SCU Pilot Program, working with RDA will elicit higher community trust, leading to increased validity of performance measures and outcomes. Additionally, contracting with RDA will allow for more efficient evaluation given their existing strong familiarity with the SCU program.

ALTERNATIVE ACTIONS CONSIDERED

The City could choose to go through another competitive bidding process to identify an evaluator. However, RDA's existing level of knowledge and credibility with stakeholders would be impossible for another firm to match, so this approach is not recommended.

CONTACT PERSON

Lisa Warhuus, Director, Health, Housing and Community Services, 510-981-5404

Attachments:

- 1: Resolution
- 2: City of Berkeley Crisis Models Report (Research Development Associates)
- 3: City of Berkeley Mental Health Crisis Response Services and Stakeholder Perspectives Report (Research Development Associates)
- 4: City of Berkeley Specialized Care Unit Crisis Response Recommendations (Research Development Associates)

RESOLUTION NO. ##,###-N.S.

CONTRACT: RESOURCE DEVELOPMENT ASSOCIATES EVALUATION FOR  
SPECIALIZED CARE UNIT AND COMMUNITY CRISIS RESPONSE SERVICES

WHEREAS, the City of Berkeley passed an omnibus package to reimagine public safety, including the establishment of a Specialized Care Unit (SCU) to respond to nonviolent behavioral health calls and

WHEREAS, the City of Berkeley released a Request for Proposals and then awarded a contract to the most qualified applicant, Resource Development Associates (RDA), to conduct extensive community engagement to provide design recommendations for the Specialized Care Unit; and

WHEREAS, the Specialized Care Unit will be implemented using RDA's recommendations and accompanying Steering Committee Analysis; and

WHEREAS, the evaluation of the Specialized Care Unit will require expertise and community trust to create a valid and reliable evaluation of this program.

NOW THEREFORE, BE IT RESOLVED by the Council of the City of Berkeley that the City Manager is authorized to execute a contract and any amendments with Resource Development Associates (Contractor) to design and implement an evaluation for program effectiveness of the Specialized Care Unit and Community Crisis Response Services (Bridge Services). Services will begin on January 1, 2023 and extend to June 30, 2025 in an amount not to exceed \$150,000 in One-time Fund (Fund 336) available in the FY2023 budget.





# City of Berkeley

## Crisis Response Models Report



# City of Berkeley

## Specialized Care Unit Model Recommendations

Crisis Response Models Report

Caroline de Bie

Sarah Ferrell

Sasha Gayle-Schneider

Jamie Dorsey

Nicole Gamache-Kocol

Kevin Wu

This report was developed by Resource Development Associates under contract with the City of Berkeley Health, Housing & Community Services Department.

Resource Development Associates, September 2021





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## Introduction

In response to the killing of George Floyd by Minneapolis police in May 2020 and the ensuing protests across the nation for this and many other similar tragedies, a national conversation emerged about how policing can be done differently in local communities. The Berkeley City Council initiated a broad reaching process to reimagine policing in the City of Berkeley. As part of that process, in July 2020, the Berkeley City Council directed the City Manager to pursue reforms to limit the Berkeley Police Department's scope of work to "primarily violent and criminal matters." These reforms included, in part, the development of a Specialized Care Unit (SCU) pilot to respond to mental health crises without the involvement of law enforcement.

In order to inform the development of an SCU, the City of Berkeley contracted with Resource Development Associates (RDA) to conduct a feasibility study that includes community-informed program design recommendations, a phased implementation plan, and funding considerations. As part of this feasibility study, RDA reviewed the components of nearly 40 crisis response programs in the United States and internationally, including virtually meeting with 10 programs between June and July 2021. This report provides a synthesized summary of RDA's findings, including common themes that emerged from across the programs, how they were implemented, considerations and rationale for design components, and overall key lessons learned. Please see the table below for a list of the programs that RDA reviewed. For the first nine programs listed (in bold and italics), RDA conducted phone interviews with representatives to obtain a further understanding of their program models; these programs are cited more often in this report because RDA had more details about them. For the remaining programs listed, RDA reviewed information that was available online. For a tabular summary of the key components of each crisis response program that RDA reviewed, please see Appendix C at the end of this report.

Additionally, SAMHSA's summary of its National Guidelines for Behavioral Health Crisis Care (released in 2020) is included in Appendix A of this report.

| <b><u>Program Name</u></b>                                                           | <b><u>Location</u></b>                   |
|--------------------------------------------------------------------------------------|------------------------------------------|
| <b><i>B-HEARD (the Behavioral Health Emergency Assistance Response Division)</i></b> | <b><i>New York, NY</i></b>               |
| <b><i>Crisis Assistance Helping Out On The Streets (CAHOOTS)</i></b>                 | <b><i>Eugene, OR</i></b>                 |
| <b><i>Crisis Response Pilot</i></b>                                                  | <b><i>Chicago, IL</i></b>                |
| <b><i>Expanded Mobile Crisis Outreach Team (EMCOT)</i></b>                           | <b><i>Austin, TX</i></b>                 |
| <b><i>Mental Health First / Anti-Police Terror Project</i></b>                       | <b><i>Sacramento and Oakland, CA</i></b> |
| <b><i>Portland Street Response</i></b>                                               | <b><i>Portland, OR</i></b>               |

| <u>Program Name</u>                                                                       | <u>Location</u>                         |
|-------------------------------------------------------------------------------------------|-----------------------------------------|
| <b><i>REACH 24/7 Crisis Diversion</i></b>                                                 | <b><i>Edmonton, Alberta, Canada</i></b> |
| <b><i>Support Team Assisted Response (STAR)</i></b>                                       | <b><i>Denver, CO</i></b>                |
| <b><i>Street Crisis Response Team (SCRT)</i></b>                                          | <b><i>San Francisco, CA</i></b>         |
| Albuquerque Community Safety Department                                                   | Albuquerque, NM                         |
| Boston Police Department's Co-Responder Program                                           | Boston, MA                              |
| Community Assessment & Transport Team (CATT)                                              | Alameda County, CA                      |
| Community Paramedicine                                                                    | California (statewide)                  |
| Crisis Call Diversion Program (CCD)                                                       | Houston, TX                             |
| Crisis Now                                                                                | National model (via SAMHSA)             |
| Crisis Response Unit                                                                      | Olympia, WA                             |
| Cuyahoga County Mobile Crisis Team                                                        | Cuyahoga County, Ohio                   |
| Department of Community Response                                                          | Sacramento, CA                          |
| Department of Community Solutions and Public Safety                                       | Ithaca, NY                              |
| Downtown Emergency Service Center (DESC) Mobile Crisis Team                               | King County, WA                         |
| Georgia Crisis & Access Line (GCAL)                                                       | Georgia (statewide)                     |
| Los Angeles County Department of Mental Health – ACCESS Center                            | Los Angeles County, CA                  |
| Los Angeles County Department of Mental Health – Co-Response Program                      | Los Angeles County, CA                  |
| Los Angeles County Department of Mental Health – Psychiatric Mobile Response Teams (PMRT) | Los Angeles County, CA                  |
| Mobile Assistance Community Responders of Oakland (MACRO)                                 | Oakland, CA                             |
| Mental Health Acute Assessment Team (MHAAT)                                               | Sydney, Australia                       |
| Mental Health Mobile Crisis Team (MHMCT)                                                  | Nova Scotia, Canada                     |
| Mobile Crisis Assistance Team (MCAT)                                                      | Indianapolis, IN                        |
| Mobile Crisis Rapid Response Team (MCRRT)                                                 | Hamilton, Ontario, Canada               |
| Mobile Emergency Response Team for Youth (MERTY)                                          | Santa Cruz, CA                          |
| Mobile Evaluation Team (MET)                                                              | East Oakland, CA                        |
| Psykiatrisk Akut Mobilitet (PAM) Unit, the Psychiatric Emergency Response Team            | Stockholm, Sweden                       |

| <b><u>Program Name</u></b>                                           | <b><u>Location</u></b>          |
|----------------------------------------------------------------------|---------------------------------|
| Police and Clinician Emergency Response (PACER)                      | Australia (several locations)   |
| Seattle Crisis Response Team                                         | Seattle, WA                     |
| Street Triage                                                        | England (several locations)     |
| Therapeutic Transportation Pilot Program/Alternative Crisis Response | Los Angeles City and County, CA |
| Toronto Crisis Response                                              | Toronto, Ontario, Canada        |

## Crisis Response Models: An Overview

Of the crisis response program models reviewed, almost all specify that they respond to mental health and behavioral health concerns in their communities. Some models additionally specify that they respond to non-emergency calls, crises or disturbances related to substance use, homelessness, physical assault and sexual assault, family crises, and/or youth-specific concerns, as well as conduct welfare checks.

In California, Alameda County has the highest rate of 5150 psychiatric holds in the entire state.<sup>1</sup> Of those Alameda County individuals placed on a 5150 psychiatric hold that were transferred to a psychiatric emergency services unit, 75-85% of the cases did not meet medically necessary criteria to be placed in inpatient acute psychiatric services. This demonstrates an overuse of emergency psychiatric services in Alameda County, which creates challenges in local communities such as having lengthy wait times for ambulance services when these ambulances are tied up transporting and waiting to discharge individuals on 5150 holds at psychiatric emergency service units.

Mental health crises are varied - they affect individuals across their lifespans, manifest in a variety of behaviors, and exist on a spectrum of

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<sup>1</sup> INN Plan – Alameda County: Community Assessment and Transport Team (CATT) – October 25, 2018. (2018, October 25). California Mental Health Services Oversight and Accountability Commission. <http://www.mhsoac.ca.gov/document/inn-plan-alameda-county-community-assessment-and-transport-team-catt-october-25-2018> & [https://mhsoac.ca.gov/sites/default/files/documents/2018-10/Alameda\\_INN%20Project%20Plan\\_Community%20Assessment%20and%20Transport%20Team\\_8.6.2018\\_Final.pdf](https://mhsoac.ca.gov/sites/default/files/documents/2018-10/Alameda_INN%20Project%20Plan_Community%20Assessment%20and%20Transport%20Team_8.6.2018_Final.pdf)



severity and risk. A crisis response system ultimately seeks to provide care to individuals in the midst of a mental health crisis, keeping the individual and their surrounding community safe and healthy, and preventing the escalation of the crisis or exacerbating strains to mental and emotional well-being. As such, there are many considerations for the design of a mental health crisis response system that addresses the current shortcoming or flaws in existing models around the country and internationally.

Traditionally, the U.S. crisis response system has been under the purview of local police departments, typically with the support of local fire departments and emergency medical services (EMS), and activated by the local 911 emergency phone line. Over time, communities have responded to the need for a response system that better meets the mental health needs of community members by activating medical or therapeutic personnel in crisis response instead of traditional first responders (i.e., police, fire, EMS).

| Term                                     | Definition                                                                                                                                                                                                                                                                  |
|------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <i>Traditional Crisis Response Model</i> | For the purposes of this report, we assume a traditional crisis response model includes having all crises routed through a 911 center that then dispatches the local law enforcement agency (as well as fire department and/or EMS, if necessary) to respond to the crisis. |
| <i>Co-Responder Model</i>                | Co-responder models vary in practice, but they generally involve law enforcement officers and behavioral health clinicians working together to respond to calls for service involving an individual experiencing a behavioral health crisis.                                |
| <i>911 Diversion Programs</i>            | Programs with processes whereby police, fire, and EMS dispatchers divert eligible non-emergency, mental health-related calls to behavioral health specialists, who then manage crisis by telephone and offer referrals to needed services.                                  |
| <i>Alternate Model</i>                   | Emerging and innovative behavioral health crisis response models that minimize law enforcement involvement and emphasize community-based provider teams and solutions for responding to individuals experiencing behavioral health crises.                                  |

Like a physical health crisis that requires treatment from medical professionals, a mental health crisis requires responses from mental health professionals. Tragically, police are 16 times more likely to kill someone

with a mental health illness compared to others without a mental illness.<sup>2</sup> A November 2016 study published in the American Journal of Preventative Medicine estimated that 20% to 50% of fatal encounters with law enforcement involved an individual with a mental illness.<sup>3</sup> As a result, communities have begun to consider the urgent need for crisis response models that include mental health professionals rather than police.

In the current national discussion about appropriate crisis response strategies for individuals experiencing mental health crises, the prominent concerns voiced have typically focused on the safety of crisis responders and community members, the funding of such programs, and balancing a sense of urgency to implement new models quickly with the need for intentional planning and preparation. In order to understand the current models that exist, RDA reviewed nearly 40 national and international crisis response programs and specifically interviewed staff from 9 programs about their:

- Program planning efforts, including community engagement strategies, coordinating across city agencies and partner organizations, and program planning, implementation, and evaluation activities;
- Models' key elements, including dispatch, staffing, transport capabilities, follow-up care, and more;
- Program financing;
- Other considerations that were factored into their program planning; and
- Key lessons learned or advice for the City of Berkeley's implementation of its SCU.

## Components of Crisis Response Models

While each crisis response program was designed to meet the needs of its local community, there are several overarching components that were common across the programs that RDA explored. The majority of crisis response programs use their community's existing 911 infrastructure for dispatch. Most programs respond to mental health and behavioral health calls where they engage in de-escalation, assessment, referral, and

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<sup>2</sup> Szabo, L. (2015, December 10). People with mental illness 16 times more likely to be killed by police. USA Today.

<https://www.usatoday.com/story/news/2015/12/10/people-mental-illness-16-times-more-likely-killed-police/77059710/>

<sup>3</sup> DeGue, S., Fowler, K.A., & Calkins, C. (2016). Deaths Due to Use of Lethal Force by Law Enforcement. *American Journal of Preventive Medicine*, 51 (5), S173-S187. [https://www.ajpmonline.org/article/S0749-3797\(16\)30384-1/fulltext](https://www.ajpmonline.org/article/S0749-3797(16)30384-1/fulltext)



transport. Nearly all programs recognize the need to operate 24/7. Staffing structure varies by the needs of the community, but many response team units are staffed by teams of two to three individuals and can include a combination of mental health professionals, physical health professionals, and peers with lived experience. Many teams arrive in plainclothes or T-shirts with logos in a vehicle equipped with medical and engagement items. Teams typically receive skills-based training in de-escalation, crisis intervention, situational awareness, and communication. Crisis teams will either transport clients themselves or call a third party to transport, depending on the legal requirements and staffing structure of the crisis response team. Programs varied in their inclusion and provision of follow-up care.

Underneath the high-level similarities of the crisis response models that RDA researched are the tailored nuances that each program adapted to its local needs, capacities, and priorities. Below are additional details, considerations, and examples from existing models to further inform the City of Berkeley's development and implementation of its SCU.

## Accessing the Call Center

Of the reviewed crisis response programs, the majority use the existing local 911 infrastructure, including its call receiving and dispatch technology and staff. There are several advantages to this approach. The general public is typically familiar with the number and process for calling 911, which can reduce the barrier for accessing services. Also, because 911 call centers already have a triage protocol for behavioral health calls, there can be a more seamless transfer of these types of calls to the local crisis response program. Additionally, some calls might not be reported as a mental health emergency but can be identified as such by trained 911 dispatch staff.

Generally, the administration of 911 varies across the nation. In some locales, 911 is operated by the police department, while in other locales it is administered centrally across all emergency services. Some programs have mental health staff situated in the 911 call center to: a) directly answer calls; b) support calls answered by 911 staff; and/or c) provide services over the phone as a part of the 911 call center's response. In Chicago, in addition to diverting more calls to the crisis response program, the staff of Chicago's Crisis Response Pilot anticipates that having mental health clinicians embedded in their call center to do triage and telemedicine will help them lay the foundation for a smooth transition to 988.

988 is the three-digit phone call for the National Suicide Prevention Lifeline. By July 16, 2022, phone service providers across the country will direct all calls to 988 to the National Suicide Prevention Lifeline, so that Americans in crisis can connect with suicide prevention and mental health crisis

counselors.<sup>4</sup> In California, AB 988 was passed in the State Assembly on June 2, 2021 (and is currently waiting on passage by the State Senate) – AB 988 seeks to allocate \$50 million for the implementation of 988 centers that have trained counselors receiving calls, as well as a number of other system-level changes.<sup>5</sup> In RDA’s research of crisis response models, some programs are actively planning for the upcoming 988 implementation when exploring the functionalities of their local 911 infrastructure and responsibilities; other programs were not differentiating 988 from 911 in the communities. For the purposes of this report, moving forward, we will not differentiate 911 from 988, and will refer to all emergency calls for service as going to 911.

Other programs use an alternative phone number in addition to or instead of 911. These numbers can be an existing non-emergency number (like 211) or a new phone number that goes directly to the crisis response program. Oftentimes a program will utilize an alternative phone number when they believe that people, particularly those disproportionately impacted by police violence, do not feel safe calling 911 because they fear a law enforcement response. Portland’s Street Response team & Denver’s STAR team use both a non-emergency number and 911, routed to the same call center. This supports community members that are hesitant to use 911 while also ensuring that calls that do come through 911 are still routed to Portland’s Street Response team. Overall, designing a system in Portland with both options was intended to increase community members’ access to mental health crisis services. Given that Portland’s program began on February 16, 2021, not enough time has elapsed for findings to be generated regarding the success of this model. But a current challenge that Portland shared with RDA is that some calls to their non-emergency number have wait times upwards of an hour because their call center needs to prioritize 911 calls.

In other program models, an alternate phone number may have been used in the community for years and, therefore, is a well-known resource. For example, in Canada’s REACH Edmonton program, the 211 line is well-used for non-emergency situations, so it is used as the main connection point for its crisis diversion team.

## Triage & Dispatch

Once a call is received, dispatch or call center staff will assess whether services could be delivered over the phone or whether the call requires an in-person response, and whether the response should be led by the crisis response team or another entity. Several programs utilize existing

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<sup>4</sup> Federal Communications Commission. (2021). *Suicide Prevention Hotline*. <https://www.fcc.gov/suicide-prevention-hotline> & <https://www.fcc.gov/sites/default/files/988-fact-sheet.pdf>

<sup>5</sup> Open States. (n.d.). *California Assembly Bill 988*. Retrieved September 2, 2021, from <https://openstates.org/ca/bills/20212022/AB988/>

well-used triage tools and/or made modifications to those triage tools based on a renewed emphasis of having non-police responses for mental health crises. Please see Appendix B for sample outlines of types of scenarios for crisis response teams that were shared with RDA. A dispatch's assessment of mental health related calls is dependent on the services provided by the local mental health crisis response team, an assessment of the situation and the caller's needs, who the caller has identified as the preferred response team, and any other safety concerns.

Some programs prioritize staff assignment based on call volume and need, such as programs that have chosen to pilot non-police crisis response teams in specific geographic locations within their jurisdiction. In these programs, the call center must, therefore, determine the location of the requested response when dispatching a crisis response team. For example, Chicago's Crisis Response Pilot has four teams that are assigned to different areas of the city based on their local ties and expertise of community needs; each team, therefore, only responds to calls that come from their assigned area. When programs are able to scale their services and hire more staff, many pilot programs plan to expand their geographical footprints.

Many crisis response teams are dispatched via radio or a computer-aided dispatch (CAD) system, and some have the ability to listen in on police radio and activate their own response if not dispatched. Of the nine programs that RDA interviewed, the Eugene CAHOOTS program allows its team to be self-dispatched, the Denver STAR program allows its team to directly see what calls are in the queue so they can be more proactive in taking and responding to calls, and the San Francisco SCRT program allows its team to respond to incidences that they witness while being out in the streets. Regarding the ability to self-dispatch, San Francisco's SCRT program is currently figuring out the regulatory requirements that might prohibit self-dispatching paramedics because they must be dispatched through a dispatch center.

Having multiple opportunities to engage the crisis response team is important to ensure community members have the most robust access to the service. For example, in Denver, their police, fire, and EMS can call their Support Team Assisted Response (STAR) team directly. Across all incidents that the Denver STAR team responded to in the first six months of its pilot implementation, it was activated by 911 dispatch in 42% of incidents, by police/fire/EMS in 35% of incidents, and self-activated in 23% of incidents.<sup>6</sup> These data from the Denver STAR team demonstrate how, especially in the early stages of a new program's implementation, new processes and relationships are continually being developed, learned, refined, and implemented. For this reason, it is beneficial to have safeguards in place in triage and dispatch processes so that the crisis

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<sup>6</sup> Denver STAR Program. (2021, January 8). STAR Program Evaluation. [https://www.denverperfect10.com/wp-content/uploads/2021/01/STAR\\_Pilot\\_6\\_Month\\_Evaluation\\_FINAL-REPORT.pdf](https://www.denverperfect10.com/wp-content/uploads/2021/01/STAR_Pilot_6_Month_Evaluation_FINAL-REPORT.pdf)

response team can be flexible in responding to the various ways in which crisis response calls originate.

## Assessing for Safety

The presence of weapons or violence are the most common reasons why a crisis response team would not be sent into the field. Some of the reviewed programs only respond to calls in public settings and do not go to private residences as an effort to protect crisis team staff, though this was the case in a few of the 40 reviewed programs. Calls that are deemed unsafe or not appropriate for a crisis response team will often be responded to by police, co-responder teams, police officers trained in Critical Intervention Team (CIT) techniques, or other units within the police department. Many alternative models have demonstrated that the need for a police response is rare for calls that are routed to non-law enforcement involved crisis response teams. For instance, in 2019, Eugene's Crisis Assistance Helping Out On The Streets (CAHOOTS) team only requested police backup 150 times out of 24,000 calls, or in fewer than one percent of all calls received by the crisis team;<sup>7</sup> this demonstrates that effective triage assessments and protocols do work in crisis response models.

Several of the programs interviewed by RDA mentioned that they are currently evaluating options for their non-police crisis response teams to respond to situations that may involve weapons or violence. These are situations that would otherwise be scenarios that default to a police response. These programs are aware of the risks of police responses to potentially escalate situations that could otherwise be deescalated with non-police involved responses and are trying to find ways to reduce those types of risks.

The types of harm and concerns for safety that should be assessed are not only for crisis response team staff, but also for the individual(s) in crisis and surrounding bystanders or community members. SAMHSA's best practices on behavioral health crisis response underscores that effective crisis care is rooted in ensuring safety for all staff and consumers, including timely crisis intervention, risk management, and overall minimizing need for physical intervention and re-traumatization of the person in crisis.<sup>8</sup> When call center staff deem a call safe and appropriate for the crisis response team, they will assign the call to the crisis response team. There may be multiple calls and situations happening concurrently, in which case the call center staff

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<sup>7</sup> White Bird Clinic. (n.d.). What is CAHOOTS?. Retrieved August 29, 2021, from <https://whitebirdclinic.org/what-is-cahoots/>

<sup>8</sup> Substance Abuse and Mental Health Services Administration (SAMHSA). (2020). Crisis Services – Meeting Needs, Saving Lives. [https://store.samhsa.gov/sites/default/files/SAMHSA\\_Digital\\_Download/PE20-08-01-001%20PDF.pdf](https://store.samhsa.gov/sites/default/files/SAMHSA_Digital_Download/PE20-08-01-001%20PDF.pdf) (page 32)

prioritize the calls based on pre-established criteria, such as acuity and risk of harm.

### Crisis Response Teams Increase Community Safety

New York City's Behavioral Health Emergency Assistance Response Division (B-HEARD) program is being piloted in a region that receives the city's highest number of mental health emergency calls.<sup>9</sup> In the first month of implementation, the program demonstrated:

- Increased rates of people accepting care from the B-HEARD team compared to traditional 911 response teams.
- The proportion of people transported by the crisis response team to the hospital for more care was far smaller than the proportion transported with their traditional 911 response.
- An anticipated increase of 911 operators routing mental health emergency calls to the B-HEARD team.

"A smarter approach to public health and public safety. A smarter use of resources. And the evidence — from Denver to New York — shows that responding with care works."

- U.S. Representative Jamaal Bowman, D-NY

## Hours of Operation

Because a mental health crisis can happen at any time, many programs have adopted a 24-hour model that supports the community seven days a week; of the 40 programs that RDA reviewed, 12 have adopted a 24/7 model. Some programs that are in their early phases of implementation have launched with initially limited hours but have plans to expand to 24/7 coverage once they are able to hire more staff for crisis response teams. If a program uses 911 as a point of access for the crisis response team, then there may be a community perception or expectation that the crisis response team also operates 24/7 the same way that 911 operates 24/7.

Other programs with more restricted resources often have limited hours; some offer services during business hours (9am to 5pm, Monday through Friday) while others offer services after-hours. Using historical data to prioritize coverage during times with highest call volumes can help a program adapt to local needs. For example, Mental Health First Oakland currently responds to calls Friday through Sunday from 7pm to 7am

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<sup>9</sup> Shivaram, D. (2021, July 23). Mental Health Response Teams Yield Better Outcomes Than Police In NYC, Data Shows. *National Public Radio (NPR)*. <https://www.npr.org/2021/07/23/1019704823/police-mental-health-crisis-calls-new-york-city#:~:text=Hourly%20News-.New%20York%20City%20Mental%20Health%20Response%20%20Teams%20Show%20Better%20Results,were%20admitted%20to%20the%20hospital.>

because they have found that those times are when mental health services are unavailable but need is high.

## Types of Calls

Some crisis response programs only respond to specific call types, such as calls pertaining to mental health, behavioral health, domestic violence, substance use, or homelessness. A fraction of programs only respond to acute mental health situations, such as suicidal behavior, or conversely only non-acute mental health calls, such as welfare checks. And, some crisis response programs respond to any non-emergency, non-violent calls, which may or may not include mental health calls. Every program is unique in the calls that they are currently responding to as well as how agencies coordinate for different types of calls. Additionally, given that many programs are actively learning and adapting their models, what and how they respond to calls is evolving.

The most common types of calls that programs are responding to are calls regarding trespassing, welfare checks, suicidal ideation, mental health distress, and social disorder. Several programs mentioned that their main call type - trespassing - is to move an unwanted person, usually someone that is unsheltered and sitting outside the caller's home or business. While programs provide this service, many advocate for increased public education around interacting with unhoused residents and neighbors without the need to call for a third-party response.

The programs in New York City, Chicago, and Portland shared with RDA that they are keeping their scopes of services small for their current pilot implementations. At a later time, they will learn from the types of calls receive and determinations made in order to determine how they will expand their program to respond to more situations (e.g., including serving more types of crises, more types of spaces like private residences, etc.).

In order to demonstrate the variety of incidents that different programs respond to, below are highlights regarding the types of calls that some of the programs that RDA interviewed respond to:

- New York City's B-HEARD program is currently responding to calls regarding suicidal ideation with no weapons, mental health crisis, and calls signaling a combination of physical health and mental health issues. For calls where weapons are involved or are related to a crime, NYPD is the initial responder. The B-HEARD program provides transport and linkage to shelters, where the shelters then provide follow-up services.
- Chicago's Crisis Response Pilot is determining how they will address "low-level crimes" and crimes related to homelessness, especially if the root cause of the crime is an unmet behavioral health and/or housing need. The program does not have an official protocol or decision tree yet for determining which calls it will respond to. But,

its emphasis is on responding to mental health crisis and mental health needs.

- The Portland Street Response program is currently only responding to calls regarding crises that are happening outdoors or public settings (e.g., storefronts), not in private residences. The majority of their calls are related to substance use issues, co-occurring mental health and substance use issues, and welfare checks. The program cannot respond to suicide calls because of a Department of Justice (DOJ) contract that the City of Portland has that would require the Portland Street Response Program to appear before a judge and renegotiate that contract that the city currently has; this process would take at least two years to happen.
- Denver's STAR program currently responds primarily to calls where individuals have schizophrenia, bipolar disorder, major depression, and/or express suicidal thoughts but have no immediate plans to act upon them. The STAR program also conducts many Welfare checks. The program is currently primarily dealing with issues related to homelessness because its pilot rolled out in Denver's downtown corridor where there is a high number of unsheltered individuals.

## Services Provided Before, During, and After a Crisis

The reviewed programs offer a variety of services before, during, and after a mental health crisis. Regarding services provided before crises occur, some programs view their role as supporting individuals prior to crisis, including proactive outreach and building relationships in the community with individuals. Portland's Street Response team contracts with street ambassadors with lived experience (via a separate contract with a local CBO) that do direct outreach to communities; street ambassadors work to explain the team's services and ultimately increase trust. Portland's Street Response team also works with nursing students who provide outreach and medical services to nearby encampments. Mental Health First has a strong cohort of repeat callers who request accompaniment through issues they are facing that the team will go into the field to provide – these services can help them avoid escalating into a crisis. Denver's STAR program initiates outreach with local homeless populations to ensure they have medicines and supplies. These proactive efforts are examples of crisis response teams supporting potential individuals before they are in crisis, and thus also promoting their overall health and well-being.

During a crisis response, most programs offer various crisis stabilization services, including de-escalation, welfare checks, conflict resolution and mediation, counseling, short-term case management, safety planning, assessment, transport (to hospitals, sobering sites, solution centers, etc.), and 5150 evaluations. To engage the individual in crisis, staff will provide supplies to help meet basic needs with items such as snacks, water, and clothing. If there is a medical professional on the team, they can provide



medical services including medical assessments, first aid, wound care, substance use treatment (i.e., medicated-assisted treatment), medication assistance and administration, and medical clearance for transport to a crisis stabilization unit (CSU).

After a crisis, the teams may provide linkage to follow-up care. Some crisis response teams do short-term case management themselves, but most refer (and sometimes transport) individuals to other providers for long-term care. Referrals can be a commonly provided service of a crisis response program. For example, 41% of Denver STAR's services are for information and referrals.<sup>10</sup> Many programs have relationships with local community-based organizations for providing referrals and linkages, while some programs have a specific protocol for referring individuals to a peer navigation program or centralized care coordination services.

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<sup>10</sup> Alvarez, Alayna. (2021, July 21). Denver's pilot from police is gaining popularity nationwide. Axios. <https://www.yahoo.com/now/denver-pivot-police-gaining-popularity-122044701.html>



| Term                                | Definition                                                                                                                                                                                                                                                                                             |
|-------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Transport                           | Placing an individual in a vehicle and driving them to or from a designated mental health service or any other place.                                                                                                                                                                                  |
| 5150                                | 5150 is the number of the section of the Welfare and Institutions Code which allows an adult who is experiencing a mental health crisis to be involuntarily detained for a 72-hour psychiatric hospitalization when evaluated to be a danger to others, or to himself or herself, or gravely disabled. |
| Peer Worker                         | A mental health peer worker utilizes learning from their own recovery experiences to support other people to navigate their recovery journeys.                                                                                                                                                         |
| Medication-Assisted Treatment (MAT) | MAT is the use of medications, in combination with counseling and behavioral therapies, to provide a whole-patient approach to the treatment of SUDs.                                                                                                                                                  |
| Narcan                              | Narcan (Naloxone) is a nasal spray used for the treatment of known or suspected opioid overdose emergencies.                                                                                                                                                                                           |
| Crisis Stabilization Unit           | A mental health voluntary facility that provides a short-term stay for individuals needing additional stabilization services following a behavioral health crisis.                                                                                                                                     |
| Sobering Center                     | A facility that provides a safe, supportive environment for publicly intoxicated individuals to become sober.                                                                                                                                                                                          |

## Staffing Crisis Teams

Most teams include a combination of a medical professional (e.g., an EMT or nurse), a mental health clinician (e.g., a psychologist or social worker), and a peer. Having a variety of staff on a team allows the program to respond to a diverse array of calls, meet most needs that a client might have, and gives the client the ability to engage with whomever they feel most comfortable.

The reviewed programs staffed their crisis teams with a variety of medical professionals. There was consensus among interviewed programs that crisis response team EMTs, paramedics, nurse practitioners, or psychiatric nurse practitioner clinicians should have at least three to five years of experience in similar settings, as well as having comprehensive de-escalation and trauma-informed care training and skills. Austin's Extended Mobile Crisis Outreach Team (EMCOT) program cited that a paramedic's ability to address a client's more acute physical health and substance use

needs is a beneficial diversion away from an EMS or police response.<sup>11</sup> However, in many cities, the skills and expertise of paramedics are not heavily utilized, as many mental and behavioral health calls do not require a high level of medical care. However, a medical professional can be an important addition to the team, especially for services like providing first aid, wound care, the administration of single-dose medication, medication-assisted treatment (MAT) for substance use issues, and 5150 transports. Considerations for which medical professionals should be staffed on a crisis team depends on the types of services the model intends to provide, the historical data on the types of calls or service needs, the local rules for which services can be provided by specific professions, and the overall program budget.

All programs had a mental health provider on their crisis response teams. There is variability in the level of formal education, training, and licensure of the type of mental health provider in each program. Some programs have licensed, masters-level therapists and clinicians (e.g., ASW, LCSW), while other programs utilize unlicensed mental health providers. Considering if a program wants or needs to be able to bill Medicaid or other insurance payors, the ability to place a 5150 hold, as well as the direct costs of providers with differing levels of education and training are examples of considerations and decision points that programs have when determining what type of professional they want to provide mental health services.

Across the programs reviewed and interviewed by RDA, there is variability in the current presence of peer support specialists on teams. By definition, peer workers are “those who have been successful in the recovery process who help others experiencing similar situations.”<sup>12</sup> Studies demonstrate that by helping others engage with the recovery process through understanding, respect and mutual empowerment, peers increase the likelihood of a successful recovery. While they do not replace the role of therapists and clinicians, evidence from the literature and testimonials given to RDA leave no doubt about their value added on a crisis response team. Peer support specialists are able to connect with clients in crisis in ways that are potentially very different from how mental health clinicians and medical providers are trained to provide their specific types of services.

Although 21 of the 40 reviewed programs were classified as alternative models for mental health crisis response, it is important to note that co-responder programs, which were 11 of the 40 reviewed programs, include a police officer on the response team. A co-responder program will often

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<sup>11</sup> Expanded Mobile Crisis Outreach Team. (n.d.). Integral Care Crisis Services. Retrieved August 29, 2021, from

<https://www.austintexas.gov/edims/document.cfm?id=302634>

<sup>12</sup> Who Are Peer Workers?. (2020, April 16). Substance Abuse and Mental Health Services Administration (SAMHSA) Bringing Recovery Supports to Scale Technical Assistance Center Strategy (BRSS TACS).

<https://www.samhsa.gov/brss-tacs/recovery-support-tools/peers>

be used for higher acuity calls that involve the risk of violence by the person in crisis or the risk that the person in crisis has a weapon. As co-responders, police may arrive on site before the rest of the crisis team does. Other models treat the police officer as a back-up personnel, allowing the crisis team to evaluate the level of risk or danger of the situation and then, if de-escalation tactics are unsuccessful, call the police for support.

Team structures vary depending on funding, local salary structures for different types of providers, program design, and program administration. For example, 24-hour programs require more teams and staffing while programs with limited hours will likely have fewer shift rotations and therefore fewer teams. San Francisco's Street Crisis Response Team has six teams with three members per team; shifts are 12 hours long with two teams assigned to each shift. Overlap between the shifts has improved coordination between the teams. Programs with unionized staff (e.g., EMTs, paramedics) require regimented 8-, 10-, or 12-hour shifts, which also influences a team's capacity and scheduling.

## Training

Training requirements vary based on the staffing structure and services provided by a crisis response program as well as the specific needs of the local community. Across the board, programs train their staff in crisis intervention topics such as de-escalation, mental health intervention, substance use management, and situational awareness. Many teams are trained together as a cohort to build relationships and trust between staff. Most teams are trained for around 40 hours in the classroom and then supervised in the field. In co-responder teams, police officers often receive 40 hours of Crisis Intervention Team (CIT) Training.

Specialized staff also receive specific training relevant to their role. Dispatch staff typically receive separate training focused on risk assessment and triage. In programs with clinicians embedded within the call center, the clinicians often provide training to other dispatch staff on mental health topics. Interviewed programs also recommended the crisis response team's dispatch team learn to assess call risk level by building an intake/eligibility tool, as well as through risk assessment and motivational interviewing. For both Denver's STAR and Portland's Street Response programs, dispatch staff were trained by and then shadowed Eugene's CAHOOTS dispatch team, leveraging the decades of experience of CAHOOTS' established alternative crisis response model.

Specific de-escalation and crisis intervention training in which programs participate include key strategies to mitigate risk in the field, learning effective radio communication, and motivational interviewing skills. Some interviewed programs shared that substance use training should be attended by all crisis response staff, not just clinicians; for example, Narcan administration, tourniquet application, and harm reduction training are critical training skills for all team members when supporting a client during a substance use emergency.

Training on implicit bias was also regarded as essential among interviewed programs. Many interviewed programs agreed that receiving training in team-building and communication strategies, trauma-informed care, cultural competency, and racial equity advances the intention and principles of their alternate response program.

## Equipment: Uniforms, Vehicles, and Supplies

Most teams arrive either in plain clothes or a T-shirt with a logo. Interviewed programs attested that casual clothing helps crisis response teams appear approachable and creates a sense of comfort for the person in crisis. In contrast, programs worried that formalizing their uniforms could trigger negative past experiences that community members have had with institutions (e.g., police, psychiatric hospitals, prisons) and, therefore, escalate someone in crisis. However, EMTs or police in a co-responder team do wear their usual uniform so that they are easily identifiable as first responders.

The types of vehicles and equipment needed for each model vary based on the scope of services provided, types of calls to which the team responds, and the team's staffing structure. The majority of programs have a van or fleet of vans with the program logo on it and are stocked with necessary supplies. Some programs use their vehicles for on-site service delivery, while others use them only for transporting a client to an alternate location. Programs situated within fire departments often have EMTs or paramedics on-staff, so those teams ride in ambulances or vans with transport capabilities. Co-responder programs often use police vehicles, either marked or unmarked.

There are several considerations for how the design of the vehicle increases accessibility and safety for clients, as well as supports the security of providers. Vans should be accessible to wheelchairs so that crisis response teams can provide services within the interior of the van (to ensure client privacy) and in the event of a needed transport. Also, vans equipped with lights allow them to park on sidewalks and increase traffic safety. Several interviewed programs mentioned using Eugene's CAHOOTS program's van specifications. One component of this design is a plexiglass barrier between the van's front and back seats, which protects both the driver and anyone riding in the back in the case of an accident; additionally, the barrier keeps clients in the back of the vehicle and protects the driver from any disruption that could decrease safety during the transport. However, some cities are moving away from including the plexiglass barrier between the front and back seats in their vans due to the stigma and lack of trust it communicates to the client.

Many vehicles and teams are equipped with various technologies, including radios with connection to dispatch, cell phones, and data-enabled tablets for mobile data entry. Denver's STAR program has access to the local 911 dispatch queue to understand what calls are being

assessed and which could potentially use the program's response. The STAR program teams also have direct access to an electronic health record (EHR) system where they can look-up an individual's health history or communicate directly with a client's psychiatrist or case manager and thus provide tailored, high quality of care in real-time.

If crisis response teams provide medical services, they often carry items such as personal protective equipment, wound care supplies, a stethoscope, blood pressure armband, oxygen, and intravenous bags. Teams also often carry engagement items to initiate client interactions and meet basic needs, such as food, water, clothing, socks, cigarettes, "mercy beers," tampons, condoms, and hygiene packs. When it is able to go into the field again, the Mental Health First model intends to use an RV instead of a van, so they can invite clients into the RV for more privacy and then supply them with a variety of supplies for their basic needs (e.g., clothing).

Overall, when deciding the types of uniforms, vehicles, and equipment to obtain, programs considered what would be recognizable, establish expertise, support the service delivery, build trust with those whom they serve, and not trigger or further harm individuals in crisis.

## Transport

The ways that programs transport clients to a subsequent location varies in many ways, including when the transport is allowed, who is doing the transport, where clients are transported, and who is affected by the transport decision.

While some programs have the capability to transport clients themselves, others call a third party to do the transport. This depends on whether staff are licensed to do involuntary transports, whether the vehicle is able to transport clients, and whether it is deemed safe to provide transport at that time. Oftentimes, programs will only conduct voluntary transports, and they may pre-establish specific locations or allow the client's location of choice. If clients do not want to be transported to another location, some programs will end the interaction. Because Denver's STAR team does not use an ambulance, they can refuse someone's requested transport to a hospital if a lower level of care is appropriate, such as a sobering center. Some programs conduct involuntary holds, either done by program staff or by calling for police backup. Waiting for police can undermine the level of care provided, a delay which poses a threat to the client's safety and well-being. Portland's Street Response program experiences delays of up to an hour when requesting police for involuntary holds; for this reason, the team hopes to have the ability to do 5150 transports themselves, and in a trauma-informed way that gives individuals a sense of control over the situation. Whether a crisis response team can transport clients, initiate involuntary holds, and/or call police for back-up in these situations are all considerations which implicate the continued involvement of law enforcement in crisis response.

In the transport process, clients may be transported to short- or long-term service providers as well as the client's location of choice. Some short-term programs include a crisis stabilization facility, detox center, sobering center, homeless shelter, primary care provider, psychiatric facilities, diversion and connection center, hospital, and urgent care. Long-term programs include residential rehabilitation and direct admission to inpatient units of psychiatric emergency departments. Building relationships at these destinations and with providers is key to successful warm handoffs and ensuring clients in crisis receive the appropriate care. For example, challenges can arise when bringing someone to an emergency room if the hospital is not fully aware of what the crisis response program is, which makes it more difficult to advocate for the client to receive services.

There are many things to consider about client and provider safety when transporting a client. Some programs do not give rides home and only transport the person to a public place. Others have restrictions on when they will transport a client to a private residence. For example, Denver's STAR team will not take a person home if they are intoxicated and if someone else is in the home because they do not want to put the other person in potential harm. Instead, when responding to an intoxicated individual, the STAR team transports them to a sobering center, detox facility, or similar location of choice. In Portland, first responders and crisis response providers use a risk assessment tool that helps them determine if ambulance transport needs to be arranged. Portland's risk assessment tool asks providers to determine if the individual has received sedation medication in the last six hours, had a Code Gray in the last 6 hours, had a history of violence and/or aggression, had a history of AWOL, or are showing resistance to hospitalization; if the answer is yes to any of these five questions, then they will arrange for ambulance transport for the individual in crisis.

## Follow-up Care & Service Linkage

Follow-up care and linkage to services are handled in a variety of ways. Some programs include referrals to internal, non-crisis response program staff as a service provided directly by the crisis response team. When community health workers and peer support specialists are staffed on crisis response teams, they often lead the referral and navigation support role. After responding to a crisis, Portland's Street Response team (an LCSW and paramedic) call a community health worker if the client wants linkages or additional follow-up supports. While referrals and linkages are important to client outcomes and prevention, this kind of follow-up care can be challenging for many programs to do because it can be difficult to find individuals in the community, particularly if they are not stably housed or do not have a working phone. Portland's Street Response team often goes to encampments to provide follow-up care, which is a program element that is also effective as proactive outreach into local communities.

Other programs refer individuals to other external teams or organizations not affiliated with the crisis response team whose primary role is to provide follow-up care to individuals who served by the crisis response team. Olympia's Crisis Response Unit specifically identifies repeat clients for a referral to a peer navigation program for linkage to care. Additionally, many programs have relationships with community-based organizations and refer clients there for follow-up services. Newer programs that have yet to fully launch stated this was a focus of their program design, as well. For example, San Francisco's Street Crisis Response Team partners with a centralized Office of Care Coordination within the San Francisco Department of Public Health that provides clients with linkages to other services; the Street Crisis Response Team essentially embeds this handoff in their own processes.

And, there are some programs that do not include follow-up care within the scope of their services. For example, Eugene's CAHOOTS program has a narrower focus on crisis stabilization and short-term care; they do not provide referrals or linkage to longer-term services for their clients.

## Program Administration

Across the crisis response models that RDA researched and interviewed, there was variability in how they are each administered. As each program is constructed around their local agency structures, resources, needs, and challenges, how their programs are administered are also just as adaptive.

## Administrative Structure

The administrative structure and placement of crisis response programs varies significantly. Some programs are administered and delivered by the city/county government, some programs are run in collaboration between a city/county government and community-based organizations (CBO), while others are entirely operated by CBOs.

The administration and structure of a crisis response program may be affected by the geographic and/or population size of the local region and what stage of implementation the program is in. For instance, consistent and guaranteed funding helps sustain programs for the long-term, so developing a program within the local municipal structure may be an advantage over contracting the crisis response program to a CBO. Some programs found that staff retention was higher for government positions, due to their generally higher wages and increased benefits compared to what CBOs generally offer. Additionally, the use of the existing 911 and dispatch infrastructure may be streamlined for crisis response programs administered by city/county governments because they can be situated within existing emergency response agencies and use existing interagency data sharing and communication processes



more easily. Finally, programs that are situated within a local health system -- such as Departments of Public Health, Behavioral Health, or public hospitals -- may have existing protocols and processes with which to collaborate with CBOs for referral assistance, case management, resourcing, and follow-up service provision.

On the other hand, programs that are primarily administered and staffed through CBOs reported a sense of flexibility and spontaneity in their program design, expansion, and evolution, especially for early-stage pilots that intend to change and grow over time. These programs shared that they experienced reduced bureaucratic barriers that were conducive to community engagement and program redesign. Additionally, most programs that included peer support specialists in their crisis response program had these roles sourced by CBOs – these peer support specialists were either fully integrated into crisis response teams or were referred to by crisis response teams to provide linkage and follow-up services.

Though there is variety in what entity administers crisis response programs, who sources or contracts the crisis responders, and where funds are generated, all programs require cross-system coordination for designing the program and implementing the dispatch, training, funding, and program evaluation/monitoring activities.

Staffing and sourcing a crisis response program entirely by volunteers can also be helpful in reducing barriers for potential providers to enter this professional field, elevating lived experience of staff, addressing community distrust of the police-involved response system, and building a mental health workforce. However, currently, all-volunteer models face challenges in having consistent and full staffing coverage, which limits a program's overall service provision and hours of operation.

## Financing

Aside from the health benefits of increasing mental health and medical resources in crisis responses, there are financial benefits, too. For example, in Eugene, the CAHOOTS program's annual budget is \$2.1 million. In contrast, the City of Eugene estimates it would cost the Eugene Police Department \$8.5 million to serve the volume and type of calls that are directed to CAHOOTS.<sup>13</sup>

Several cities are funding crisis response systems through the city's general fund, which offers a potentially sustainable funding source for the long-term because it demonstrates that city officials are committed to investing in these services with public funds. To generate these funds, Denver added a sales and use tax in 2019 (one-quarter of a percent) to cover mental health services, a portion of which funds the STAR program.

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<sup>13</sup> White Bird Clinic. (n.d.). What is CAHOOTS?. Retrieved August 29, 2021, from <https://whitebirdclinic.org/what-is-cahoots/>



Some cities have funded crisis response programs by reallocating other city funds. Chicago's Police Department currently pays the salary of the CIT-officer in Chicago's crisis response pilot program. Chicago's crisis response pilot also receives additional funding from Chicago's Department of Public Health. Austin's EMCOT program is funded by \$11 million reallocated from the Police Department. And Eugene's CAHOOTS program is fully funded through a contract by the Eugene Police Department.

Federal or state dollars have also been used for some crisis response programs. Alameda County's Community Assessment and Transport Team (CATT) is funding by California's Mental Health Services Act (MHSA) Innovation funds. Chicago's current crisis response pilot uses Centers for Disease Control and Prevention (CDC) funding. New York City and Los Angeles both plan to bill Medicaid as a funding source for their emerging crisis response programs. The national Crisis Now program bills per service and per diem for mobile crisis and crisis stabilization services, which is reimbursed by Medicaid.

Some programs are able to leverage private funds to support their services. In addition to the allocation of city funds, Chicago receives funding from foundations and corporations to fund its crisis response program. The Mental Health First program is entirely supported by donations, grants, and volunteer time.

These financing mechanisms provide varying levels of sustainability and predictability, which may affect the longevity of a program and, therefore, its overall impacts. Ensuring that programs can be continuously funded ensures resources go into direct service provision and program administration, rather than on development, fundraising, or grant management. Staff recruitment and retention is also more successful when there is long-term reliability of positions.

## Program Evaluation

Many crisis response programs use data to monitor their ongoing progress and successes, modify and expand program pilots, and measure outcomes and impact. Standardizing data collection practices (i.e., data collection tools, measures, values for measures, aligned electronic sources for data entry, etc.) across participating teams and agencies within and across cities/locales, especially for regional plans, supports effective program evaluation and reporting. Addressing this consideration is best done early in program planning because it affects the protocols developed for triage and dispatch, the equipment that crisis response teams use to record service delivery notes or accessing clients' EHR records, the way referrals and hand-offs are conducted, whether or how Medicaid billing/financing will be leveraged, and more. Several cities noted that they incorporated data sharing and access into MOUs that outlined the scope of work. The providers in most programs have access to an electronic health record (EHR) system that they are able to enter

their contact notes into – having access to a centralized data collection portal like this can greatly aid a program’s evaluation efforts.

#### Pilot Program Evaluation Highlight: Denver’s Support Team Assisted Response (STAR) Program

Denver planned to evaluate the STAR program after an initial six-month pilot phase. For the evaluation, data was collected from both the 911 CAD database and the Mental Health Center of Denver. Data was kept in separate systems to protect health-related information from the law enforcement database. The program evaluation provided data on incident locations, response time, response dispatch source (i.e., 911, police unit, or STAR-initiated), social demographics of consumers served, services provided, location of client transport/drop-off, and more. The use of two data systems also allowed the program to evaluate what the STAR team identified as the primary issue of concern compared to clinical diagnoses from the health data.<sup>14</sup>

As a result of analyzing these data, Denver identified its program successes and impacts and is committed to expanding the funding and scope of the program. This expansion includes purchasing more vans, staffing more teams, expanding the hours of operation, expanding the service area across the City, hiring a supervisor, and investing in program leadership. Additional plans for future evaluation include building a better understanding of populations served and more rigorous data capture, a longitudinal study to understand consumer long-term outcomes, and a cost-benefit analysis to understand the economic impacts of the program.

Once data is collected, a process for analyzing, visualizing, and reviewing data supports the overall effectiveness of program monitoring, thus contributing to changes to a pilot and the overall outcomes achieved by the program. Some programs have developed internal data dashboards to compile and organize their data in real-time, thus allowing them to review their program data on a weekly basis. And, some programs are also planning for an external evaluation to assist them in developing a broader understanding of their program’s impacts for their clients and in the larger community.

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<sup>14</sup> Denver STAR Program. (2021, January 8). STAR Program Evaluation. [https://www.denverperfect10.com/wp-content/uploads/2021/01/STAR\\_Pilot\\_6\\_Month\\_Evaluation\\_FINAL-REPORT.pdf](https://www.denverperfect10.com/wp-content/uploads/2021/01/STAR_Pilot_6_Month_Evaluation_FINAL-REPORT.pdf)

### Examples of Metrics that Cities Collect, Review, and Publish Data On

- Call volume
- Time of calls received
- Service areas
- Response times
- Speed of deployment
- Determinations and dispositions of dispatch (including specific coding for violence/weapons/emergency)
- Which teams are deployed across all emergency response
- Actual level of service needed compared to the initial determination at the point of dispatch
- Number of involuntary holds that are placed
- Number of transports that are conducted
- Type of referrals made
- Priority needs of clients served (housing, mental health)
- Frequency of police involvement

Making data about crisis response programs publicly available is also important for community transparency and public research. For example, New York City is planning to publish B-HEARD program data on a monthly basis. And, Portland has a public data dashboard for its crisis response program that is updated at least once per week.<sup>15</sup> Such data transparency allows local constituents and stakeholders to check on the progress of their local crisis response program and whether it is making a difference. Such transparency can also contribute to public research and dissemination efforts about emerging alternate crisis response models.

## Coordinating the Crisis Response System

Given the complexity of a crisis response system -- from its administrative structure and financing, the technical integration of dispatch with responders, the coordination of referrals and linkages, to client case management -- coordination is an essential, ongoing element of any program. This coordination requires investing in staff time and skills to participate in coordination efforts, focusing on de-siloing all components of crisis response, and effective leadership and vision. Coordination affects financing decisions and contributes directly to client outcomes; therefore, coordination implicates every aspect of program planning, implementation, and evaluation. Overall, program administration benefits

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<sup>15</sup> Portland Street Response Data Dashboard. (n.d.). City of Portland, Oregon. Retrieved August 29, 2021, from <https://www.portland.gov/streetresponse/data-dashboard>

from having coordination done at a high level, ensuring there is a person(s) responsible for holding the program at a birds-eye view.

Coordinating services between the crisis response team and community partners includes ensuring there are open communication channels between various entities at a structural level down to a client case management level. At a structural level, it requires investing in staff time, technology, and protocol development, not just at the initial program launch but on an ongoing basis. Based on the program evaluation and data collection design, system-level coordination can support ongoing data review and inform future decisions made about a program.

For example, the managers of San Francisco's Street Crisis Response Team participate in interagency meetings to ensure strategic coordination of service delivery across San Francisco's Department of Public Health, Fire Department, and Office of Care Coordination. Additionally, when Austin's EMCOT program's call center staff integrated the call center technology and co-located their crisis response services within the city's 911 dispatch, the crisis response program had reduced dropped calls, increased communication around safety and risk assessment during triage, more effective handoffs to mental health clinicians for telehealth, and increased deployment of the crisis response team by dispatch.

System-level coordination also has important downstream effects, such as ensuring that first responders (i.e., police, fire, EMS) can call the crisis response team to respond to a situation if they are dispatched first. At a client level, system coordination can support case management, referrals and linkages, and improved client outcomes. For example, Canada's REACH Edmonton program provides governance support and coordination to a network of CBO providers, including facilitating a bimonthly meeting for frontline workers to discuss shared clients. The program shared that for its most complex cases, this coordination significantly increased positive client outcomes. The program also found that they were able to better leverage the expertise of peer support specialists by having a specified coordinator leading these meetings and ensuring their voice and participation was valued. Service providers within this network all utilize the same EHR for documenting and sharing client notes, though the program has encountered challenges in data sharing. Overall, the REACH Edmonton program shared that system-level coordination must be tightly managed but that most program staff and frontline workers do not have the capacity to do so, so having a centralized governance and coordinating body is essential.

## Program Planning Process

Planning the large and small details of a crisis response program is an essential part of a successful launch. Although each city will have a different planning process and timeline based on the local community's needs and administrative designs, some common themes emerged across the crisis response models that RDA reviewed.

Planning across city departments typically includes active involvement from emergency medical services, fire, and police as well as leaders from local public health and mental/behavioral health agencies and CBOs. Many cities stated that having emergency responders involved in the collaborative brainstorming and discussions from the earliest planning stages was essential in garnering buy-in from other city or county departments, including identifying the best resource(s) when responding to mental health needs and crises. Planning also requires engaging other entities; for instance, Portland has to negotiate with the local police union for all services provided by Portland's Street Response program. Some cities shared that they are aware of beliefs of local police departments and unions about potentially losing funding for police services when new crisis response services are added to the local infrastructure. But, cities found that when they focused the conversation about shared objectives between the crisis response program and the police, police began to see the program as a resource to them as mental health professionals could often better handle mental health crises because of their training and backgrounds. This alignment on shared goals and values underpins the reason that the Eugene Police Department funds the city's non-police crisis response program, CAHOOTS. Developing a collective and shared narrative around community health and well-being while reducing harm, trauma, and unnecessary use of force, is essential in promoting any crisis response program.

Program planning allows cities to identify elements to include in the pilot that will be investigated throughout the pilot stages. For instance, the planning process may include heat mapping the highest call-volume areas of the city or discussing preliminary milestones to support scaling or expansion of a pilot program. As an example, New York City's B-HEARD model is currently focused on deploying the B-HEARD team using the existing 911 determination process for identifying mental health emergencies; but, in the future, the program will also assess how those determinations are made to improve the determination and dispatch processes. Their sequencing of planning priorities allowed the program to be launched on a shorter timeline while preparing for an iterative evaluation and design process.

In the future, many learnings can be extrapolated from the ways that crisis response programs are being implemented across the United States and internationally. At this point in time, given that many implementations began within the past two years and are still actively evolving and changing, it is premature to pinpoint common themes in how similar and different jurisdictions and communities (e.g., population size, population density, geography, etc.) are unfolding their emerging crisis response programs.

## Planning Timeline

While some cities operated co-responder models for years before moving to a non-police model, other cities are launching non-police models for the first time. Some cities engaged in extensive community engagement

processes while others launched programs quickly and plan to collect feedback for future iterations of their program.

For instance, Denver had a co-responder model from 2016-2020 and launched the STAR program in 2020 for an initial six-month pilot. The program was launched very quickly in 2020, and then it held community forums to hear from community members for input on the expansion. In Chicago, planning began in the summer of 2019 and the mental health advisory commission developed recommendations in October 2019, then planning and funding continued throughout the summer of 2020, with the program launched in the summer of 2021 (two years after initial program planning began).

New York City's B-HEARD program was originally announced in November 2020 with an initial launch target of February 2021, though the launch was delayed until June 2021 (eight months later). San Francisco's Street Crisis Response Team began planning in July 2020 and launched with one team in November 2020 (five months later); the program added a second team and additional hours in January 2021, added four more teams in March 2021, and integrated the local Office of Coordinated Care team for follow-up and linkages in April 2021 (all over a span of four months); the City of San Francisco wanted to move quickly due to its budgeting timeline so it did not conduct much initial community engagement, but rather expected the program design to be an iterative process with future opportunities for community input and evaluation. Additionally, for many pilot crisis response programs, when they are able to scale their services and hire more staff, then they plan to expand their geographical footprints.

## Community Engagement

Community engagement is an invaluable element of program design and evaluation that leverages the expertise of the local community members directly impacted by these services. Community engagement activities are conducted to include the perspectives of potential service recipients, existing consumers of the behavioral health and crisis systems, existing coalitions, and/or local community-based service providers in the development and implementation of crisis response programs.

Cities may face barriers in hearing from community members that are the most structurally marginalized, so engaging existing coalitions and networks can support more equitable and targeted outreach. For instance, in Chicago, Sacramento, and Oakland, program planners worked with credible messengers that were connected to networks that the cities were not connected to, such as a teen health council, street outreach teams, homeless advocacy organizations, and disability rights collectives. There was a focus especially on working with mutual aid collectives and other underground groups that do not receive city funding, including voices that may otherwise be neglected in government spaces. This level of outreach and intentionality is essential because, historically, government institutions and other structures have prevented

the full and meaningful engagement of people of color, working class and cash-poor people, immigrants and undocumented people, people with disabilities, people who are cognitively diverse, LGBTQ+ people, and other structurally marginalized people. Engaging community members that are most directly impacted by crisis response programs, such as unsheltered people, will lead to feedback that is informed by direct lived experiences with the prior and existing programs in a given community. Additionally, prioritizing the engagement, participation, and recommendations of community members that are most harmed by existing institutions - such as the disproportionate rates of police violence against people of color<sup>16</sup> - will ensure that systems of inequity are not reproduced by a crisis response program. Instead, intentional community engagement can support the program to address existing structural inequities.

Community engagement can inform program planning, program implementation, and program evaluation in unique ways. When planning for a crisis response program, community engagement can be used to survey existing needs, collect input on priorities, and engage hard-to-reach consumers. To hear directly from community members, Chicago interviewed 100 people across the city to ask about their service needs and how to implement a co-responder or alternative crisis response model. Denver targeted specific community stakeholder groups when collecting feedback for its program design, including perspectives from residents with lived experience, community activists for reimagining policing, a Latinx clinic, and a needle exchange program.

When implementing a crisis response program, engaging the community can identify opportunities for program improvement in real-time and promote community education about the program's services and partners. To collect feedback on key components of its model, Portland worked with a local university to send a questionnaire to service recipients. Denver prioritized community education by working with Business Improvement Districts (BIDs) to educate them on appropriate and inappropriate times to call 911 and how to more effectively and compassionately engage with unsheltered neighbors. Denver also worked to build trust with local CBOs to increase their engagement of the STAR crisis response team. Such community engagement can improve program implementation by increasing community awareness of the program, clarifying existing barriers for community members, and modifying service provision processes and priorities on an ongoing basis.

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<sup>16</sup> Edwards, F., Lee, H., & Esposito, M. (2019). Risk of being killed by police use of force in the United States by age, race-ethnicity, and sex. *Proceedings of the National Academy of Sciences of the United States of America (PNAS)*, 116(34), 16793-16798.  
<https://www.pnas.org/content/116/34/16793>



## Lessons Learned

As cities have begun planning, launching, and iterating on a variety of crisis response program models, they shared key lessons learned and recommendations for new cities considering implementing non-police crisis response programs.

Community members are essential sources of knowledge: Co-creating a crisis response model with community members that have directly experienced the crisis system will make the program more accessible and utilized.

Community engagement requires time: Build the engagement and planning time into the overall program development approach and timeline.

Use a pilot approach: Test, modify, and expand specific aspects of each crisis response model based on program successes, challenges, and consumer feedback.

Build trust across the network: Cities must build trust across city agencies and local CBOs to successfully launch and implement a crisis response program.

The 911 dispatch system is complex: Successful implementation of a crisis response program requires sufficient planning, time/resources investment, and buy-in for revising 911 call determination and dispatch processes.

Look to the future: While alternative models are currently focused on crisis response, future models could also support a population's holistic health outcomes and redefine what "safety" means in a community.

## Community members are essential sources of knowledge.

Program representatives that spoke with RDA emphasized the many considerations that programs must make to ensure a program is utilized and accessible to community members. The interviewed programs emphasized the importance of co-creating programs with community members because community members have experienced the existing crisis response options, know where the gaps exist, and may have already implemented or witnessed community-based short-term solutions that should directly inform program design. Cities explained that creating a program or model that does not appeal to the consumer, especially in terms of the involvement and presence of law enforcement, will decrease



the reach and impact of the program. Community members must trust the program if they are going to call and engage in services. For example, because they understood that a significant barrier was that the general public was not confident that they could call 911 to engage a non-police response to a mental health or related crisis, the San Francisco's Street Crisis Response Teams have done significant outreach at community events and presentations at CBOs to build relationships and trust.

## Community engagement requires time.

Learning from the community requires time, so plans for community engagement should be part of any new program's overall timeline and approach. For example, after their initial implementation began, Denver's STAR teams learned that there is a need to expand their program with multilingual teams, which they have since been effective in making progress towards achieving this. It has been a part of the STAR program's process to prioritize program needs as they arise while planning for expansion.

## Use a pilot approach.

Cities also recommended using a pilot approach so that the model can evolve and expand over time. For example, Chicago piloted two crisis response teams with a CIT-officer and piloted two teams without a CIT-officer to determine the role and efficacy of the CIT-officer in a crisis response. New York City designed their pilot to focus on one zone (a geographic subsection of a borough) before broadening the pilot to more of the city. A pilot approach allows a city to learn from implementation successes and challenges, hear from service recipients, and generate buy-in from potentially hesitant stakeholders.

## Build trust across the network.

Cities elevated that building trust across city departments and with CBOs was an essential component of their processes. Cities recognize the different cultures and priorities across city departments and agencies as well as CBOs and volunteers. Within a local government, framing this work as a health response helps to align all partners on their shared values. Moreover, emphasizing to the local police departments that taking a responsibility off their plate is a benefit to them, which may help them to see the crisis response teams as assets and resources to them. Additionally, while bringing onboard internal (i.e., city departments and agencies) stakeholders to the table, it is important to ensure that they each have the appropriate degree of weight in decision making for the program. For example, New York City emphasized that law enforcement should not have an imbalance in controlling the conversation or

decisions. Programs also shared examples of opportunities to build trust across staff members: San Francisco's Street Crisis Response Team used all-team debriefs to strengthen communication and establish processes; and Canada's REACH Edmonton used data on their program and outcomes to promote accountability between providers. Ultimately, building and sustaining trust across a network of crisis response teams, first responders, and law enforcement agencies is a type of role that the central coordinating governance structure of a crisis response system should aim to lead and support.

## The 911 dispatch system is complex.

The 911 dispatch component of a crisis response model is complex and requires effective collaboration for successful implementation. New York City felt that the dispatch and deployment components of its B-HEARD program took the most time to design well (e.g., diagramming calls, finding existing data), even though the 911 data infrastructure already existed. Similarly, Los Angeles' Department of Mental Health found the call diversion process and decision-making to be the most challenging aspect to align across departments. By being aware of this hurdle from the beginning, a new program can allocate sufficient time and resources as well as identify strategic personnel to support the development of this important component of any crisis response program.

## Look to the future.

Finally, cities offered that they are only in their first steps of a longer process of designing alternative models of care in their communities. Planning for a program's next steps can make the initial pilots even more successful and support the transition to future iterations. For instance, Portland's Street Response program is primarily focused on low-acuity crises, though there is a need for a non-police response that can respond to higher acuity calls, including incidences with weapons, in order to achieve Portland's aim of reducing police violence. Mental Health First emphasized that an armed officer does not necessarily provide security and safety to bystanders, providers, or consumers, and so alternative crisis response models are countering a larger system of socialization around notions of safety and the role of 911 in a community. Additionally, these models are operating within larger mental health response systems that must work together to ensure fewer community members are going into crisis in the first place. Programs should always be considering how alternative models of care can support individuals from entering into crises, too. Denver's STAR program shared that they have numerous opportunities for prevention efforts, such as proactive response after encampment sweeps, checking in with consumers in high visibility areas even if there is not a call there, and proactively connecting people to services. By keeping an open mind for what a more holistic crisis response system could look like in their future, cities can plan for their present day,

early-stage pilot programs to be a part of their evolving and innovative models of care.

## Appendices

### Appendix A. SAMHSA's National Guidelines for Behavioral Health Crisis Care - Best Practice Toolkit Executive Summary<sup>17</sup>

The *National Guidelines for Crisis Care – A Best Practice Toolkit* advances national guidelines in crisis care within a toolkit that supports program design, development, implementation and continuous quality improvement efforts. It is intended to help mental health authorities, agency administrators, service providers, state and local leaders think through and develop the structure of crisis systems. The toolkit includes distinct sections for:

- ✓ Defining national guidelines in crisis care;
- ✓ Implementing care that aligns with national guidelines; *and*
- ✓ Evaluating alignment of systems to national guidelines.

Given the ever-expanding inclusion of the term “crisis” by entities describing service offerings that do not truly function as no-wrong-door safety net services, we start by defining what crisis services are and what they are not. Crisis services are for **anyone, anywhere and anytime**. Crisis services include (1) crisis lines accepting all calls and dispatching support based on the assessed need of the caller, (2) mobile crisis teams dispatched to wherever the need is in the community (not hospital emergency departments) and (3) crisis receiving and stabilization facilities that serve everyone that comes through their doors from all referral sources. These services are for **anyone, anywhere and anytime**.

With non-existent or inadequate crisis care, costs escalate due to an overdependence on restrictive, longer-term hospital stays, hospital readmissions, overuse of law enforcement and human tragedies that result from a lack of access to care. Extremely valuable psychiatric inpatient assets are overburdened with referrals that might be best-supported with less intrusive, less expensive services and supports. In too many communities, the “crisis system” has been unofficially handed over to law enforcement; sometimes with devastating outcomes. The current approach to crisis care is patchwork and

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<sup>17</sup> Substance Abuse and Mental Health Services Administration (SAMHSA). (2020). *National Guidelines for Behavioral Health Crisis Care – Best Practice Toolkit Executive Summary*. <https://www.samhsa.gov/find-help/implementing-behavioral-health-crisis-care> & <https://www.samhsa.gov/sites/default/files/national-guidelines-for-behavioral-health-crisis-services-executive-summary-02242020.pdf>

delivers minimal treatment for some people while others, often those who have not been engaged in care, fall through the cracks; resulting in multiple hospital readmissions, life in the criminal justice system, homelessness, early death and even suicide.

A comprehensive and integrated crisis network is the first line of defense in preventing tragedies of public and patient safety, civil rights, extraordinary and unacceptable loss of lives, and the waste of resources. There is a better way. Effective crisis care that saves lives and dollars requires a systemic approach. This toolkit will delineate how to estimate the crisis system resource needs of a community, the number of individuals who can be served within the system, the cost of crisis services, the workforce demands of implementing crisis care and the community-changing impact that can be seen when services are delivered in a manner that aligns with this Best Practice Toolkit. Readers will also learn how this approach harnesses data and technology, draws on the expertise of those with lived experience, and incorporates evidence-based suicide prevention practices.

## Core Services and Best Practices

The following represent the *National Guidelines for Crisis Care* essential elements within a **no- wrong-door** integrated crisis system:

1. **Regional Crisis Call Center:** Regional 24/7 clinically staffed hub/crisis call center that provides crisis intervention capabilities (telephonic, text and chat). Such a service should meet National Suicide Prevention Lifeline (NSPL) standards for risk assessment and engagement of individuals at imminent risk of suicide and offer quality coordination of crisis care in real-time;
2. **Crisis Mobile Team Response:** Mobile crisis teams available to reach any person in the service area in his or her home, workplace, or any other community-based location of the individual in crisis in a timely manner; *and*
3. **Crisis Receiving and Stabilization Facilities:** Crisis stabilization facilities providing short-term (under 24 hours) observation and crisis stabilization services to all referrals in a home-like, non-hospital environment.

In addition to the essential structural or programmatic elements of a crisis system, the following list of essential qualities must be “baked into” comprehensive crisis systems:

1. Addressing recovery needs, significant use of peers, and trauma-informed care;
2. “Suicide safer” care;
3. Safety and security for staff and those in crisis; *and*

## 4. Law enforcement and emergency medical services collaboration.

## Regional Crisis Call Hub Services – Someone To Talk To

Regional, 24/7, clinically staffed call hub/crisis call centers provide telephonic crisis intervention services to all callers, meet National Suicide Prevention Lifeline (NSPL) operational standards regarding suicide risk assessment and engagement and offer quality coordination of crisis care in real-time. Ideally, these programs will also offer text and chat options to better engage entire communities in care. Mental health, substance use and suicide prevention lines must be equipped to take all calls with expertise in delivering telephonic intervention services, triaging the call to assess for additional needs and coordinating connections to additional support based on the assessment of the team and the preferences of the caller.

### Minimum Expectations to Operate a Regional Crisis Call Service

1. Operate every moment of every day (24/7/365);
2. Be staffed with clinicians overseeing clinical triage and other trained team members to respond to all calls received;
3. Answer every call or coordinate overflow coverage with a resource that also meets all of the minimum crisis call center expectations defined in this toolkit;
4. Assess risk of suicide in a manner that meets NSPL standards and danger to others within each call;
5. Coordinate connections to crisis mobile team services in the region;  
*and*
6. Connect individuals to facility-based care through warm hand-offs and coordination of transportation as needed.

### Best Practices to Operate Regional Crisis Call Center

To fully align with best practice guidelines, centers must meet the minimum expectations and:

1. Incorporate Caller ID functioning;
2. Implement GPS-enabled technology in collaboration with partner crisis mobile teams to more efficiently dispatch care to those in need;
3. Utilize real-time regional bed registry technology to support efficient connection to needed resources; *and*
4. Schedule outpatient follow-up appointments in a manner synonymous with a warm handoff to support connection to ongoing care following a crisis episode.

To align with National Suicide Prevention Lifeline (NSPL) operational standards, centers must:

1. Practice **active engagement** with callers and make efforts to establish sufficient rapport so as to promote the caller's collaboration in securing his/her own safety;

2. Use the **least invasive intervention** and consider involuntary emergency interventions as a last resort, except for in circumstances as described below;
3. Initiate life-saving services for attempts in progress – in accordance with guidelines that do not require the individual’s consent to initiate medically necessary rescue services;
4. Initiate active rescue to secure the immediate safety of the individual at risk if the caller remains unwilling and/or unable to take action to prevent his/her suicide and remains at imminent risk;
5. Practice active engagement with persons calling on behalf of someone else (“third-party callers”) towards determining the least invasive, most collaborative actions to best ensure the safety of the person at risk;
6. Have supervisory staff available during all hours of operations for timely consultation in determining the most appropriate intervention for any individual who may be at imminent risk of suicide; *and*
7. Maintain caller ID or other method of identifying the caller’s location that is readily accessible to staff.

True regional crisis call center hub services that offer air traffic control-type functioning are essential to the success of a crisis system. Cracks within a system of care widen when individuals experience interminable delays in access to services which are often based on an absence of:

1. Real-time coordination of crisis and outgoing services; *and*
2. Linked, flexible services specific to crisis response; namely mobile crisis teams and crisis stabilization facilities.

## Mobile Crisis Team Services – Someone To Respond

Mobile crisis team services offering community-based intervention to individuals in need wherever they are; including at home, work, or anywhere else in the community where the person is experiencing a crisis. For safety and optimal engagement, two person teams should be put in place to support emergency department and justice system diversion. EMS services should be aware and partner as warranted.

### Minimum Expectations to Operate a Mobile Crisis Team Services

1. Include a licensed and/or credentialed clinician capable to assessing the needs of individuals within the region of operation;
2. Respond where the person is (home, work, park, etc.) and not restrict services to select locations within the region or particular days/times; *and*
3. Connect to facility-based care as needed through warm hand-offs and coordinating transportation when and only if situations warrants transition to other locations.

### Best Practices to Operate Mobile Crisis Team Services

To fully align with best practice guidelines, teams must meet the minimum expectations and:

1. Incorporate peers within the mobile crisis team;
2. Respond without law enforcement accompaniment unless special circumstances warrant inclusion in order to support true justice system diversion;
3. Implement real-time GPS technology in partnership with the region's crisis call center hub to support efficient connection to needed resources and tracking of engagement; *and*
4. Schedule outpatient follow-up appointments in a manner synonymous with a warm handoff in order to support connection to ongoing care.

Essential functions of mobile crisis services include:

- Triage/screening, including explicit screening for suicidality;
- Assessment;
- De-escalation/resolution;
- Peer support;
- Coordination with medical and behavioral health services; *and*
- Crisis planning and follow-up.

## Crisis Receiving and Stabilization Services – A Place to Go

Crisis receiving and stabilization services offer the community a no-wrong-door access to mental health and substance use care; operating much like a hospital emergency department that accepts all walk-ins, ambulance, fire and police drop-offs. The need to say yes to mental health crisis referrals, including working with persons of varying ages (as allowed by facility license) and clinical conditions (such as serious emotional disturbance, serious mental illness, intellectual and developmental disabilities), regardless of acuity, informs program staffing, physical space, structure and use of chairs or recliners in lieu of beds that offer far less capacity or flexibility within a given space. It is important to fund these facility-based programs so they can deliver on the commitment of never rejecting a first responder or walk-in referral in order to realize actual emergency department and justice system diversion. If an individual's condition is assessed to require medical attention in a hospital or referral to a dedicated withdrawal management (i.e., referred to more commonly and historically as detoxification) program, it is the responsibility of the crisis receiving and stabilization facility to make those arrangements and not shift that responsibility to the initial referral source (family, first responder or mobile team). Law enforcement is not expected to do the triage or assessment for the crisis system and it is important that those lines never become blurred.

### Minimum Expectations to Operate a Crisis Receiving and Stabilization Service

1. Accept all referrals;
2. Not require medical clearance prior to admission but rather assessment and support for medical stability while in the program;
3. Design their services to address mental health and substance use crisis issues;
4. Employ the capacity to assess physical health needs and deliver care for most minor physical health challenges with an identified pathway in



order to transfer the individual to more medically staffed services if needed;

5. Be staffed at all times (24/7/365) with a multidisciplinary team capable of meeting the needs of individuals experiencing all levels of crisis in the community; including:
  - a. Psychiatrists or psychiatric nurse practitioners (telehealth may be used)
  - b. Nurses
  - c. Licensed and/or credentialed clinicians capable of completing assessments in the region; *and*
  - d. Peers with lived experience similar to the experience of the population served.
6. Offer walk-in and first responder drop-off options;
7. Be structured in a manner that offers capacity to accept all referrals, understanding that facility capacity limitations may result in occasional exceptions when full, with a no rejection policy for first responders;
8. Screen for suicide risk and complete comprehensive suicide risk assessments and planning when clinically indicated; *and*
9. Screen for violence risk and complete more comprehensive violence risk assessments and planning when clinically indicated.

#### Best Practices to Operate Crisis Receiving and Stabilization Services

To fully align with best practice guidelines, centers must meet the minimum expectations and:

1. Function as a 24 hour or less crisis receiving and stabilization facility;
2. Offer a dedicated first responder drop-off area;
3. Incorporate some form of intensive support beds into a partner program (could be within the services' own program or within another provider) to support flow for individuals who need additional support;
4. Include beds within the real-time regional bed registry system operated by the crisis call center hub to support efficient connection to needed resources; *and*
5. Coordinate connection to ongoing care.

#### *The Role of the Psychiatrist/Psychiatric Nurse Practitioner*

Psychiatrists and Psychiatric Nurse Practitioners serve as clinical leaders of the multi-disciplinary crisis team. Essential functions include ensuring clinical soundness of crisis services through evaluation of need, continued monitoring of care and crisis service discharge planning.

## Essential Principles for Modern Crisis Care Systems

Best practice crisis care incorporates a set of core principles that must be systematically “baked in” to excellent crisis systems in addition to the core structural elements that are defined as essential for modern crisis systems. These essential principles and practices are:

1. Addressing Recovery Needs,

2. Significant Role for Peers,
3. Trauma-Informed Care,
4. *Zero Suicide/Suicide Safer Care,*
5. Safety/Security for Staff and People in Crisis *and*
6. Crisis Response Partnerships with Law Enforcement, Dispatch, and Emergency Medical Services.

### Addressing Recovery Needs

Crisis providers must address the recovery needs of individuals and families to move beyond their mental health and substance use challenges to lead happy, productive and connected lives each and every day.

### Implementation Guidance

1. *Commit to a no-force-first approach to quality improvement in care that is characterized by engagement and collaboration.*
2. *Create engaging and supportive environments that are as free of barriers as possible. This should include eliminating Plexiglas from crisis stabilization units and minimal barriers between team members and those being served to support stronger connections.*
3. *Ensure team members engage individuals in the care process during a crisis. Communicate clearly regarding all options clearly and offer materials regarding the process in writing in the individual's preferred language whenever possible.*
4. *Ask the individual served about their preferences and do what can be done to align actions to those preferences.*
5. *Help ensure natural supports and personal attendants are also part of the planning team, such as with youth and persons with intellectual and developmental disabilities.*
6. *Work to convert those with an involuntary commitment to voluntary so they are invested in their own recovery.*

### Significant Role for Peers

A transformative element of recovery-oriented care is to fully engage the experience, capabilities and compassion of people who have experienced mental health crises. Including individuals with lived mental health and substance use disorder experience (peers) as core members of a crisis team supports engagement efforts through the unique power of bonding over common experiences while adding the benefits of the peer modeling that recovery is possible.

### Implementation Guidance

1. *Hire credentialed peers with lived experience that reflect the characteristics of the community served as much as possible. Peers should be hired with attention to common characteristics such as gender, race, primary language, ethnicity, religion, veteran status, lived experiences and age.*

2. *Develop support and supervision that aligns with the needs of your program's team members.*
3. *Emphasize engagement as a fundamental pillar of care that includes peers as a vital part of a crisis program's service delivery system. This should include (1) integrating peers within available crisis line operations, (2) having peers serve as one of two mobile team members and (3) ensuring a peer is one of the first individuals to greet an individual admitted to a crisis stabilization facility.*

## Trauma-Informed Care

The great majority of individuals served in mental health and substance use services have experienced significant interpersonal trauma. Mental health crises and suicidality often are rooted in trauma. These crises are compounded when crisis care involves loss of freedom, noisy and crowded environments and/or the use of force. These situations can actually re-traumatize individuals at the worst possible time, leading to worsened symptoms and a genuine reluctance to seek help in the future.

On the other hand, environments and treatment approaches that are safe and calm can facilitate healing. Thus, we find that trauma-informed care is an essential element of crisis treatment. In 2014, SAMHSA set the following guiding principles for trauma-informed care:

1. Safety;
2. Trustworthiness and transparency;
3. Peer support and mutual self-help;
4. Collaboration and mutuality;
5. Empowerment, voice and choice; *and*
6. Ensuring cultural, historical and gender considerations inform the care provided.

Trauma-informed systems of care ensure these practices are integrated into service delivery. Developing and maintaining a healthy environment of care also requires support for staff, who may have experienced trauma themselves.

### Implementation Guidance

1. *Incorporate trauma-informed care training into each team member's new employee orientation with refreshers delivered as needed.*
2. *Apply assessment tools that evaluate the level of trauma experienced by the individuals served by the crisis program and create action steps based on those assessments.*

## Zero Suicide/Suicide Safer Care

Two transformational commitments must be made by every crisis provider in the nation: (1) adoption of suicide prevention as a core responsibility, and (2) commitment to dramatic reductions in suicide among people under care. These changes were adopted and advanced in the revised *National Strategy for Suicide*

*Prevention* (2012), specifically via a new Goal 8: “Promote suicide prevention as a core component of health care services” (p. 51).

The following key elements of Zero Suicide or Suicide Safer Care are all applicable to crisis care:

1. Leadership-driven, safety-oriented culture committed to dramatically reducing suicide among people under care, that includes survivors of suicide attempts and suicide loss in leadership and planning roles;
2. Developing a competent, confident, and caring workforce;
3. Systematically identifying and assessing suicide risk among people receiving care;
4. Ensuring every individual has a pathway to care that is both timely and adequate to meet his or her needs and includes collaborative safety planning and a reduction in access to lethal means;
5. Using effective, evidence-based treatments that directly target suicidal thoughts and behaviors;
6. Providing continuous contact and support; especially after acute care; *and*
7. Applying a data-driven quality improvement approach to inform system changes that will lead to improved patient outcomes and better care for those at risk.

## Safety/Security for Staff and People in Crisis

Safety for both individuals served and staff is a foundational element for all crisis service settings. Crisis settings are also on the front lines of assessing and managing suicidality and possibly violent thoughts or aggressive behaviors, issues with life and death consequences. While ensuring safety for people using crisis services is paramount, the safety for staff cannot be compromised. Keys to safety and security in crisis delivery settings include:

- Evidence-based and trauma-informed crisis training for all staff;
- Role-specific staff training and appropriate staffing ratios to number of clients being served;
- A non-institutional and welcoming physical space and environment for persons in crisis, rather than Plexiglas “fishbowl” observation rooms and keypad-locked doors. This space must also be anti-ligature sensitive and contain safe rooms for people for whom violence may be imminent;
- Established policies and procedures emphasizing “no force first” prior to implementation of safe physical restraint or seclusion procedures;
- Pre-established criteria for crisis system entry;
- Strong relationships with law enforcement and first responders; *and*
- Policies that include the roles of clinical staff (and law enforcement if needed) for management of incidents of behavior that places others at risk.

Providers must establish environments that are safe for those they serve as well as their own team members who are charged with delivering high quality crisis care that aligns with best practice guidelines. The keys to safety and security for

home visits by mental health staff include:

- No mental health crisis outreach worker will be required to conduct home visits alone.
- Employers will equip mental health workers who engage in home visits with a communication device.
- Mental health workers dispatched on crisis outreach visits will have prompt access to any information available on history of dangerousness or potential dangerousness of the client they are visiting.

#### Implementation Guidance

1. *Commit to a no-force-first approach to care.*
2. *Monitor, report and review all incidents of seclusion and restraint with the goal of minimizing the use of these interventions.*
3. *Remember that barriers do not equal safety. The key to safety is engagement and empowerment of the individual served while in crisis.*
4. *Offer enough space in the physical environment to meet the needs of the population served. A lack of space can elevate anxiety for all.*
5. *Incorporate quiet spaces into your crisis facility for those who would benefit from time away from the milieu of the main stabilization area.*
6. *Engage your team members and those you serve in discussions regarding how to enhance safety within the crisis program.*

## Law Enforcement and Crisis Response—An Essential Partnership

Law enforcement agencies have reported a significant increase in police contacts with people with mental illness in recent years. Some involvement with mental health crises is inevitable for police. Police officers may (1) provide support in potentially dangerous situations when the need is assessed or (2) make warm hand-offs into crisis care if they happen to be first to engage.

In many communities across the United States, the absence of sufficient and well-integrated mental health crisis care has made local law enforcement the *de facto* mental health mobile crisis system. This is unacceptable and unsafe. The role of local law enforcement in addressing emergent public safety risk is essential and important. With good mental health crisis care in place, the care team can collaborate with law enforcement in a fashion that will improve both public safety and mental health outcomes. Unfortunately, well-intentioned law enforcement responders to a crisis call can escalate the situation solely based on the presence of police vehicles and armed officers that generate anxiety for far too many individuals in a crisis.

#### Implementation Guidance

1. *Have local crisis providers actively participate in Crisis Intervention Team training or related mental health crisis management training sessions.*

2. *Incorporate regular meetings between law enforcement and crisis providers, including EMS and dispatch, into the schedule so these partners can work to continuously improve their practices.*
3. *Include training on crisis provider and law enforcement partnerships in the training for both partner groups.*
4. *Share aggregate outcomes data such as numbers served, percentage stabilized and returned to the community and connections to ongoing care.*

## Psychiatric Advance Directives

A psychiatric or mental health advance directive (PAD) is a legal tool that allows a person with mental illness to state their preferences for treatment in advance of a crisis. They can serve as a way to protect a person's autonomy and ability to self-direct care. Crisis providers are expected to always seek to understand and implement any existing PAD that has been developed by the individual during the evaluation phase and work to ensure the individual discharges from crisis care with an updated and accurate psychiatric advance directive whenever possible. PAD creates a path to express treatment preferences and identify a representative who is trusted and legally empowered to make healthcare decisions on medications, preferred facilities, and listings of visitors.

### Funding Crisis Care

The full *Crisis Services Best Practice Toolkit* document contains specific strategies on how a community can fund each of the core crisis system elements in single and multiple-payer environments. Additionally, recommendations on service coding already being reimbursed by Medicaid in multiple states are made available; including the use of *HCPCS code H2011 Crisis Intervention Service per 15 Minutes* for mobile crisis services and *S9484 Crisis Intervention Mental Health Services per Hour* or *S9485 Crisis Intervention Mental Health Services per Diem* for crisis receiving and stabilization facility services.

### Training and Supervision

Many members of the crisis services delivery team are licensed mental health and substance use professionals operating within the scope of their license and training with supervision delivered in a manner consistent with professional expectations of the licensing board. Licensed professionals are expected to strengthen their skills and knowledge through ongoing CEU and CME professional advancement opportunities focused on improving team members' ability to deliver crisis care.

Providers also incorporate non-licensed individuals within the service delivery

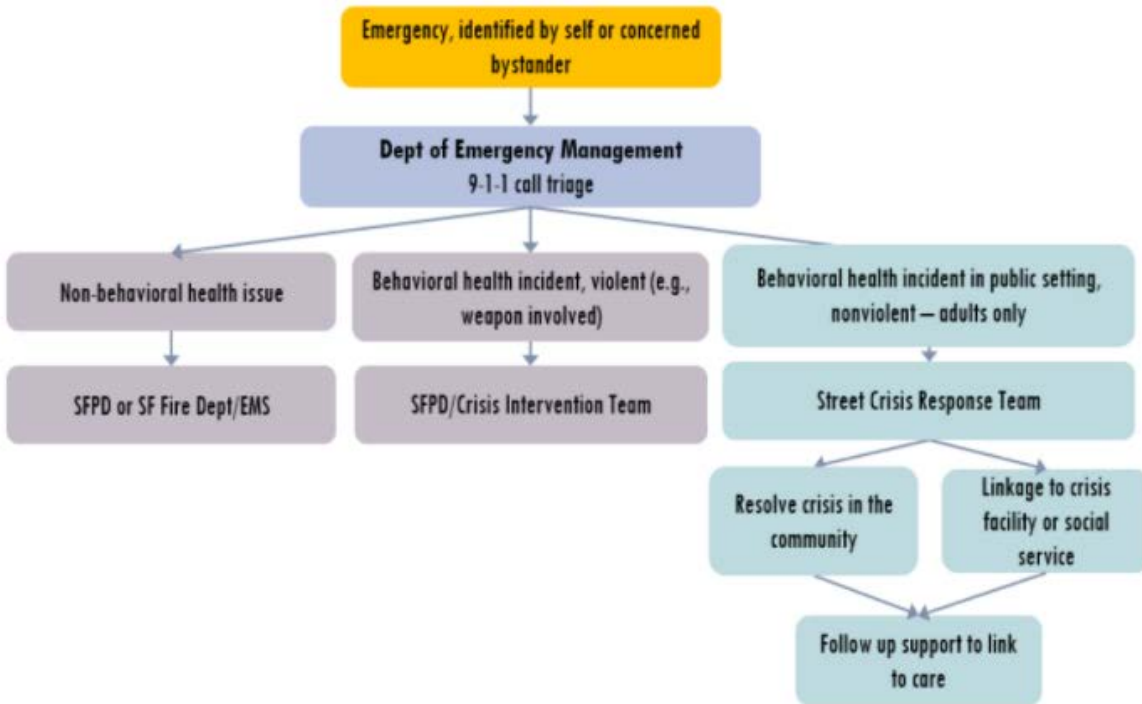
team; creating the need for additional training and supervision to ensure services are delivered in a manner that advances positive outcomes for those engaged in care. Verification of skills and knowledge of non-professional staff is essential to maintaining service delivery standards within a crisis program; including the incorporation of ongoing supervision with licensed professionals available on site at all times. Supervision and the verification of skills and knowledge shall include, but is not limited to, active engagement strategies, trauma-informed care, addressing recovery needs, suicide-safer care, community resources, psychiatric advance directives and role-specific tasks.

## Conclusion

Crisis services must be designed to serve **anyone, anywhere and anytime**. Communities that commit to this approach and dedicate resources to address the community need decrease psychiatric boarding in emergency departments and reduce the demands on the justice system. These two benefits translate into better care, better health outcomes and lower costs to the community. The *National Guidelines for Crisis Care – A Best Practice Toolkit* delivers a roadmap that can be used to truly make a positive impact to communities across the country.

## Appendix B. Sample Outlines of Types of Scenarios for Crisis Response Teams

Appendix B-1. County and City of San Francisco's Crisis Response





Appendix B-2. County of Los Angeles' Behavioral Health Crisis Triage

| COUNTY OF LOS ANGELES · BEHAVIORAL HEALTH CRISIS TRIAGE     |                  |                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|-------------------------------------------------------------|------------------|---------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| PEER INVOLVEMENT IN TRAINING                                | HIGHER RISK      | CALLS AND RESPONSE CAN BE FLUID AND OVERLAP | <b>IMMEDIATE THREAT TO PUBLIC SAFETY • CRIME</b><br><br>ANYONE IN IMMEDIATE DANGER BESIDES LONE SUICIDAL SUBJECT<br>SUBJECT THREATENING OTHERS' PERSONAL SAFETY/PROPERTY<br>OBSERVED WITH OR KNOWN ACCESS TO DANGEROUS WEAPON<br>REPORTED CRIME REQUIRES SOME LEVEL OF INVESTIGATION<br><br>-----<br>PATROL (B&W) UNIT(S) DISPATCHED OR ON SCENE<br>SMART / MET CO-RESPONSE TEAM [DISPATCH VIA TRIAGE DESK]<br>[FUTURE 988 LINKAGE TO 911 SYSTEM FOR TRANSFER IF NEEDED] |
|                                                             | 4                |                                             | <b>MODERATE RISK</b><br><br><b>CALLER NEEDS HELP IN PERSON</b><br><br>PUBLIC NOT IN IMMEDIATE DANGER<br>FIELD RESPONSE IS NECESSARY<br>MAY BE DANGER TO SELF, OTHERS, GRAVELY DISABLED<br>DMH ACCESS CALL CENTER—DISPATCHES NON-LE TEAM<br>[FUTURE LINKAGE TO 988 & 911 SYSTEM FOR TRANSFER IF NEEDED]<br><br>-----<br>FIELD RESPONSE BY DMH PSYCHIATRIC MOBILE RESPONSE TEAM (PMRT) OR DMH VAN OR OTHER PSYCH EVALUATION TEAM (PET)                                     |
| DIRECT PEER INVOLVEMENT (INDIVIDUALS WITH LIVED EXPERIENCE) | IMMEDIATE REMOTE |                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                             | 2                |                                             | <b>NO CRISIS / RESOLVED</b><br><br><b>CALLER NEEDS SUPPORT/SERVICES • NOT IMMEDIATE RISK</b><br><br>SUBJECT OR CARE TAKER NEEDS SUPPORTIVE SERVICES<br>"LIVE TRANSFER" TO DMH ACCESS CALL CENTER—PRIORITY LINE<br><u>MAY</u> TRIGGER PEER ACCESS NETWORK REFERRAL TO MAKE CONTACT<br><u>MAY</u> RESULT IN APPOINTMENT FOR A TREATMENT PROVIDER<br><br>-----<br>MAY REQUEST PEER-RESPONSE ORG TO ASSIST INCLUDING "NAVIGATOR" ROLE                                        |
| 1                                                           |                  |                                             | <b>M</b><br><br><b>MEDICAL AID • EMS / FIRE DEPT</b><br><br>ANYONE NEED MEDICAL ATTENTION? INJURY?<br>ALSO FOR INTEGRATED MEDICAL INTERVENTION PLAN                                                                                                                                                                                                                                                                                                                      |

## Appendix C. Crisis Response Programs Researched by RDA – Summary of Key Components

| <u>Program</u>                                                                                      | <u>Dispatch</u>               | <u>Types of calls</u>                               | <u>Hours of operation</u>         | <u>Crisis team staff</u>                                      | <u>Vehicles</u>                                                               | <u>Follow-up process</u>                                                                                                 |
|-----------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------------------------|-----------------------------------|---------------------------------------------------------------|-------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|
| Albuquerque Community Safety Department – <i>Albuquerque, NM</i>                                    | 911                           | Mental health, inebriation, homelessness, addiction | TBD                               | Clinicians or peers                                           | TBD                                                                           | TBD                                                                                                                      |
| <b>B-HEARD (the Behavioral Health Emergency Assistance Response Division) – <i>New York, NY</i></b> | 911 dispatch                  | Mental health                                       | Daily 16 hours per day            | 2 EMTs or paramedics + social worker                          | Non-transport vehicles                                                        | Connect with services if transported; heat team does follow-up (clinician and peer for follow-up connection to services) |
| Boston Police Department’s Co-Responder Program – <b><i>Boston, MA</i></b>                          | 911 dispatch                  | Mental health crisis                                | Unknown                           | Co-responder (police + clinician)                             | Police car                                                                    | Unknown                                                                                                                  |
| <b>Crisis Assistance Helping Out On The Streets (CAHOOTS) – <i>Eugene, OR</i></b>                   | 911 calls dispatched on radio | Non-emergency calls                                 | 24/7                              | Unlicensed crisis worker and EMT or paramedic                 | 3 vans with logo                                                              | Not currently part of services                                                                                           |
| <b>Crisis Assessment &amp; Transport Team (CATT) – <i>Alameda County, CA</i></b>                    | 911 dispatch                  | Mental health                                       | Daily 7am-12am                    | Licensed clinician + EMT, co-responding with police           | Unmarked vehicles, barrier, custom locks and windows, locked storage cabinets | Unknown                                                                                                                  |
| <b>Community Paramedicine – <i>California (statewide)</i></b>                                       | 911 dispatch                  | Non-emergency health and mental health calls        | Unknown                           | Paramedics                                                    | Unknown                                                                       | Unknown                                                                                                                  |
| <b>Crisis Call Diversion Program (CCD) – <i>Houston, TX</i></b>                                     | 911 dispatch                  | Non-emergency mental and behavioral health calls    | Daily, morning and evening shifts | Mental health professional tele-counselors at 911 call center | N/A                                                                           | Unknown                                                                                                                  |

| <u>Program</u>                                                                       | <u>Dispatch</u>                     | <u>Types of calls</u>                                               | <u>Hours of operation</u> | <u>Crisis team staff</u>                                      | <u>Vehicles</u>       | <u>Follow-up process</u>                                                       |
|--------------------------------------------------------------------------------------|-------------------------------------|---------------------------------------------------------------------|---------------------------|---------------------------------------------------------------|-----------------------|--------------------------------------------------------------------------------|
| <b>Crisis Now – National model (via SAMHSA)</b>                                      | Regional crisis call hub            | Mental health                                                       | 24/7                      | Licensed clinician + behavioral health specialist             | Unmarked van          | Program staff follows up to ensure connection to a resource                    |
| <b>Crisis Response Pilot – Chicago, IL</b>                                           | 911 dispatch                        | Mental health                                                       | M-F 9:30-5:30             | Paramedic, crisis counselor, CIT officer, peer recovery coach | 2 vans                | Unknown                                                                        |
| <b>Crisis Response Unit – Olympia, WA</b>                                            | 911 or alternate number             | Mental health, homelessness                                         | Daily 7am-9pm             | Nurse + behavioral health specialist                          | Van owned by the City | Repeat clients get referred to peer navigation program (Familiar Faces)        |
| <b>Cuyahoga County Mobile Crisis Team – Cuyahoga County, Ohio</b>                    | National Suicide Prevention Hotline | Mental health                                                       | 24/7                      | Licensed clinicians                                           | Unknown               | Unknown                                                                        |
| <b>Department of Community Response – Sacramento, CA</b>                             | 911 or alternate number             | Mental health, homelessness, youth and family crisis, substance use | 24/7                      | Social workers                                                | 6 vans                | CBO partner will provide connection to longer term care and follow up services |
| <b>Department of Community Solutions and Public Safety – Ithaca, NY</b>              | TBD                                 | Non-violent calls                                                   | TBD                       | Unarmed first responders                                      | TBD                   | TBD                                                                            |
| <b>Downtown Emergency Service Center (DESC) Mobile Crisis Team – King County, WA</b> | 911 dispatch                        | Mental health, substance use                                        | 24/7                      | Mental health professional                                    | Unknown               | Unknown                                                                        |

| <u>Program</u>                                                                                                           | <u>Dispatch</u>                | <u>Types of calls</u>                           | <u>Hours of operation</u> | <u>Crisis team staff</u>                                                                      | <u>Vehicles</u>                                                       | <u>Follow-up process</u>                                                       |
|--------------------------------------------------------------------------------------------------------------------------|--------------------------------|-------------------------------------------------|---------------------------|-----------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|--------------------------------------------------------------------------------|
| <b>Expanded Mobile Crisis Outreach Team (EMCOT) – Austin, TX</b>                                                         | 911 or alternate number        | Mental health                                   | 24/7                      | Field staff: two person teams of clinicians<br>Call center staff: mental health professionals | Unmarked vehicles                                                     | Post-crisis services available for up to 3 months after initial contact        |
| <b>Georgia Crisis &amp; Access Line (GCAL) – Georgia (statewide)</b>                                                     | Alternate number, app          | Non-emergency mental health, substance use      | 24/7                      | Mental health professionals                                                                   | Unknown                                                               | Unknown                                                                        |
| <b>Los Angeles County Department of Mental Health - ACCESS Center – Los Angeles County, CA</b>                           | Alternate number               | Mental health                                   | 24/7                      | Unknown                                                                                       | Unknown                                                               | Unknown                                                                        |
| <b>Los Angeles County Department of Mental Health - Co-Response Program – Los Angeles County, CA</b>                     | 911 dispatch                   | Emergency mental health                         | Unknown                   | Co-responder (police + clinician)                                                             | Police car                                                            | Unknown                                                                        |
| <b>Los Angeles County Department of Mental Health - Psychiatric Mobile Response Team (PMRT) – Los Angeles County, CA</b> | Alternate number               | Mental health crises                            | Unknown                   | Psychiatric mobile response team                                                              | Unknown                                                               | Unknown                                                                        |
| <b>Mobile Assistance Community Responders of Oakland (MACRO) – Oakland, CA</b>                                           | 911 dispatch                   | Non-emergency calls                             | 24/7                      | Unlicensed community member + EMT                                                             | Vehicle with radios, mobile data terminal, cell phones                | Community Resource Specialist to connect to resources                          |
| <b>Mental Health Acute Assessment Team (MHAAT) – Sydney, Australia</b>                                                   | Ambulance Control Center       | Acute mental health crises                      | Unknown                   | Paramedic + mental health nurse                                                               | Ambulance                                                             | Contacted within 3 days, follow up with referral facility                      |
| <b>Mental Health First / Anti-Police Terror Project – Sacramento and Oakland, CA</b>                                     | Alternate number, social media | Mental health, domestic violence, substance use | Fri-Sun 7pm-7am           | Peer first responders                                                                         | Use personal vehicles and meet at the scene; have an RV with supplies | Have relationship with CBOs, staff work to get folks into longer term services |
| <b>Mental Health Mobile Crisis Team (MHMCT) – Nova Scotia, Canada</b>                                                    | 911 dispatch                   | Mental health                                   | 24/7                      | Co-responder (police + clinician) and telephone clinician support                             | Unknown                                                               | Unknown                                                                        |

| <u>Program</u>                                                                                            | <u>Dispatch</u>         | <u>Types of calls</u>                                   | <u>Hours of operation</u>         | <u>Crisis team staff</u>                                         | <u>Vehicles</u>                                          | <u>Follow-up process</u>                                                     |
|-----------------------------------------------------------------------------------------------------------|-------------------------|---------------------------------------------------------|-----------------------------------|------------------------------------------------------------------|----------------------------------------------------------|------------------------------------------------------------------------------|
| <b>Mobile Crisis Assistance Team (MCAT) – Indianapolis, IN</b>                                            | 911 dispatch            | Mental health, substance use                            | M-F, not after hours or overnight | Co-responder (police + clinician + paramedics)                   | Unknown                                                  | Conduct follow up visits to encourage connection to care                     |
| <b>Mobile Crisis Rapid Response Team (MCRRT) – Hamilton, Ontario, Canada</b>                              | 911 dispatch            | Mental health                                           | Unknown                           | Co-responder (CIT-trained police + clinician)                    | Police car                                               | Unknown                                                                      |
| <b>Mobile Emergency Response Team for Youth (MERTY) – Santa Cruz, CA</b>                                  | Alternate number        | Mental health calls for youth                           | M-F 8am-5pm                       | Clinician + family specialist                                    | Van with wheelchair lift, comfortable chairs, TV, snacks | Continue to provide services until patient connected with long-term services |
| <b>Mobile Evaluation Team (MET) – East Oakland, CA</b>                                                    | 911 or alternate number | Mental health                                           | Mon-Thurs 8am-3:30pm              | Co-responder (1-2 mental health clinicians + police officer)     | Unmarked police car                                      | Unknown                                                                      |
| <b>Psykiatrisk Akut Mobilitet (PAM) Unit, the Psychiatric Emergency Response Team – Stockholm, Sweden</b> | Alarm center            | Acute risk of suicidal behavior                         | Daily 2pm-2am                     | 2 psychiatric nurses and ambulance driver                        | Ambulance                                                | Unknown                                                                      |
| <b>Police and Clinician Emergency Response (PACER) – Australia (several locations)</b>                    | Dispatched by police    | Mental health                                           | Varies                            | Co-responder (police + clinician)                                | Unknown                                                  | Unknown                                                                      |
| <b>Portland Street Response – Portland, OR</b>                                                            | 911 or alternate number | Low-acuity mental health, substance use, welfare checks | M-F 10am-6pm                      | EMT and LCSW dispatched to scene; 2 CHWs called in for follow-up | Van with logo                                            | CHWs connect to services; partnerships with CBOs for outreach in encampments |
| <b>REACH 24/7 Crisis Diversion – Edmonton, Alberta, Canada</b>                                            | Alternate number (211)  | Non-violent, non-emergency calls                        | 24/7                              | 2 crisis diversion workers                                       | Have van to transport                                    | Connector role for connection to long-term services                          |



| <u>Program</u>                                                                                                | <u>Dispatch</u>               | <u>Types of calls</u>                                                          | <u>Hours of operation</u> | <u>Crisis team staff</u>                                      | <u>Vehicles</u>                                                                    | <u>Follow-up process</u>                                                                                                          |
|---------------------------------------------------------------------------------------------------------------|-------------------------------|--------------------------------------------------------------------------------|---------------------------|---------------------------------------------------------------|------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|
| <b>Seattle Crisis Response Team – Seattle, WA</b>                                                             | 911 dispatch                  | Mental health, assault/threat/harassment, suspicious circumstance, disturbance | Unknown                   | Co-responder (CIT + clinician)                                | Unknown                                                                            | Clinicians can follow up with clients                                                                                             |
| <b>Supported Team Assisted Response (STAR) – Denver, CO</b>                                                   | 911 dispatch                  | Mental health, homelessness, substance use                                     | M-F 10am-6pm              | Mental health clinician (SW) + paramedic                      | Civilian van with amber lights, bucket seats on each side with standard front seat | Can hand off to case managers                                                                                                     |
| <b>Street Crisis Response Team (SCRT) – San Francisco, CA</b>                                                 | 911 calls dispatched on radio | Non-emergency mental health                                                    | Daily, 12 hours a day     | Social worker/psychologist + paramedic + peer                 | Van with lights and sirens, currently using old fire department vehicles           | Office of Care Coordination provides linkages to other services                                                                   |
| <b>Street Triage – England (several locations)</b>                                                            | Emergency dispatch            | Mental health                                                                  | Varies                    | Mental health nurse                                           | Unknown                                                                            | Unknown                                                                                                                           |
| <b>Therapeutic Transportation Pilot Program/Alternative Crisis Response – Los Angeles City and County, CA</b> | 911 dispatch                  | Mental health crisis                                                           | 24/7                      | Mental health experts co-respond or take the lead on MH calls | Plan to have van for transports                                                    | Level 1 calls will be referred to non-crisis follow up services, folks can step down from crisis receiving to residential program |
| <b>Toronto Crisis Response – Toronto, Ontario, Canada</b>                                                     | TBD                           | Non-violent, non-emergency calls                                               | TBD                       | Mental health professionals                                   | TBD                                                                                | TBD                                                                                                                               |



# City of Berkeley

## Mental Health Crisis Response Services and Stakeholder Perspectives Report



# City of Berkeley

## Specialized Care Unit Model Recommendations

City of Berkeley Mental Health Crisis Response and Stakeholder Perspectives Report

Sarah Ferrell

Caroline de Bie

Sasha Gayle-Schneider

Jamie Dorsey

Nicole Gamache-Kocol

Kevin Wu

This report was developed by Resource Development Associates under contract with the City of Berkeley Health, Housing & Community Services Department.

Resource Development Associates, October 2021







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## Executive Summary

The City of Berkeley contracted with Resource Development Associates (RDA) to conduct a feasibility study to inform the development of Specialized Care Unit (SCU) pilot to respond to mental health crises without the involvement of law enforcement. RDA's feasibility study includes community-informed program design recommendations, a phased implementation plan, and funding considerations. RDA's first report from this feasibility study was a synthesis of crisis response programs in the United States and internationally. This second report details RDA's synthesized findings from speaking with and collecting data from a myriad of City of Berkeley and Alameda County agencies, community-based organizations (CBOs), local stakeholders and community leaders, and utilizers of Berkeley's crisis response services.

This report has two focus areas: 1) describing the City of Berkeley's current mental health crisis response system, including the roles and responsibilities of the various agencies involved and basic quantitative data about the volume of mental health crisis calls received; and 2) sharing key themes from RDA's qualitative data collection efforts across the Berkeley community.

Presently, callers experiencing a mental health crisis typically call 911, Mobile Crisis Team (MCT) phone line, or the Alameda County Crisis Support Services phone line. Depending on the assessment of the call, phone or in-person services are deployed. All these points of access could result in a police response.

In Berkeley, while there are a variety of programs and service provided by Berkeley Mental Health, Berkeley Police, Berkeley Fire, and an array of community-based organizations, there is an overall insufficient level of resources to meet the volume and types of mental health crisis needs across the city. Stakeholder participants urged that the concept and definition of a mental health crisis and crisis services be expanded to include the full spectrum of a mental health crisis, including prevention, diversion, intervention, and follow-up. Through this lens, stakeholders identified strengths and challenges of the existing crisis response system, described personal experiences, and shared ideas for a reimagined mental health crisis response system.



### Key Themes from Stakeholder Feedback

Perceptions of the urgent need for a non-police mental health crisis response in Berkeley

Perceptions of varied availability, accessibility, and quality of crisis response services

Perceptions of insufficient crisis services for substance use emergencies

Perceptions of a need for a variety of crisis transport options

Perceptions of a lack of sites for non-emergency care

Perceptions around supporting the full spectrum of mental health crisis needs

Perceptions of a need for post-crisis follow-up care

Perceptions of barriers to successful partnerships and referrals across the mental health service network

Perceptions of needs to integrate data systems and data sharing to improve services

Perceptions of a need for increased community education and public awareness of crisis response options

Participants were asked to share their ideas for alternative approaches to mental health and substance use crises as well as to share community needs for a safe, effective mental health and substance use crisis response. Such perspectives illuminate the perceived gaps in the current system that could be filled by a future SCU. These perspectives are summarized as guiding aspirations for reimagining public safety and designing a response system that promotes the safety, health, and well-being of all Berkeley residents.



## Community Aspirations

Stakeholder-identified opportunities to address the root causes that contribute to mental health, homelessness, and substance use crises

Stakeholder-identified opportunities for centering BIPOC communities in crisis response

Stakeholder-identified opportunities for community oversight to ensure equitable and transformative crisis care

## Introduction

In response to the killing of George Floyd by Minneapolis police in May 2020 and the ensuing protests across the nation for this and many other similar tragedies, a national conversation emerged about how policing can be done differently in local communities. The Berkeley City Council initiated a broad-reaching process to reimagine policing in the City of Berkeley. As part of that process, in July 2020, the Berkeley City Council directed the City Manager to pursue reforms to limit the Berkeley Police Department's scope of work to "primarily violent and criminal matters." These reforms included, in part, the development of a Specialized Care Unit (SCU) pilot to respond to mental health crises without the involvement of law enforcement.

To inform the development of an SCU, the City of Berkeley contracted with Resource Development Associates (RDA) to conduct a feasibility study that includes community-informed program design recommendations, a phased implementation plan, and funding considerations. RDA's first report from this feasibility study was a synthesized summary of its review of the components of nearly 40 crisis response programs in the United States and internationally. This second report details RDA's synthesized findings from speaking with and collecting data from a myriad of City of Berkeley and Alameda County agencies, community-based organizations (CBOs), local stakeholders and community leaders, and utilizers of Berkeley's crisis response services.

With the guidance and support of an SCU Steering Committee (led by the Director of City of Berkeley's Health, Housing and Community Services Department), RDA conducted a large volume of community and agency outreach and qualitative data collection activities between June-July 2021. The goal of this immense undertaking was to understand the variety of perspectives in the local community regarding how mental health crises are currently being responded to as well as the community's desires for a different crisis response system that would better serve its populations and needs. The City of Berkeley will be implementing an SCU that consists of a team of providers – that does not include law enforcement representation – who will respond to mental health crisis situations in Berkeley. Given that this is happening, RDA's data collection focused on obtaining perspectives that could inform the development of Berkeley's SCU; in contrast, RDA's data collection was not targeted at understanding the validity or utility of having a SCU in Berkeley.

RDA's outreach and data collection efforts yielded a large volume of information. In order to ensure this report is accessible to a wide audience - in both the length and breadth of findings - RDA's analysis of all the information it collected was led by a clear goal of identifying common themes across its many data sources. Additionally, RDA sought to distill all findings into manageable pieces that could be succinctly written about in this report.

This report has two focus areas: 1) describing the City of Berkeley's current mental health crisis response system, including the roles and responsibilities

of the various agencies involved and basic quantitative data about the volume of services provided; and 2) sharing the common themes from RDA's qualitative data collection efforts across the Berkeley community. It is important to note upfront that given the limited quantitative data available about Berkeley's historical mental health crisis response calls – as documented and described in much depth by the Berkeley City Auditor's study (released in April 2021) entitled "Data Analysis of City of Berkeley's Police Response"<sup>1</sup> – this report is focused on qualitative data. That data allows for a better understanding of what this set of stakeholders feels about the current crisis system and their hopes for an improved system. After sharing information about Berkeley's current mental health crisis response services, this report shares information from RDA's qualitative data collection activities with local agencies, CBOs, stakeholders, and utilizers of crisis response services.

## Communitywide Data Collection

In order to fully understand the current state of the mental health crisis system in the City of Berkeley, RDA engaged a variety of stakeholders in gathering both quantitative and qualitative data. As this is a community-driven process, much of the data collection was through engaging members of the Berkeley community. These methods will be described below.

*Note: Please refer to the following section, [What is the current mental health crisis call volume in Berkeley?](#) for a description of the project's quantitative methods.*

## Community Engagement Planning Process

To bring resident and other stakeholder voices into community planning efforts, RDA worked closely with the SCU Steering Committee<sup>2</sup> to develop a comprehensive, inclusive, and accessible outreach and engagement plan. The goal of this plan was not to reach a group that was "representative" of all Berkeley residents, but rather to hear from those that receive crisis response services, those that call or initiate crisis

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<sup>1</sup> [https://www.cityofberkeley.info/uploadedFiles/Auditor/Level\\_3\\_-\\_General/Data%20Analysis%20of%20the%20City%20of%20Berkeley's%20Police%20Response.pdf](https://www.cityofberkeley.info/uploadedFiles/Auditor/Level_3_-_General/Data%20Analysis%20of%20the%20City%20of%20Berkeley's%20Police%20Response.pdf)

<sup>2</sup> Berkeley Specialized Care Unit Steering Committee members: Colin Arnold, Paul Kealoha Blake, Jeff Buell, Caroline de Bie, Margaret Fine, Maria Moore, Andrea Pritchett, David Sprague, David McPartland, Marc Staton, Lisa Warhuus, and Jamie Works-Wright.

response, and those whose voices are commonly omitted from city planning efforts. The plan focused on those who are most marginalized by the current system and are most at risk of harm. These groups include, but are not limited to the following:

- Individuals who are frequently targeted by policing, including:
  - Black and African Americans
  - Native Americans
  - Pacific Islander Americans
  - Latinx Americans
  - Asian Americans
  - SWANA (Southwest Asia and North Africa)
- People who have experienced a mental health crisis
- People experiencing or at risk of homelessness
- People who use substances
- Gay, Lesbian, Bisexual, Queer, Transgender and Non-Binary people
- Seniors and older adults
- Transition age youth (TAY)
- People with disabilities
- Survivors of domestic violence and/or intimate partner violence
- People returning to the community from prison or jail
- Veterans
- Immigrants and undocumented residents

RDA and the steering committee also reached out to a wide range of advocates, service providers, and CBOs. In addition to wanting to understand the current state of crisis services from a provider perspective, one of the objectives for reaching out to these advocacy and community organizations was to leverage their community and client connections to reach the target populations.

Once the target groups were identified, RDA and the SCU Steering Committee developed a specific outreach plan and interview guides for each group. The outreach strategy was designed to maximize accessibility by providing multiple opportunities for engagement. Interview guides<sup>3</sup> were customized to each group but followed the same set of four core questions:

1. People's experiences with, and perceptions of, the current mental health and substance use related crisis response options;
2. Challenges and strengths of current mental health and substance use related crisis response options;
3. Ideas for an alternative approach to mental health and substance use related crises; and
4. Needs identified by the community for a safe, effective mental health and substance use related crisis response.

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<sup>3</sup> For an example interview guide, see [Appendix A](#).

This set of four questions was also used to create a survey distributed to providers unable to attend focus groups, their clients, other service utilizers, and the broader Berkeley community.

It is important to note that mental health crisis affects everyone. RDA purposefully focused engagement efforts on groups that are most often marginalized and at risk of harm from the current crisis system, but in so doing, was an approach that may not have brought in all voices impacted by mental health crisis. The key themes brought out by stakeholders, therefore, may not be fully representative of the broader Berkeley community. Instead, the key themes reflect the perspective of those most impacted by the current system.

## Data Sources

All outreach activities occurred between June and July 2021. RDA engaged the community in a variety of in-person and virtual mediums including interviews, focus groups, shadowing, and surveys. In total, RDA conducted 18 focus groups, 51 individual interviews, 1 full day of shadowing dispatch at BPD, and administered 1 online survey.

The CBOs and community members that were targeted for outreach skewed towards either agencies serving unhoused populations in Berkeley or individuals who were unhoused. This was an intentional strategy to reach a population that is generally underrepresented in community-wide data collection efforts. But, as mentioned above, mental health crises can affect anyone, not just those who are unhoused.

Below is a list of groups that were engaged in interviews or focus groups as part of this process.

| Type of Group                     | Organizations/Departments (# individuals)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|-----------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| City of Berkeley & Alameda County | <ol style="list-style-type: none"> <li>1. Berkeley Fire Department</li> <li>2. Berkeley Fire Department – Mobile Integrated Paramedic (MIP)</li> <li>3. Berkeley Mental Health</li> <li>4. Berkeley Mental Health - Mobile Crisis Team</li> <li>5. Berkeley Mental Health – Crisis, Assessment, and Triage (CAT)</li> <li>6. Berkeley Mental Health - Homeless Full Service Partnership</li> <li>7. Berkeley Mental Health – Transitional Outreach Team (TOT)</li> <li>8. Berkeley Police Department - Key Informants</li> <li>9. Berkeley Police Department – Dispatch</li> <li>10. Berkeley Police Department - Community Services Bureau</li> <li>11. Berkeley Police Department - Public Safety Officers</li> <li>12. City of Berkeley - Aging Services</li> <li>13. Alameda County Behavioral Health Care Services</li> <li>14. Alameda County Crisis Support Services</li> </ol> |

| Type of Group                 | Organizations/Departments (# individuals)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|-------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Community-Based Organizations | <ol style="list-style-type: none"> <li>1. Alameda County Network of Mental Health Clients</li> <li>2. Alameda County Psychological Association</li> <li>3. Anti Police-Terror Project</li> <li>4. BACS - Amber House</li> <li>5. Berkeley Free Clinic</li> <li>6. Dorothy Day House</li> <li>7. Harm Reduction Therapy Center</li> <li>8. LifeLong Medical Care - Ashby Health Center, Behavioral Health</li> <li>9. LifeLong Medical Care - Street Medicine</li> <li>10. Needle Exchange Emergency Distribution (NEED)</li> <li>11. Pacific Center</li> <li>12. UC Berkeley School of Social Welfare</li> <li>13. Women's Daytime Drop-In Center</li> </ol> |
| Service Utilizers             | <ol style="list-style-type: none"> <li>1. People's Park</li> <li>2. Seabreeze encampment</li> <li>3. Planting Justice</li> </ol>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |

## Demographics of Participants of RDA's Data Collection Efforts

RDA was able to reach a large demographic of providers, service utilizers, and community members across these engagement efforts. These data collection efforts were not focused on providers of mental health care, substance use disorder care, or insurance companies like Kaiser Permanente or the Alameda Alliance. This was a purposeful decision to gain the insight of those who are outside of the current system of care. Demographic information was not gathered for City of Berkeley or Alameda County staff.

Overall, RDA received information from more people in the 30-44 range than any other age range. As compared to Berkeley's overall population, service utilizers and providers who identified as Black or African American were overrepresented in RDA's data collection efforts. There were far more cisgender participants than transgender participants overall, though a higher proportion of service utilizer respondents were transgender compared to survey respondents and provider respondents. RDA collected feedback from more than double the number of female-identifying participants than male identifying participants. Overall, there were very few genderqueer or nonbinary participants. The most common zip codes of participants were 94710, 94702, 94703, and 94704. For more a more detailed description of participant demographics, see [Appendix B](#).



## Impacts of COVID-19 Pandemic on Data Collection

The COVID-19 pandemic made it challenging for this project to engage with participants for data collection. The rise of the Delta variant in August 2021 further complicated matters. Many non-medical social service providers in Berkeley had suspended or limited their in-person services with clients due to the pandemic, so RDA was unable to connect with clients in-person. Invitations were sent to case managers and group/individual counselors to forward to their clients in hopes of interviewing clients, but this did not prove to be effective. Aside from being unable to connect with participants in-person, many providers were overwhelmed with ongoing COVID-19 emergency response and unable to participate in focus groups or the survey. Eleven agencies were in conversation with RDA but were unable to attend any focus groups or submit a survey, and 34 agencies did not respond to attempts to connect. Despite these challenges, RDA found considerable themes and patterns in the data that was collected for this project and feel strongly that the data and perspectives presented here represent the scope of the issues pertinent to mental health crisis response in the City of Berkeley.

## Overview of Berkeley Crisis Response

### What is the current mental health crisis response system in Berkeley?

To understand where the gaps are in the mental health crisis response system in Berkeley, it is important to understand each component and the surrounding landscape of providers and services. The following section describes the process of a mental health call, key city and county entities involved in the crisis system, and other community-based organizations who provide crisis services. This information was gathered during key informant interviews with city and county staff, CBO provider focus groups, and consulting online materials.

#### Process of Response to a Mental Health Call<sup>4</sup>

When someone makes a call for a mental health crisis, they will typically call 911, the Mental Health Division's Mobile Crisis Team (MCT) phone line,

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<sup>4</sup> See [Appendix C](#) for a flowchart of this process.

or Crisis Support Services of Alameda County. The caller is often a family member, friend, or bystander.

If the call goes to 911, the staff member at Berkeley dispatch receives the call. They use the Emergency Medical Dispatch (EMD) protocols to assess whom to deploy to the scene: fire, police, or an ambulance. When assessing a call for the presence of mental health issues, they consider many factors including the possibility of violence against the caller or others, certainty or uncertainty of violence, whether the person is using substances and what type of substance, the coherence of the person's thoughts or behaviors, and background noises. Callers can specifically request MCT, in which case dispatchers may call MCT on the radio and request an MCT call-back for the caller.

If they determine that services can be delivered over the phone, they can transfer the call to Alameda County Crisis Support Services (CSS). If CSS cannot resolve the crisis, they will send the call back to dispatch for an in-person response. If an in-person response is required, they will transfer the call to the appropriate dispatcher staff. Calls with a potential for violence or criminal activity are transferred to police dispatch. Police can call the Berkeley Mobile Crisis Team (MCT) for backup if it is clear that there is a mental health component to the situation. Calls that involve mental health are sent to police dispatch. Police will then alert the MCT that they are needed on-scene. The police will arrive first to secure the scene, then mobile crisis will provide mental health crisis services while police are still on-scene. If the individual needs to be transported to a secondary location, the police will call for an ambulance. Calls that involve a medical or fire issue are transferred to fire dispatch. If fire staff need to place an involuntary hold on the person, they can call police to place the hold.

If the caller decides to call MCT directly, their call will be sent to a confidential voicemail. An MCT staff member will listen to the voicemail, call the person back, and provide services over the phone. If no further services are required, the call is resolved. If an in-person response is required, MCT will call police dispatch to have police secure the scene. After MCT calls dispatch, they will travel to the scene of the incident. Once the scene is secured, MCT provides services and may call an ambulance through dispatch if transport is needed.

If the caller decides to call CSS directly, staff will first attempt to resolve the crisis over the phone. If they are able to de-escalate the crisis over the phone, they will provide referral services to additional resources or, on rare occasions, contact Berkeley Mental Health for follow-up care. If they are unable to resolve the crisis, they will send the call to 911 dispatch.

After the incident, the Berkeley Transitional Outreach Team (TOT) will follow-up with the client to ensure that options for longer term care have been offered. TOT can provide referrals and linkage to long-term services, bridging the gap between a moment of crisis and ongoing mental health care.

### City and County Teams that Respond During a Crisis

There are several teams within the City of Berkeley and Alameda County that provide services to someone experiencing a mental health crisis. These include programs within Berkeley Mental Health, Berkeley Police Department, Berkeley Fire Department, and Alameda County Behavioral Health Care Services. Although, as mentioned later in this report, the community does not see these services as sufficient or linked.

#### Berkeley Mental Health Crisis Programs:

The City of Berkeley is contracted by Alameda County to deliver mental health services to Berkeley residents. In general, Berkeley Mental Health programs are funded to serve individuals with severe mental health needs who have major impairments in their functioning and are covered by Medi-Cal. However, Crisis Services teams (not including Homeless FSP) can serve any Berkeley resident, regardless of diagnosis or insurance status. It should be noted that residents covered by private insurance are eligible for services through their insurer and are not eligible for most Berkeley Mental Health programs.

The *Crisis, Assessment, and Triage (CAT)* program is a key access point for a wide range of Berkeley residents to get connected to mental health services. They are a team of clinical staff—licensed clinicians, paraprofessionals, peers, and/or family members—that conduct mental health screenings and assessments, mental health planning/consultation, and linkages to county or community-based care. They are also the official entry point for Berkeley Mental Health’s Homeless Full Service Partnership (HFSP), Adult Full Service Partnership (AFSP), and Comprehensive Community Treatment (CCT) programs. As previously noted, these programs have strict eligibility requirements driven by their funding. Most callers are referred to non-city resources. They offer both remote as well as in-person, walk-in assessments, and linkages to appropriate care. If someone is in crisis, they can suggest or facilitate linkage to 911, MCT, Amber House, or other crisis resources. CAT can also provide limited outreach and transportation services to people experiencing homelessness or people with disabilities who also want to engage in mental health services.

The *Mobile Crisis Team (MCT)* is a team of licensed clinicians that provide crisis intervention services to people in crisis within the Berkeley city limits. These services include de-escalation and stabilization for individuals in crisis, consultation to hospital emergency personnel, consultation to police and fire departments, hostage negotiation, and disaster and trauma-related mental health services. When fully staffed, MCT can operate 7 days a week from 11:30am-10pm. Due to persistent staff shortages, MCT is currently unable to operate on Tuesdays or Saturdays. They primarily receive referrals from Berkeley Police Department, Berkeley Fire Department, hospital emergency rooms, and directly from residents. Most calls for MCT are received on the police radio directly from BPD for 5150 evaluations. Calls can also come directly through the MCT voicemail.

The *Transitional Outreach Team (TOT)* follows up with individuals after an interaction with MCT. The TOT team consists of one licensed clinician and

one unlicensed peer team member. The function of the TOT team is to offer linkages to appropriate resources and help navigating the system of care after someone has experienced a crisis. TOT assesses the individual's eligibility for services, including insurance status, before making referrals to care. During the pandemic, their services have been mostly limited to phone calls. Pre-pandemic, they regularly connected with service utilizers after they were discharged from the hospital. Most often, TOT connects people with homeless service provider agencies, the CAT team for connection to BMH programs, case management services at other clinics, or any other community provider that would meet the client's needs. Due to a recent division restructuring, TOT and CAT have been combined into one unit to allow more community members to access information and referrals provided by TOT.

The *Homeless Full Service Partnership (HFSP)* is Berkeley Mental Health's newest program. They are a team of two behavioral health clinicians, two social service specialists, one mental health nurse, one part-time psychiatrist (0.5 FTE), and one clinical supervisor. HFSP serves adults who are homeless or at risk of homelessness and have major functional impairments related to a mental health diagnosis. They provide a wide array of services based on the client's needs including support applying for benefits, connection to short-term and long-term housing, harm reduction for substance use, and support with physical health needs.

Berkeley Police Department: The Berkeley Police Department (BPD) is made up of patrol teams, Communications Center (i.e., dispatch) staff, other sworn officers, and non-sworn professional personnel. In total, the 2020 budget included 181 sworn officers and 104.2 professional staff.<sup>[1]</sup> BPD patrol team duties include responding to emergency and non-emergency calls for service or criminal activity, enforcing the law, responding to community needs, and directing traffic. The role of BPD patrol teams in mental health crises is to assess the situation to determine if there is a threat of public safety, assess how volatile the situation is, and secure the scene. Oftentimes, police officers will then provide crisis intervention services themselves, either because MCT is unavailable or the officer believes they can adequately respond with their experience and skillset. Otherwise, they will bring in another service team, such as MCT or Fire/ambulance to provide additional mental health or medical services. Officers may on-view incidents, but primarily receive assignments from the Communications Center. Officers may also coordinate with the other City Departments on some cases. All officers also receive a minimum of eight hours of advanced officer training in de-escalation and crisis intervention per year; and many officers are trained in a full week CIT-training course. The Department continues to assign

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<sup>[1]</sup> Berkeley City Auditor. (2021, July 2). *Data Analysis of the City of Berkeley's Police Response*.

[https://www.cityofberkeley.info/uploadedFiles/Auditor/Level\\_3\\_-\\_General/Data%20Analysis%20of%20the%20City%20of%20Berkeley's%20Police%20Response.pdf](https://www.cityofberkeley.info/uploadedFiles/Auditor/Level_3_-_General/Data%20Analysis%20of%20the%20City%20of%20Berkeley's%20Police%20Response.pdf)

officers to this full week training as staffing allows and course space is available.

BPD's Communications Center is staffed by dispatchers who handle the following: community calls, records checks, fire dispatching, and police dispatching.<sup>[2]</sup> Call takers receive non-emergency and 911 calls, assess the call (including using the emergency medical dispatch (EMD) protocol, enter data into the computer aided dispatch (CAD) system to be dispatched to either police or fire personnel where appropriate. Other calls may be directed to other City Departments or BPD work units. The dispatchers deploy the appropriate response to the scene and maintain radio contact until personnel arrive at the scene.

Other sworn officers in BPD include area coordinators, a bike unit, detectives and traffic enforcement unit, and other sworn non-patrol officers. Area coordinators are situated within the Community Services Bureau and work with patrol officers in their area and seek to address community needs. Officers on the bike unit are assigned to patrol specific areas, where they address public safety issues and other community safety concerns. Detectives follow up on criminal investigations, conduct search warrants and work with the District Attorney's Office on charging. The traffic enforcement unit responds to traffic related complaints, investigates serious injury and fatal collisions, and analyzes and provides state mandated reporting on collision data. Other sworn, non-patrol officers include special assignments in personnel and training, policy, and police technology.

The remaining staff are non-sworn, professional personnel including community service officers, crime scene technicians, and parking enforcement officers. Community service officers work in jail and as crime scene technicians who collect and document evidence from crime scenes. Parking enforcement officers enforce parking violations and support traffic safety related matters. Many of these functions are also supported by Police Aides and Reserve Police Officers.

Berkeley Fire Department: The Berkeley Fire Department (BFD) is comprised of 7 fire stations, 130 sworn fire suppression personnel and paramedic firefighters.<sup>5</sup> BFD provides 24/7 response to emergencies including fires, medical emergencies, and disasters. The department operates 4 24/7 Advanced Life Support ambulances that are primarily responsible for all emergency medical transport within the City of Berkeley to local emergency departments.

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<sup>[2]</sup> Berkeley City Auditor. (2019, April 25). *911 Dispatchers: Understaffing Leads to Excessive Overtime and Low Morale*.

[https://www.cityofberkeley.info/uploadedFiles/Auditor/Level\\_3\\_-\\_General/Dispatch%20Workload\\_Fiscal%20Year%202018.pdf](https://www.cityofberkeley.info/uploadedFiles/Auditor/Level_3_-_General/Dispatch%20Workload_Fiscal%20Year%202018.pdf)

<sup>5</sup> City of Berkeley Fire Department. (n.d.). *History of the Berkeley Fire Department*. Retrieved October 5, 2021, from

[https://www.cityofberkeley.info/Fire/Home/Department\\_History.aspx](https://www.cityofberkeley.info/Fire/Home/Department_History.aspx)

BFD also participates in care coordination for high utilizers of services as part of the Community Accessing Resources Effectively (CARE) Team. This team is a multidisciplinary group of practitioners made up of both staff from community organizations as well as City of Berkeley staff. The group is facilitated by the EMS division of the department and aims to connect residents using high amounts of emergency services to more appropriate and/or long-term care options.

During the COVID-19 pandemic, BFD operated a Mobile Integrated Paramedic (MIP) unit for a six-week pilot. The MIP unit provided community paramedicine as a diversion from hospitals during the early days of the pandemic. This team did proactive street outreach in the community to help meet basic needs and provide referrals to community organizations, based primarily on 9-1-1 callers who ended up not seeking care at an Emergency Department.

For people experiencing a mental health crisis, the City of Berkeley contracts with Falck Ambulance, which is also the private provider for emergency medical transport for Alameda County. Falck provides treatment, stabilization, and transports to hospitals, including voluntary and involuntary psychiatric hospitalizations. BFD firefighters can call Falck directly when an individual needs to be transported for mental health issues, although most transport requests are through requests from Mobile Crisis. The current collaboration with Falck began July, 1 2019, and the contract is overseen by BFD.

Alameda County Behavioral Health Care Services Crisis Programs:

Alameda County Behavioral Health Care Services (AC BHCS) operates both crisis and long-term mental health service programs.<sup>6</sup> Some key crisis programs include Crisis Support Services, Acute Crisis Care and Evaluation for Systemwide Services, Mobile Crisis Team, Mobile Evaluation Team, and the Community Assessment and Transport Team.

The Alameda County Mobile Crisis Team, Mobile Evaluation Team, and the Community Assessment and Transport Team do not serve the geographic area of the City of Berkeley; despite this, we include brief information about them below to describe the types of mobile crisis services available to the other cities in Alameda County.

Crisis Services Eligible to Berkeley Residents

*Crisis Support Services (CSS)* is a county contracted program that provides several services for individuals experiencing a mental health crisis, including a 24-hour crisis phone line, text messaging, therapy groups, therapy services for older adults, school-based counseling, grief therapy,

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<sup>6</sup> Alameda County Behavioral Health Care Services. (n.d.). *Acute & Integrated Health Care – Acute & Crisis Services*. Retrieved October 5, 2021, from <http://www.acbhcs.org/acute-integrated-health-care/acute-crisis-services/>



and community education.<sup>7</sup> CSS coordinates closely with mobile crisis teams in Oakland and Alameda County and often refer clients to mobile crisis. They are staffed by trained crisis counselors, both licensed and unlicensed. Most often calls to CSS are direct from someone experiencing a crisis. Berkeley dispatch can transfer calls to CSS for phone support if they deem an in-person response is not required. CSS fields over 40,000 calls annually and spends an average of 25-30 minutes per call.

*Acute Crisis Care and Evaluation for Systemwide Services (ACCESS)* is the main entry point for Alameda County residents to get connected to acute and longer-term mental health and substance use services.<sup>8</sup> The phone line is staffed by licensed mental health clinicians and administrators who screen and assess the client's needs, provide information about available options, and refer to an appropriate service. Clinicians also screen clients to see if they meet medical necessity criteria for Specialty Mental Health Services (SMHS). Calls that come in after 5pm or on weekends are routed to CSS.

#### *Crisis Services Not Eligible to Berkeley Residents*

The Alameda County *Mobile Crisis Team* responds to mental health crisis calls either in-person or over the phone.<sup>9</sup> They are staffed by two licensed clinicians. Calls can come directly to the mobile crisis team, or they can be dispatched by 911 or CSS. The Alameda County Mobile Crisis Team responds in a police co-responder model.

The *Mobile Evaluation Team (MET)* is a co-responder program; one Oakland police officer and one licensed clinician respond to calls in an unmarked police car. They respond to mental health calls that come through 911 dispatch.

The *Community Assessment and Transport Team (CATT)* provides community-based crisis intervention, medical clearance, and transport services. Administered through Bonita House, a licensed clinician and an EMT will be dispatched to a scene where the individual needs to be transported to a higher level of care. CATT currently utilizes a police co-responder model.

Other Service Providers in the Mental Health Crisis Response System: In addition to services provided by the City of Berkeley and Alameda County, there is an array of community-based services and other providers within the mental health crisis response system in Alameda

<sup>7</sup> Crisis Support Services of Alameda County. (n.d.). *24-Hour Crisis Line*. Retrieved October 5, 2021, from Alameda County Behavioral Health Care Services. (n.d.). *Acute & Integrated Health Care – Acute & Crisis Services*. Retrieved October 5, 2021, from <http://www.acbhcs.org/acute-integrated-health-care/acute-crisis-services/>

<sup>8</sup> Alameda County Behavioral Health Care Services. (n.d.). *ACCESS program*. Retrieved October 5, 2021, from <http://www.acbhcs.org/providers/Access/access.htm>

<sup>9</sup> In this report, the acronym "MCT" is only used in reference to the City of Berkeley's Mobile Crisis Team, not Alameda County's Mobile Crisis Team.

County. These generally fall into four categories: crisis response providers, crisis stabilization units, drop-in centers, and medical service providers.

The agencies listed below are not meant to be a comprehensive list, rather these were the organizations that were mentioned most frequently by focus group participants, interviewees, and survey respondents. There are many organizations and individuals who contribute to crisis prevention and stabilization by addressing other needs such as housing, substance use, ongoing mental health support, or domestic violence. Though not enumerated in this report, the ecosystem of services in Berkeley and surrounding areas help prevent community members from escalating into crisis.

*Crisis Response Providers:* Crisis response providers accompany individuals while they are experiencing a crisis, work with the client to de-escalate, and connect them to resources to meet their needs. It should be noted that ongoing mental health service providers, such as therapists or clinical case managers, de-escalate and divert mental health crises every day. In this report, we are focusing on providers who respond to acute crisis situations that are outside of long-term supports. The two key crisis response providers mentioned most often by the community are Mental Health First and UC Berkeley.

*Mental Health First* is a project of the Anti Police-Terror Project (AFTP). Based in Oakland, this volunteer-run crisis line provides crisis support, de-escalation, mediation, and connection to resources to anyone who calls. They are available on Friday and Saturday nights, 8pm to 8am, when other crisis services are unavailable. Community members can access services via phone, text, or social media. About half of callers are calling for themselves, while the other half are calls from friends or family members concerned about a loved one. Mental Health First can help people navigate the complicated mental health system and get them connected to services.

When a student is experiencing a mental health crisis on the UC Berkeley campus, *UC Police Department (UCPD)* are often the ones who arrive on scene. UCPD employs a mix of sworn and non-sworn personnel including 49 police officers, 10 dispatch and records staff, 31 security patrol officers, and 12 professional staff.<sup>10</sup> UCPD police officers are currently the ones who respond during a mental health crisis. However, the University has publicly stated plans to phase out involvement of police during a crisis and shift to having its Tang Center counselors respond to mental health

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<sup>10</sup> Berkeley UCPD. (n.d.). *Department Demographics*. Retrieved October 5, 2021, from <https://ucpd.berkeley.edu/department-demographics>



calls.<sup>11</sup> They are currently in the process of planning and developing a new mental health response team.<sup>12</sup>

The *UC Berkeley Tang Center* offers health, mental health, and crisis services to all UC Berkeley students, regardless of insurance. Their staff, which include licensed psychologists, psychiatrists, and psychiatric nurses, respond to urgent mental health concerns.<sup>13</sup> They also provide services after a sexual assault or incident of domestic violence and respond to campus crises (e.g., when a student passes away).<sup>14</sup> As of the Fall 2021 semester, students can access these services by calling the Tang Center's urgent phone or after-hours support lines. But as previously mentioned, UC Berkeley is currently redesigning their crisis response model so students can more easily get connected with Tang Center staff during a crisis.

### Crisis Stabilization Units and Psychiatric Facilities

Crisis Stabilization Units and psychiatric facilities provide a safe location for people to de-escalate from crisis, receive psychological support, and get connected with mental health services. There are no crisis stabilization units within the City of Berkeley, so Berkeley residents in crisis are often transported or referred to the facilities noted below.

*John George Psychiatric Hospital (JGPH, or John George)* is a locked facility where patients can receive short-term psychiatric care from doctors, psychiatrists, and counselors. Once a patient receives medical clearance (i.e., they do not have any acute medical needs), they can be transported to JGPH. John George is the main facility that individuals are transported to when they are under an involuntary hold. Many patients are referred and/or transported by emergency services and mobile crisis teams across the County.

*Willow Rock Center* operates both a 12-16 bed crisis stabilization unit as well as an inpatient unit for adolescents ages 12-17.<sup>15</sup> A team of psychiatrists, nurses, group and individual therapists and counselors provides assessment, counseling, medication administration, group,

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<sup>11</sup> Public Affairs. (2021, August 18). UC Berkeley to shift comes campus services away from UCPD. *Berkeley News*. <https://news.berkeley.edu/2021/08/18/uc-berkeley-to-shift-some-campus-services-away-from-ucpd/>.

<sup>12</sup> Berkeley Business Process Management Office. (n.d.). *Mental Health Response*. Retrieved October 5, 2021, from <https://bpm.berkeley.edu/projects/active-projects/reimagining-uc-berkeley-campus-and-community-safety-program/mental-health>

<sup>13</sup> University Health Services. (n.d.). *Meet the CAPS Staff*. Retrieved October 5, 2021, from <https://uhs.berkeley.edu/mental-health/counseling-and-psychological-services-caps/about-caps/meet-caps-staff>

<sup>14</sup> University Health Services. (n.d.). *Crisis Counseling for Urgent Concerns*. Retrieved October 5, 2021, from <https://uhs.berkeley.edu/counseling/urgent>

<sup>15</sup> Telecare. (n.d.). *Willow Rock Center*. Retrieved October 5, 2021, from <https://www.telecarecorp.com/willow-rock-center>

family, individual therapy, and connections to resources. The locked, inpatient unit is the main transport facility for adolescents under an involuntary hold. Their patients are often referred from Kaiser Permanente, schools, and emergency services. They also accept walk-ins for voluntary services.

*Cherry Hill Detoxification Services Program* provides services for adults needing to detox from substances.<sup>16</sup> Their sobering unit has 50 beds for patients to stay 23 hours or less. The detox unit has 32 beds for patients to stay 4-6 days. Trained staff screen patients, provide medical services and psychological support, and link patients to services to meet their needs before discharge. Both units often get referrals from emergency services but also can accept self-referrals.

*Amber House*, operated by Bay Area Community Services (BACS), is a 23-hour mental health crisis stabilization unit (CSU) that provides a quiet environment for clients to receive short-term psychological support and have their basic needs met. The team is a clinician, a nurse, a supervisor, and an on-call psychiatrist, who provide voluntary services for people experiencing an acute mental health crisis. Many of their clients are transported or referred by mobile crisis teams, Oakland's CATT program, and occasionally police. Before a client is discharged, a staff member will provide referrals for long-term mental health care and other resources to meet their needs. Amber House also operates a crisis residential treatment (CRT) program in the same facility (which is Alameda County's only combined CSU and CRT), providing clients the option for a longer stay.

#### Drop-In Centers

The City of Berkeley has three drop-in centers for residents: the Berkeley Drop-In Center, Berkeley Wellness Center, and the Women's Daytime Drop-In Center. While not all sites have specific services for individuals in crisis, they can be an entry point for mental health services.

The *Berkeley Drop-In Center* is a peer-run, walk-in community center that provides drop-in time, service advocacy, and housing advocacy.<sup>17</sup> Clients can have their basic needs met, find a place to socialize, get connected to benefits, receive a referral for subsidized housing, and get linked to mental health services.

The *Berkeley Wellness Center*, operated by Bonita House, provides art classes, employment services, connection to benefits, primary care, counseling, case management, and evidence-based support groups for

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<sup>16</sup> Horizon Services. (n.d.). *Cherry Hill Detoxification Program Services*. Retrieved October 5, 2021, from <https://www.horizonservices.org/cherry-hill-detoxification>

<sup>17</sup> City of Berkeley. (n.d.). *Berkeley Drop-In Center*. Retrieved October 5, 2021, from [https://berkeleycity.networkofcare.org/mh/services/agency.aspx?pid=BerkeleyDropInCenter\\_670\\_2\\_0](https://berkeleycity.networkofcare.org/mh/services/agency.aspx?pid=BerkeleyDropInCenter_670_2_0)

adults with mental health and co-occurring disorders.<sup>18</sup> The Berkeley Wellness Center serves as an entry point to recovery and supportive services for people with a broad range of mental health needs and co-occurring conditions.

The *Women's Daytime Drop-In Center (WDDC)* provides similar services for homeless women and their children.<sup>19</sup> A small team of case managers, managers, and volunteers provide various services including case management, food, groceries, and hygiene kits. Clients can also receive referrals to additional services that are beyond the scope of WDDC.

#### Medical Service Providers

Because a mental health crisis and substance use crisis can co-occur, medical service providers play an important role in crisis stabilization and prevention. The two medical outreach teams mentioned by the community were Lifelong Street Medicine and Berkeley Free Clinic's Street Medicine team.

*LifeLong Street Medicine* is a program contracted by Alameda County Health Care for the Homeless Street Health.<sup>20</sup> Multidisciplinary teams provide street psychiatry and substance use recovery services for people experiencing homelessness in Berkeley. They can also provide connections to primary care, social services, housing, and other resources.

*Berkeley Free Clinic's Street Medicine* team is a volunteer-run collective where volunteers are trained as medics and provide services in the community.<sup>21</sup> Their services include HIV and STI testing and treatment, first aid, vaccinations, hygiene kit distribution, and substance use supplies and training. The teams regularly do proactive outreach to connect to new clients.

## What is the current mental health crisis call volume in Berkeley?

In addition to its deep community engagement process, RDA also reviewed quantitative data on the volume of calls related to mental health issues and who is making those calls. As noted previously, quantitative data from City of Berkeley agencies conducting crisis response (i.e., Mobile Crisis Team, Berkeley Police Department, and Berkeley Fire Department) currently have a variety of limitations. Because

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<sup>18</sup> Bonita House Inc. (n.d.). *Berkeley Wellness Center*. Retrieved October 5, 2021, from <https://bonitahouse.org/berkeley-creative-wellness-center-cwc/>

<sup>19</sup> Women's Daytime Drop-In Center. (n.d.). *Women's Daytime Drop-In Center*. Retrieved October 5, 2021, from <https://www.womensdropin.org/>

<sup>20</sup> Alameda County Health Care for the Homeless. (n.d.). *Street Health*. Retrieved October 5, 2021, from <https://www.achch.org/street-health.html>

<sup>21</sup> Berkeley Free Clinic. (n.d.). *Street Medicine Team*. Retrieved October 5, 2021, from <https://www.berkeleyfreeclinic.org/street-medicine-team>

of these limitations, RDA suspects that the available data is generally an underrepresentation of the true volume of mental health related calls in Berkeley. Given these limitations, RDA explored the available data for trends that can support the community in building its understanding of who is currently utilizing Berkeley's crisis services.

It is important to note that the City of Berkeley has contracted with the National Institute of Criminal Justice Reform (NICJR) to lead the City's current Reimagining Public Safety work. As a part of its current engagement, NICJR collaborated with Bright Research Group (BRG) on a large community engagement effort to better understand the local community's perspectives across a variety of issues pertaining to public safety in Berkeley. NICJR and BRG shared their findings on July 29, 2021 at Berkeley's Reimagining Public Safety Task Force (RPSTF) meeting; the slide deck presentation of key findings can be found online.<sup>22</sup> The overarching findings from this presentation align with RDA's community-wide data collection efforts.

### Key Mental Health Call Volume Trends

- MCT has responded to a declining number of 5150s since 2015, in part due to staff vacancies and the pandemic.
- The most frequent incident types of all 5150 calls to BPD were disturbance, welfare check, mentally ill, and suicide.
- Around 40% of BPD's welfare check calls included a mental health related facet to the response, followed by around 20% of disturbance calls, and around 10% of calls regarding suspicious circumstances.
- Falck has been contracted to conduct the large majority of 5150 transports in Berkeley, most often taking service utilizers to Alta Bates Medical Center and John George Psychiatric Emergency Services.
- BFD conducted fewer 5150 transports in Berkeley and only took service utilizers to Alta Bates, Oakland Children's Hospital, and Kaiser Hospital.
- The time required for a 5150 is, in part, determined by geography and the destination of transport.
- Calls for 5150s are most frequent from 10:00am to midnight and least frequent from 2:00am to 8:00am. There are no notable differences in the frequency of calls by day of the week.

For a deeper description of call volume and data, demographics of calls, and methods please see [Appendix D](#).

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<sup>22</sup> City of Berkeley's Reimagining Public Safety Task Force. (2021, July 29). *Berkeley Reimagining Public Safety – Community Engagement Report*. [https://www.cityofberkeley.info/uploadedFiles/Clerk/Level\\_3\\_-\\_Commissions/CE-presentation-Final.pdf](https://www.cityofberkeley.info/uploadedFiles/Clerk/Level_3_-_Commissions/CE-presentation-Final.pdf)

## Stakeholder Feedback

Mental health crises vary in severity along a spectrum. A crisis can present as someone in immediate danger to themselves or others, someone that needs regular support to address their basic needs, or someone that is generally able to manage their needs but needs occasional support to prevent a future crisis. Many stakeholders expressed that in order to effectively address the challenges of the current system, solutions and changes must engage with the nuance and spectrum of mental health crises.

Many stakeholders shared that by broadening our concept or definition of a mental health crisis, we can better design the mental health crisis response system and related services. Stakeholders provided several examples of the nuance and spectrum of mental health crises:

- ❖ Some forms of crisis are readily visible (such as people presenting to hospitals or experiencing a crisis while in public) while others may be unseen (such as a homeless-but-sheltered individual recovering from intimate partner violence).
- ❖ Some forms of mental illness or neurodivergence are reported by a bystander as a crisis, but there is not an acute crisis situation and should not result in a forced transport just because of a bystander's concern.
- ❖ Some forms of crisis are a result of community members not knowing where to access services even if they are able to identify their needs.
- ❖ Some forms of emergency service utilization stem from an ongoing unmet need for basic goods and services, such as a high utilizer that regularly presents at the hospital emergency department because they need food.

Overall, there is wide consensus among interviewed stakeholders that the current mental health, substance use, and homelessness crisis systems in Berkeley are under-resourced and unable to meet both the volume of need and the various ways in which crisis presents.

Expectations for different types of crisis responders varied greatly by stakeholder. Stakeholders shared mixed experiences with BPD's ability to successfully de-escalate situations and respond empathetically to people in crisis, and often attributed the quality of interaction to the traits of an individual officer. Stakeholders often held low expectations for BPD to intervene non-violently and expressed positive perceptions when BPD "didn't do anything." On the other hand, stakeholders shared high expectations for other crisis service providers including MCT responders or county case managers. Negative feedback from stakeholders was often because providers were not meeting these high standards. As a result, understanding stakeholder praise and criticism of crisis responders – such as MCT, BPD, and other CBOs – requires understanding stakeholders' varied expectations.

In discussing their experiences as well as the strengths and challenges of existing crisis response system, interviewed participants and survey respondents also shared ideas for a reimagined mental health crisis response system. The following sections detail key themes that were elevated across stakeholder participants.

Illustrative quotes from survey respondents are included alongside key themes. Due to concerns with anonymity and limitations of data collection, quotes from interviews and focus groups were unable to be included.



## Key Themes from Stakeholder Feedback

Perceptions of an urgent need for a non-police mental health crisis response in Berkeley

Perceptions of varied availability, accessibility, and quality of crisis response services

Perceptions of insufficient crisis services for substance use emergencies

Perceptions of a need for a variety of crisis transport options

Perceptions of a lack of sites for non-emergency care

Perceptions around supporting the full spectrum of mental health crisis needs

Perceptions of a need for post-crisis follow-up care

Perceptions of barriers to successful partnerships and referrals across the mental health service network

Perceptions of needs to integrate data systems and data sharing to improve services

Perceptions of a need for increased community education and public awareness of crisis response

## Stakeholder perceptions of the urgent need for a non-police mental health crisis response in Berkeley.



*"I think a carceral approach creates more trauma and fear. I have been traumatized by being in jail. I do not wish to be incarcerated when all I need is support."*

- SCU Survey Respondent

Overall, there was a strong sense of urgency for a change in the response to mental health crises in Berkeley. Service providers indicated that they routinely use creative interventions and provide services for clients multiple times and consider calling the police a last resort. Service providers shared that if there were an SCU, they would prefer to use a non-police option for crisis response.

Service providers and crisis responders expressed a sense that the current system is "broken," that they see the same service utilizers on a frequent basis. Providers shared examples of clients unable to access existing services, not engaged in services they are enrolled in, or not willing to receive offered treatment for a variety of reasons. Stakeholders felt that most people need support accessing resources in addition to immediate crisis response or de-escalation. However, they believe the existing crisis response system often relies on police to respond to calls. This is not the specialty of the police, nor are they able to provide a full range of follow-up linkages and referrals to trauma-informed social services.

There is strong consensus across city staff, service providers, service utilizers, and survey respondents that police do not best serve the needs of those who are experiencing a mental health or substance use crisis. Stakeholders emphasized that a mental health crisis should not be equated with violence, though there is often the misconception that any display of mental illness is violent or a threat to public safety.



*"My perception is that mental health issues, substance use, and homelessness are \*rampant\* in Berkeley - now more than ever - and police are simply not the right people to deal with these issues."*

- SCU Survey Respondent

Stakeholders shared that there are scenarios in which the presence of police can increase the danger for service utilizers or bystanders. In the context of intimate-partner and domestic violence, there is often a fear of retaliatory violence if the police are called in to respond to the abused partner seeking help. Stakeholders shared examples police presence and visible weapons escalating a mental health crisis, causing an increase in erratic or unpredictable client behavior. Particularly for service utilizers with traumatic histories from interactions with police officers, they felt the presence of police can escalate a crisis or emergency. Service providers shared stories of clients that have suffered through immense psycho-social harm and/or medical complications before reaching out to 911 due to their fear of the police.

Survey respondents and service providers shared the perception that sometimes police think a weapon is present on an individual when it is not, and felt that police use unnecessary violence and force, which overall decreases their sense of safety. Stakeholders felt that this context results in an environment in which they do not call for emergency help because of



a fear of police, leaving community needs for crisis support unmet. Service providers also elevated that there are ways to disarm someone without using force or weapons which would improve the safety for both service utilizers and providers alike.

For these reasons, Crisis Support Services of Alameda County (CSS) crisis line providers shared that they prepare callers for interactions with the police by telling them what to expect when the police arrive and providing options to keep themselves safe (e.g., stepping outside, double checking that there are no weapons or illicit substances on their person, and closing their front door). However, they did mention that service utilizers using substances or experiencing a break with reality may not be able to follow close directions and are at increased risk of police violence due to the heightened probability of misunderstanding or miscommunication.

Stakeholders shared a few strengths of police involvement in the existing crisis response system. They shared that police may provide a useful resource for people who need documentation of a crime for future legal reference. A police report with these details can later be used in a court setting or provided as proof to an insurer. Additionally, many service providers indicated police presence can protect the safety of crisis responders and bystanders when weapons are present. Some stakeholders elevated that the presence of police can be supportive when community members or service providers are attempting to de-escalate a crisis.

The overwhelming importance and immediacy of changing the mental health crisis response system was emphasized in stakeholders' references to the violence committed against a woman killed by BPD during a mental health crisis in 2013 and a man shot by BPD during a mental health crisis in 2021. Stakeholders shared that providing a non-police mental health crisis response option could increase the acceptability and accessibility of crisis response by addressing this fear, thereby promoting the safety and well-being of community members and service utilizers.

There were differing perspectives of whether police should have any involvement in crisis response. The expressed perspectives included: there should be no police involvement; police should be called as back-up only if SCU de-escalation efforts were unsuccessful; police should be called as back-up only if the presence of weapons was confirmed; or police should be involved through a co-responder model like MCT.

Stakeholders offered important considerations for police involvement. Some stakeholders suggested that police should be dressed in plain clothes to avoid their presence further escalating a community member in crisis. Other stakeholders shared that if police are involved in the SCU model of crisis response, then they should be in uniform; they elevated that community members should understand who they are speaking to, given that a police officer can arrest, detain, and/or incarcerate them. Additionally, because community members expressed that they have the right to identify a police officer's badge number and last name -- which is particularly important if a community member needs to report any



*"I desperately needed help for a friend who was experiencing a mental health crisis. She was adamant that I not call police because she is scared of them and feared that they would be violent with her. There were no alternatives available in Berkeley. I have watched police respond to people in crisis many times. Some cops are aware that their presence can escalate people. Some of the cops are oblivious of how they impact a situation and make it worse."*

- SCU Survey Respondent





*"I have had police response in an emergency crisis. It only made the crisis more terrifying and traumatic."*

- SCU Survey Respondent

misconduct -- police should be in uniform. Furthermore, stakeholders elevated their fear of being targeted by certain police officers as someone that experiences mental health emergencies and/or someone who uses drugs; for this reason, stakeholders shared that it is important for police to remain in uniform to mitigate the criminalization of mental health crises and drug use and for public awareness.

Stakeholders shared considerations for protecting and enhancing the safety and well-being of crisis responders, service utilizers, and community bystanders alike. The presence of weapons is a primary safety consideration for many stakeholders. Stakeholders reported concerns about determining and dispatching the appropriate intervention team in order to prevent injury or assault to crisis responders, especially when there are weapons present. Many stakeholders also emphasized that the safety of the person in crisis must be protected too.

Stakeholders provided many ideas for how a non-police crisis response system could best support Berkeley residents. Community members and providers suggested a crisis response team include mental health practitioners such as peer workers, therapists, direct patient care specialists, social workers, medical providers and/or psychiatrists. They also suggested several trainings that would support crisis responders to better meet the needs of people in crisis, such as trainings on trauma-informed care, de-escalation, and crisis neutralization. Finally, given the types of crises service providers and service utilizers most often experience, stakeholders elevated specific technical knowledge that crisis responders should be prepared to employ, including basic first aid, domestic-violence crisis response training, and specific knowledge on DSM-5 mental health diagnoses, and co-occurring drug-induced states.



### Additional Perspectives from the SCU Survey

*"The police response here is among the most professional that I have seen in any jurisdiction in the nation - yet the bottom line is requiring police to respond to crisis situations in which they do not have the requisite training is a disservice to both the officers and those on the other side of the response."*

*"I don't feel unsafe in the community. My homeless neighbors are much more unsafe than I am because they are consistently interacting with people who hate them, with some bad cops including the campus cops."*

*"There is a huge crisis in our city of homelessness and mental health and the police only ever make things worse. Sweeps, seizures of possessions, harassment and intimidation of unhoused residents is all too common. The violent detention of mentally ill people seems to be a day to day reality. Heavy restraints and spit hoods being used in the place of de-escalation and care. The Berkeley police shot a man in crisis through the mouth this year and that is beyond unacceptable!!!"*

*"I need to know that if I, or someone I love, is experiencing a mental health crisis that there is a trained mental health professional that I can call who will come, without a gun, and that I will receive care, not a cop, and that I will not end up dead. Knowing I won't be shot dead by a cop for the "crime" of living with mental illness, for being poor, or for having a substance use disorder would help me to feel safe."*

# Stakeholder perceptions of varied availability, accessibility, and quality of crisis response services

## Perceived Strengths

- MCT provides quality services
- Positive experiences with individual BPD officers
- BFD created a resource list to better provide referrals

## Perceived Challenges

- Lack of 24/7 crisis services
- Requiring service utilizers to keep appointments
- Slow response times for MCT due to limited staffing
- Long waitlists for services
- Few options for de-escalation or non-emergency care
- Poorer quality of services provided to people of color and unsheltered people

## Stakeholder Ideas

- Proactively communicate service availability & hours of operation
- Increase 24/7 service options
- Increase training on racial justice, cultural sensitivity, harm reduction, and de-escalation

Stakeholders identified a few strengths of the availability, accessibility, and quality of crisis services. Many reported that there is general knowledge of the existing crisis response options in Berkeley. Some providers reported positive experiences with police, and many reported positive experiences with MCT. Another strength shared by stakeholders is that BFD's ability to refer and link service utilizers to resources has increased since they created a list of CBOs and local programs.

A common challenge elevated by stakeholders is the lack of 24/7 response options. A mental health crisis can happen at any time, but many crisis programs operate during standard business hours. The limited hours of operation of MCT were elevated by stakeholders as a significant challenge that increased the risk of police interaction with service utilizers who call 911 when MCT is not staffed.

Stakeholders frequently mentioned limited MCT staffing as a major barrier to accessing quality crisis response services. For the last two years, two of four crisis staff positions have been vacant. Because MCT responds to calls in pairs, only one team is available to respond at a time. This can result in long wait times if the team is responding to another call. Additionally, if there is a high call volume, MCT will prioritize high acuity calls where someone is showing imminent signs of crisis or distress. The reduction in staffing also led to a reduction in hours. This has caused confusion among providers and service utilizers. Service providers elevated this as a source of uncertainty and distrust that can reduce the likelihood of someone accessing services in the future.



*"Berkeley MCT is only open on weekdays during certain hours. I have never had an incident where I needed help with a client coincide with their open hours."*

- SCU Survey Respondent




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*“Mobile Crisis folks are good. It's just that they always come with the cops, and sometimes they can't come for many hours because they're busy.”*

- SCU Survey Respondent

Stakeholders believe these challenges and barriers to accessing services or ensuring the availability of services are ultimately challenges to the overall safety and well-being of potential service utilizers, community bystanders, and service providers.

A Berkeley City Auditor's report in 2019 elevated that the understaffing of the 911 Communications Center has led to staffing levels that cannot meet the call volume and increased call wait times.<sup>23</sup> Increased call wait times have negative implications for the safety and well-being of service utilizers and community members, as well as the service providers and crisis responders that are responding to a potentially more advanced state of crisis. Additionally, inadequate staffing levels have caused BPD to rely on overtime spending to fund the Communications Center, which increases the cost of the entity.

There was consensus among participants that many facets of the crisis response system feel understaffed, which can lead to decreased service availability and slower responses. Under-resourcing can create challenges to service availability across the providers and programs throughout Berkeley and Alameda County. Service utilizers and community members reported long waiting lists for permanent supportive housing units, a key stabilizing factor that could reduce the incidence of mental health crises overall. There was also a perception among stakeholders that service utilizers are faced with long waits to access healthcare, case managers, and temporary congregate shelters.

Some CBOs also identified a need for more multilingual services, especially Spanish-speaking providers. They also indicated that a fear of ICE or 911-corroboration with ICE is a barrier for undocumented community members to call 911, especially for undocumented residents that are unhoused. Service providers suggested that more culturally competent services would increase the likelihood of someone seeking services when they are experiencing a crisis.

Stakeholders believe that these challenges to availability and accessibility can reduce the quality of available services. When police must respond to a mental health crisis because it is outside MCT business hours, community members do not feel the response was adequate or of the highest quality. Crisis responders expressed that they frequently provide medical solutions when the service utilizers they encounter have mental health needs and are most affected by broader societal problems.

When MCT is not operating, CSS indicated that they do more de-escalation over the phone prior to calling for police support to prepare




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*“It's a revolving door (with Santa Rita, John George, etc.) where crises are sometimes averted, but almost no one is truly healed and set on a good path of recovery or even stability.”*

- SCU Survey Respondent

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<sup>23</sup> Berkeley City Auditor. (2019, April 25). *911 Dispatchers: Understaffing Leads to Excessive Overtime and Low Morale*. [https://www.cityofberkeley.info/uploadedFiles/Auditor/Level\\_3\\_-\\_General/Dispatch%20Workload\\_Fiscal%20Year%202018.pdf](https://www.cityofberkeley.info/uploadedFiles/Auditor/Level_3_-_General/Dispatch%20Workload_Fiscal%20Year%202018.pdf)

the service utilizer and reduce their risk of harm; however, they shared that phone support may not always be sufficient for every mental health crisis.

Overall, there was consensus among stakeholders that there is a lack of successful linkages and connection to follow-up services beyond John George Psychiatric Hospital. Many participants felt that hospitalization may not be appropriate care for everyone experiencing a mental health crisis. Crisis responders and providers reported service utilizers requesting to not be sent to John George, but that as service providers they do not feel they have other options. For service utilizers, trauma histories can be re-triggered by congregate shelters, psychiatric care or hospitals, and police interactions. Stakeholders elevated a need for increased options for where people can be transported during a crisis.

Finally, there is a perception that the quality of the City's first responder crisis response services is inhibited by a lack of training that sufficiently addresses harm reduction, racial justice and cultural sensitivity training, and successful de-escalation. Service providers shared examples of clients' needs not being taken seriously, such as instances of individual EMTs not responding to unsheltered clients and/or clients of color. These examples demonstrate how stigma, dehumanization, and racism decrease quality of services.

Given the constraints of how the existing crisis system is funded and resourced currently, stakeholders elevated that any changes to program hours of operation, locations, staffing, phone numbers, and/or other logistical/programmatic decisions be shared regularly and distributed to the partnership network in order to improve availability, accessibility, and quality of service provision. They felt that the ideal alternative crisis response options would include 24/7 mental health crisis response and should address the desired competencies of harm reduction, racial justice and cultural sensitivity, and de-escalation to increase community safety and promote health and well-being.



*"The resources we have are helpful, but we need more. We especially need affordable housing units. The mobile street medicine teams have been very helpful. Shelters are ok for some people, but often exclude people with disabilities who need assistance the most."*

- SCU Survey Respondent



### Additional Perspectives from the SCU Survey

*"They tend to exist in ways that are the most convenient for the service providers, not for the person in need. Mental Health Services don't really happen outside of their offices. How can disordered, homeless people be expected to make and keep appointments at some unfamiliar address? The drug epidemic is complicating things and I have seen no evidence that this city wants to commit to rehab on demand which is what we need. We need to be able to offer help when it is needed- not when it is convenient."*

*"I've been doing outreach work for more than a year in Berkeley now and access to mental health crisis support is almost nonexistent. It is highly needed as many individuals are experiencing some level of mental health issues."*

*"... My experience with the police response has been that the City of Berkeley crisis team has been understaffed or not working the day that I phoned, or my report of the need for crisis support was minimized, and it was explained that the person "wasn't breaking any law." Crisis doesn't often intersect with law breaking, nor does an individual always meet the criteria for a 5150. There are trained individuals who can help with this, and police often offer heavy handed threats of arrest, or physical violence, in attempt to stop a behavior."*

# Stakeholder perceptions of insufficient crisis services for substance use emergencies

## Perceived Strengths

- EMTs respond well to substance overdoses
- EMTs are well-trusted by many unsheltered communities and encampments

## Perceived Challenges

- Not enough SUD training for clinicians providing complex mental illness care
- High rates of transport to emergency facilities for substance use emergencies
- Infrequent referrals to substance use management services
- Too few resources to meet high volume of substance use emergencies and management needs

## Stakeholder Ideas

- Incorporate harm reduction framework into all crisis response
- Distribute NARCAN
- Distribute harm reduction supplies (e.g., sharps disposal, clean needles, etc.)



*“Decriminalization is key to “illegal” drug use and harm reduction methods of dealing with addiction and drug use save lives and alleviate the stigma.”*

*- SCU Survey Respondent*

Stakeholders explained that mental health crises often include substance use emergencies, but they felt that variety and uniqueness of substance use emergencies is often overlooked and not adequately served in the existing crisis response. Stakeholders described many examples of physical and psychosocial health needs related to substance use that do not involve an overdose. Service providers shared that substance use emergencies and mental health crises are often co-occurring as substance use is common among people with histories of trauma and is used as a form of self-medicating.

Substances can alter someone’s mental state and contribute to or exacerbate what is perceived as a mental illness. Stakeholders elevated that when a person is in distress, providers should assume that something is triggering that distress, be it an event or intoxication. One of the most frequently and emphatically emphasized points by service providers was the need to address mental health and substance use in tandem.



*“The people with mental illness should get treatment. In crisis, they should be housed with treatment. Those with substance abuse should have treatment available. Being homeless probably makes people mentally ill. I think I would be mentally ill if homeless.”*

*- SCU Survey Respondent*

In the event of a substance overdose, stakeholders felt that Berkeley EMTs are well-trained, follow protocols, and administer effective treatment for users that have overdosed. Stakeholders reported that EMTs are well-trusted by marginalized substance-using communities, including homeless encampments. Seabreeze encampment residents shared that they avoid calling 911 for any emergencies except to specifically request an EMT during an overdose.

Stakeholders described many challenges to how the system currently addresses substance use emergencies. They felt that the physical health and mental health needs of a service user experiencing a substance use emergency are treated as separate needs. Service providers explained that whichever presents as more immediately pressing often dictates the classification for the call; they felt that this results in inadequate service provision during a crisis.

Community-based providers elevated that when seeking care for clients with complex trauma or chronic mental illness, they are rarely put in contact with a provider that has SUD training. Service providers expressed a need for an integrated approach to substance use emergencies, with providers working together to tend to both the psychological and physical health needs of their clients.

Substance users reported frequent transport to hospitals and sobering centers when emergency providers respond to crises. Interviewed substance users shared that they were only informed of other substance use management options when other case managers shared those options (not emergency services personnel prior to transport).

Stakeholders suggested ways that the current crisis response system could better address the needs of substance use emergencies, including incorporating a Harm Reduction framework into first responder's approach to drug use, distributing Narcan, and distributing harm reduction supplies such as clean needles, pipes, and safe sharps disposal kits.



### Additional Perspectives from the SCU Survey

*“I am a Nurse Practitioner... Some camps in Berkeley have agreements internally not to call the police on each other. If someone does, there is retaliation, sometimes in the form of lighting the person's tent on fire. This means people do not call 9-11 when there is a mental health emergency. While I completely understand why the mobile crisis unit has police officers, it is not used as often as it could be because of that fact...Many unhoused folks we meet use meth in part to stay up all night so they will not get raped or robbed during the night. This is of course not the only reason folks use meth and other drugs--there are mental health issues, addiction, etc. But until people are housed, it is very, very hard for them to cut down or quit, because the risks can outweigh the benefits in their minds.”*

*“...Offering safe use and drug checking sites, so we can reduce harm that comes from unsafe drug use. Creating accessible, affordable, and temporary housing for each phase of a person's recovery from crisis. Ensuring people have access to food, safe shelters, and access needs are met.”*



# Stakeholder perceptions of a need for a variety of crisis transport options

## Perceived Strengths

- Transport is provided to emergency sites during medical emergencies

## Perceived Challenges

- High rates of involuntary transports (5150s) do not align with service needs
- Lack of options for transport to non-emergency sites
- Ambulances and emergency services can be cost-prohibitive for service utilizers

## Stakeholder Ideas

- Provide voluntary transport to non-emergency sites
- Provide services and supplies during transport process



*“With all the services available, as a firefighter, all we can really do is take someone to the ER, which is not definitive care for homelessness. Mobile support of homeless services would be a game changer, much the way mental health comes out into the field.”*

*- SCU Survey Respondent*

Crises can vary in levels of acuity, and not everyone calling in to report a mental health emergency needs transport to a psychiatric facility, hospital emergency department, or inpatient setting. Both EMTs and police shared that they provide free transport to a medical facility, which is important in the event of medical health emergencies. However, Alameda County has the highest rates of 5150s per capita in California.<sup>24</sup> Service providers described full emergency departments and service utilizers not being admitted upon arrival. There are also financial implications for being transported in an ambulance, which providers suggested may deter service utilizers from requesting emergency services. Stakeholders felt that there are few to no options for service utilizers to request transport to a different, non-medical facility or location. Stakeholders did provide some examples of CBOs and non-emergency programs that provide transportation to their clients, though they shared that these services are not for the general public and barriers to transportation persist.

Given the need for addressing a variety of transport needs, stakeholders elevated the importance of an SCU team to have the ability to provide voluntary transport services to any secondary location, such as a sobering center or a public location. Service providers and community members suggested that the transport vehicle should have available supplies to provide care during a transport, such as one-off doses of psychiatric medicines, food, and water. There was a shared sense that providing

<sup>24</sup> California Department of Health Care Services. (2017, October). *California Involuntary Detentions Data Report; Fiscal Year (FY) 2015-2016*. [https://www.dhcs.ca.gov/services/MH/Documents/FMORB/FY15-16\\_Involuntary\\_Detentions\\_Report.pdf](https://www.dhcs.ca.gov/services/MH/Documents/FMORB/FY15-16_Involuntary_Detentions_Report.pdf)

transport options that meet the mental health needs at varying levels of acuity has important implications for the safety and well-being of crisis responders and service utilizers.



### Additional Perspectives from the SCU Survey

*"...Another challenge is the lack of options for people in crisis either hospitalization or nothing which is very harmful. Another issue are people who feel terrible but are not exactly in crisis but because there are not enough mental health providers they are forgotten or left to their own devices."*

*"I need to know that if I call for help, a compassionate response will arrive and be able to take a person to a humane location, respite of some kind. Not forcing them into a hospital where they are stripped of agency, but giving them a place where they can stabilize without adding to their feeling of trauma and powerlessness."*

## Stakeholder perceptions of a lack of sites for non-emergency care

### Perceived Strengths

- Drop-in centers, day centers, sobering sites, and respite centers provide essential non-emergency services

### Perceived Challenges

- No drop-in site for mental health emergencies or crises in Berkeley
- Too few drop-in sites for non-emergencies to meet the volume of need
- Lack of support for people released from a psychiatric hold

### Stakeholder Ideas

- Offering drop-in sites with counselors and Peer Specialists, a phone line, and no service/time limits
- Offering office hours and/or relationship-building opportunities between the SCU and service utilizers

Stakeholders shared examples of sites that can support non-emergency care and felt that they are effective for mitigating further crises. These examples include drop-in centers, day centers, sobering sites, and respite centers. Services providers believe that such spaces allow individuals to meet their basic needs – including access to restrooms, showers, clothing, food, and rest – as well as have a safe space for self-regulation and self-soothing. Stakeholders, particularly service providers, feel that these types of resources are essential for harm reduction, crisis intervention, health promotion, and crisis prevention. Stakeholders shared that these sites can be a safe and trusted source for someone to access so that a primary caregiver can have a break, such as a parent that provides an adult child behavioral health support and care. Participants mentioned other CBOs



that operate drop-in sites, such as the Women’s Drop-In Center or Berkeley Drop-In Center, but service providers indicated that there is still an unmet need for more sites that serve sub-acute needs. Because there is not a drop-in center for emergencies, service utilizers and community service providers described relying on either 911 or the CSS 24/7 phone line. Similarly, stakeholders felt that the availability of non-emergency drop-in centers for individuals to have non-emergency, indoor downtime is too limited to meet the volume of need. CBO service providers as well as crisis responders described situations of individuals being released from psychiatric holds without adequate support upon their release. They felt that these individuals would greatly benefit from the availability of additional drop-in centers.

Service utilizers and community-based service providers emphasized that it would be useful for the SCU to have an office available for community members to develop relationships with the team, like Aging Services’ Senior Centers. They suggested that a drop-in site could have a social worker or peer counselor to accept and direct phone calls, answer questions, and support those accessing the drop-in site.



### Additional Perspectives from the SCU Survey

*“...addressing the connection to community in the long term - spaces for people to gather publicly without needing to pay money, so we can get to know our neighbors.”*

*“... We need wrap-around services, a halfway house or drop-in center for people being released from a psychiatric hold, to ease them back into their lives and connect them with ongoing services.”*

# Stakeholder perceptions around supporting the full spectrum of mental health crisis needs

## Perceived Strengths

- Relationship building is important in crisis response

## Perceived Challenges

- Wages, retention, and union agreements may affect type of staff on crisis response team
- Crisis response lacking sufficient supplies and expertise for SUD treatment, de-escalation, and system navigation
- Crisis responders are not often representative of service utilizers

## Stakeholder Ideas

- Incorporate clinicians, social workers, and peer counselors on crisis response team
- Increase compensation for Peer Specialists and non-clinical staff



*“A response team targeted at de-escalation and risk reduction would be best; it would be best staffed by those who can actually connect people in need to resources rather turning a crisis into a criminal matter, such as police do.”*

*- SCU Survey Respondent*

Stakeholders shared many strengths of crisis responders across a spectrum of non-clinical and clinical background and expertise, emphasizing the importance of empathy and building trusting relationships. For instance, TOT staff received positive feedback across stakeholder groups for their follow-up work post-crisis, especially due to their diverse staff and rigorous training in preparation for field work. Service providers emphasized the importance of Peer Specialists to support service utilizers by reassuring them from their own background of lived experience, especially during transport or if the team applies physical restraints.

Crisis responders and service utilizers shared that the pre-existing relationships paramedics have with community members, particularly those that repeatedly need crisis response services, allows paramedics to deliver better care. Some CBOs have observed similar success when incorporating Nurse Practitioners on their street outreach teams. Overall, stakeholders believe that the ability for the same personnel to be providing crisis response services over an extended period can lead to positive outcomes of relationship building and knowing a client's background.

However, stakeholders raised some potential challenges that must be considered when deciding how to staff a crisis response team. Crisis responders explained that paramedics often have a higher salary than other crisis responders and their skills can be under-utilized during a mental health crisis. They felt that this could make staffing a crisis response

program with paramedics less financially efficient. On the other hand, they shared that other crisis responders, such as peer specialists, can be underpaid for their level of contribution, which they suggested might make retention a challenge. One additional consideration shared by crisis responders is that staff can have different union agreements that restrict the number of hours that can be worked per shift, which would affect the program's overall staffing model and schedule.



*"I think professionals who are trained to resolve these crises non-violently is key. For example, social workers."*

- SCU Survey Respondent

Stakeholders felt that some of the services most important for mental health are not always standard practice among current crisis response teams. The types of clinical services that stakeholders reported as most important for mental health crisis response include prescribing psychiatric medicines, administering single-dose psychiatric medicines, quick identification of a substance overdose and/or the need for Narcan intervention, as well as a nuanced understanding of drug-psychosomatic interactions. The types of non-clinical services that stakeholders reported as most important for mental health crisis response included de-escalation, resource linkages and handoffs, system navigation, providing perspective from providers with shared identities or experiences, building ongoing relationships with frequent utilizers, and overall building trust and rapport with the community.

Given the considerations around the types of needs that various specialties can address during crises, as well as the implications for financial feasibility, stakeholders elevated additional ideas for how to staff crisis response teams. Stakeholders expressed support for a crisis response team with a medical provider (e.g., advanced practice nurses, psychiatric mental health nurse practitioners, EMTs, or paramedics), social workers, and especially peer counselors. Stakeholders expressed that non-clinical staff are equally valuable to clinical staff in a crisis response team, a value which should be reflected in their salaries.



#### Additional Perspectives from the SCU Survey

*"We need a crisis response team with trained social workers, case managers, and clinicians trained in de-escalation techniques. This team should be able to connect people in crisis with emergency shelter and other services."*

*"I do not believe that the police are trained to respond to the needs of an individual, homeless, or otherwise, experiencing a crisis. Mental health, substance use, and homelessness related crisis are best responded to by someone who has been trained to work with these issues, or a peer who, along with a trained professional, can provide support and most importantly, follow up."*

## Stakeholder perceptions of a need for post-crisis follow-up care.

### Perceived Strengths

- Positive experiences with existing referral services (i.e., TOT and CAT)

### Perceived Challenges

- Existing programs do not meet the volume of need
- Difficulty contacting service utilizers for follow-up care
- Lack of warm handoffs to follow-up providers
- Limited long-term service availability
- Strict missed appointment policies

### Stakeholder Ideas

- SCU provides follow-up care
- SCU builds relationships to support before, during, and after a crisis
- Providers should be familiar with case history, triggers, etc.

For crisis services provided by the City of Berkeley, the Transitional Outreach Team (TOT) is the primary resource for post-crisis follow-up care. Service utilizers and community-based service providers elevated many strengths about the TOT team, including their ability to connect service utilizers to longer-term care options and social services when interested.

At the same time, stakeholders uplifted a need for additional follow-up care after a mental health emergency. TOT staff and Berkeley Mental Health leadership described many challenges TOT face in meeting the level of need across the crisis spectrum. The team is not adequately staffed to meet the current demand for their services. TOT is a team of only two staff with limited business hours for providing linkage to care. TOT staff also shared that the service provider that responds during a crisis (i.e., MCT) is not the same provider that makes follow-up connections (i.e., TOT), and that there are many potential providers to provide ongoing, long-term care (e.g., Berkeley Mental Health, Alameda County Behavioral Health, or private providers). They felt that this can create challenges for them to provide successful referrals and handoffs to post-crisis follow-up care, sharing background information on clients, and building trust and establishing rapport.

TOT staff also shared many challenges they face in reaching clients, particularly those leaving an inpatient or emergency facility, such as John George or Alta Bates Hospital. They explained that clients are sometimes discharged prior to their connection with TOT, often outside of TOT's hours of operation. They find it particularly difficult to connect with service utilizers that do not have a cell phone or a consistent residence, which they explain is common among high-utilizer community members, such as those with severe mental illness or those experiencing homelessness.



*"I think police officers already deal with so much, there's often an acute need they're responding to when in fact these individuals need long-term care."*

- SCU Survey Respondent



*We need clean, safe shelters for people to spend the night if they're homeless and/or under threat. Kicking them out of shelters doesn't make the problem go away.*

*- SCU Survey Respondent*

In general, many people that experience mental illness or mental health crises require or are recommended to long-term therapy or extended sessions. However, it is the perception of stakeholders that services are primarily devoted to high-acuity and short-term and service utilizers are unable to access long-term therapy. Stakeholders felt that the providers who do offer therapy or counseling are unable to meet the volume of weekly appointment needs of service utilizers due to budget and billing constraints. Therapy is not only a form of post-crisis care but also a pre-crisis prevention tool; service providers suggested brief intervention therapy in non-emergency settings (such as a service utilizer walking in during a crisis) to augment the existing crisis response system.

Outside of Berkeley Mental Health services, there are often strict policies around missing appointments, largely tied to insurance and billing requirements, that result in service disruption or termination for service utilizers. Service providers and service utilizers feel that these strict missed appointment policies are inaccessible to many low-income service utilizers and often result in the discontinuation of services. Stakeholders described some barriers that service utilizers may face in maintaining their appointments, including working more than one job (especially during standard business hours), having a reliable cell phone, having access to a calendar, and/or having a reliable mode of transportation.

The importance of follow-up care was elevated by all stakeholder groups as a priority for the SCU. Service providers argued that there may be benefits to having the same people providing care before, during, and after a mental health crisis, to build relationships, establish trust, and understand an individual service utilizer's care history, behaviors, triggers, and needs.



#### Additional Perspectives from the SCU Survey

*"I would like for the police to be removed from crisis services and to have a rapid response available when I call...I would like for there to be more connection to services and follow up as part of the planning. There is often not a resource available for the person, and living on the streets is stressful, so repeated contact is essential. It can't be a one and done and often would mean an increase in FSP teams."*

*"Alternative trained individuals, such as social workers or mental health professionals as part of this time, increased community-based mental health care services, social and rehabilitative services that highlight social reintegration, such as Supported Housing, Supported Employment, and Supported Education."*

# Stakeholder perceptions of barriers to successful partnerships and referrals across the mental health service network

## Perceived Strengths

- Providers know the referral options available for their clients

## Perceived Challenges

- Limited coordination and information sharing between providers of shared clients
- BPD engages with many high utilizers but is not connected to the network of providers
- Lack of trust and understanding across service providers

## Stakeholder Ideas

- Engage providers in discussions on system improvement
- Increase collaboration between cities, counties, and providers
- Address systemic factors of crises
- Increased outreach and care coordination of referrals



*“A 24-hour crisis line/team or at least a team more available than currently. Police and that team should attend the regular city coordination meetings with the current teams that are doing outreach.”*

*- SCU Survey Respondent*

There was consensus among stakeholder groups that the existing mental health and crisis service network is complex, involves many providers, and can be a challenge for both clients and providers to navigate. Across these entities, establishing partnerships and referral pathways can be done informally (such as knowing which organization provides which types of services) or can be formalized (such as holding regular case management meetings for shared clients). Among community-based service providers, interviewees shared that they typically do know the scope of options available to their clients.

In general, stakeholders elevated a perceived lack of coordination between service entities in Berkeley. For example, a single client might receive emergency services from John George or Highland Hospital, but also have a primary care provider, have engaged frequently with the LifeLong Street Medicine Team, and have a case manager at the Women’s Drop-In Center for wraparound services. Stakeholders shared that there is not active collaboration across all these entities or an established infrastructure to facilitate an understanding of all the touch points between providers and a service utilizer. Ultimately, stakeholders feel that this obstructs the visibility of how a service utilizer moves through various points in the system. Some providers explained that they may not share the full case history or behavior details of a client with other service providers initially because they fear the client will be rejected or denied service, particularly for violent behaviors. They feel that this prevents informed and well-placed referrals and service provision.

TOT staff shared that service coordination is lacking between hospitals and TOT for post-crisis follow-up care. To connect with an MCT service

utilizer at the hospital, TOT explained that they must rely on the discharging facility to contact them and coordinate the release of the shared client. TOT staff reported needing to spend time in hospitals to establish relationships with new case managers, front desk staff, nurses, and orderlies to facilitate this information sharing and warm handoff of clients; they described a lack of standardized protocol for such coordination.

BPD also reported feeling disconnected from the care continuum and lacking coordination with trusted CBOs and behavioral healthcare providers around shared clients. BPD routinely engages with frequent crisis service utilizers and sometimes carries supplies like food and clothing, though there is not an existing pathway for BPD to identify, contact, and coordinate with a case manager. BPD elevated that these frequent utilizers would be better served by a case manager.

Service providers also reported that BPD does not routinely bring service utilizers to their locations for support, and some questioned whether BPD know that their programs and services exist. Still, others felt that police presence at their sites is disruptive and may prevent potential service utilizers from coming if they witness police officers around the premises.

Stakeholders offered possibilities to enhance the referral pathways and partnerships across the crisis response network at both structural and provider levels. At a structural level, stakeholders suggested having a regular convening of local care providers to discuss opportunities to improve the mental health crisis system. Stakeholders also suggested having more inter-county and inter-city coordination on systemic issues related to housing and healthcare. Stakeholders suggested that the crisis response system should be expanded and augmented to include more non-mental health related service provision on the spot and not only connections or linkages to resources. Additionally, stakeholders expressed a desire for more outreach and partnerships with long-term care to enhance coordination and referrals across the service network.

At a provider level, stakeholders suggested having more coordination between providers and outreach teams. Service providers also expressed an interest in having regular meetings with the SCU to discuss shared clients, which could improve care coordination as well as client outcomes.



### Additional Perspectives from the SCU Survey

*“The challenge is, and has been, to have adequate staffing to provide services to those in crisis, with severe mental health diagnosis and/or dual diagnosis in the moment and following a crisis response. Successful efforts have been proven by street health teams to engage and provide treatment on the street, which often include de-escalation. The struggle lies on helping folks transition into care in the clinics, recovery programs, or a combination of both: with adequate staffing to provide long term services. So, challenges would fall under budget & funding to expand staffing and programming, including crisis residential, and Board and Care Homes...The City appears open and willing to try an approach that will better meet the needs of its citizens.”*



# Stakeholder perceptions of needs to integrate data system and data sharing to improve services

## Perceived Strengths

- Some medical clinics use the same EHR
- Some agencies use a shared Alameda County Community Health Record

## Perceived Challenges

- Limited data integration across providers inhibits care coordination

## Stakeholder Ideas

- Expand data integration across providers and provider access to case history
- Increase care coordination across providers
- Notify case managers after discharge from hospital



*"I would also feel safe knowing that the City and County were working together to identify ways to increase funding for mental health services in conjunction with housing to meet the mental health/substance use recovery needs of the community."*

- SCU Survey Respondent

Service providers feel that better system integration and data sharing across the service provider network can support providers in meeting the needs of service utilizers. Stakeholders feel that system integration and data sharing are strongly related to the successes and challenges of partnerships, referrals, and connectivity across the service network.

The numerous entities that span the mental health, substance use, and homelessness service network include CBOs and government agencies across the City of Berkeley, Alameda County, and other cities and counties. Service utilizers also move across these regions, accessing services in multiple cities or counties. As a result, system integration could happen at many levels.

Fortunately, subsets within the service network do have data integration and sharing capabilities. For instance, providers shared that all federally-qualified health centers (FQHCs) are on the same network as hospital Emergency Departments.

Some program directors also discussed a recent effort at the county level to integrate data into one Community Health Record for service utilizers.<sup>25</sup> This system integrates medical, mental health, housing, and social service data into one platform. There are currently over 30 organizations within

<sup>25</sup> Alameda County Care Connect. (n.d.). *Why AC Care Connect? Why Now?* Retrieved October 11, 2021, from <https://accareconnect.org/care-connect/#faq-item-5>



Alameda County who are using the community health record, with a goal of every agency being onboarded onto the system.<sup>26</sup>

Until then, the current multitude of agency data systems are not yet fully integrated. Providers explain that they are unable to identify shared clients or high utilizers of multiple systems, track those service utilizers' touchpoints across the service network, or view patient history across those service touchpoints. Case managers share that they are not notified when a client is discharged from a medical facility or community provider of care. Service providers feel that this lack of data integration affects collaboration, referrals, and, ultimately, client outcomes. The limited visibility of a service utilizer's prior history was raised by service providers as a challenge to supporting safety when trauma histories, triggers, and recent mental health crises cannot be incorporated into care planning.

Additionally, except for diagnosis and treatment purposes, HIPAA privacy regulations require service utilizers to give consent and Release of Information (ROI) to providers for external case managers' names, information, and service documentation to be included in medical records. This limits the collaboration between case managers and other providers on a case-by-case basis.

Stakeholders elevated that it would be ideal to have all service providers, including an SCU, utilizing the same data platform. They also indicated that non-medical CBO providers and case managers should have contact with the client's health home (if established), especially for substance use management and medication management. Case managers could then be notified when a service utilizer is engaged or discharged from care. Service providers emphasized the importance of understanding someone's medical and social history to provide appropriate care and anticipate what could trigger or escalate them. Service providers also warned to not overburden the SCU with documentation requirements.



*"...But we need more training in mental health, de-escalation and interagency training and coordination. We have a lot of great people working these issues, we just need a little more cross pollination of effort."*

*- SCU Survey Respondent*



### Additional Perspectives from the SCU Survey

*"...Secondly, we need significantly greater inter-municipal and inter-county collaboration in order to tackle structural problems that homeless and mentally ill clients face...Increasingly, our clients are more mobile, have longer commutes, and with gentrification and sprawl, landscapes of poverty and wealth are shifting. We need to be able to be responsive to clients across municipalities and communities, as people who seek services in Berkeley, particularly homeless and low-income clients, often no longer have the means themselves to be able to live in Berkeley."*

<sup>26</sup> Raths, D. (2021, October 4). Alameda County's Social Health Information Exchange Expands. *Healthcare Innovation*. <https://www.hcinnovationgroup.com/interoperability-hie/health-information-exchange-hie/article/21240807/alameda-countys-social-health-information-exchange-expands>

# Stakeholder perceptions of a need for increased community education and public awareness of crisis response options

## Perceived Strengths

- 911 is well-known by the general public as a crisis response option

## Perceived Challenges

- Lack of clarity that MCT responds with police, undermining trust
- Limited knowledge around services and availability
- Distrust of system can prevent people from calling 911
- Incidents of unnecessary use of 911

## Stakeholder Ideas

- Launch a public awareness campaign for new SCU and clearly distinguish it from MCT
- Work with partners and service providers to advertise SCU
- Increase community education on use of 911 and techniques for conflict resolution

A common perspective among stakeholders is that the general public is unclear around when police will or will not be involved in a response. Many service providers and service utilizers do not know the current options and availability of services in Berkeley to support during a mental health crisis. Overall, stakeholders share that there is a lack of understanding of what services are available and which entity provides those services. They feel that this undermines a sense of safety and contributes to distrust of the current mental health crisis response system.

One common challenge raised by many stakeholders has been the lack of understanding of MCT's co-responder model. Many providers shared that they have contacted the MCT line specifically to avoid calling 911 and were surprised when MCT was accompanied by police. Many providers, therefore, stopped calling MCT because of its collaboration with BPD. Similarly, service utilizers shared that there is a lack of trust that MCT can manage a crisis without police presence. Service utilizers are concerned that their safety is endangered in these instances and that they may experience retaliation or police surveillance after requesting service provision from MCT, especially when they request help during substance use emergencies.

Stakeholders spoke to the importance of promoting community education and public awareness to address these challenges. They feel that the success of an SCU would be contingent on community education and public awareness around whether there would be police involvement in an SCU response. Service providers shared that connecting with local CBOs, leveraging existing partnerships, and building trust will be essential for an SCU to have buy-in among service providers to call a new



*"In the past, I have witnessed unsafe situations or people who look like they could use support, but I am too afraid to call the police in those situations, for fear that they could show up and harm or kill the person."*

- SCU Survey Respondent




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*“More trained & well-compensated and insured crisis response staff, especially at night, around the full moon, or public events, & other times of increased disturbances, & more info put out there about what they do to help.”*

*- SCU Survey Respondent*

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service that they have not used before. Service providers are interested in understanding more closely how services will be provided, the techniques that will be used for de-escalation and crisis intervention, and the SCU’s relationship with the police.

Stakeholders also shared challenges around the general public’s use of 911 and ideas for how to increase responsible use of 911. Stakeholders shared many instances of inappropriate use of 911, such as during disputes among neighbors or because a housed person or business does not want an unhoused neighbor to be near them. For these reasons, stakeholders emphasized the importance of a community education campaign around appropriate uses of 911. Stakeholders suggested that such a campaign could include strategies and techniques for managing conflicts and disputes without calling for crisis responders as an additional form of promoting community safety through methods that do not require law enforcement.



### Additional Perspectives from the SCU Survey

*“Merchants in the shopping districts should not be able to call the cops like they’re calling customer service when a homeless person is not breaking any laws. It would be great if crisis services were more friendly and less coercive (cops), if the mental health delivery system was more robust, if crisis teams could respond in a timely way, if clinicians didn’t use police radios on mobile crisis calls, if actual risk assessments were done on calls where no one would ever need a cop (when the person is willingly ready to go to the hospital), if hospitals would actually keep and treat the most ill patients rather than turning them away after 24 hours in a waiting area, if there were more mental health respite beds run by people who aren’t ready to call the police if someone is agitated.”*

## Community Aspirations

Throughout stakeholder engagement, participants were asked to share their ideas for alternative approaches to mental health and substance use crises as well as to share community needs for a safe, effective mental health and substance use crisis response. These perspectives help illuminate the gaps in the current system that could be filled by a future Specialized Care Unit.

The following perspectives provide guiding aspirations for reimagining public safety and designing a response system that promotes the safety, health, and well-being of all Berkeley residents.



### Community Aspirations

Stakeholder-identified opportunities to address the root causes that contribute to mental health, homelessness, and substance use crises

Stakeholder-identified opportunities for centering BIPOC communities in crisis response

Stakeholder-identified opportunities for community oversight to ensure equitable and transformative crisis care

## Stakeholder-identified opportunities to address the root causes that contribute to mental health, homelessness, and substance use crises



*“Berkeley should decriminalize the use of all drugs, it needs to create housing for the chronically mentally disturbed, it needs to have very well-trained people responding to crises. Berkeley together with Alameda County, should be providing wraparound services for the mentally disturbed and substance abusers. It needs to stop criminalizing people who are homeless.*

*- SCU Survey Respondent*

Stakeholders unanimously pointed to the context surrounding the conversation on mental health crises: there are intersecting, state-wide crises of homelessness due to the lack of affordable housing<sup>27</sup> and the opioid epidemic. When reflecting on alternative ideas and community needs, stakeholders expressed desires for addressing the root causes that manifest in the present-day rates of mental illness, homelessness, and substance misuse and abuse. Stakeholders discussed possibilities for shifting funding away from the criminal system and policing to overall community infrastructure (such as jobs, housing, and education) and increasing preventative healthcare to address the root causes of mental health, homelessness, and substance use emergencies more adequately.

Stakeholders also emphasized how stigma and criminalization of drug use and/or mental illness continue to exacerbate crises. Stigma and criminalization are barriers to accessing care and addressing these crises at both the individual and structural levels. At the individual-level, stakeholders identified that internalized stigma around mental illness, homelessness, or substance use, can prevent individuals from seeking care and that service providers can reinforce stigma through their actions and/or withhold care. They described instances of criminalization of mental illness, homelessness, and substance penalizing individuals who do seek care, preventing or terminating employment or housing, and consequently perpetuating a cycle of these experiences. At a structural level, stakeholders emphasized that stigma and criminalization shape the prioritization of funding and budget allocations away from quality healthcare, affordable housing, and evidence-based harm reduction approaches that promote community safety and health. Stakeholders also identified that the gaps in the existing crisis response system are because the crisis response system was designed around the stigma and criminalization of these experiences rather than designed to provide care and promote well-being.

<sup>27</sup> In 2019, Berkeley passed a resolution calling on the Governor to declare homelessness a state of emergency. [https://www.cityofberkeley.info/Clerk/City\\_Council/2019/02\\_Feb/Documents/2019-02-19\\_Item\\_10\\_Declaring\\_a\\_California\\_Homelessness.aspx](https://www.cityofberkeley.info/Clerk/City_Council/2019/02_Feb/Documents/2019-02-19_Item_10_Declaring_a_California_Homelessness.aspx)



## Additional Perspectives from the SCU Survey

*“As with every other part of the United States, we too are dealing with a rather poorly run medical care delivery system. We are also dealing with the war on drugs which is a total failure and has criminalized for too many people for a drug related problem, which is a public health issue and should never have been a criminal justice issue.”*

*“Honestly we need more than just mental health crisis teams. We need a holistic approach. One that considers not just the crisis but also everything before. We need to address the underlying cause - child abuse, domestic violence, individualism and lack of community.”*

*“The system is overwhelmed. It has been extraordinarily difficult to link clients to shelter or mental health consistently in Berkeley. The problems that most clients suffering from mental illness in the region face are primarily systemic in nature, and there is an extreme lack of resources available in the way of permanent housing, shelter, or frontline community mental health services. Furthermore, for clients who are low-income, learning disabled or struggle with executive functioning, or homeless, engaging in the kind of time-intensive, linear, multi-step bureaucratic processes necessary to enter into the shelter and mental health systems is often all but impossible without intensive agency advocacy and persistency. Homeless clients in particular struggle with agency-based barriers to care, often move between counties and municipalities, lack targeted outreach, and experience outreach primarily as criminalization, a tragedy given that cost of living, region-wide housing shortages, and past failures of criminal justice policy are disproportionately responsible for endemic homelessness in the Bay Area.”*

*“Firstly, funding priorities need to shift. We need to address the root causes of mental illness, substance use, and homelessness - trauma, often created or exacerbated by decades of failed criminal justice policy and lack of investment in community infrastructure and social services, criminalization of drug users as opposed to investment in substance use counseling and harm reduction programs, and the legacy of a suburbanized and disjointed approach to regional housing policy and governance. We need to shift funding priorities in Berkeley and the region towards funding social services, especially mental health and substance use rehabilitation, education, parks and transit infrastructure, and encourage policies that protect renters and the working poor, especially families. We need to not only shift towards social workers and mental health responders as the primary agents in engagement with clients suffering from mental illness, and not only increase homeless outreach - we also need to acknowledge the history of homeless-led political engagement in Berkeley and the region, and employ a model that politically values the voices of homeless clients themselves...”*

## Stakeholder-identified opportunities for centering BIPOC communities in crisis response

Stakeholders emphasized that people of color, particularly Black or African American people, are most often harmed by police. They also named that in Berkeley, the structures that put people at risk of homelessness disproportionately affect Black residents, which results in Black Berkeley residents disproportionately experiencing homelessness.<sup>28</sup>

Some service providers also shared incidences of racial bias and discrimination by BPD against their Black clients. For example, at a CBO provider of non-emergency services, case managers reported calling 911 because MCT was closed; the case managers reportedly gave specific instructions that a young White woman was threatening staff and refusing to leave the premises. Yet, upon arrival, BPD harassed and threatened to arrest a Black client.

Black service utilizers and service providers alike elevated their own experiences navigating systems with entrenched racism, including interactions with police and medical facilities. For example, one Black clinician shared the important and unique ways that Black personnel promote a sense of safety, security, and trust for Black service utilizers. The provider shared that the comfort and reassurance of a shared identity increases the opportunities to be more honest, especially during medical or mental health crises.

Stakeholders shared that reducing contact between police and Black residents, especially Black unsheltered residents, is important to public safety. Stakeholders also shared that Black residents and other community members of color should provide input and feedback as an SCU is designed and implemented in Berkeley.



### Additional Perspectives from the SCU Survey

*"less arrests and escalation by police, I worry because the homeless population is mostly African American."*

*"...The proportion of folks who are Black among those homeless in Berkeley is much higher than the general population. We know that police interacting with POC is a dynamic that all too often leads to harm."*

<sup>28</sup> City of Berkeley. (2019). *City of Berkeley Homeless Count & Survey – Comprehensive Report*. Retrieved October 11, 2021, from [https://everyonehome.org/wp-content/uploads/2019/09/2019HIRDReport\\_Berkeley\\_2019-Final.pdf](https://everyonehome.org/wp-content/uploads/2019/09/2019HIRDReport_Berkeley_2019-Final.pdf)



## Stakeholder-identified opportunities for community oversight to ensure equitable and transformative crisis care

Due to system distrust and the current climate around Berkeley's Reimagining Public Safety efforts, stakeholders expressed a desire and need for ongoing community input and oversight of crisis response, especially by those most impacted by crisis services.

Stakeholders suggested leveraging the Mental Health Commission, which they feel is currently underutilized. They also expressed the importance of ensuring that engagement and oversight opportunities are accessible for the most structurally marginalized residents and residents utilizing SCU and crisis response services.



### Additional Perspectives from the SCU Survey

*"Crisis response that reaches out to the community to ask what they want; particularly communities of color, and enlist this community in the creation of the programs..."*

*Thoughtful, constructive ways for integration and engagement of the challenged community with the community of Berkeley residents and workers."*



# Appendices

## Appendix A. Sample Interview Guide

### CBO Staff Focus Group Guide

#### Focus Group Details

|                                       |  |
|---------------------------------------|--|
| <b>Date</b>                           |  |
| <b>Facilitator</b>                    |  |
| <b>Community groups in attendance</b> |  |

#### Overview

[Introduce facilitator and notetaker]

*We are gathering information about mental health and substance use crisis response in the City of Berkeley, including by contacting (211, 911, BMH crisis triage line, etc.) and who responded (if at all): social workers, medics/EMT, fire and/or police in our city. We are interested in hearing specifically about your experiences, and/or your perceptions of, mental health and substance use crisis response in the City of Berkeley. We are gathering this information to inform the development of a Specialized Care Unit (SCU) for the City of Berkeley as a non-police crisis response to mental health and substance use calls.*

*At the end of the discussion, if you feel like you didn't get to share something, or you think of something else you want to share later, feel free to visit our website for additional ways to provide feedback. <https://sites.google.com/rdaconsulting.com/city-of-berkeley-scu/>*

*This focus group will last approximately 90 minutes. If possible, please leave your video on and keep yourself muted when you are not speaking. You may respond to our questions verbally or in the chat, whichever you prefer.*

*Our goal for today is to understand your experiences as providers and advocates and do not expect you to share private details of your clients' experiences. Your own responses will be kept confidential and will be de-identified in any report back to the City of Berkeley.*

*We understand that some experiences with the current crisis response may have been harmful to you and/or your clients; if you would like to take a break or leave the focus group, please do so at any time.*

*Does anyone have any questions before we begin?*

#### Questions

##### **Warm-up**

*To get us started, we would like to do some introductions.*

1. Please introduce yourself to the group by sharing your name, group or organization you are representing, your role, how long you've been there, and a word or phrase that comes to mind when you think about "mental health and substance use crisis services".

**Experience with and perceptions of mental health and substance use crisis response**

*Now I would like to ask you some questions about your experience with and perceptions of the mental health and substance use crisis response options in the City of Berkeley.*

2. What do you know about the existing mental health and substance use crisis response options in the City of Berkeley?
  - a. What kinds of crises do these services respond to?
  - b. What is missing?
3. How do the services your organization or program provides intersect with mental health and substance use related crisis services?
4. Are individuals referred to your program after experiencing a mental health or substance use related crisis?
  - a. If so, what services do you typically provide
  - b. How are those clients connected to your program?
5. Where would your clients go/who would they call if they were experiencing a mental health or substance use related crisis?
  - a. If, as a provider, a client was experiencing a mental health or substance use related crisis is there a program that you would call for support?
    - i. If so, who would you call? How do you decide who to call?
    - ii. How effective has the response been?
    - iii. Please share an example of a situation where you needed to contact someone to support a mental health or substance use related crisis for a client.
      1. Do you feel that the service was helpful? If so, how?
      2. If not, what could have been done differently?
6. Do you feel comfortable/safe calling for support from the existing mental health or substance use related crisis service options? Why or why not?
  - a. Do you feel that the existing mental health or substance use related crisis response options are helpful to clients? Why or why not?
7. Are there times that you have chosen not to call for mental health or substance use related crisis response services? Why or why not?
  - a. What did you do instead?
  - b. What might have made you feel more comfortable calling for support when a client was experiencing a mental health or substance use related crisis?
8. What do you feel that your clients typically need when they are experiencing a mental health or substance use related crisis?
  - a. Where might you refer a client if your program or organization can't provide the help they need during a mental health or substance use related crisis?
9. Are there local organizations or groups that you collaborate with that are maybe not considered part of the "system"?
  - a. If so, who are they and what kinds of support do they provide?
    - i. Do you think they would want to talk with us? *[if yes, get contact info for follow up]*

**Strengths and challenges of the current mental health or substance use related crisis response options**

*In this section we will be discussing what the system is doing well and what the system is not doing so well.*

10. In your opinion, what are some of the strengths of the current mental health or substance use related crisis response options?
  - a. If your clients have experienced a mental health or substance use related crisis, were they able to get help? How so?
  
11. In your opinion, what are some of the weaknesses of the current mental health or substance use related crisis response options?
  - a. Why do you think things aren't working?
  - b. Do you think mental health or substance use related crisis response services are difficult for your clients to access? How so?
  - c. What are some of the gaps related to mental health or substance use related crisis response options?
  
12. Do you feel that some people are served better than others by the current crisis system?
  - a. If so, who is left out?
  - b. Are people treated differently based on their race, gender, culture, sexuality, or disability? If so, how?

### **Ideas for alternative model**

*In this section I'm now going to ask you for your ideas for an ideal response for someone experiencing a mental health or substance use related crisis.*

13. What would an ideal mental health or substance use related crisis response look like for you and the people you serve?
  - a. What kind of response would best meet the needs of your clients?
  - b. What would make it more likely for you to reach out to a crisis team for support?
  - c. What would make it less likely for you to reach out?
  - d. Who should, and should not, be involved in a mental health or substance use related crisis response? (i.e., Police, EMT, clinicians, peers, social workers, others?)
  - e. What do you consider to be essential features of an effective mental health or substance use related crisis response that is responsive to, and respectful of, the clients you serve?
  
14. What do you feel needs to be included in a new mental health or substance use related crisis response for you to feel safe calling for or providing those services?

### **Wrap up**

*We are hoping to talk to people one on one who are less likely to attend a focus group, but who have lived experience and would like to provide feedback on the development of a Specialized Care Unit. We are asking you to think about the people your program serves and consider if there are individuals who might want to share their experience with us in an interview either in person or over the phone.*

15. What do you think are the best ways to engage your clients in this process?
  - a. How can we make sure that everyone's voice is heard?
  - b. Who is the best person to interview them?

- c. Would they be comfortable talking with someone from RDA or is there another person who might be more suited to talk with them?
- d. [Note contact information for follow up if applicable]

16. Is there anything else that you didn't get to share today that is important for us to know?

### Closing

Thank you for your participation. We genuinely appreciate the time you took to speak with us today. We will be conducting interviews with other organizations and community members over the next few months and compiling a report based on the feedback, which will be shared with you and the community. If you would like to share any additional information with the City of Berkeley, feel free to visit <https://sites.google.com/rda consulting.com/city-of-berkeley-scu/>.

## Appendix B. Demographics of Community Engagement Participants

As a reference point, it is important to understand the demographics of the Berkeley population. Table 1 below shows the demographics of Berkeley's overall city population (in July 2019) and the Medi-Cal recipient population (FY 2019-2020). Medi-Cal population demographics are included because the majority of City of Berkeley ongoing funded mental health services are restricted to this population, due to funding requirements. Relative to Berkeley's overall population, Black or African American residents are overrepresented in the City's Medi-Cal population, while Whites and Asians are underrepresented.

Table 1. Berkeley Population and Medi-Cal Recipient Demographics (2019)

|                               | City Population<br>(July 2019) <sup>29</sup> | Medi-Cal<br>Recipients<br>(FY 2019-2020) |
|-------------------------------|----------------------------------------------|------------------------------------------|
| Population Size               | 121,363                                      | 18,548                                   |
| Race Ethnicity (%)            |                                              |                                          |
| White                         | 53.3%                                        | 26%                                      |
| Black/African American        | 7.9%                                         | 22%                                      |
| Hispanic/Latino               | 11.4%                                        | 12%                                      |
| Asian/Pacific Islander        | 21.5%                                        | 10%                                      |
| American Indian/Alaska Native | 0.5%                                         | 0%                                       |
| Other (including 2+ races)    | 7.5%                                         | 33%                                      |
| Gender (%)                    |                                              |                                          |
| Female                        | 50.5%                                        | 51%                                      |
| Male                          | 49.5%                                        | 49%                                      |

In the charts shown below, "provider participants" are those who were interviewed by RDA as part of CBO interviews and focus groups. "Service utilizer participants" are clients of CBOs or encampment residents who were interviewed by RDA. And "survey participants" are individuals who responded to RDA's online survey; these respondents could be a mix of providers, service utilizers, and/or other Berkeley residents or stakeholders.

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<sup>29</sup> United States Census Bureau. (2019). *QuickFacts – Berkeley city, California*. <https://www.census.gov/quickfacts/berkeleycitycalifornia>

Figure 1 below shows the age distribution of the individuals that participated in this process. Overall, RDA received information from more people in the 30-44 range (39%) than any other age range.

Figure 1. Participants by age (n = 122 individuals)

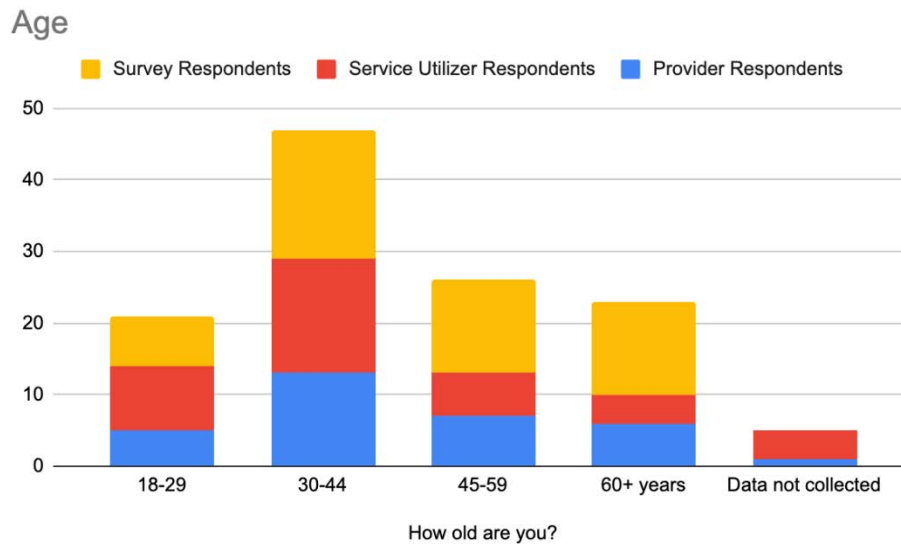


Figure 2 below shows the racial and ethnic distribution of participants in RDA's data collection.<sup>30</sup> Participants were asked to note all races/ethnicities that they identified with, so these are duplicated counts; for this reason, specific percentages should not be interpreted from this data. A large proportion of participants were white, especially among the survey respondents who participated. Most of the Black or African American participants contributed their perspectives via RDA's in-person focus groups or interviews. As compared to Berkeley's overall population, service utilizers and providers who identified as Black or African American were overrepresented in RDA's data collection efforts, (see Table 1).

<sup>30</sup> 13 participants selected more than one racial or ethnic identity, so these numbers are duplicated. For example, if a participant selected White and Black or African American, they are counted in both the White and African American categories.

Figure 2. Participants by race/ethnicity (n = 122 individuals)

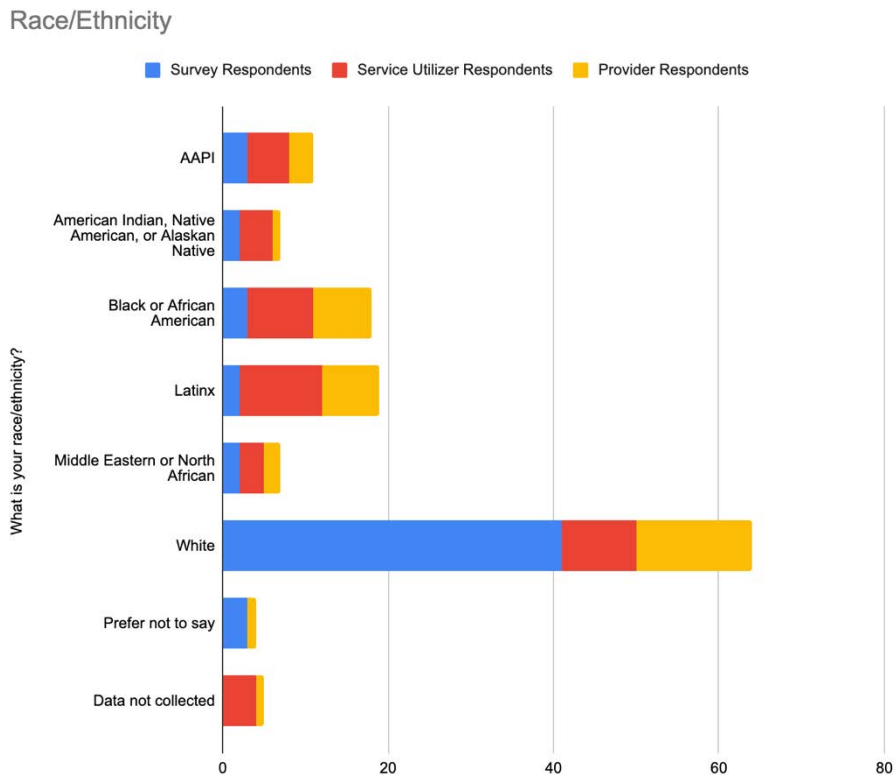


Figure 3 below shows the number of transgender and cisgender participants of RDA's data collection. Overall, there were far more cisgender participants than transgender participants. However, a higher proportion of service utilizer respondents (13%) were transgender, while less than 4% of survey respondents and 3% of provider respondents were transgender.

Figure 3. Participants by transgender/cisgender (n = 122 individuals)

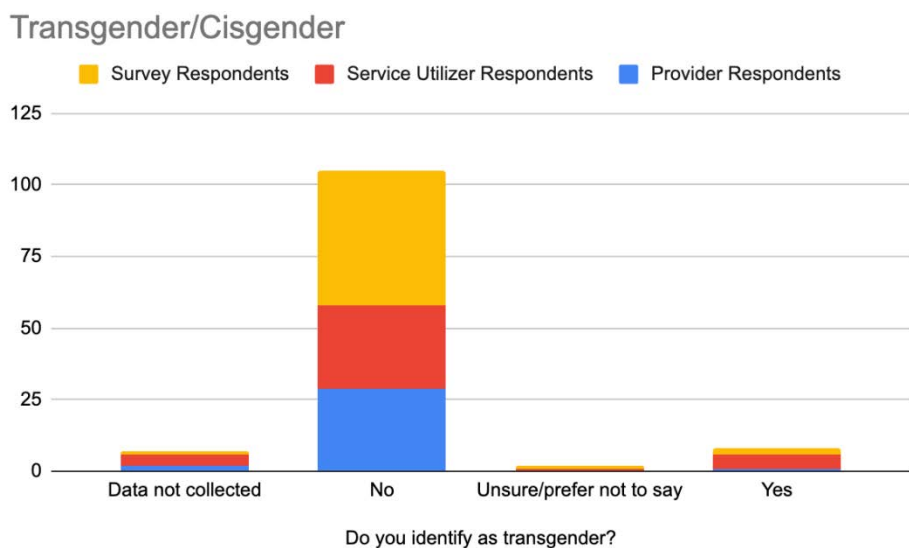


Figure 4 below shows the gender identity distribution of participants to RDA’s data collection. RDA collected feedback from more than double the number of female-identifying participants (72) than male identifying participants (31). There was an even distribution among service utilizer respondents (41% female and 41% male) compared to survey respondents (67% female vs. 20% male) and provider respondents (69% female, 16% male). Overall, there were very few genderqueer or nonbinary participants (<1% and 6% respectively).

Figure 4. Participants by gender identity (n = 122 individuals)

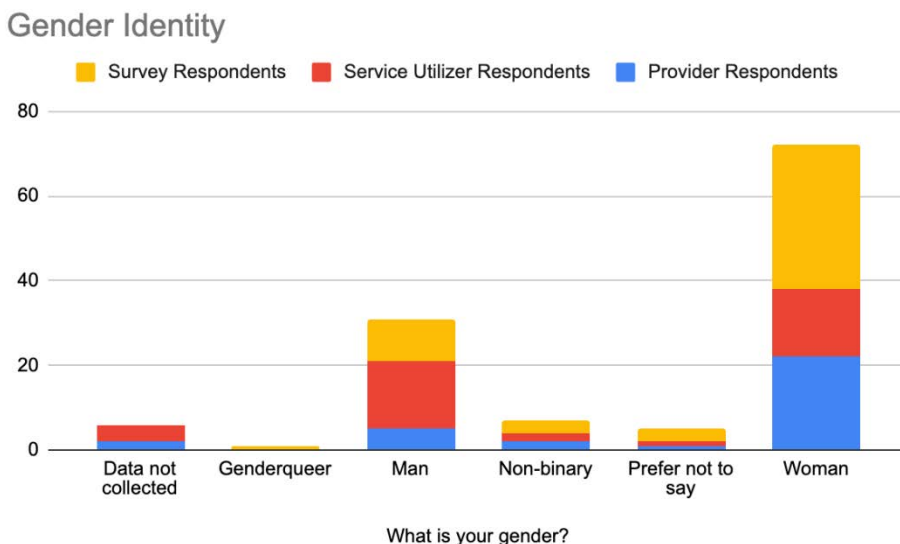


Figure 5 below shows the sexual orientation of participants of RDA’s collection. Over one third (35%) of participants identified as heterosexual or straight, while over one fourth (28%) identified as LGBTQ+. The remaining participants did not share their sexual orientation or it was not asked of them. Over half of survey respondents (57%) identified as straight, while only 31% of provider respondents and 10% of service utilizer respondents identified as straight.

Figure 5. Participants by gender identity (n = 122 individuals)

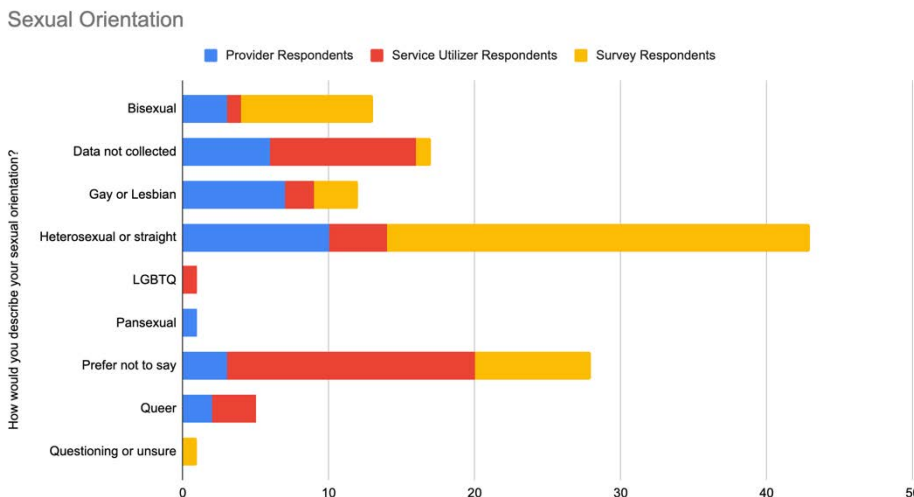
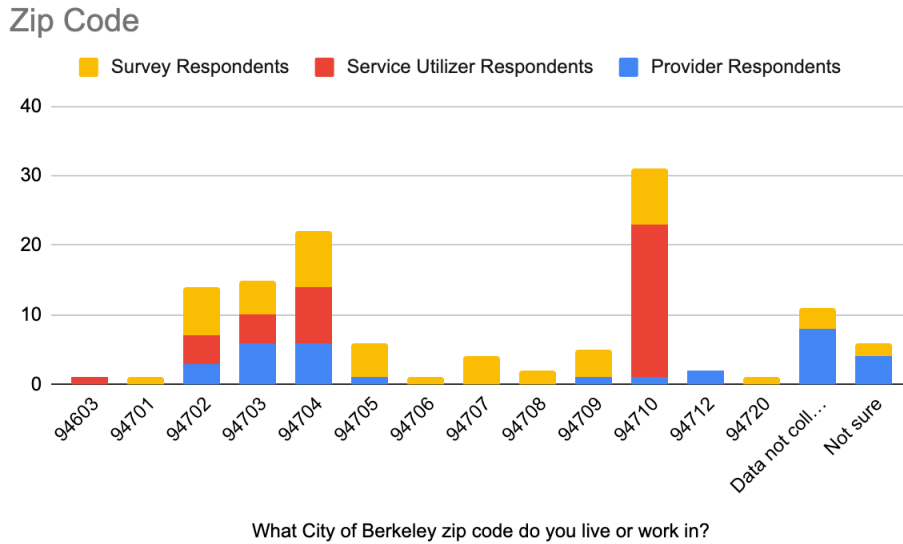


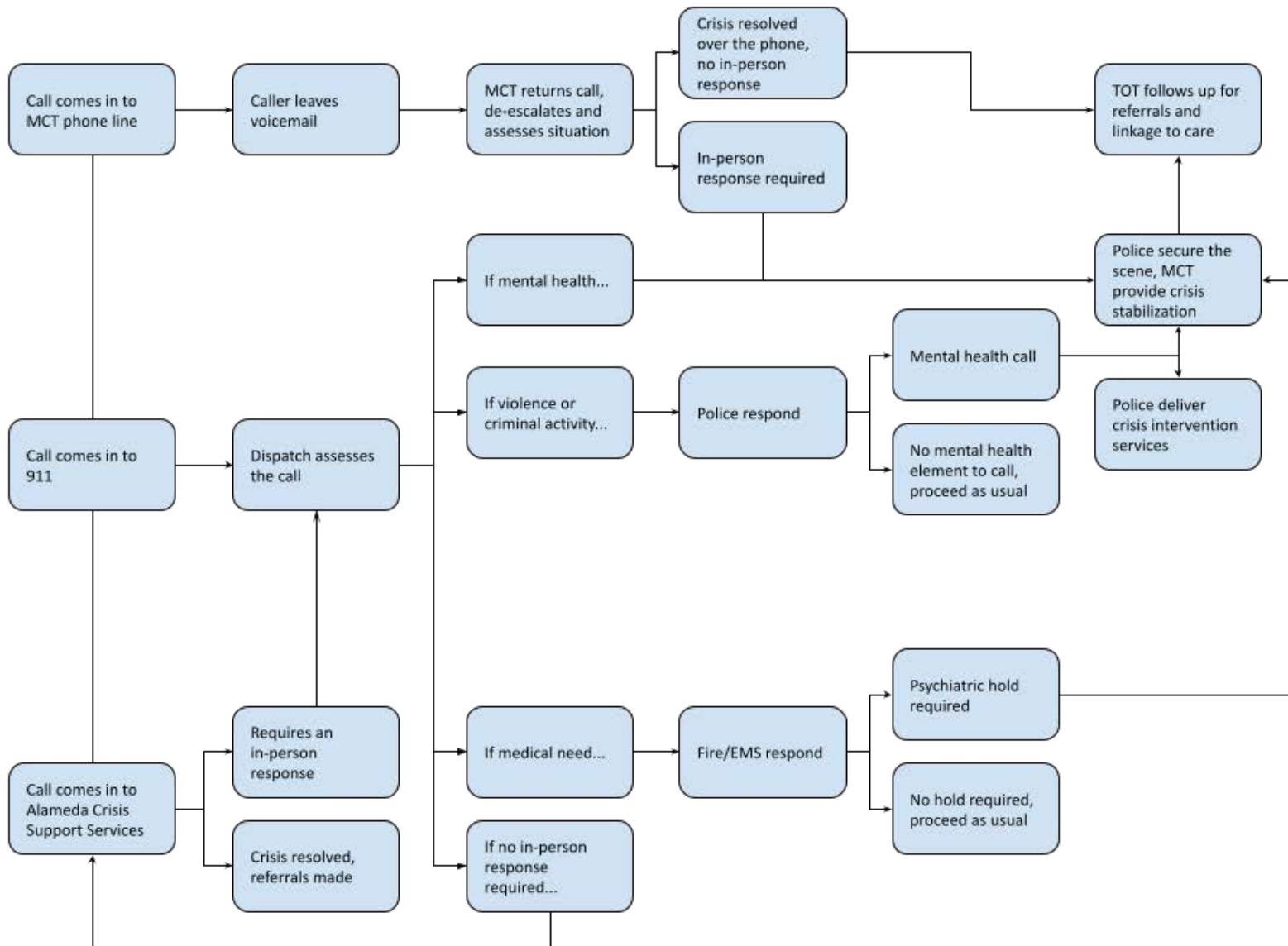


Figure 6 below shows the geographical distribution of participants of RDA's data collection. The most common zip code of participants was 94710 (25%), in large part due to the number of Seabreeze encampment residents that participated in this process. Closely following were the Berkeley ZIP codes of 94702, 94703, and 94704 with 11%, 12%, and 18% of participants, respectively.

Figure 6. Participants by ZIP code (n = 122 individuals)



## Appendix C. Process of a Mental Health Call



## Appendix D. Mental Health Call Responses – Call Volume and Demographics

### Data Collection Methods and Challenges

Early on in this project, RDA submitted requests to Berkeley Mental Health’s Mobile Crisis Team (MCT) and the Berkeley Fire Department (BFD) to receive data on responses to all mental health related calls. MCT shared basic service-level data of their responses for FYs 2015-2020. BFD shared data from BFD and Falck (the city’s contracted ambulance services provider for mental health crises) that was limited to responses to 5150 calls in Berkeley between calendar years 2019-2021.

RDA did not submit a data request to the Berkeley Police Department (BPD) for two reasons. First, from another evaluation project that RDA currently has with the Berkeley Mental Health Division, RDA already had basic service-level data from BPD regarding their responses to calls originating for 5150s, for the period of CYs 2014-2020. Second, in April 2021, the Berkeley City Auditor released a comprehensive report on its extremely in-depth data analysis of BPD’s responses. For the purposes of RDA’s project regarding the Specialized Care Unit (SCU), there was no need to replicate any of the work and findings that came from the Berkeley City Auditor. Please see the Berkeley City Auditor’s report for a detailed description of its methods, findings, data limitations, and data recommendations for BPD.<sup>31</sup> The findings that are shared in this report from the Berkeley City Auditor’s study are extrapolated directly from the data about BPD calls (from CYs 2015-2019) that was included in the Auditor’s report.

In general, RDA’s analysis of MCT, BFD, Falck, and BPD call data yielded high-level summary plots about subject/patient demographics and call volume. The general limitations of all available data prevented a more in-depth analysis of the data. More detailed tabular findings are not shared in this report for two reasons: 1) given that all of the quantitative data are under representations of the true volume of crisis responses and callers in Berkeley, only the trends about the volume of mental health related calls and caller demographics should be interpreted from this data, not the specific numbers; and 2) in order to protect the privacy of the few individuals who populated some of the specific categorizations of this data, RDA cannot disclose data which includes small sample sizes.

There were limitations to the quantitative datasets that RDA received. Of greatest impact is that the data entry practices across each agency were not consistent with each other, thus limiting which data could be pulled for analysis as well as which findings could be compared between agencies. For example, due to data limitations, RDA was unable to present a total call volume across agencies or the unmet need for mental health intervention during 5150 transport. Though estimates on call volume and unmet need are relevant to understanding crisis response options, inconsistent data collection and reporting across agencies would make this calculation inaccurate and misleading.

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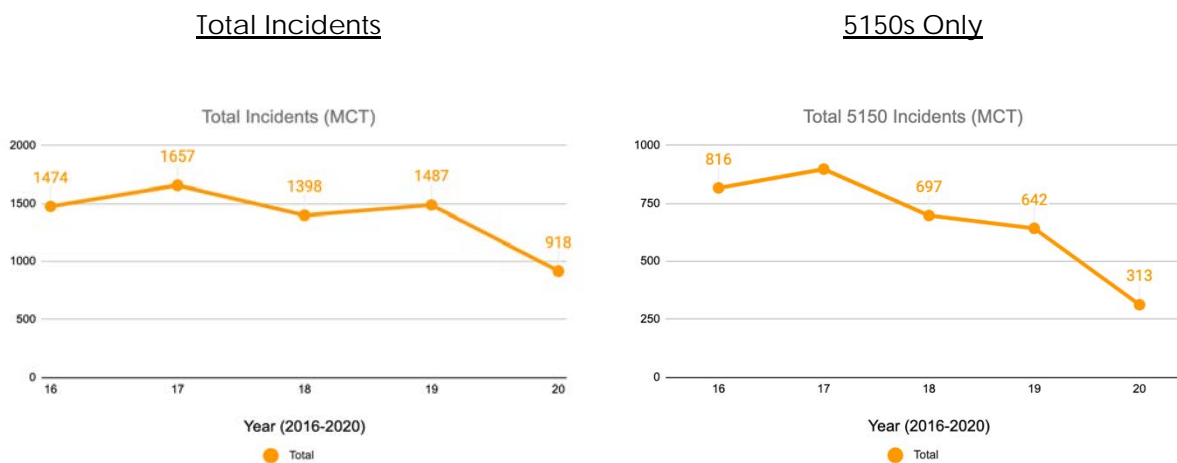
<sup>31</sup> Berkeley City Auditor. (2021, July 2). *Data Analysis of the City of Berkeley’s Police Response*. [https://www.cityofberkeley.info/uploadedFiles/Auditor/Level\\_3\\_-\\_General/Data%20Analysis%20of%20the%20City%20of%20Berkeley's%20Police%20Response.pdf](https://www.cityofberkeley.info/uploadedFiles/Auditor/Level_3_-_General/Data%20Analysis%20of%20the%20City%20of%20Berkeley's%20Police%20Response.pdf)

The data challenges that RDA encountered were very similar to those faced by the Berkeley City Auditor; please refer to the Berkeley City Auditor’s report of its findings of Berkeley’s Police Response for a thorough description of their data challenges.<sup>32</sup>

Mental Health Call Volume

Mobile Crisis Team: From the call data that MCT shared with RDA, findings are limited to only showing the total volume of calls that MCT responded to during 2015-2020. Due to missing data and data elements across the various years, there were not any consistent elements for which findings could be determined over the full five-year period. Figure 7 below shows the volume of MCT’s total incidents and which of those incidents resulted in a 5150 for each year between 2015-2020.

Figure 7. Mobile Crisis Team (MCT) Incidents in 2015-2020 - Total



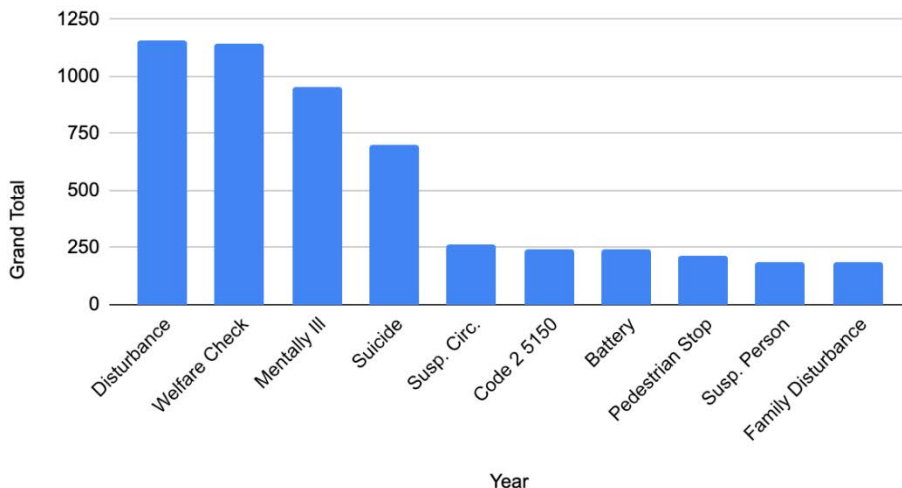
Since 2015, there has been a gradual decline in the number of total and 5150 incidents that MCT responded to in Berkeley due to staff vacancies as well as the COVID-19 pandemic.

Berkeley Police Department: For the period of 2014-2020, RDA received data from BPD that included all calls initially coded by BPD as needing a 5150 response. This was the only type of designation that could be queried in BPD’s data for mental health related calls. From this dataset, RDA identified the variety of other types of incidents that were coded alongside “5150” for each call. Figure 8 below shows the top ten incident types for all the 5150 calls that BPD responded to in 2014-2020.

Figure 8. Top 10 Berkeley Police Department (BPD) 5150 Incident Call Types, 2014-2020

<sup>32</sup> Berkeley City Auditor. (2021, July 2). *Data Analysis of the City of Berkeley’s Police Response*. [https://www.cityofberkeley.info/uploadedFiles/Auditor/Level\\_3\\_-\\_General/Data%20Analysis%20of%20the%20City%20of%20Berkeley's%20Police%20Response.pdf](https://www.cityofberkeley.info/uploadedFiles/Auditor/Level_3_-_General/Data%20Analysis%20of%20the%20City%20of%20Berkeley's%20Police%20Response.pdf)

### Top 10 BPD 5150 Incident Call Types (2014-2020)

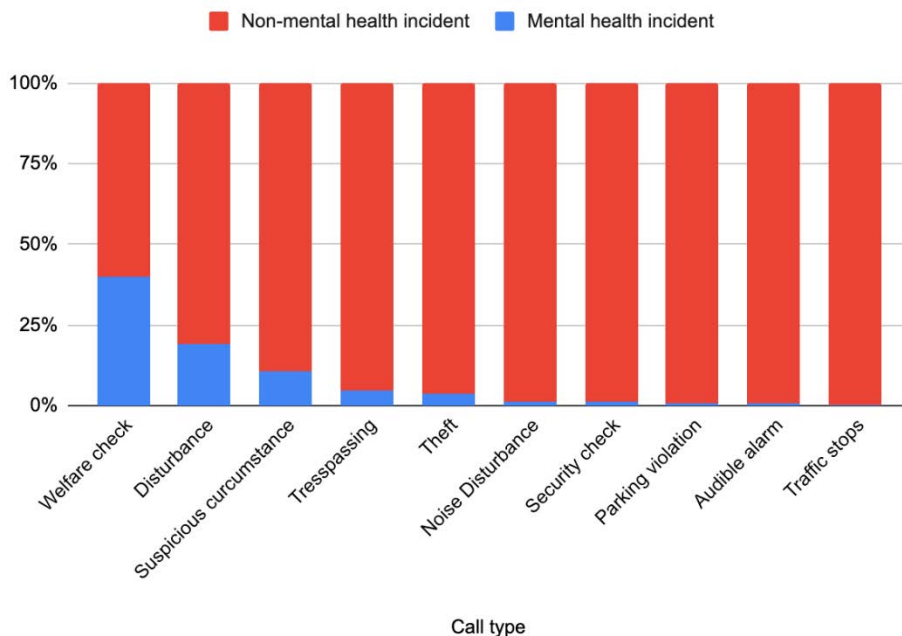


Disturbance, welfare check, mentally ill, and suicide were the most frequent incident types of all 5150 calls to BPD.

The Berkeley City Auditor conducted a qualitative analysis of its BPD call response data to explore the differences between calls that were or were not mental health related. Because BPD’s data does not have an explicit variable that denotes whether each call is mental health related or not, the Berkeley City Auditor did a keyword search for mental health related terms in the open narrative fields of BPD’s call entries. Figure 9 below shows the differences in mental health related and non-mental health related calls that BPD responded to between 2015-2019, stratified by call type.

Figure 9. Berkeley Police Department (BPD) Call Types, 2015-2019

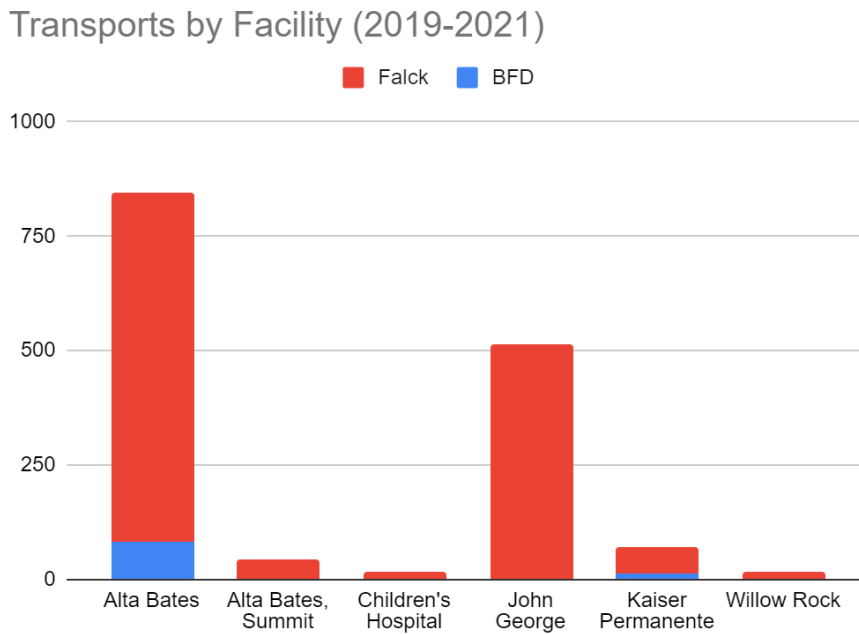
### Top Call Types with Mental Health Incidents (2015-2019)



Around 40% of BPD’s welfare check calls included a mental health related facet to the response, followed by around 20% of disturbance calls, and around 10% of calls regarding suspicious circumstances.

Berkeley Fire Department: The data that BFD shared with RDA (which included data from BFD and Falck) included information on the facilities that BFD and Falck transported 5150 cases to between 2019-2021. Falck conducted the large majority of 5150 transports in Berkeley. Most 5150 transports were to Alta Bates Medical Center and John George Psychiatric Emergency Services. BFD only transported 5150 cases to Alta Bates, Oakland Children’s Hospital, and Kaiser. As contracted, Falck conducted 5150 transports to all the agencies noted below.

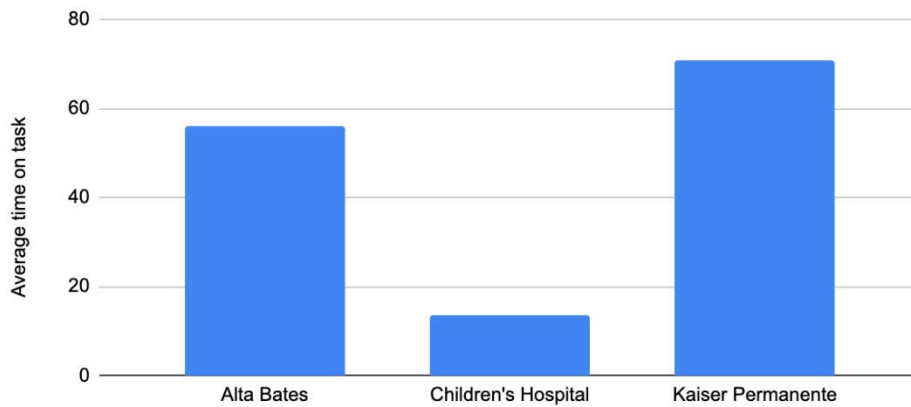
Figure 10. BFD and Falck 5150 Transports by Destination, 2019-2021



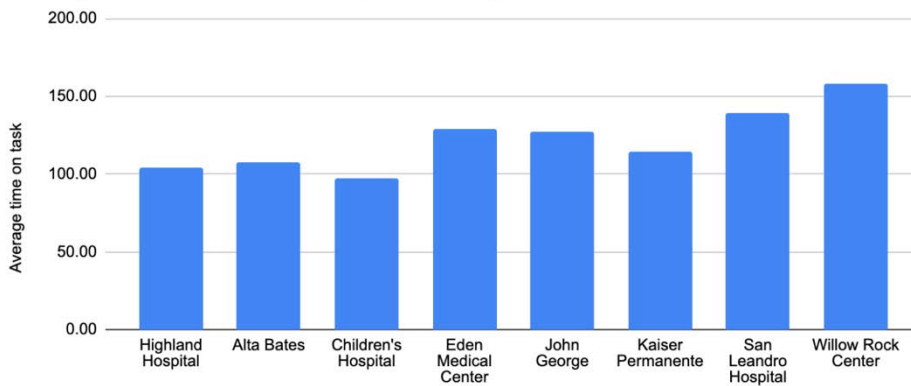
BFD also shared data regarding their and Falck’s time on task for each 5150 response and transport. Time on task represents the time from which BFD or Falck arrive at the scene to the point in which they complete the transport of the patient to the destination. Of the 95 5150 transports that BFD conducted between 2019-2021, BFD’s average time on task was 20 minutes. Of the 1,523 5150 transports that Falck conducted between 2019-2021, Falck’s average time on task was 115 minutes. This is because Falck is the designated ambulance provider who is transporting 5150 cases around Alameda County. These calls can take more time and can be to farther locations. Figure 11 below shows the average time on tasks for BFD and Falck.

Figure 11. BFD and Falck Time on Task for 5150 Transports, 2019-2021

Average Time on Task, BFD (2019-2021)



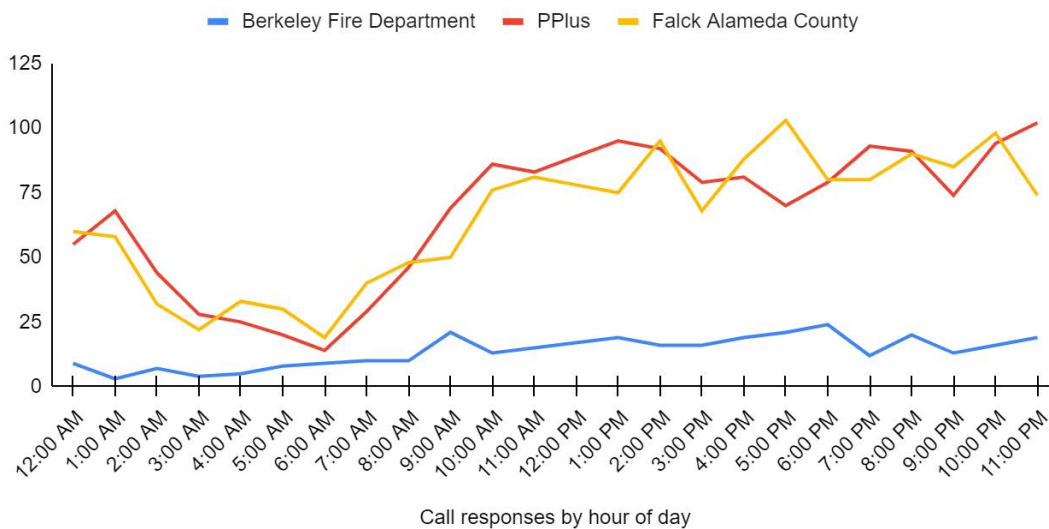
Average Time on Task, Falck (2019-2021)



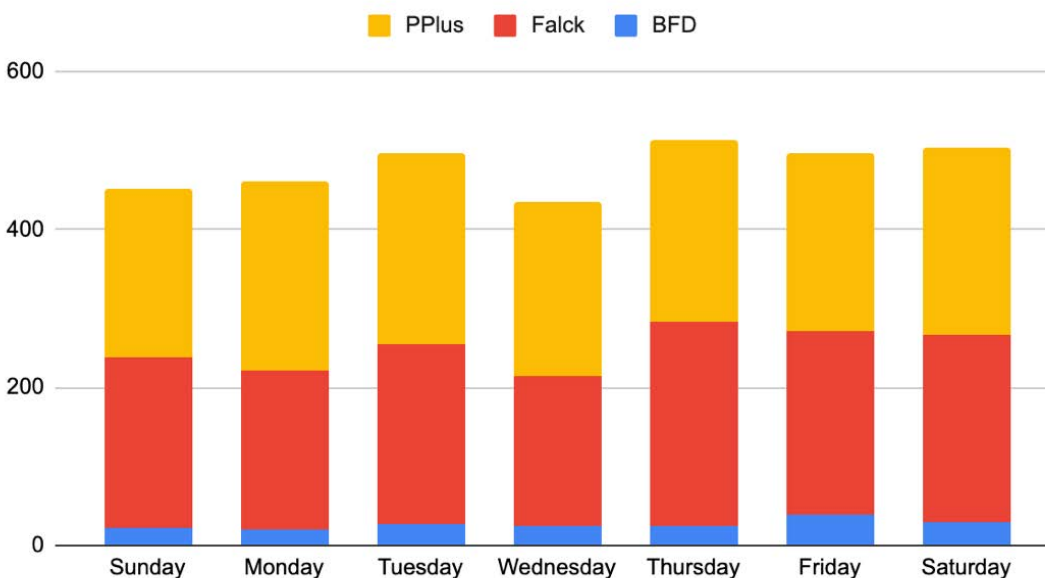
BFD, Paramedics Plus (or PPlus, the contracted ambulance provider prior to Falck), and Falck’s data on their 5150 call responses also included information on the day of the week and time that each 5150 call was initiated. RDA analyzed this data to search for any notable trends regarding when 5150 calls originate. Figure 12 below shows when each agency’s 5150 call responses occurred; this data spans the years 2018-2021. From this data, it appears that 5150s are least frequent during the very late-night and early-morning hours (2:00-8:00am), and the most frequent between 10:00am – midnight. There is no noticeable difference in the frequency of 5150s across the seven days of the week.

Figure 12. BFD, PPlus, Falck 5150 Transports by Time of Day and Day of Week, 2018-2021

### Call Responses by Hour of Day (2018-2021)



### Call Responses by Day of the Week (2018-2021)



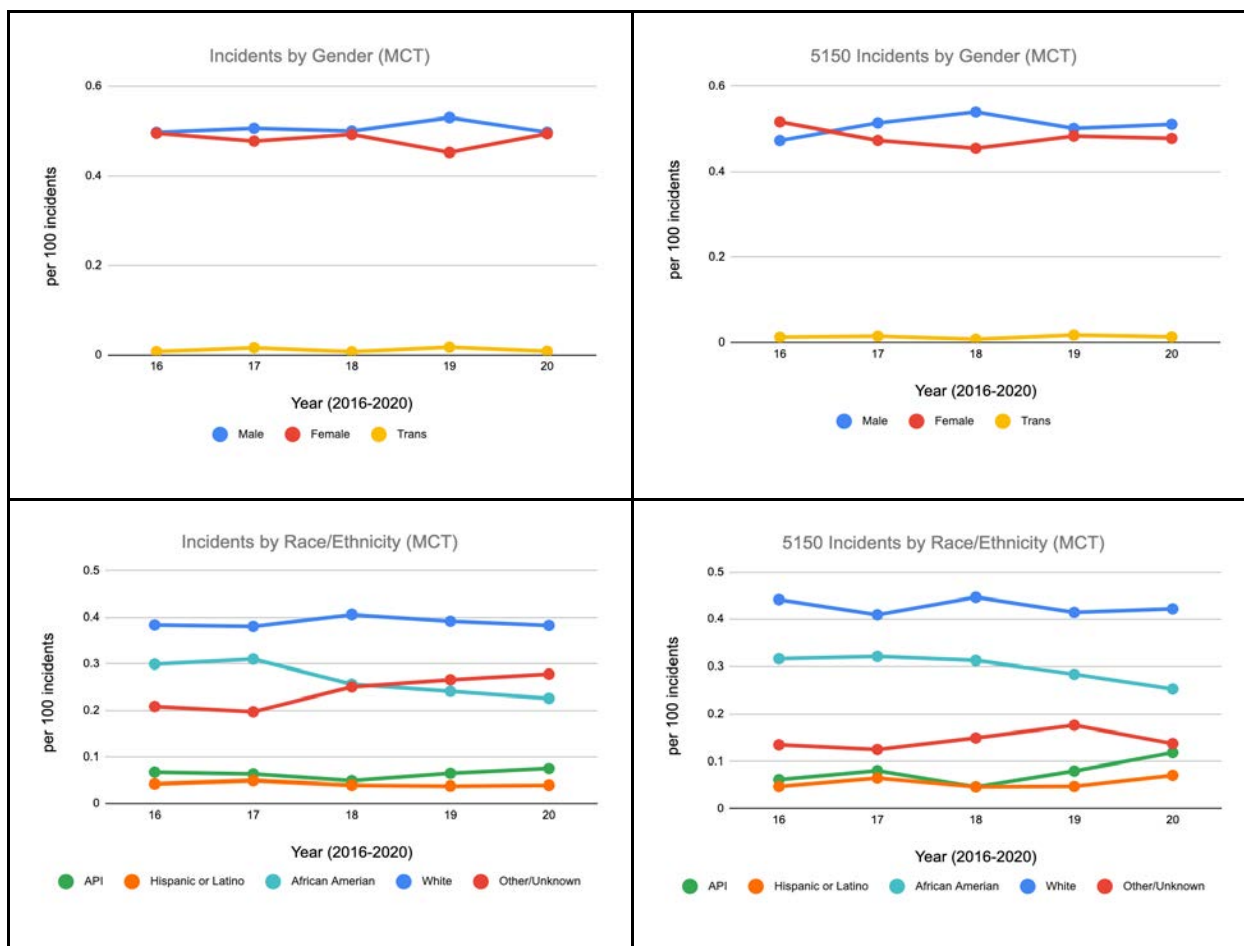
### Demographics of Mental Health Call Responses

Mobile Crisis Team: For the five-year period of FY 15/16 through FY 19/20, the Berkeley Mental Health Division’s Mobile Crisis Team (MCT) shared data about both their overall volume of responses as well as those pertaining specifically to 5150 calls. Figure 13 below includes four figures that show MCT’s incidents by gender (first row), and then incidents by race/ethnicity (second row) by each fiscal year.

Figure 13. Mobile Crisis Team (MCT) Incidents in 2015-2020 - Gender, Race/Ethnicity

| Total Incidents | 5150s Only |
|-----------------|------------|
|                 |            |





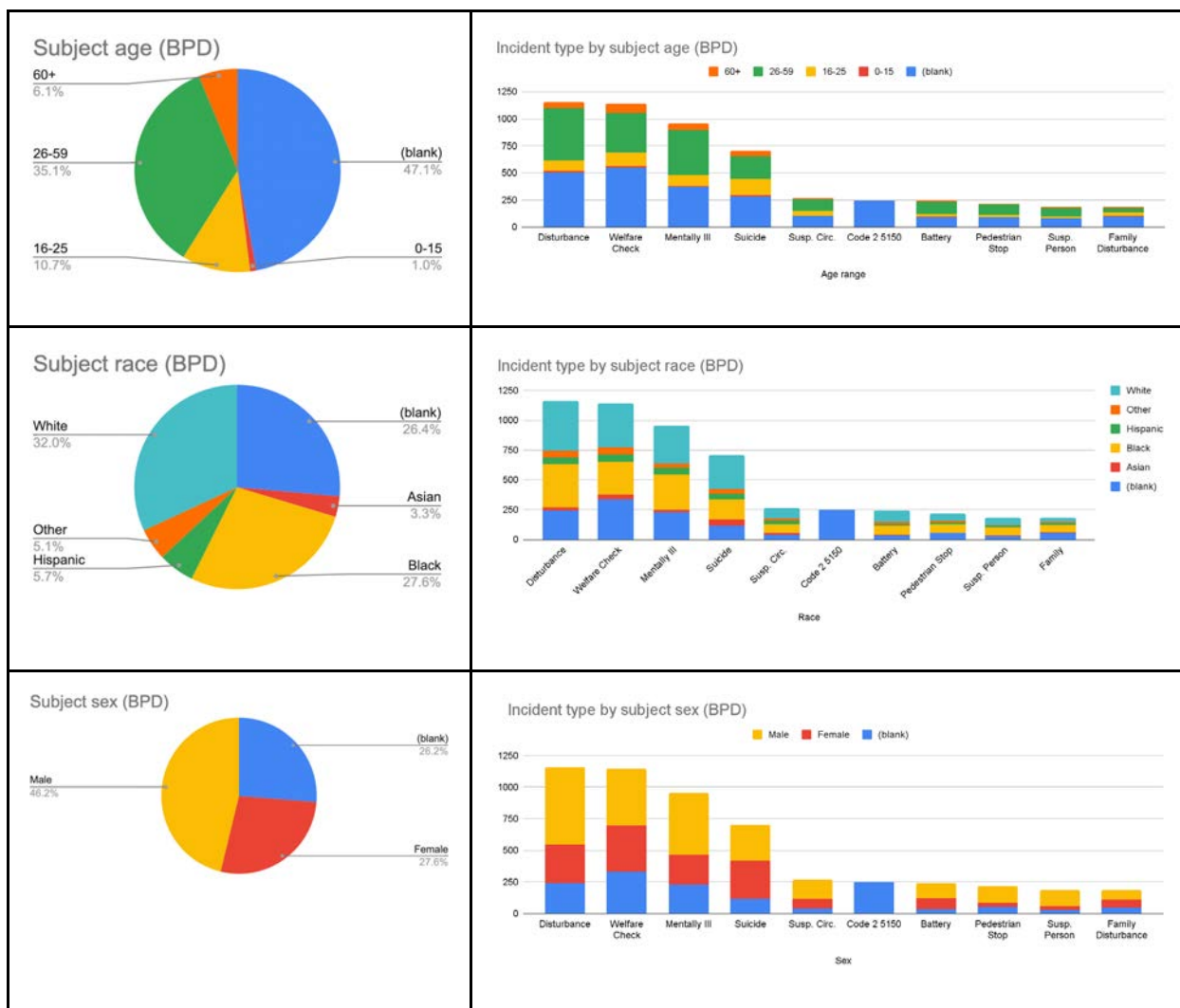
MCT incidents were with slightly more males than females, and very few trans individuals. And, regarding race/ethnicity, MCT cases were most often White, followed by African American, other/unknown, Asian Pacific Islander, and Hispanic or Latino. Given that African Americans comprise only 7.9% of Berkeley’s population (see Table 1), they are very overrepresented in MCT’s service utilizer population.

Berkeley Police Department: For the six-year period of CY 2014 through CY 2020, the Berkeley Police Department (BPD) shared data regarding demographics (age, race, and sex) for each of its calls that were originated as designated 5150 responses. Since 2019, the majority of 5150 responses were conducted by Falck - an ambulance services provider contracted by BFD - because Falck is the designated entity (between the two agencies) to conduct 5150 transports in Berkeley. Figure 14 below includes six figures that show: 1) the summative demographics of BFD’s 5150 subjects, and 2) the incident types stratified by subject demographics.

Figure 14. Berkeley Police Department (BPD) 5150 Subjects in 2014-2020 - Demographics and Incident Types<sup>33</sup>

|                                 |                                       |
|---------------------------------|---------------------------------------|
| <u>Subjects by Demographics</u> | <u>Incident Types by Demographics</u> |
|---------------------------------|---------------------------------------|

<sup>33</sup> Data noted as (blank) represent data points where data were missing.

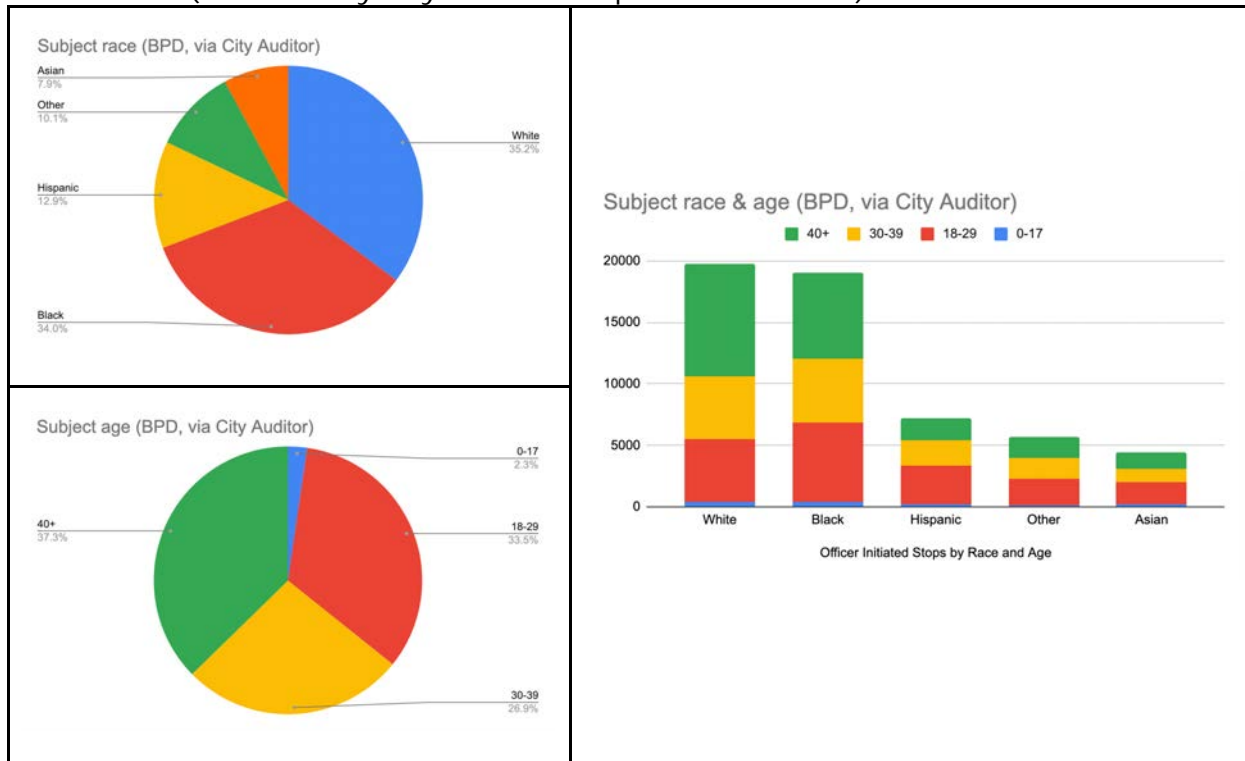


Of the BPD 5150 calls that had demographic variables coded, most responses were with individuals between ages 26-59, White, or male. Liked noted above with MCT’s service utilizer population, given that African Americans comprise only 7.9% of Berkeley’s population (see Table 1), they are also very overrepresented amongst BPD’s 5150 population. Most BPD 5150 calls were also coded as disturbance calls, welfare checks, mentally ill individuals, and suicide. Each incident type is not mutually exclusive, so any particular incident could have one or multiple more incident type logged towards it in addition to being a 5150.

The Berkeley City Auditor’s report (released in April 2021) on BPD call responses included a variety of tables with data on the demographics of the subjects of their officer-initiated stops by race and age; please refer to the Berkeley City Auditor’s Report in Figure 19: Officer-Initiated Stops by Race and Age, 2015-2019.<sup>34</sup> RDA took the data shared in that figure to produce different visual representations of all subjects that BPD responded to between 2015-2019; this data includes responses to non-mental health related calls, as well.

<sup>34</sup> Berkeley City Auditor. (2021, July 2). *Data Analysis of the City of Berkeley’s Police Response*. [https://www.cityofberkeley.info/uploadedFiles/Auditor/Level\\_3\\_-\\_General/Data%20Analysis%20of%20the%20City%20of%20Berkeley’s%20Police%20Response.pdf](https://www.cityofberkeley.info/uploadedFiles/Auditor/Level_3_-_General/Data%20Analysis%20of%20the%20City%20of%20Berkeley’s%20Police%20Response.pdf)

Figure 15. Berkeley Police Department (BPD) Officer-Initiated Calls in 2015-2020 - Race and Gender (via Berkeley City Auditor’s Report on BPD Calls)



Berkeley Fire Department: For the three-year period of CY 2019 through CY 2021, the Berkeley Fire Department (BFD) shared data regarding demographics (age, race, and gender) and incident type for each of its calls that were originated as designated 5150 responses. Figure 16 below includes six figures that show: 1) the summative and combined demographics of BFD and Falck’s 5150 patients, and 2) the differences in volume of BFD and Falck 5150 responses stratified by patient demographics. Figure 17 below shows the total combined 5150 responses by BFD and Falck, first grouped by gender by race, then by race by gender.

Figure 16. Berkeley Fire Department (BFD) and Falck 5150 Patients in 2019-2021 - Demographics

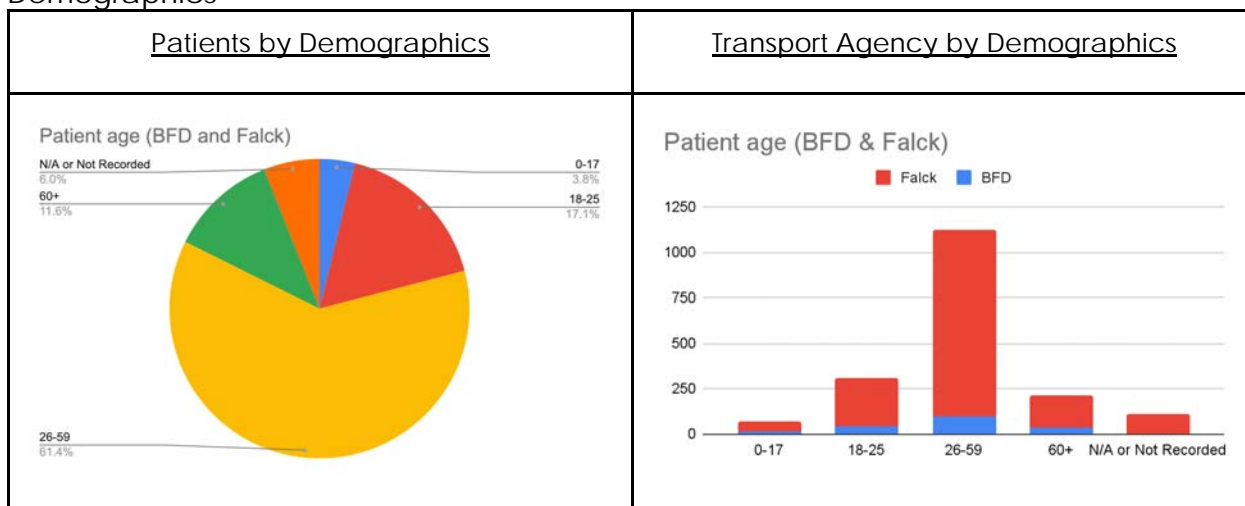
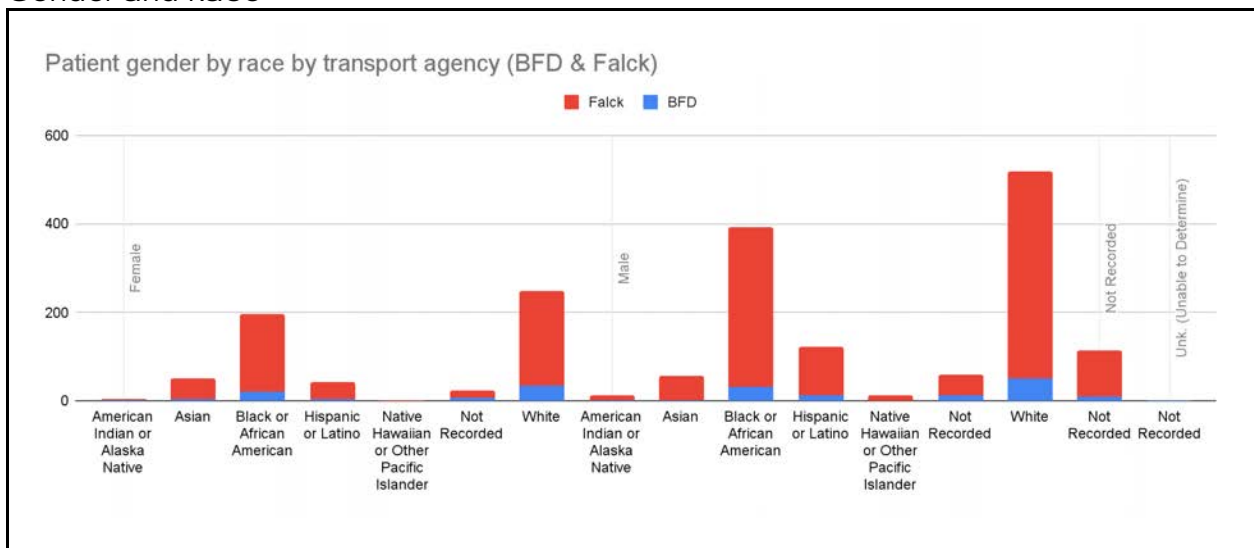
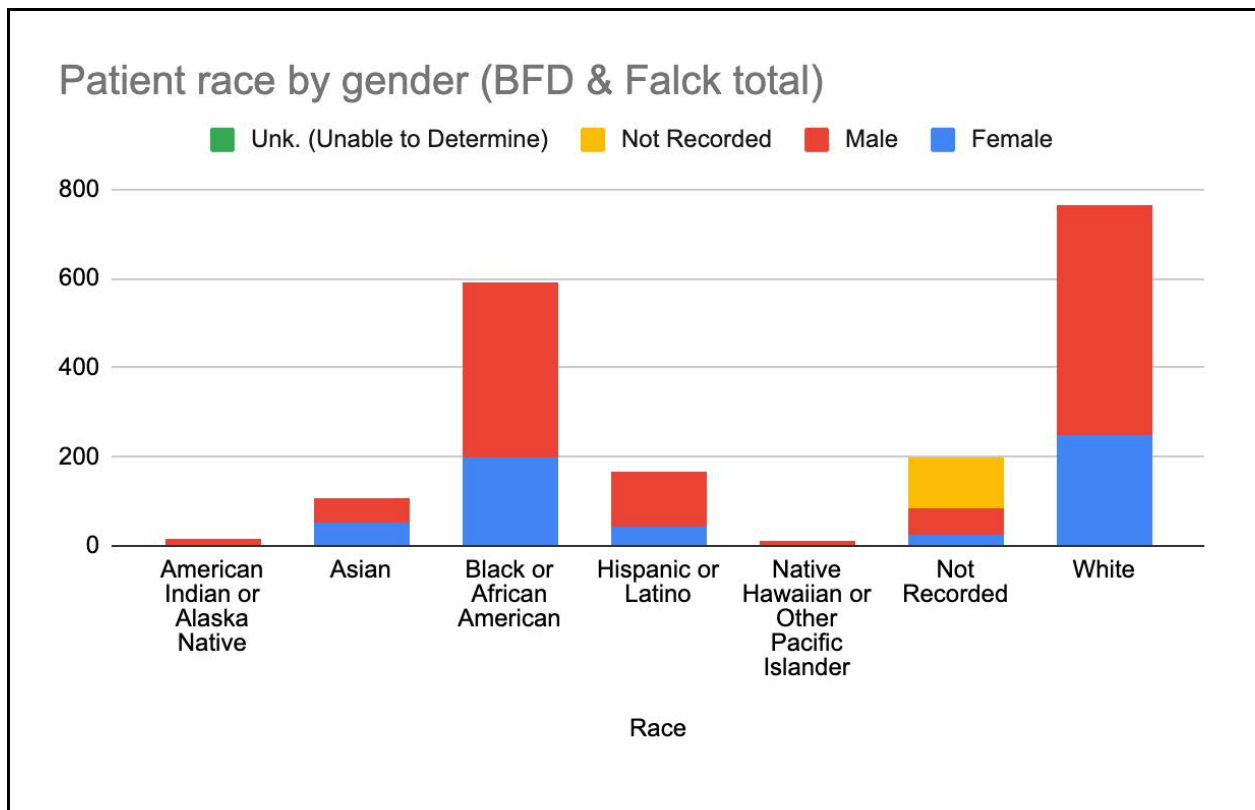




Figure 17. Berkeley Fire Department (BFD) and Falck 5150 Patients in 2019-2021 - By Gender and Race





Similar to the incidents that MCT responded to, the 5150 patients that BFD and Falck responded to are mostly between ages 26-59, White, or male. Falck also conducted a large majority of the 5150 transports in Berkeley, as compared to BFD.





# City of Berkeley

## Specialized Care Unit

### Crisis Response Recommendations



City of Berkeley

# **Specialized Care Unit (SCU) Crisis Response Recommendations**

Sarah Ferrell

Caroline de Bie

Sasha Gayle-Schneider

Amalia Egri Freedman

Nicole Gamache-Kocol

Jamie Dorsey

Kevin Wu

This report was developed by Resource Development Associates under contract with the City of Berkeley.

Resource Development Associates, 2021





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## Executive Summary

As part of the larger effort to Reimagine Public Safety, the City of Berkeley contracted with Resource Development Associates (RDA) to conduct a feasibility study for a Specialized Care Unit (SCU), an alternative mental health and substance use crisis response model that does not involve law enforcement.

This is the third of three distinct reports for this effort. The first report ([“Crisis Response Models Report”](#)) presents a summary of crisis response programs in the United States and internationally. The second report ([“Mental Health Crisis Response Services and Stakeholder Perspectives Report”](#)) is the result of engagement with stakeholders of the crisis system, including City of Berkeley and Alameda County agencies, local community-based organizations (CBOs), local community leaders, and utilizers of Berkeley’s crisis response services, and presents a summary of key themes to inform the SCU model.

This third report is intended to guide implementation of the SCU model and includes:

- Core components and guiding aims of the SCU model;
- Stakeholder and best practice-driven design recommendations;
- Considerations for planning and implementation;
- A phased implementation approach;
- System-level recommendations; and
- Future design considerations.

Each recommendation put forth in this report is deeply rooted in the stakeholder feedback included in the two previous reports. This report presents RDA’s recommendations based on this year-long project, which the City of Berkeley may adapt and adjust as necessary.

## Key Recommendations

1. The SCU should respond to mental health crises and substance use emergencies without a police co-response.
2. The SCU should operate 24/7.
3. Staff a three-person SCU mobile team to respond to mental health and substance use emergencies.
4. Equip the SCU mobile team with vans.
5. The SCU mobile team should provide transport to a variety of locations.
6. Equip the SCU mobile team with supplies to meet the array of clients' needs.
7. Clearly distinguish the SCU from MCT.
8. Participate in the Dispatch assessment and planning process to prepare for future integration.
9. Ensure the community has a 24/7 live phone line to access the SCU.
10. Plan for embedding a mental health or behavioral health clinician into Dispatch to support triage and SCU deployment.
11. Fully staff a comprehensive model to ensure the success of the SCU mobile team, including supervisory and administrative support.
12. Operate one SCU mobile team per shift for three 10-hour shifts.
13. SCU staff and Dispatch personnel should travel to alternative crisis programs for in-person observation and training.
14. Prepare the SCU mobile team with training.
15. Contract the SCU model to a CBO.
16. Integrate the SCU into existing data systems.
17. Collect and publish mental health crisis response data publicly on Berkeley's Open Data Portal.
18. Implement care coordination case management meetings for crisis service providers.
19. Implement centralized coordination and leadership across city agencies to support the success of mental health crisis response.
20. Continue the existing SCU Steering Committee as an advisory body.
21. Solicit ongoing community input and feedback.
22. Adopt a rapid monitoring, assessment, and learning process.
23. Conduct a formal annual evaluation.
24. Launch a public awareness campaign to promote community awareness and education about the SCU.
25. The SCU mobile team should conduct outreach and build relationships with potential service utilizers.



# Introduction

## Project Background

In response to the killing of George Floyd by Minneapolis police in May 2020 and the ensuing protests across the nation for this and many other similar tragedies, a national conversation emerged about how policing can be done differently in local communities. The Berkeley City Council initiated a wide-reaching process to reimagine safety in the City of Berkeley. As part of that process, in July 2020, the Council directed the City Manager to pursue reforms to limit the Berkeley Police Department's (BPD) scope of work to "primarily violent and criminal matters." These reforms included, in part, the development of a Specialized Care Unit (SCU) to respond to mental health crises without the involvement of law enforcement.

In order to inform the development of an SCU, the City of Berkeley contracted with Resource Development Associates (RDA) to conduct a feasibility study that includes community-informed program design recommendations, a phased implementation plan, and funding considerations.

## The Need for Specialized Mental Health Crisis Response

Just as a physical health crisis requires treatment from a medical professional, a mental health crisis requires response from a mental health professional. Unfortunately, across the country and in Berkeley, police are typically deployed to respond to mental health and substance use crises.

Without the proper infrastructure and resources in place, cities are unable to adequately meet the needs of people experiencing a mental health and/or substance use crisis. Relying on police officers to respond to the majority of mental health 911 calls endangers the safety and well-being of community members. Tragically, police are 16 times more likely to kill someone with a mental illness compared to those without a mental illness.<sup>1</sup> A November 2016 study published in the *American Journal of Preventative Medicine* estimated that 20% to 50% of fatal encounters with law enforcement involved an individual with a mental illness.<sup>2</sup> As a result, communities have begun to consider the urgent need for crisis response models that deploy mental health professionals rather than police. An analysis found that the 10 largest police departments in the U.S. paid out nearly 250 billion dollars in settlements in 2014, much of which were related to wrongful-

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<sup>1</sup> Szabo, L. (2015). People with mental illness 16 times more likely to be killed by police. *USA Today*. <https://www.usatoday.com/story/news/2015/12/10/people-mentalillness-16-times-more-likely-killed-police/77059710/>

<sup>2</sup> DeGue, S., Fowler, K.A., & Calkins, C. (2016). Deaths due to use of lethal force by law enforcement. *American Journal of Preventive Medicine*, 51(5), S173-S187. [https://www.ajpmonline.org/article/S0749-3797\(16\)30384-1/fulltext](https://www.ajpmonline.org/article/S0749-3797(16)30384-1/fulltext)

death lawsuits of people in a mental health crisis.<sup>3</sup> Law enforcement should not be the primary responders to mental health crises.

A 2012 Department of Justice report outlines that policing in the U.S. does not necessarily keep people safer but instead, militaristic policing causes more harm than good and disproportionately impacts communities of color. The report further assessed that over-policing requires more resources without producing benefits to public safety, draining resources that could otherwise be used for more effective public safety strategies.<sup>4</sup>

Nationally, the negative impacts of policing and police violence have been declared a public health issue.<sup>5</sup> Extensive data shows that aggressive policing is a threat to physical and mental health: inappropriate stops are associated with increased anxiety, depression, PTSD, or long-term health conditions like diabetes. In 2016, at least 76,440 nonfatal injuries due to law enforcement were reported and at least 1,091 deaths were reported. However, due to insufficient monitoring and surveillance of law enforcement violence, these statistics are underestimated.<sup>6</sup>

The impacts of policing disproportionately harm people of color, especially Black Americans, making policing an issue of racial justice. Police disproportionately stop, arrest, shoot, and kill Black Americans. Other marginalized populations, such as people with mental illness, people who identify as transgender, people experiencing homelessness, and people who use drugs, are also subjected to increased police stops, verbal and sexual harassment, and death.<sup>7</sup>

In California, Alameda County has the highest rate of 5150 psychiatric holds in the entire state,<sup>8</sup> which may indicate inadequate provision of mental health crisis services. Of those individuals placed on a 5150 psychiatric hold in Alameda County and transferred to a psychiatric emergency services unit, 75–85% of the cases did not meet medical necessity criteria to be placed in inpatient acute psychiatric care. This demonstrates an overuse of emergency psychiatric services in Alameda County. Such overuse creates challenges in local communities such as lengthy wait times for ambulance services which are busy

<sup>3</sup> Elinson, Z. & Frosch, D. (2015). Cost of police-misconduct cases soars in big U.S. cities. *Wall Street Journal*. <https://www.wsj.com/articles/cost-of-police-misconduct-cases-soars-in-big-u-s-cities-1437013834>

<sup>4</sup> Ashton, P., Petteruti, A., & Walsh, N. (2012). Rethinking the blues: How we police in the U.S. and at what cost. *Justice Policy Institute, U.S. Department of Justice*. <https://www.ojp.gov/ncjrs/virtual-library/abstracts/rethinking-blues-how-we-police-us-and-what-cost>

<sup>5</sup> American Public Health Association. Addressing law enforcement violence as a public health issue. Policy number: 201811. 2018. <https://www.apha.org/policies-and-advocacy/public-health-policy-statements/policy-database/2019/01/29/law-enforcement-violence>.

<sup>6</sup> Ibid.

<sup>7</sup> Ibid.

<sup>8</sup> INN Plan – Alameda County: Community Assessment and Transport Team (CATT) (2018, October 25). *California Mental Health Services Oversight and Accountability Commission*. [https://mhsoac.ca.gov/sites/default/files/documents/2018-10/Alameda\\_INN%20Project%20Plan\\_Community%20Assessment%20and%20Transport%20Team\\_8.6.2018\\_Final.pdf](https://mhsoac.ca.gov/sites/default/files/documents/2018-10/Alameda_INN%20Project%20Plan_Community%20Assessment%20and%20Transport%20Team_8.6.2018_Final.pdf)

transporting and discharging individuals on 5150 holds. The overuse of involuntary psychiatric holds can be traumatizing for people experiencing crisis, as well as for their friends and family.

The overuse of involuntary psychiatric holds is also an issue of racial justice. Police and ambulance workers have been found to bring Black patients with psychoses to psychiatric emergency service more frequently than non-Black patients with psychoses.<sup>9</sup> For example, in San Francisco, Black adults are overrepresented in psychiatric emergency services, relative to overall population size.<sup>10</sup>

Based on 911 call data from 2001 to 2003 in San Francisco, a study found that neighborhoods with higher proportions of Black residents generate relatively fewer mental health-related 911 calls. The authors suggest that underutilization of 911 by the Black community can result in delayed treatment, therefore increasing the risk posed to the health and safety of people in crisis and their communities. The study highlights the common distrust of law enforcement among communities of color. Such distrust and fear of law enforcement may mean that people of color do not trust that mental health-related calls will be handled appropriately if they seek support for a mental health crisis through 911. The study reinforced that “law enforcement officers’ role in the disposition of calls makes them de facto gatekeepers to safety net services for persons with mental disorders.”<sup>11</sup>

It is within this context that many Berkeley community members are calling for a more just, equitable, and health-focused crisis response system, in part due to the distrust of institutions of policing or those closely intertwined with police. A variety of stakeholder groups, including the Berkeley Mental Health Commission and the Berkeley Community Safety Coalition, have long advocated for a community-designed 24/7 crisis care model and to reduce the role of law enforcement in crisis response.

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<sup>9</sup> Kessell, E.R., Alvidrez, J., McConnell, W.A. & Shumway, M. (2009). Effect of racial and ethnic composition of neighborhoods in San Francisco on rates of mental health-related 911 calls. *Psychiatric Services*, 60(10), 1376-1378. <https://ps.psychiatryonline.org/doi/pdf/10.1176/ps.2009.60.10.1376>

<sup>10</sup> Ibid.

<sup>11</sup> Kessell, E.R., Alvidrez, J., McConnell, W.A. & Shumway, M. (2009). Effect of racial and ethnic composition of neighborhoods in San Francisco on rates of mental health-related 911 calls. *Psychiatric Services*, 60(10), 1376-1378. <https://ps.psychiatryonline.org/doi/pdf/10.1176/ps.2009.60.10.1376>

In a concurrent project for the City of Berkeley’s Reimagining Public Safety initiative, the National Institute for Criminal Justice Reform found that among many Berkeley residents, there is a lack of trust in and satisfaction with the Berkeley Police Department. They found that:<sup>12</sup>

- Non-White respondents were more likely to indicate that the Berkeley Police Department is not effective at all compared to White respondents;
- 17.1% of Black respondents and 7.6% of Latinx respondents reported that police had harassed them personally in comparison to only 4.3% of White respondents;
- Respondents are less likely to call 911 during emergencies related to mental health or substance use crisis (57.9%) in comparison to an emergency not involving mental health or substance use (86.2%); and
- Substantially more Black respondents indicated extreme reluctance to call 911 as compared with other groups.

Additionally, the report shared that across all respondents, 65.9% indicated a preference for trained mental health providers to respond to mental health and substance use emergencies “with support from police when needed” and 14.9% indicated a preference “with no police involvement at all.” In total, 80.8% of respondents indicated a preference for trained mental health providers to respond to calls related to mental health and substance use.<sup>13</sup>

Clearly, there is an urgent need for a more racially just, equitable, and health-focused mental health crisis response system. The SCU could be well poised to address these inequities by providing specialized mental health crisis intervention, de-escalation, and stabilization without the presence of law enforcement.

## Inputs to the Recommendations

This report includes core components and guiding aims of the SCU model, considerations for planning and implementing the SCU model, a phased implementation approach, stakeholder-driven design recommendations, system-level recommendations, and next steps and future design considerations. Each recommendation that RDA puts forth in this report is deeply rooted in the following sources of input:

- Crisis Response Models Report (Report 1 of this series of 3)
- Mental Health Crisis Response Services and Stakeholder Perspectives Report (Report 2 of this series of 3)
- Ongoing engagement with the SCU Steering Committee and the City’s Health, Housing & Community Services Department (HHCS)

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<sup>12</sup> National Institute for Criminal Justice Reform (2021). Reimagining public safety: Draft final report and implementation plan. [https://www.cityofberkeley.info/uploadedFiles/Clerk/Level\\_3\\_-\\_Commissions/Draft%20Final%20Report%20and%20Implementation%20Plan%20FNL%20DRFT%2010.30.21.pdf](https://www.cityofberkeley.info/uploadedFiles/Clerk/Level_3_-_Commissions/Draft%20Final%20Report%20and%20Implementation%20Plan%20FNL%20DRFT%2010.30.21.pdf)

<sup>13</sup> Ibid.

- Learnings from the simultaneous Reimagining Public Safety initiative
- Best practices research

The recommendations presented in this report are directly informed from the strengths, challenges, gaps in services, and lessons learned from crisis response programs around the country. Those considerations, however, must be uniquely tailored to the Berkeley community based on the existing crisis response system and the needs and perspectives of Berkeley residents. Together, the recommendations and implementation approaches presented here are informed by findings from the robust community engagement and citywide processes of the past year.

### **Crisis Response Models Report**

As part of this feasibility study, RDA reviewed the components of nearly 40 crisis response programs in the United States and internationally, including virtually meeting with 10 programs between June and July 2021. A synthesized summary of RDA’s findings, including common themes that emerged across the programs, how they were implemented, considerations and rationale for design components, and overall key lessons learned can be found in the [Crisis Response Models Report](#).

### **Mental Health Crisis Response Services and Stakeholder Perspectives Report**

With the guidance and support of the SCU Steering Committee, facilitated by the Director of City of Berkeley’s Health, Housing and Community Services Department (HHCS), RDA conducted a large volume of community and agency outreach and qualitative data collection activities in June and July 2021. Because BIPOC, LGBTQ+, unhoused, and other communities are disproportionately represented in public mental health and incarceration systems—particularly ones designed for punishment and sentencing to prisons—their input was sought to advance the goal of achieving health equity and community safety.

Crisis response service users described their routes through these systems, providing their perspectives about their experiences and how these experiences impact their lives in a way that other stakeholders are not able or qualified to do. The goal of the immense amount of outreach and qualitative data collection was to understand the variety of perspectives in the local community regarding how mental health crises are currently being responded to as well as the community’s desire for a different crisis response system that would better serve its population and needs. Such perspectives are necessary to improve the quality of service delivery and, moreover, to inform structural changes across the crisis response system.

The synthesis of the City of Berkeley’s current mental health crisis system and themes from qualitative data collection can be found in the [Mental Health Crisis Response Services and Stakeholder Perspectives Report](#)





# The SCU Model: Planning & Implementation

## Core Components

The recommendations presented in this report represent a model that is responsive to community needs, but as planning continues throughout 2021 and into 2022, new considerations and constraints may arise. As dynamics evolve and more information is obtained and assessed, the model must be flexible and adaptable. There are several components that should, however, remain core to the SCU model:

- The SCU responds to mental health and substance use crises.
- The SCU responds with providers specialized in mental health and substance use.
- The SCU model does not include police as a part of the crisis response.
- The SCU is not an adjunct to nor overseen by a policing entity (e.g., Police, Fire, or CERN<sup>14</sup>).

With these core components in mind, the SCU model and phased approach were designed to address the challenges, gaps in services, and community aspirations shared by numerous stakeholders throughout Berkeley. The SCU model seeks to:

- Address the urgent need for a non-police crisis response.
- Disrupt the processes of criminalization that harm Black residents and other residents of color, substance users, people experiencing homelessness, and others who experience structural marginalization.
- Increase the availability, accessibility, and quality of mental health crisis services.
- Provide quality harm reduction services for substance use emergencies.
- Strengthen collaboration and system integration across the crisis and wraparound service network.
- Be responsive to ongoing community feedback and experiences.
- Build and repair trust with community members and increase public awareness of newly available services.

## A System-wide Change Initiative

The development of a mental health crisis response model as a component of the City of Berkeley's emergency services should be understood as a systemwide change initiative of great magnitude. Developing a shared narrative around community health and well-being while reducing harm, trauma, and unnecessary use of force may build collective support for the SCU model across City of Berkeley agencies and departments. Other cities implementing non-police crisis response models found that garnering buy-in from other

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<sup>14</sup> Community Emergency Response Network (CERN) is a model recommended by the National Institute for Criminal Justice Reform through the Reimagining Public Safety process.



city or county departments requires collaboration from the earliest planning stages. Cities shared that when they focused these conversations about shared objectives between the crisis response program and the police, police began to see the program as a resource to them, as mental health professionals could often better handle mental health crises because of their training and backgrounds. Alignment on shared goals and values may support leadership across the City of Berkeley to identify and advance the best resource(s) for responding to mental health needs and substance use crises. An effective systemwide change initiative will also require all involved leaders to communicate and champion the shared vision.

The SCU model requires not only collaboration, but also structural changes and integration across other entities. For one, the SCU's ability to respond to crises relies in large part on the 911 Communications Center ("Dispatch"). However, in 2019, a Berkeley City Auditor's report<sup>15</sup> elevated that the understaffing of Dispatch has led to staffing levels that cannot meet the call volume of residents and has increased call wait times. Increased wait times for 911 callers have negative implications for the safety and well-being of service utilizers and community members. Increased wait times also have negative implications for service providers and crisis responders that are responding to a potentially more advanced state of crisis. Additionally, inadequate staffing levels rely on overtime spending to fund Dispatch, which increases the cost of the entity.

The Auditor's report also recommended increased training for Dispatchers to manage and respond to mental and behavioral health crisis calls, including the management of suicidal callers and persons with mental illness. The well-being and stress of call takers are also of concern. In all, if they are not addressed, such resource shortages and unmet training needs could have a significant impact on the SCU's success.

Other entities that will be affected by the implementation of the SCU model include Berkeley Fire, who responds to crises through Dispatch, and the Mobile Crisis Team (MCT), who provide mental health crisis services in partnership with the Berkeley Police Department. These entities, in addition to Dispatch and the SCU, will have to establish new working relationships and protocols to effectively serve the community together.

Dispatch is an immensely complex system. Integrating the SCU into such a system, while addressing staff capacity and training needs, will take significant planning and coordination, as well as funding. For these reasons, the recommendations for the planning and implementation of the SCU model are laid out in a phased implementation approach to allow for sufficient preparation of Dispatch while providing urgently needed mental health crisis response to community members.

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<sup>15</sup> Berkeley City Auditor. (2019, April 25). 911 Dispatchers: Understaffing Leads to Excessive Overtime and Low Morale. [https://www.cityofberkeley.info/uploadedFiles/Auditor/Level\\_3\\_-\\_General/Dispatch%20Workload\\_Fiscal%20Year%202018.pdf](https://www.cityofberkeley.info/uploadedFiles/Auditor/Level_3_-_General/Dispatch%20Workload_Fiscal%20Year%202018.pdf)



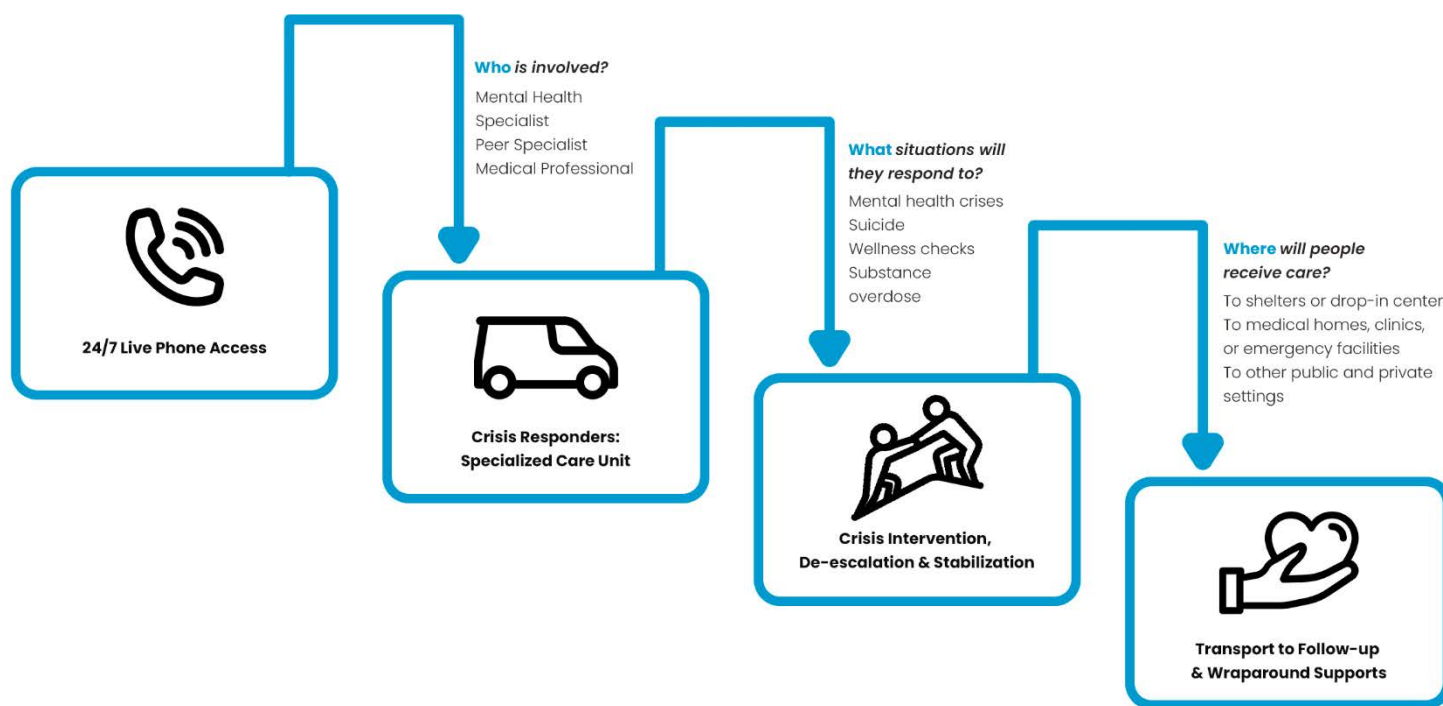
## Recommendations

### Overview

This report presents recommendations that address what is required for SCU model. Figure 1, below, provides an overview of the specialized care unit's response. Figure 2 shows the many components required for a comprehensive 24/7 SCU model.

### The Specialized Care Unit: Crisis Response

**Figure 1: An overview of the SCU crisis response.**

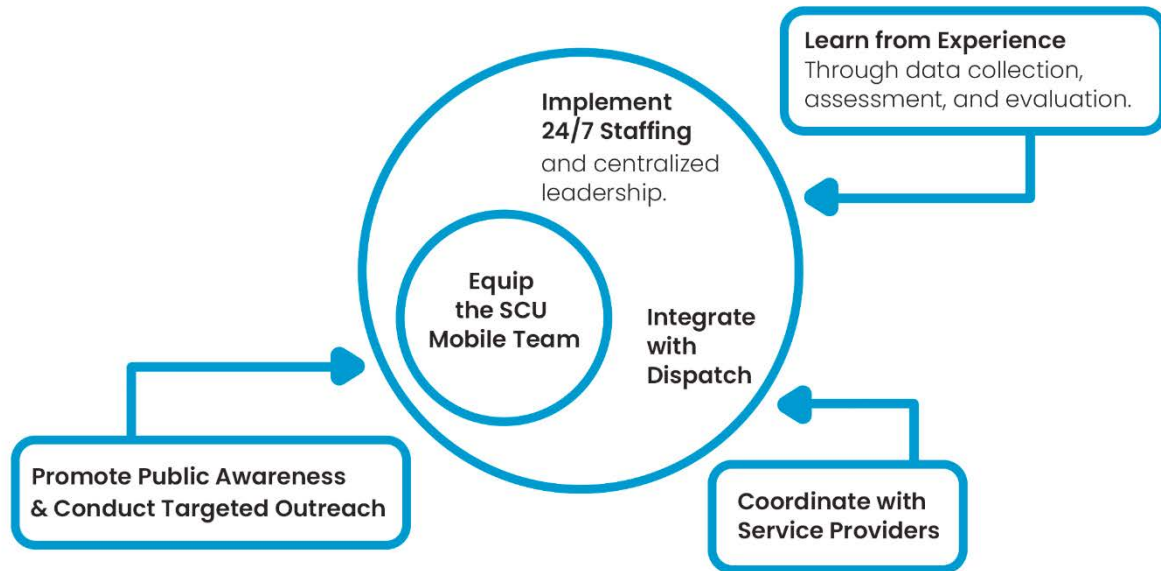


Community members experiencing or witnessing a mental health or substance use crisis will be able to call the SCU through a 24/7 live phone line, from which the SCU mobile team will be deployed to the crisis. The SCU mobile team will include specialists who support a person in crisis with intervention, de-escalation, and stabilization techniques. If necessary, the SCU will also be able to transport a person in crisis to locations that promote the person's safety and care.



## The SCU Model: A Comprehensive 24/7 Crisis Response

**Figure 2: An Overview of the comprehensive 24/7 SCU model.**



The SCU is not solely a mobile team that delivers specialized care during mental health and substance use crises, but rather requires a comprehensive model. This model includes clinical and administrative staff to ensure 24/7 live access to the phone line and SCU mobile team. The model also requires centralized leadership and system integration to realize systemwide changes. As this new model is implemented, it will require ongoing data collection, assessment, and iteration to ensure it is meeting the needs of the community. And, the model requires that community members know that they can call a non-police, specialized mental health and substance use crisis team.



## Phased Implementation

A phased approach will support a successful rollout of the SCU model while planning for integration across city agencies. These timelines may be ambitious given the magnitude of this systems-change initiative and the dependencies of the various model components. While the phased implementation approach represents an ideal timeline and is responsive to the urgent need for specialized mental health and substance use crisis response in Berkeley, it may need to be adjusted to realize the success of the SCU.

Refer to **Appendix A** for a complete phased implementation roadmap.

**Figure 3: An overview of the phased implementation approach.**

| PHASE 0                                                                                                                                                                                                                                                                                                                                          | PHASE 1                                                                                                                                                                                                                                                                                        |                                                                                                                               | PHASE 2                                                                                                    |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|
| Nov 2021 – Aug 2022                                                                                                                                                                                                                                                                                                                              | Sept 2022 – Aug 2023                                                                                                                                                                                                                                                                           | Sept 2023 – Feb 2024                                                                                                          | Feb 2024+                                                                                                  |
| <ul style="list-style-type: none"> <li>Engage SCU Steering Committee &amp; community stakeholders on RFP; launch RFP</li> <li>SCU staff: Contracting, hiring, training</li> <li>Dispatch: Planning &amp; assessment</li> <li>Establish preliminary triage criteria, workflows and protocols</li> <li>Launch public awareness campaign</li> </ul> | <ul style="list-style-type: none"> <li>SCU implements crisis response services</li> <li>Dispatch implements integration or components based on Phase 0 planning</li> <li>Conduct rapid assessment, monitoring, and iteration</li> <li>Engage centralized leadership in coordination</li> </ul> | <ul style="list-style-type: none"> <li>Review annual evaluation and rapid assessments</li> <li>Prepare for Phase 2</li> </ul> | <ul style="list-style-type: none"> <li>Implement changes based on evaluation and community need</li> </ul> |



## SCU Mobile Team

The goal of the SCU is to provide specialized care during mental health crises and substance use emergencies, including crisis intervention, de-escalation, and stabilization. This specialized care does not require a police response but instead should be a three-person team of medical and behavioral health specialists. The SCU will need to be equipped to address the nuanced variety of crisis needs across mental health and substance use emergencies.

By providing 24/7 SCU services, the City of Berkeley asserts that mental health crisis response is of the same importance as other crisis services and limits the need to use the police to respond to such crises. Overall, the SCU model aims to disrupt the criminalization of substance use and mental illness and advance racial justice in the City of Berkeley. There are several considerations for how to most effectively promote the safety of crisis responders, persons in crisis, and general community members.

The following recommendations are aligned to best practices and emerging alternative models, while being rooted in community-driven recommendations. Each recommendation is tailored to the City of Berkeley and provides key considerations to support planning and implementation:



### Key Recommendations

- 1. The SCU should respond to mental health crises and substance use emergencies without a police co-response.**
- 2. The SCU should operate 24/7.**
- 3. Staff a three-person SCU mobile team to respond to mental health and substance use emergencies.**
- 4. Equip the SCU mobile team with vans.**
- 5. The SCU mobile team should provide transport to a variety of locations.**
- 6. Equip the SCU mobile team with supplies to meet the array of clients' needs.**
- 7. Clearly distinguish the SCU from MCT.**

## Recommendation #1

### The SCU should respond to mental health crises and substance use emergencies without a police co-response.

The goal of the SCU is to provide specialized care during mental health crises and substance use emergencies. Below are suggested guidelines of when the SCU should and should not respond to a call.

#### Types of calls SCU **should** respond to:

- Suicide
- Drug overdose
- Welfare check
- Suspicious circumstance
- Complaint of an intoxicated person
- Social disorder
- Indecent exposure
- Trespassing
- Disturbance

#### Types of calls SCU should **not** respond to:

- Confirmed presence of firearm, knife, or other serious weapon
- Social monitoring and enforcement (e.g., of unsheltered residents in public spaces)
- Calls that Dispatch already deems do not need an in-person response (e.g., argument with a neighbor, minor noise violation)

#### Location of calls SCU should respond to:

- Public settings (e.g., parks, sidewalks, vehicles)
- Commercial settings (e.g., pharmacies, restaurants)
- Private settings (e.g., homes)

Note: These guidelines and types of calls will need to be further explored to develop triage criteria that adequately reflect all the considerations for when the SCU will respond to crises.

#### Why isn't the SCU responding with police?

Stakeholders consistently emphasized the need to provide non-police mental health crisis response options, noting that police are primarily trained in issues of imminent public safety threats, not mental health care. Rather than duplicating the MCT's model, the SCU model provides a new option for those better served by a non-police response. A dedicated response unit for mental health, behavioral health, and substance use emergencies will also help to build community trust and increase the likelihood that someone will call for help when they are in a crisis.

#### Why is the SCU responding to calls at public and private locations? Is that safe?

A mental health crisis can happen anywhere, so the SCU must be able to respond to mental health and substance use crises in both public and private settings. Any variables around the safety of responding to a crisis in a private setting should be assessed before deploying the SCU team (e.g., the presence of a serious weapon).

### How were the types of calls decided?

Research from alternative models in other cities, community stakeholders' perceptions of existing needs in Berkeley, and input from crisis responders in the City of Berkeley all indicate that these call types may be well suited for behavioral health and mental health specialists instead of police. The nuances within any of these call types will be further planned for throughout Phase 0.

### Considerations for Implementation

#### Safety & Weapons:

- Not all weapons pose the same risk to crisis responders, so triage and deployment protocols should be aligned to best practices and standards of practice. The SCU may be able to respond to some calls where a weapon is present. The criteria for this safety precaution should be evaluated and planned for during Phase 0.
- If there is a mental health or substance use emergency where a weapon is present, then MCT-Police co-response should be deployed rather than the SCU.
- If the SCU mobile team is on scene but feels their safety is in imminent danger, they should have the ability to call in the MCT-Police co-response as backup support.

#### Coordinating with Other Entities

- Mobile Crisis Team: The types of calls, triage criteria, and workflows will need to be differentiated for deploying MCT versus SCU.
- Berkeley Police Department: When BPD is on scene and MCT is not available, BPD and SCU will need clear processes for whether police can bring the SCU to support. Similarly, BPD and SCU will need clear processes for when/how SCU leaves if they call the BPD to a scene.

## Recommendation #2

### The SCU should operate 24/7.

The SCU mobile team should be available to respond to a crisis in person 24 hours per day, 7 days per week. Not having services available 24/7 was the most common challenge expressed by stakeholders about the current mental health crisis response system. In contrast, other crisis services like Fire and Police are available 24/7. By operating the SCU 24/7, the City of Berkeley asserts that mental health crisis response is of the same importance as other crisis services and negates the need to use police to respond to such crises. The need for 24/7 service is supported by national trends, as although some cities have implemented alternative crisis models with limited hours, many of them shared that they plan to expand to 24/7 to meet community needs.

#### **Why does the SCU need to be available 24/7? Why can't it operate only during peak hours?**

A mental health or substance use crisis can happen at any time. Stakeholders stressed the importance of having mental health crisis response services available 24 hours per day and 7 days per week. If community members are to trust in the SCU as an ongoing and authentic alternative to police involvement, services need to be available whenever someone calls.

#### **Considerations for Implementation**

All other supporting elements described throughout this report will need to accommodate 24/7 availability, such as:

- Phone access to the SCU
- Certain personnel roles, like a Clinical Supervisor
- Staffing structure that allows redundancy of personnel to cover each shift
- Equipment and infrastructure including the number of vans for the mobile team



## Recommendation #3

# Staff a three-person SCU mobile team to respond to mental health and substance use emergencies.

The array of mental health, behavioral health, and substance use services offered by the SCU require staff with varying professional specialties. The following roles are necessary to adequately provide these services:

### 1. A Mental Health Specialist

This role will be the primary provider of mental health services with the ability to conduct 5150 assessments, and therefore need to be licensed. They should have significant training in mental health and behavioral health conditions and disorders, crisis de-escalation, and counseling.

- Recommended position: Licensed Behavioral Health Clinician
- Possible positions: Licensed Clinical Social Worker (LCSW), Associate Clinical Social Worker (ASW), SUD or AOD Counselor, psychologist

### 2. A Peer Specialist

This role should have lived experience with mental health crises and systems, substance use crises or addiction, and be equipped to support system navigation for a person in crisis.

- Recommended position: Peer Specialist
- Other possible positions: Community Health Worker, Case Manager

### 3. A Medical Professional

This role should be able to identify physical health issues that may be contributing to or exacerbating a mental health crisis, including psychosomatic drug interactions. They should be able to administer single-dose psychiatric medicines and have training in harm reduction theory and approaches. They can also assess and triage for higher levels of medical care as needed.

- Recommended position: Psychiatric Nurse Practitioner (Psych-NP)
- Other possible positions: Nurse Practitioner (NP), EMT, Paramedic

### Why a three-person team?

These three distinct roles create a team that can effectively provide the necessary range of specialized services and can engage in organic collaboration to address each crisis. Cities who have implemented similar models spoke to the advantage of team members taking different roles in each scenario based on each client's needs and preferences.

### Why is the mental health specialist conducting 5150 assessments?

The SCU's aim is to reduce the overall number of involuntary holds through effective crisis intervention, de-escalation, and stabilization. However, ensuring the SCU has the ability to conduct 5150 assessments and involuntary holds rather than calling in the police to do the assessment can reduce interactions between people experiencing mental health crisis and police. Additionally, enabling the SCU to conduct the 5150

assessment is a more trauma-informed model because it eliminates the need for a person in crisis to interact with multiple teams and reduces the time it takes to respond to a crisis from start to finish.

### **Why is there a peer on the team?**

The peer is a critical member of the crisis team. Other systems shared that a person in crisis may be most responsive to a peer who has gone through a similar experience and that, at times, peers' unique training and skills allow them to engage that person more effectively than other specialties. Berkeley stakeholder participants emphasized the invaluable contributions of peer specialists, noting that they may be best equipped to lead the de-escalation before the mental health specialist or medical professional steps in to administer care because a person in crisis may be most responsive to someone that has similar lived experience.

### **Why is there a medical professional on the team? Why a Psych-NP?**

Mental health and physical health needs often co-present, with physical needs ranging from basic first aid (e.g., wound care, dehydration) to reactions to substances, such as overdoses or drug interactions. A medical professional, such as a Psych-NP, brings the clinical expertise to understand how physical ailments, chronic medical conditions, and psychiatric conditions affect a service utilizer (e.g., someone with hypertension and schizophrenia using methamphetamines). Other medical professionals, such as NPs, may also have sufficient training to meet the mental health and substance use needs of service utilizers. These situations do not require the expertise of a paramedic or doctor who are trained to respond to emergencies and deliver life-saving care.

### **Considerations for Implementation:**

- The number of mobile teams required will be based on multiple variables including community needs, call volume, and budget (for a more in-depth description, *refer to recommendation #12*).
- There may be challenges in staffing the SCU mobile team with these specific roles, such as the Psych-NP. The SCU model may need to allow for a variety of specialists to fill each of the three main roles.
- Across these roles, the SCU mobile team should have the following competencies:
  - Lived experience of behavioral health or mental health needs, homelessness, addiction or substance use, and/or incarceration
  - Emphasis on dual diagnosis (mental health and substance use) training, psychosomatic interactions, substance use management, and harm reduction
  - Identities reflective of those most harmed by the current system of care and/or those who are most likely to use or benefit from the SCU services
  - Multilingual
- Across these roles, the SCU mobile team will need to be trained on a variety of topics (for a full list, *refer to recommendation #14*). These may be desirable prerequisite skills, such as:
  - Disarming without the use of weapon
  - Motivational interviewing
  - Naloxone administration
  - Harm reduction
  - Trauma-informed care

## Recommendation #4

### Equip the SCU mobile team with vans.

Based on the scope of services, the SCU mobile team will need a vehicle to arrive at each call, carry equipment and supplies, and transport clients to another location. A well-equipped van should be both welcoming and physically accessible to clients and easily maneuverable by staff.

#### SCU vans should include:

- Wheelchair accessible features
- Lights affixed to the top of the van, allowing for sidewalk parking
- Locked supply cabinets
- Rear tinted windows for client privacy
- Rear doors not operable from the inside
- Power ports to charge laptops, tablets, and phones
- Comfortable seating
- SCU logo on the side of the van so the community can easily identify the team

#### SCU vans should **not** include:

- Sirens
- A plexiglass barrier between the front and back seats

#### Why not use an ambulance?

There are a several reasons why an ambulance is not the appropriate vehicle for the SCU:

- Ambulances must transport to a receiving emergency department when transporting from the field (a call for service from a community member), which may not always be the most appropriate end point for the level of care required (*refer to recommendation #5*).
- Ambulances require a special license to drive and would require the inclusion of an EMT or paramedic on staff and would therefore increase the expense of the SCU.
- Ambulances are more expensive to purchase and maintain than a van.
- A van is potentially less stigmatizing and traumatizing for a person in crisis.

#### Why were these specific features chosen?

All van specifications are based on lessons learned from alternative crisis response programs in other cities and experiences and insight shared by the Berkeley Fire Department. Many van features, such as locked supply cabinets and locked rear doors, are designed to increase the safety of both crisis responders and a person in crisis. Other van features support the SCU mobile teams to provide a variety of services.

#### Why shouldn't the van have sirens or a plexiglass barrier?

Sirens can draw unnecessary public attention, thereby reducing privacy for a person in crisis, while both sirens and plexiglass barriers can exacerbate the stigmatization, traumatization, and criminalization of mental health and substance use crises.

#### Considerations for Implementation

The number of vans required will be based on the number of SCU mobile teams and shift structure/overlap (*refer to recommendation #12*).

## Recommendation #5

### The SCU mobile team should provide transport to a variety of locations.

The SCU should provide a level of care appropriate to each specific crisis with the aim of de-escalating crises, preventing emergencies, and promoting well-being. The SCU will transport service utilizers in the SCU van (*refer to recommendation #4*) unless there is a medical need that requires the SCU to request an ambulance for transport.

#### The SCU will transport service utilizers to:

- Inpatient units of psychiatric emergency departments
- Primary care providers, psychiatric facilities, or urgent care
- Crisis stabilization units, detox centers, or sobering centers
- Drop-in centers and other CBOs
- Shelter or housing sites
- Domestic violence service sites
- Long-term programs including residential rehabilitation sites
- Requested public locations (e.g., parks)
- Requested private locations (e.g., home)

#### Considerations when deciding transport location:

- Transport can be voluntary or involuntary, based on a 5150 assessment
- The SCU should be able to deny the request of a person in crisis for transportation based on their assessment of the appropriate level of care
- The SCU will need to assess safety or liability concerns for the service utilizer or other bystanders based on transport location (e.g., not transporting an intoxicated person home where another person is present at the home)

#### Why should the SCU transport service utilizers to so many different locations?

The SCU model aims to support diversion of people experiencing crises away from jails and hospitals and into the appropriate community-based care and resources. Some crises can be resolved on scene, while others will require transport to another location. Even if a crisis is de-escalated on scene, service utilizers may benefit from being transported to another location for additional care or resources. Throughout this project, stakeholder participants emphasized that the level of need outweighs the available resources and providers in Berkeley and Alameda County. Providing transport to a variety of locations and resources allows the SCU to provide the level of care appropriate to each specific crisis and increases the possibility of providing care in an overwhelmed service network. *Refer to Section V for long-term recommendations for addressing the needs of the service network.*

#### Considerations for Implementation

- Established, trust-based relationships with community partners and warm handoff procedures will improve overall quality of care and can reduce the amount of time required when dropping off a client.
- Staff at emergency facilities will need to be familiar with the SCU, including the van, logo, and uniforms, to be prepared to receive transported clients in a timely and responsive manner, reducing “wall time.”
- Triage criteria and workflows should support the SCU in assessing where and how to transport a person in crisis.
- Triage criteria and workflows for transport should address the safety implications for both the person in crisis and other community members.

**Recommendation #6**

## Equip the SCU mobile team with supplies to meet the array of clients' needs.

The SCU will be responding to a variety of calls, each with their own specific needs. The supplies needed will vary depending on the call. Below is a suggested list of supplies the SCU should carry, generated from the input of stakeholders and other alternative crisis response programs. These supplies will facilitate a harm reduction approach and directly contribute to the health and well-being of the person in crisis.

- |                         |                                                                                                                                                                                                                                                                                                 |
|-------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Medical supplies</b> | <ul style="list-style-type: none"> <li>• First aid kit</li> <li>• Personal protective equipment</li> <li>• Wound care supplies</li> <li>• Stethoscope</li> <li>• Blood pressure armband</li> <li>• Oxygen</li> <li>• Intravenous bags</li> <li>• Single-dose psychiatric medications</li> </ul> |
|-------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

- |                                |                                                                                                                                                                                                                             |
|--------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Client engagement items</b> | <ul style="list-style-type: none"> <li>• Food and water</li> <li>• Clothing, blankets, and socks</li> <li>• Transportation vouchers</li> <li>• "Mercy beers" and cigarettes</li> <li>• Tampons and hygiene packs</li> </ul> |
|--------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

- |                                  |                                                                                                                                                                                          |
|----------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Community health supplies</b> | <ul style="list-style-type: none"> <li>• Safe sex supplies and pregnancy tests</li> <li>• Naloxone</li> <li>• Clean needles and glassware</li> <li>• Sharps disposal supplies</li> </ul> |
|----------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

- |                   |                                                                                                                                                                  |
|-------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Technology</b> | <ul style="list-style-type: none"> <li>• Cell phones</li> <li>• Data-enabled tablets</li> <li>• Computer Aided Dispatch (CAD)</li> <li>• Police radio</li> </ul> |
|-------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|

- |                 |                                                                                                        |
|-----------------|--------------------------------------------------------------------------------------------------------|
| <b>Uniforms</b> | <ul style="list-style-type: none"> <li>• Casual dress: polo or sweatshirt with the SCU logo</li> </ul> |
|-----------------|--------------------------------------------------------------------------------------------------------|

### **Why does the SCU need to carry client engagement items?**

These items can help initiate an interaction while also meeting the basic needs of clients while they are experiencing a crisis.

### **Why does the SCU need to carry community health supplies?**

These supplies can help address an underlying physical health need or provide harm reduction for substance use crises.

### **Why does the SCU need technology and uniforms?**

The team needs cell phones and data-enabled tablets for mobile data entry. The tablets should be preloaded with an electronic health record (EHR) application so staff can access client history to provide more effective, tailored care. Wearing a casual uniform can help the team appear more approachable to clients and be easily identifiable. Uniforms that look more like traditional emergency response uniforms can be triggering for clients who have had traumatic experiences with emergency responders.

### **Considerations for Implementation**

- The need for basic provisions among service utilizers is often significant and therefore affects the model's budget. To effectively plan for the program budget, San Francisco's Street Crisis Response Team shared that they budgeted for \$20 in supplies per client contact but quickly exceeded their \$10,000 annual budget. Denver's STAR program noted that these supplies were in high demand and the budget was supplemented with donations.
- Staff should track which supplies are used most often and which supplies are requested by clients that the SCU does not carry.

## Recommendation #7

### Clearly distinguish the SCU from MCT.

Once the SCU model is implemented, there will be two teams responding to mental health crisis calls in the City of Berkeley: the Specialized Care Unit and the Mobile Crisis Team. It will be necessary to clearly distinguish the role of these two teams so that the proper response is deployed for each situation. The general public will also need to be informed regarding the two teams, how to access them, and why.

Suggested scenarios when MCT and Police should be deployed instead of the SCU:

- If there is a confirmed presence of a serious weapon during a mental health crisis, the police and MCT would be deployed.
- If the police request mental health support during a crisis, MCT will be deployed as a co-response.
- If the SCU is on a call and needs backup or cannot successfully intervene, they would call for an MCT-police co-response.

#### **If there's an SCU, why should the MCT still exist?**

When the police respond due to the presence of a weapon or other element outlined above, a joint response that includes clinical staff to support the intervention is a best practice and community asset, delivering a trauma-informed response focused on de-escalation. This is especially true for a person in crisis with past traumatic experiences with the police. The MCT remains an important resource that can reduce the negative impacts of police presence during situations where a mental health crisis intersects with issues of imminent public safety.

#### **Why is it important to distinguish MCT from the SCU?**

**Trust & Acceptability of SCU:** MCT responds to the majority of their calls with police backup. Because SCU is a non-police crisis response option, clearly distinguishing the two models will be essential in establishing and maintaining community trust to increase utilization of the SCU, particularly among groups most at risk of harm from police violence.

**Logistics for Deploying the Right Team:** Dispatch will need tools and training to clearly differentiate the teams' roles to effectively deploy the right team for each mental health crisis call.

#### **Considerations for Implementation**

- All triage criteria and workflows need to be reflective of the differentiation between SCU and MCT. This includes the triage criteria and workflows for Dispatch and/or the alternative phone line and Alameda County's Crisis Support Services (CSS) (*refer to recommendation #9*).
- The distinction between MCT and the SCU, particularly around availability and police involvement, should be emphasized in the public awareness campaign (*refer to recommendation #24*).
- Tracking the acuity levels of calls, as well as whether MCT and police were called in for backup, can help refine the Dispatch process and ensure that the right team is deployed.

## Accessing the SCU Crisis Response: Dispatch & Alternative Phone Number

Implementing the SCU as a 24/7 mental health and substance use crisis model requires that community members have reliable and equitable access to the team. By integrating the SCU crisis response into 911 and Dispatch's processes, mental health crisis services will be elevated to the same level of importance as Fire and Police when calling for emergency services, thus promoting community access to specialized crisis care. To reach this goal, the SCU model, City of Berkeley leadership, and Dispatch will need to work together during assessment and planning processes.

The need to develop and implement the SCU model is urgent. Yet Dispatch is a complex, under-resourced, and overburdened system. To achieve structural change that ensures sustainability, significant planning and coordination is essential.

There are several possibilities for how to advance the SCU-911 integration aligned to the phased implementation approach. The following recommendations are aligned to best practices and emerging alternative models and responsive to the needs and concerns expressed by community stakeholder participants. Each recommendation should be further explored, assessed, and discussed across City of Berkeley leadership:



### Key Recommendations

- 8. Participate in the Dispatch assessment and planning process to prepare for future integration.**
- 9. Ensure the community has a 24/7 live phone line to access the SCU.**
- 10. Plan for embedding a mental health or behavioral health clinician into Dispatch to support triage and SCU deployment.**



## Recommendation #8

### Participate in the Dispatch assessment and planning process to prepare for future integration.

Ultimately, the SCU should be integrated into 911 and Dispatch protocols. To reach this goal, the SCU model, City of Berkeley leadership, and Dispatch will need to work together during assessment and planning.

Dispatch, through the Berkeley Fire Department, has conducted a Request for Proposal process and selected a consulting firm to support enhancements to the deployment of Fire and EMS/Ambulance services. That assessment and planning process should integrate SCU implementation, preparing for the SCU to be a mental health emergency response on par with police and fire emergency calls.

#### **If this is a non-police response model, why is Dispatch involved?**

An effective mental health crisis response that increases community safety, well-being, and health outcomes relies on the SCU actually being deployed to community members in crisis. Dispatch has established infrastructure and technology that could effectively and safely deploy the SCU mobile team. Moreover, 911 is a well-known resource to the general public, which many people do seek during crises. In 2017, Dispatch received 256,000 calls.<sup>16</sup> For these reasons, integration of the SCU into 911 and Dispatch's processes is an important method for deploying the SCU team to people experiencing a mental health or substance use crisis.

#### **Will another assessment and planning process delay the launch of the SCU?**

Dispatch's expertise and experience are a critical asset to lead the assessment, planning, and implementation of revised 911 procedures that include the SCU. The Dispatch assessment and planning project is slated to begin in 2022; by incorporating assessment and planning for the SCU into an existing project, it will initiate the process several months sooner than if a separate and new project were to be initiated. Additionally, integrating both projects will ensure consistent and simultaneous efforts rather than disjointed efforts that require backtracking or undoing of work and decisions.

### Considerations for Implementation

- A systems-change initiative of this magnitude will need identified shared aims and goals.
- A systems-change initiative of this magnitude will need Dispatch leadership to champion the effort and communicate early, often, and positively about the upcoming changes.
- By participating in Dispatch's assessment and planning processes, the SCU model can identify opportunities early on that support the integration, such as using aligned terminology and data collection processes.
- A Dispatch representative should join the SCU Steering Committee (*refer to recommendation #20*).
- Dispatch leadership should join the model's centralized coordinating body (*refer to recommendation #19*).

<sup>16</sup> Berkeley City Auditor. (2019, April 25). 911 Dispatchers: Understaffing Leads to Excessive Overtime and Low Morale.

[https://www.cityofberkeley.info/uploadedFiles/Auditor/Level\\_3\\_-\\_General/Dispatch%20Workload\\_Fiscal%20Year%202018.pdf](https://www.cityofberkeley.info/uploadedFiles/Auditor/Level_3_-_General/Dispatch%20Workload_Fiscal%20Year%202018.pdf)

**Recommendation #9****Ensure the community has a 24/7 live phone line to access the SCU.**

Implementing the SCU as a 24/7 mental health and substance use crisis model requires a 24/7 live phone line to ensure community members have reliable and equitable access to mental health crisis response. The 24/7 availability is essential for community members to feel confident in the availability of the mental health crisis response, as stakeholders reported that MCT's alternative phone number—which is not live and relies on voicemail and callbacks—does not feel like a reliable resource during crises.

The need to develop and implement the SCU model is urgent and at the same time must achieve structural change to ensure sustainability. Implementing a process for the short-term that must be undone would be an inefficient use of funds and may confuse the public and exacerbate distrust. For these reasons, the following three options should be further considered and assessed for how to most effectively ensure 24/7 live access to the SCU crisis response:

1. Option A: Use the existing 911 Communications Center (“Dispatch”) to deploy the SCU.
2. Option B: Contract to a CBO that can staff and implement an alternative number phone line as part of the SCU model.
3. Option C: Use the 988 National Suicide Prevention Lifeline to receive, triage, and assess all mental health crisis calls.

Table 1 below highlights several factors to consider related to timeline and staff capacity, funding, safety, system integration, and public awareness. Based on these factors, it appears that Option A (using the existing 911 Communications Center to deploy the SCU) would be the best option for the City of Berkeley. However, these factors should be further discussed by City of Berkeley leadership across HHCS and Dispatch with careful consideration of the phased implementation approach and timeline.

**Table 1: Options and factors to assess when planning for the community to have 24/7 live phone line access to the SCU.**

|                                      | <b>Option A *Recommended Option*</b>                                                                                                                                                                                                                                                                                                                                                   | <b>Option B</b>                                                                                                                                                                               | <b>Option C</b>                                                                                                                                                                                                                      |
|--------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                      | <b>Use 911 and existing Communications Center (“Dispatch”) to deploy the SCU.</b>                                                                                                                                                                                                                                                                                                      | <b>Contract to a CBO that can staff and implement an alternative number phone line as part of the SCU model.</b>                                                                              | <b>Use the 988 national phone line to receive, triage, and assess all mental health crisis calls.<sup>17</sup></b>                                                                                                                   |
| <b>Timeline &amp; Staff Capacity</b> | <p>Assess Dispatch’s ability to recruit, hire, and train new staff on a timeline aligned to the phased implementation approach.</p> <p>Consider the amount of resources and time required for Dispatch to train existing staff on new protocols.</p> <p>Consider Dispatch’s capacity to support the SCU adoption and integration in addition to the current accreditation process.</p> | <p>Assess whether a CBO can realistically implement both the SCU model and an alternative phone number (i.e., call center), including recruiting, hiring, and training all new personnel.</p> | <p>Monitor the alignment of national, state, and county timelines for 988 implementation.</p> <p>Assess whether the 988 call center will be staffed appropriately for the additional call volume brought in by requests for SCU.</p> |
| <b>Funding</b>                       | <p>Estimate the additional funds required for Dispatch to recruit new personnel (i.e., a recruitment team) and manage the Human Resource capacity to support additional staff.</p>                                                                                                                                                                                                     | <p>Estimate the cost to create and operate an independent 24/7 live alternative phone line.</p>                                                                                               | <p>Explore the amount of funding and resourcing available for 988 to assess whether the funds sufficiently support the 24/7 SCU.</p>                                                                                                 |

<sup>17</sup> Gold, J. (2021). How will California’s new 988 mental health line actually work? *U.S. News*. <https://www.usnews.com/news/health-news/articles/2021-10-12/how-will-californias-new-mental-health-hotline-actually-work>

**Option A (Recommended)****Option B****Option C****Safety Promotes Safety**

Evaluate and compare each option's ability to establish protocols or infrastructure to support the safety of crisis responders and community members.

Dispatch already has established protocols and technology to track the crisis responder's location/position through CAD.

Assess the resources and timing required for a CBO to ensure sufficient training on the use of the CAD system and radio communication.

Assess the ability for existing Alameda CSS and 988 technology to integrate with Dispatch's CAD system and radio communication.

Dispatch already has established protocols and technology to maintain radio communication between Dispatch and crisis responders, especially during rapid changes in a situation.

Assess workflows and processes that would affect the number of times a caller must repeat triage/assessment; estimate whether there will be an increase in dropped calls.

Evaluate the effectiveness of existing processes to transfer calls between Alameda CSS and Dispatch.

Dispatch already has established protocols and technology to streamline the handling and transfer of calls so that a person in crisis does not have to repeat their story multiple times, thereby reducing the number of dropped calls.

Consider if a non-911 entity will more effectively reduce police-community interactions during mental health and substance use crises.

Consider if the 988 entity will more effectively reduce police-community interactions during mental health and substance use crises.

**Risks to Safety**

Evaluate and compare the potential risks to the safety of crisis responders and community members across each option.

Consider whether Dispatch will be more likely to deploy the police than the SCU during initial model implementation.

Consider whether alternative phone line personnel will be more likely to deploy the SCU than transferring calls to 911.

Consider whether community members will be confused about 988 and may believe it is only for suicide prevention rather than the full spectrum of mental health and substance use crises, and therefore be less likely to call 988.

Evaluate whether community members' fear of a police response, will reduce the utility, acceptability, and accessibility of the SCU.

Evaluate whether community members will be more likely to call an alternative phone number than 911 if they are experiencing a mental health or substance use crisis.

**Option A (Recommended)****Option B****Option C****System Integration**

N/A  
*(911 is already integrated with Berkeley Fire, Falck, and Alameda County CSS)*

Explore the process for a CBO to assess and prepare callers if they need to transfer the call to 911, such as if the presence of weapons is confirmed. Evaluate the effects, such as a slowed response time or increased risk of a dropped call.

Consider whether the transfer of calls to 911 (i.e., calls ineligible for SCU) will undermine community trust in the alternative phone line.

Determine the feasibility of integrating a CBO's technology to allow for the transfer of calls between Alameda CSS and Dispatch.

Determine the feasibility of a CBO's technology to receive calls from Fire and Falck if they request the SCU.

Determine whether Alameda County will be able to deploy a Berkeley-specific team (the SCU) for only Berkeley residents as a component within the larger 988 model.

Assess what will be required for a county system to deploy a model administered by a CBO, such as additional contracts, MOUs, or staff licensure requirements.

**Public Awareness**

Consider what will be required of a public awareness campaign to build community trust in 911 to deploy the SCU as a non-police response.

Consider what will be required of a public awareness campaign to inform Berkeley residents both about the SCU as a non-police crisis response and promote an alternative phone number to access the SCU.

Assess the public awareness and education planned for 988.

Assess whether the Alameda County 988 public awareness campaign can be adjusted for Berkeley to communicate the availability of the SCU through 988.

### **Why consider different options for phone access to the SCU?**

The numerous factors that should be assessed to determine the best option for phone access to the SCU will require a significant amount of collaboration and detailed planning across city leadership, which requires time throughout Phase 0. The general public is familiar with 911 as a crisis response resource. As a result, 911 could be an important method of ensuring mental health and substance use crises are routed to the SCU mobile team. However, stakeholders, especially residents of color and Black residents, consistently shared that the fear of physical violence, criminalization, or retaliation by police in response to mental health and substance use emergencies is a barrier to calling 911. Therefore, a non-911 option may support community members to feel confident in the SCU as a non-police mental health crisis response. Considering and assessing the full array of options will ensure the best approach for a reliable and equitable access to 24/7 mental health crisis response.

### **Why is Option A elevated as the recommended option?**

Overall, Option A is recommended because it appears to be a better fit for the SCU model. It will most likely be the more cost-effective option, will allow for the SCU mobile team to be launched soonest, and will align to the phased implementation approach and the future integration of the SCU into 911.

By pursuing Option A, preparation with Dispatch can begin sooner than the other options, thus allowing for additional time to plan and prepare. This additional planning time can be used to address concerns regarding safety, community trust, and public awareness. Integrating the SCU into 911 from the initial phases of implementation may also support a streamlined and efficient integration. In contrast, Option B will likely require significantly more funding to create an entirely new call center, which may become obsolete once 988 is implemented, nationally. The feasibility and expense of standing up an entirely new call center (option B) may be prohibitive. Option C will require significant coordination with Alameda County and has many implications that are outside of the control of the City of Berkeley, which could cause delays or challenges to the implementation of the SCU model.

Additionally, 911 has established technology and infrastructure for receiving and triaging phone calls, deploying crisis responders, tracking the crisis response to promote responder safety, and collecting data that is essential for monitoring, evaluation, and follow-up. Moreover, for the public awareness campaign, it may be easier to communicate the SCU as a non-police response through 911 than it is to both communicate the SCU as a non-police response and to publicize an alternative phone number.

### **Why might the model implement an alternative phone number? (Option B or Option C)**

First, due to existing community distrust of policing systems, it is important to establish the SCU response as a non-police response. By implementing the alternative phone number first, community members may be encouraged to utilize the SCU. Second, the existing Dispatch system is complex, overburdened, and underfunded. In order to have a successful integration of the SCU within 911, it may require more time for planning for a sustainable integration that ensures community safety. Third, lessons learned from other cities implementing alternative models may indicate this order would support SCU success. For example, the Portland Street Response team can be accessed through both 911 and a non-emergency phone number connected to Dispatch. However, they found that calls from 911 were prioritized rather than calls from the alternative line when deploying the team. Berkeley will need to establish clear prioritization and triage protocols so that the highest-acuity calls receive adequate responses, rather than the response being determined by the source of the call.

### Do other cities use multiple phone numbers?

From the reviewed models, at least seven use two or more lines for emergency crisis calls:

- Olympia, WA: Crisis Response Unit
- Sacramento, CA: Department of Community Response
- Austin, TX: Expanded Mobile Crisis Outreach Team (EMCOT)
- Oakland, CA: Mobile Evaluation Team (MET)
- Portland, OR: Portland Street Response
- Eugene, OR: Crisis Assistance Helping Out on the Streets (CAHOOTS)
- Denver, CO: Supported Team Assisted Response (STAR)

### If the model uses an alternative phone line, what happens if people still call 911 when they are having a mental health crisis?

Dispatch should have the option to forward calls to the SCU alternative phone line, where those staff can triage the call and deploy the SCU. Establishing these protocols will be part of the assessment and planning process. It is also important that a public awareness campaign promotes access to the SCU team (*refer to recommendation #24*).

### Additional Considerations for Implementation:

- The phone line will require dedicated office space and equipment to process calls and deploy the SCU.
- The phone line will need technology and protocols to ensure data collection and integrity to support monitoring and evaluation (*refer to recommendations #22 and #23*).
- The phone line will require enough staff to maintain a 24/7 live response including staff to receive calls and supervisory staff. This team will need to be sufficiently staffed to account for shift overlap, sick leave, and vacation time.
- Additional data collection and planning will be required to determine the adequate number of call takers and fully implement the phone line.
- Option A may require that Dispatch makes more gradual changes to triage criteria, deploying the SCU to a more limited scope of call types with a gradual increase in SCU deployment through Phase 1 implementation.
- Either option B or option C would still require the phone line entity to collaborate with Dispatch to develop types of calls, triage criteria, and workflows to allow for future integration of SCU into Dispatch.
- The future structure of the 911 Communications Center within Berkeley Police Department should be evaluated (*refer to Section V*).

*\*Please note: Dispatch uses specific terminology that may not be accurately represented here. The language in these recommendations should be understood from a lay perspective rather than rigid technical language (e.g., call takers versus dispatchers, assessment versus triage versus decision-trees).*

## Recommendation #10

# Plan for embedding a mental health or behavioral health clinician into Dispatch to support triage and SCU deployment.

Embedding a mental or behavioral health clinician within the Dispatch represents a new process for Berkeley's Dispatch and broadens Dispatch's lens from being solely a Police entity to an entity that includes clinical specialists. Dispatch must be involved in planning for this additional team member.

### Why should Dispatch have a clinician in the call center?

Embedding a mental health clinician in emergency call centers is an emerging best practice, though only a few cities nationally report staffing their call centers with clinicians. The few cities that have included mental health clinicians in their call centers have found them to be a useful resource. Where implemented, clinicians provide specialized training for call takers to handle behavioral health crisis calls, receive transferred behavioral health crisis calls, and provide guidance.<sup>18</sup>

### How does having a clinician in Dispatch promote community or crisis responder safety?

Berkeley Dispatch is deeply committed to the safety of crisis responders. In interviews for this project, Austin's EMCOT program<sup>19</sup> shared that embedding a clinician within their call center increased communication around safety and risk assessment during triage, including increased deployment of the crisis response team. They also shared that this integration improved handoffs for telehealth conducted by the clinician. Berkeley should plan for embedding a clinician in Dispatch to support with de-escalation and determinations because it could promote safety.

### Why does the clinician need to be part of planning in Phase 0 if implementation is in Phase 1?

This change represents a structural shift for Dispatch, incorporates new roles for a specialized skillset, and changes several workflows. As a result, having a clinician participate in planning in Phase 0 will support successful implementation in future phases. Additionally, given the current significant understaffing and under-resourcing of Dispatch, the clinician can augment staff capacity without Dispatch having to acquire a new, specialized skillset.

### Considerations for Implementation:

- Calls that do not require an in-person response should continue to be sent to Alameda County CSS for phone support.
- Staffing structures will need to be adapted, such as determining which roles supervise the clinician and which roles the clinician supervises.
- The clinician may be able to provide training and ongoing professional development to support call takers to identify and address mental health calls.
- There may be a need for multiple clinicians depending on their role and the call volume.
- This recommendation will need to be adapted based on how recommendations #8 and #9 are implemented.

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<sup>18</sup> Velazquez, T & Clark-Moorman, K. (2021). New research suggests 911 call centers lack resources to handle behavioral health crises. *ResearchGate*.

[https://www.researchgate.net/publication/355684339\\_New\\_Research\\_Suggests\\_911\\_Call\\_Centers\\_Lack\\_Resources\\_to\\_Handle\\_Behavioral\\_Health\\_Crises](https://www.researchgate.net/publication/355684339_New_Research_Suggests_911_Call_Centers_Lack_Resources_to_Handle_Behavioral_Health_Crises)

<sup>19</sup> Read more about the EMCOT program here: <http://www.austintexas.gov/edims/pio/document.cfm?id=348966>



## Implement a Comprehensive 24/7 Mental Health Crisis Response Model

There are many considerations for realizing the full implementation of a 24/7 model including hiring personnel, establishing clear roles, and providing office space and required materials. Staffing a comprehensive model should seek to address the perceived challenges of existing crisis response systems throughout Berkeley, such as not having 24/7 availability or sufficient staff capacity.

The following recommendations are designed to leverage the lessons learned from other cities implementing non-police crisis response models and be responsive to the needs and concerns expressed by community stakeholder participants. Each recommendation should be further explored as launch and implementation progresses:



### Key Recommendations

- 11. Fully staff a comprehensive model to ensure the success of the SCU mobile team, including supervisory and administrative support.**
- 12. Operate one SCU mobile team per shift for three 10-hour shifts.**
- 13. SCU staff and Dispatch personnel travel to alternative crisis programs for in-person observation and training.**
- 14. Prepare the SCU mobile team with training.**

## Recommendation #11

### Fully staff a comprehensive model to ensure the success of the SCU mobile team, including supervisory and administrative support.

In addition to the three-person SCU mobile team (*recommendation #3*), the 24/7 live phone line (*recommendation #9*), and the clinician in Dispatch (*recommendation #10*), the SCU will require supervisory and administrative support roles. These roles will support the day-to-day services and operations of the SCU mobile team. They also will participate in case management meetings (*recommendation #18*), rapid assessment and monitoring (*recommendation #22*), and model evaluation (*recommendation #23*).

#### **Recommended Personnel Roles & Types of Responsibilities<sup>20</sup>:**

##### **Program Manager**

- Review data from implementation, lead rapid assessment process, support changes and iteration to model
- Liaise with city, Dispatch, and central leadership around implementation, rapid assessment, and coordination
- Manage contract and budget
- Manage scheduling and shifts

##### **Clinical Supervisors**

- Oversee and support SCU mobile team, provide consultation for medical and mental health services
- Plan and lead training and professional development for SCU mobile team
- Collaborate with peer specialist supervisor on how to best support SCU mobile team
- Share client and staff feedback to program manager for rapid assessment and monitoring

##### **Peer Specialist Supervisor**

- Oversee and support peer specialists on SCU mobile team with an emphasis on emotional support for peers
- Plan and lead training and professional development for SCU mobile team, with an emphasis on utilizing peer specialists and other forms of team communication and support (e.g., advocacy, equal value, communication)
- Collaborate with clinical supervisor

##### **Call Takers / Call Center (*pending implementation of recommendations #8-10*)**

- Receive calls from the 24/7 live phone line; triage calls and deploy SCU mobile team, as required
- Receive calls from Dispatch
- Transfer calls that do not require in-person services to Alameda County CSS
- Participate in case management care coordination meetings, as relevant

<sup>20</sup> Refer to **Appendix B** for the number of personnel, availability, shifts, and a sample shift structure

## Considerations for Implementation

Availability or shift structure for roles:

- The program manager and peer specialist supervisor roles should be available during traditional business hours.
- The clinical supervisor role should be available 24/7 and will require redundancy in hiring.
- The call center will need to be staffed to ensure a 24/7 live phone line. If Option B is pursued (*refer to recommendation #9*), the call center should be situated within the SCU model rather than a separate CBO. This could promote morale and team identity and will increase the quality and efficiency of communication.

Office & Equipment Needs:

- The SCU model will need an office space that accommodates all personnel and their roles, such as daily huddles, desks, and equipment.<sup>21</sup>
- Stakeholders suggested that the SCU would benefit from developing relationships with service utilizers and their families. If these opportunities are pursued as part of the SCU's function, then office space could also accommodate service utilizer and family consultations and/or open "office hours" for relationship building.

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<sup>21</sup> Refer to **Appendix C** for the budget and additional office equipment needs, such as computers, phones, printers, etc.

## Recommendation #12

### Operate one SCU mobile team per shift for three 10-hour shifts.

In order to staff a crisis response model that operates 24/7, the SCU should staff one mobile team per shift for three 10-hour shifts. We estimate that the SCU would respond to three to six incidents per 10-hour shift, with each incident requiring 20 to 120 minutes for response and closure. This should generally be manageable by one SCU mobile team.<sup>22</sup>

#### Why 10-hour shifts?

Based on feedback from those operating similar models as well as from community stakeholders, 10-hour shifts are common in residential settings and tend to work well for clinical and mental health staff. There are often labor union protections for shifts longer than 10 hours. Three 10-hour shifts would provide 24/7 coverage while allowing for some overlap before and after each shift.

#### Why should shifts overlap?

The SCU mobile team shifts should overlap so that the team can conclude engagement with a person in crisis before their shift ends. The next shift would be able to respond to a crisis call that comes in towards the end of the preceding team's shift. The overlap also supports team huddles for care coordination. The shift structure and overlap should include time for the required paperwork at the end of the shift so that there is not an expectation that paperwork is completed during off hours.

#### Will one SCU mobile team be sufficient?

This estimate is comparable to the call and incident volume reported by Denver's STAR pilot, Portland's Street Response pilot, and Eugene's CAHOOTS program. Though the city population of Denver and Portland are 5.8 and 5.3 times larger than Berkeley's population, respectively, their pilots are restricted to smaller geographic units of the city; Denver and Portland both operate only 1 mobile crisis response team per shift. Eugene's city population is 1.4 times the population of Berkeley, and Eugene operates 1 crisis team per shift, with an additional team during peak hours of 10am-12pm and 5pm-10pm.<sup>23</sup>

#### Considerations for Implementation

- Staffing structure will require redundancy to allow for personnel to take vacation and sick days, and in anticipation of periodic vacancies.<sup>24</sup>
- Staffing structure may need to plan for on-call or floater shifts.

<sup>22</sup> Estimates for SCU call volume are based on analysis of call and service volume by MCT from 2015 to 2019, the Auditor's Report and analysis of Berkeley Police Department's call and service volume from 2015 to 2019, and analysis of Berkeley Fire's and Falck's transport volume and time on task from 2019 to 2021. Please refer to **Appendix D** for more specific analysis and estimates.

<sup>23</sup> The City of Eugene (2019-03240). <https://www.eugene-or.gov/DocumentCenter/View/56579/2019-03240-White-Bird-CAHOOTS-Services---SIGNED>

<sup>24</sup> Refer to **Appendix B** for the number of personnel, availability, and a sample shift structure.

**Recommendation #13**

## SCU staff and Dispatch personnel should travel to alternative crisis programs for in-person observation and training.

Although Berkeley's SCU model will be uniquely designed and tailored for the Berkeley community, there are many opportunities to learn from successes and challenges of other models that have implemented non-police mental health crisis response programs. For example, the Denver STAR team shared that their Dispatch team benefited greatly from traveling to Eugene, OR to observe and learn about the CAHOOTS model and plan their deployment protocols.

**Options for city programs to visit:**

- CAHOOTS: Eugene, OR
- STAR: Denver, CO
- EMCOT: Austin, TX

**Recommended personnel to attend:**

- Dispatch: Supervisor
- SCU: Clinical Supervisor and Program Manager
- Phone line staff, as relevant (refer to recommendation #9)

**Potential program components to observe during site visit:**

- Triage criteria and workflows
- Assessing for risk and safety
- Working with the mental health clinicians embedded in Dispatch
- Coordinating and prioritizing calls between 911 and an alternative phone number
- SCU mobile team services and team coordination
- Role clarification

**Why should Dispatch and SCU staff travel to these sites together?**

This training opportunity would support the collaboration between the SCU and Dispatch in planning for the phased integration. By traveling to the sites together, SCU and Dispatch will not only hear the same questions and answers but can ideate and collaborate on adaptations for the Berkeley SCU model. Finally, this is an important opportunity for relationship building between SCU staff and Dispatch, which is essential to this systems-change initiative.

**Considerations for Implementation**

- Travel costs will need to be included in the initial budget; estimates for consulting fees from the sites are already included.<sup>25</sup>

<sup>25</sup> Refer to **Appendix C** for the estimated SCU model budget.

## Recommendation #14

### Prepare the SCU mobile team with training.

The SCU will require training in a set of specific skill areas to be best equipped to provide mental health crisis response. The personnel hired should already have demonstrated their specialized skill set in previous employment settings; training will therefore support the team to align on how to implement their skills. Training also supports teams to work together and with other entities effectively, such as Dispatch, which is essential in crisis response.

#### The SCU mobile team should be trained in the following topics:

- General de-escalation techniques
- Disarming without use of weapon
- Substance use management
- Naloxone administration
- Harm reduction theory and practice
- First aid
- Situational awareness and self-defense
- Radio communication
- Motivational interviewing
- Implicit bias, cultural competency, and racial equity
- Trauma-informed care
- Training on data collection protocols and data integrity (refer to recommendations #17 and #18)
- Compliance with confidentiality and HIPAA when interacting with Police and/or Dispatch

#### How long will it take to train staff?

Eugene's CAHOOTS program includes at least 40 hours of classroom training and 500 to 600 hours of field training for all new staff.<sup>26</sup> This equates to 12.5 to 15 weeks of training when calculated on a full-time basis.

#### What informed these suggested training topics?

These training topics were generated from a variety of alternative model program recommendations and input from Berkeley service providers and community stakeholders.

#### Considerations for Implementation:

- The phased approach timeline incorporates an estimate aligned to CAHOOTS' model, with room for adaptation.
- Training should be provided to all new SCU staff as they are added to the team, regardless of start date.
- Additional training topics may be identified by the SCU team.

<sup>26</sup> Beck, J., Reuland, M., & Pope L. (2020). Case Study: CAHOOTS. Vera. <https://www.vera.org/behavioral-health-crisis-alternatives/cahoots>

## Administration and Evaluation

There are many considerations for effectively administering and monitoring implementation of a new, 24/7 mental health crisis response model. Effective implementation includes ongoing collaboration and decision-making at both the structural and provider levels.

At a structural level, the SCU model will require cross-system coordination for implementing new processes and therefore will require leadership across the City of Berkeley and SCU to collaborate around ongoing program monitoring, data review and transparency, and system integration. At a provider level, the SCU model will require collaboration and communication to support care coordination and case management for people that have experienced crisis as well as to elevate emerging challenges and successes.

Moreover, the community can—and must—provide essential advisory capacities. The community should be actively engaged to provide input and feedback throughout the planning and implementation of the SCU, including through the SCU Steering Committee and ongoing opportunities for the general public.

The following recommendations were informed by the lessons learned from other cities implementing alternative crisis models and aim to be reflective of the perspectives shared by the project’s stakeholder participants. Each recommendation should be a starting point to promote cross-sector collaboration, adjusting to accommodate the evolution of the SCU:



### Key Recommendations

- 15. Contract the SCU model to a CBO.**
- 16. Integrate the SCU into existing data systems.**
- 17. Collect and publish mental health crisis response data publicly on Berkeley’s Open Data Portal.**
- 18. Implement care coordination case management meetings for crisis service providers.**
- 19. Implement centralized coordination and leadership across city agencies to support the success of mental health crisis response.**
- 20. Continue the existing SCU Steering Committee as an advisory body.**
- 21. Solicit ongoing community input and feedback.**
- 22. Adopt a Rapid Monitoring, Assessment, and Learning process.**
- 23. Conduct a formal annual evaluation.**

## Recommendation #15

### Contract the SCU model to a CBO.

The administrative structure of crisis response systems across the country varies significantly. Some are administered by government agencies, some are run in collaboration between a government agency and CBO, and some are entirely operated by CBOs. There are several reasons why the SCU model should be contracted to a CBO, at least through Phase 2 of the phased implementation approach.

#### The SCU crisis response model would benefit from being contracted to a CBO for several reasons:

- **Supports a quick launch:** CBOs are often able to move more nimbly than government agencies, especially as it relates to hiring; adequately staffing the SCU mobile crisis team is a critical element in timely implementation. Given the urgent need, the ability to launch the SCU quickly and provide non-police mental health crisis response services is critical.
- **Established relationships with community members:** Stakeholders made it clear that CBOs have developed strong relationships with service utilizers accessing mental health support, homelessness resources, street medicine, and system navigation and referrals. CBOs in Berkeley have expertise in the community that can be leveraged to advance the SCU's crisis response efforts.
- **Referral networks and partnerships:** A CBO with established networks and partnerships would be well positioned to support service utilizers with referrals as well as transport to community-based resources. Additionally, these relationships can support warm handoffs at transport locations.

#### Considerations for Implementation

- To contract with a CBO, the City of Berkeley will have to issue a Request for Proposals (RFP). The RFP process will need to evaluate a CBO's capacity to develop and implement a model of this size on this timeline.
- The City should identify a backup plan if no qualified CBOs respond to the RFP.
- The CBO's practices should align to the values and principles of the SCU. The City may need to use contracts and MOU specifications to require:
  - Adequate and equitable wages for all SCU staff and crisis responders, especially peer specialists and peer specialist supervisors.
  - A representative and equitable hiring process that prioritizes staff who are reflective of those most marginalized and harmed by existing crisis response options and the criminal legal system.
  - Necessary data and metrics to collect and report as well as ensuring sufficient technological systems to meet these needs.
- CBOs may face challenges inherent in the contract structure, which should be evaluated and protected against as these challenges can undermine sustainability and longevity.
  - Short-term funding: only funding the SCU in one-year increments can reduce staff retention and inhibit investments in operations (*refer to Section V*).
  - Overhead costs: allocate enough funds for overhead costs (e.g., salary, training, and office equipment), which are critical to SCU success.
  - Contract monitoring: data collection, monitoring, and evaluation are essential to the success and iteration of the SCU but should not be prohibitive to the work.
- There may be additional needs or considerations around data and system integration (*refer to recommendation #16*) and the collaboration across administration and leadership if a CBO implements the SCU; these may need to be included in the contract.
- All recommendations are written with a contracted CBO in mind; additional implications may arise during planning and Phase 0.



## Recommendation #16

### Integrate the SCU into existing data systems.

Having access to patient data will support the SCU to provide tailored, informed, and equitable services for those experiencing mental health and substance use crises. Access to existing data systems, such as an EHR, will not only ensure that the SCU has access to relevant patient information, but also that other providers are aware when, how, and why their client might be interacting with crisis response. Finally, integrating the SCU into existing data systems will ensure aligned and consistent data collection, which is essential for the rapid assessment monitoring (*refer to recommendation #22*) and evaluation (*refer to recommendation #23*).

There are many factors outside of the purview of the SCU, HHCS, or even that City of Berkeley that affect whether data and system integration can be achieved. These factors include patient privacy and legal protections (i.e., HIPAA), technological capabilities, available funding, logistics across private and government entities, and more. As a result, this recommendation is included as an aspiration that should be planned for in future phases and may not be realized during Phase 1 of implementation.

- Bidirectional, live data feeds should be integrated between the SCU and other data sources, including but not limited to:
  - EHRs used by major medical systems and Federally Qualified Health Centers (FQHC)
  - Alameda County's Community Health Record (CHR)
  - Alameda County's YellowFin

#### **Why does the SCU need to access service utilizers' records, such as EHRs?**

Access to an EHR allows crisis responders to make informed decisions based on a service utilizer's health history. This access also enables crisis responders to communicate directly with a service utilizer's existing support team, such as psychiatrists or case managers, when providing crisis response or referring the service utilizer for follow-up care.

#### **Is it common for crisis responders and clinicians to have access to service utilizer records?**

Many other crisis response programs enable access to these sources of data. For example, the Alameda County Community Assessment and Transport Team (CATT) has access to the county's CHR. Providers at FQHCs, including programs like Lifelong's Street Medicine Team, have access to an integrated EHR. Berkeley Mental Health (BMH) is already integrated with the county's YellowFin reporting system. Other city models, such as Denver STAR, enable their crisis responders to access existing data systems.

#### **Why should the data feeds be bidirectional?**

Not only do crisis responders need to access service utilizer medical history, but the data they collect during a crisis response should be entered into the centralized data systems so that a service utilizer's existing support team has an updated and complete case history. The county's CHR has live data feeds from many providers and so the SCU's data should also have bidirectional capabilities when possible.

## Considerations for Implementation

- The Berkeley City Attorney and IT have signed onto the county's CHR, and many CBOs and medical providers have also already signed onto the CHR, which could facilitate the SCU's integration into this system.
- The SCU will need access to EHRs and the CHR to participate in client case management meetings (*refer to recommendation #18*).
- SCU team members will need training and support to accurately enter data into these platforms, which is essential to data integrity.
- Legal protections for confidentiality and consent will have to be carefully assessed to determine the feasibility of this recommendation and implementation approach.
- Many health conditions can be criminalized and prosecuted. The SCU data must be separate from Dispatch and CAD data because Dispatch is situated within Berkeley Police Department. Presently, Dispatch does not have access to EHRs or the CHR, and in the future, this separation should continue.

## Recommendation #17

# Collect and publish mental health crisis response data publicly on Berkeley's Open Data Portal

Data collection is essential to monitoring and evaluation and spans across the SCU mobile team and supporting personnel, Dispatch and/or the alternative phone line, and central leadership. Given how many different personnel and agencies will be collecting and reviewing data, it is essential that data collection be planned for early in Phase 0 to ensure alignment, accuracy, and data integrity.

- Types of data that should be collected and published:
  - Call volume
  - Time of calls received
  - Service areas
  - Response times
  - Speed of deployment
  - Determinations and dispositions of Dispatch (including specific coding for violence, weapons, and emergency)
  - All determinations and deployed teams from Dispatch
  - Percentage of calls responded to by SCU of all calls sent to SCU
  - Type or level of service needed compared to the initial determination at the point of Dispatch
  - Service utilizer outcomes
  - Number of 5150 assessments conducted
  - Number of 5150s confirmed and involuntary holds placed
  - Number of transports conducted
  - Location of transport destinations
  - Type of referrals made
  - Priority needs of clients served (housing, mental health)
  - Number of requests for police involvement
  - Racial demographics of service utilizers
  - Other relevant characteristics of service utilizers, such as homelessness status or dementia

*Note: not an exhaustive list.*

- Examples of public data dashboards from alternative crisis models:
  - [Portland's Street Response data dashboards](#)
  - [NYC's B-HEARD monthly data reports](#)

### How does data collection promote community safety and health?

Nationally, many emergency call centers lack consistent data collection and internal sharing and review, suggesting city administrators and leaders are unable to effectively use data to understand the scope of behavioral crisis and response in their communities.<sup>27</sup> Collecting data in a way that can be used among program administrators will be essential in supporting the success of the SCU and positive outcomes for the community. Moreover, during this project, it was impossible for RDA to conduct an “apples-to-apples” analysis between data from any of the contributing agencies (Police, Fire and Falck, MCT, Dispatch/Auditor’s Report) because the data entry practices across each agency are inconsistent. Specifically, the variables that each agency records for each call response are not the same. In instances where there were similarities in the types of variables used between agencies, the values that they each used to enter or code their data were not comparable.

### Why does publishing data publicly matter?

Publishing data through Berkeley’s Open Data Portal could promote transparency around crisis response services, address community stakeholders’ distrust of the system, and keep the community informed about the SCU and the city’s crisis response services.

### Considerations for Implementation

- Multiple agencies are likely to engage in data collection that contributes to the SCU model. All data variables and definitions should be aligned to ensure system integration and data integrity, including:
  - CAD data
  - Additional 911 and Dispatch data (as applicable)
  - Alternative phone number data (as applicable)
  - SCU mobile team data
  - EHR data
  - CHR data
- Personnel will need ample training on data collection, including variable definitions and data entry processes, to ensure a high degree of data integrity.
- Staff will need adequate technology to collect and report on data (*refer to recommendation #6*).

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<sup>27</sup> Velazquez, T & Clark-Moorman, K. (2021). New research suggests 911 call centers lack resources to handle behavioral health crises. *ResearchGate*.

[https://www.researchgate.net/publication/355684339\\_New\\_Research\\_Suggests\\_911\\_Call\\_Centers\\_Lack\\_Resources\\_to\\_Handle\\_Behavioral\\_Health\\_Crises](https://www.researchgate.net/publication/355684339_New_Research_Suggests_911_Call_Centers_Lack_Resources_to_Handle_Behavioral_Health_Crises)

**Recommendation #18**

## Implement care coordination case management meetings for crisis service providers.

Service utilizers often receive care across multiple agencies and individual service providers, but transparency and visibility of service utilizers that move in and out of these agencies is a challenge. Regular case management coordination meetings across organizations and providers could help to address the perceived lack of coordination across different services and to improve the care coordination for service utilizers, such as those discharged from inpatient facilities.

**Who should participate:**

- SCU mobile team
- Service providers and case managers identified through CHR and EHRs
- Partners and those receiving referrals at CBOs
- A designated meeting coordinator (e.g., SCU program manager, city staff)

**What the meetings should achieve:**

- Discuss care for shared service utilizers
- Discuss needs of high service utilizers, services provided
- Discuss successes or challenges with warm handoffs and referral pathways

**How is care coordination relevant to crisis response?**

Care coordination supports providers in making informed decisions about the services to provide and can prevent future crisis. Throughout the project's qualitative data collection, service providers in Berkeley commonly provided the idea of care coordination meetings between the SCU and providers; they expressed that if their clients access SCU crisis services, they would benefit from collaborating with the SCU. The REACH Edmonton program also shared that meetings for frontline workers to discuss shared clients increased positive client outcomes. Finally, Berkeley's Transitional Outreach Team (TOT) shared challenges they have encountered when providing follow-up care after MCT responds to an incident, especially communicating with the many external providers that interact with a single service utilizer.

**Why is there a coordinator role in these meetings? Who is that?**

Based on the lessons learned from other cities implementing alternative crisis response models, such as the REACH Edmonton and Denver STAR programs, care coordination meetings will require a centralized coordinator or leader from the SCU. Frontline workers do not have the capacity to manage these meetings, which includes scheduling, note taking, preparing data, following up on items as necessary, and other duties. The care coordinator may be an administrative staff member of the SCU, such as the program manager, or a staff member from the City of Berkeley who oversees many of the relevant contracted providers (beyond the SCU).

### Considerations for Implementation:

- These meetings will require a clear owner to manage meeting topics, prepare data, identify non-urgent items for follow-up, and ensure equitable power and time talking, especially for peer specialists. The SCU program manager may be best poised for this role.
- Integrated data systems that allow for sharing data and reviewing case history across providers would enhance care coordination and case management (*refer to recommendation #16*).
- There may be a benefit to call takers joining these meetings if they identify and document who is in crisis.

## Recommendation #19

# Implement centralized coordination and leadership across city agencies to support the success of mental health crisis response.

Overall, programs benefit from ensuring there are one or more people responsible for coordinating the program at a birds-eye view. As a new mental health crisis response initiative, the SCU model will require cross-system coordination for implementing new processes, training, monitoring, and evaluation. Moreover, because these initiatives span across Dispatch and/or an alternative phone number, the SCU mobile team, and other referral entities like Fire, Police, MCT, TOT, and mental health and social service providers, a centralized coordinating body will be essential to the success of this far-reaching initiative.

### Who should participate:

- Berkeley Dispatch
- Berkeley Department of Public Health
- Berkeley Mental Health (BMH)
- Berkeley Health, Housing & Community Services Department (HHCS)
- SCU Program Manager
- Berkeley Fire Department
- Berkeley Police Department
- Other relevant parties as the project evolves

### What the meetings should achieve:

- Progress along the phases of implementation
- Lead the rapid assessment processes and regularly review data
- Review SCU Steering Committee feedback
- Review service utilizer and stakeholder feedback
- Prioritize issues
- Make decisions

### Additional outcomes:

- Increase open communication across city agencies
- Build trust across crisis responders and city departments
- Align all partners on shared values for increasing community health and well-being

### Why is the Berkeley Police Department involved in this leadership body if the SCU is a non-police response?

Because the police currently respond to all mental health calls received through 911, any decision about shifting specific call and service types from police to SCU will require BPD buy-in, communication, and planning. Moreover, Dispatch is currently situated within BPD, and therefore, BPD leadership will be required to assess and approve changes to Dispatch. For instance, to ensure that all SCU data is kept confidential and separate from police, BPD will need to support planning for CAD data to integrate with SCU in a compliant manner. Finally, police may be able to request SCU deployment, so these types of protocols will need BPD's input.

### Considerations for Implementation:

- These meetings will need a clear owner to schedule meeting times, prioritize agenda topics, prepare data, identify non-urgent items for follow-up, and coordinate follow-up communication to relevant stakeholders.
- A data dashboard will support data review and rapid assessment processes.
- Some agencies may have strong bargaining presence or positional power, such as BPD. It is important that these meetings uphold equitable power and weight in making decisions.
- Throughout Phase 0 and Phase 1, this group may need to meet on a weekly basis.
- Additional stakeholders may need to be added to this group (permanently or ad hoc for specific topics), such as representatives from emergency departments, John George Psychiatric Hospital, or other city or county stakeholders.
- As the model progresses, this group may discuss opportunities to improve the mental health crisis system at a broader scale, beyond the scope of the SCU's crisis response, such as more inter-county and inter-city coordination on systemic issues related to housing.

**Recommendation #20**

## Continue the existing SCU Steering Committee as an advisory body.

Presently, the SCU Steering Committee has representatives with ties to community groups and stakeholders. The SCU Steering Committee should continue as an advisory body to incorporate into decision-making spaces the perspectives that may otherwise be neglected in government spaces.

The SCU Steering Committee should continue to advocate for marginalized communities in the SCU model design and delivery by taking on an advisory role through Phase 0 and Phase 1 of implementation, at a minimum.

**The current participants should remain, if they choose, including:**

- Berkeley Community Safety Coalition
- Representatives from the Mental Health Commission
- HHCS staff
- BMH staff
- Berkeley Fire

**Additional participants should be added, including:**

- Relevant staff from the SCU or administrative CBO, such as the program manager or clinical supervisor
- Dispatch personnel, particularly someone in a leadership position who can both promote change and holds expertise relevant to implementation

### Considerations for Implementation

- HHCS staff should maintain the role of coordinating the SCU Steering Committee, even if a contracted CBO leads the SCU, because HHCS will lead other aspects of oversight including contract management.
- Additional participants may be added to the SCU Steering Committee at different times. For example, Dispatch personnel should join earlier in Phase 0 of implementation, while SCU personnel will join once that team is fully staffed in Phase 1.



**Recommendation #21**

## Solicit ongoing community input and feedback.

Governments often face barriers in hearing from community members that are the most structurally marginalized. However, engaging existing coalitions and networks designed to represent marginalized service users' perspectives can support more equitable engagement. Intentional outreach for these opportunities is essential because, historically, government institutions and other structures have prevented the full and meaningful engagement of Black people, Indigenous people, people of color, working class and low-income people, immigrants and undocumented people, people with disabilities, unhoused people, people who use drugs, people who are neurodivergent, LGBTQ+ people, and other structurally marginalized people. Prioritizing the engagement, participation, and recommendations of the community members most harmed by existing institutions, including those most harmed by police violence, will ensure that systems of inequity are not reproduced by a crisis response model.

Instead, community engagement can support the SCU to address structural inequities. In addition to the SCU Steering Committee, ongoing opportunities for the community to provide input to decisions as well as feedback about their experiences will be valuable to the SCU model throughout Phase I.

**Suggested methods to receive community input and feedback:**

- Focus groups
- Town halls or community forums
- On-site outreach
- Questionnaire
- Online feedback "box"

**Modalities should ensure equitable access to participation:**

- Online and in person
- Large groups, small groups, and one-on-one
- Anonymous
- Written and verbal
- Translation and interpretation

**Encourage participation among:**

- Service utilizers
- Community members with mental health and behavioral health needs who have not yet engaged with the SCU
- Service providers at CBOs, especially those receiving SCU transports and referrals

**Address structural barriers to participation by:**

- Using convenient, accessible, and geographically diverse locations
- Offering events at varying times to accommodate different schedules
- Providing financial compensation
- Providing childcare

**Why is more community engagement needed if community input informed the model?**

The robust community engagement that contributed significantly to the development of this model demonstrates the valuable perspective and knowledge held by community members about the types of services needed and how to make them more accessible and acceptable. Soliciting ongoing feedback once the SCU is launched will provide insight to how well the model is meeting community members' needs and where barriers to crisis care persist, servicing both quality improvement and evaluative needs.

**Why should ongoing community engagement be conducted?**

Community input and feedback should not be limited to the end of Phase 1 as part of a summative evaluation, but instead be ongoing to account for the changing landscape of SCU model implementation and the needs of both service utilizers and the broader community. It will also support ongoing iteration of the SCU throughout Phase 1, while planning for more complex modifications in Phase 2.

**Considerations for Implementation**

- The opportunities for community input and feedback should be held regularly, such as monthly, or quarterly.
- Frequent service utilizers, perhaps identified during the SCU's first three months of implementation, could be the primary recruitment base for feedback.
- Address barriers to equitable participation in feedback, such as by providing childcare, transportation vouchers, or financial compensation for time.
- Community feedback should be evaluated as essential data points that directly inform the rapid assessment processes (*refer to recommendation #22*).

**Recommendation #22****Adopt a rapid monitoring, assessment, and learning process.**

Many crisis response programs use data to monitor their ongoing progress and successes, modify and expand program pilots, and measure outcomes and impact to inform ongoing quality improvement efforts. Data collection, data system integration, centralized coordination across city leadership, the SCU Steering Committee, and ongoing input and feedback from community members and service utilizers (*recommendations #16, #17, #19, #20, and #21*) should all contribute to the monitoring that supports ongoing implementation, assessment, and iteration.

**A rapid assessment process will likely need to:**

- Develop a shared vision for the SCU model.
- Develop goals for the SCU model.
- Create assessment questions to guide the monitoring and learning process.\*
- Define indicators or measures.
- Use a mixed-methods approach, including quantitative programmatic data and feedback from service utilizers, staff, and other stakeholders.

**All model components will benefit from assessment, including:**

- Availability of the team, accessibility of Dispatch and/or alternative phone line, response time
- Services provided, expertise of mobile team, training
- Equipment, vehicles, and supplies
- Transport, service linkages and handoffs, partnerships with CBOs
- Case management meetings and centralized leadership coordination
- Data collection, data integration, data integrity, and data transparency
- Public awareness campaign

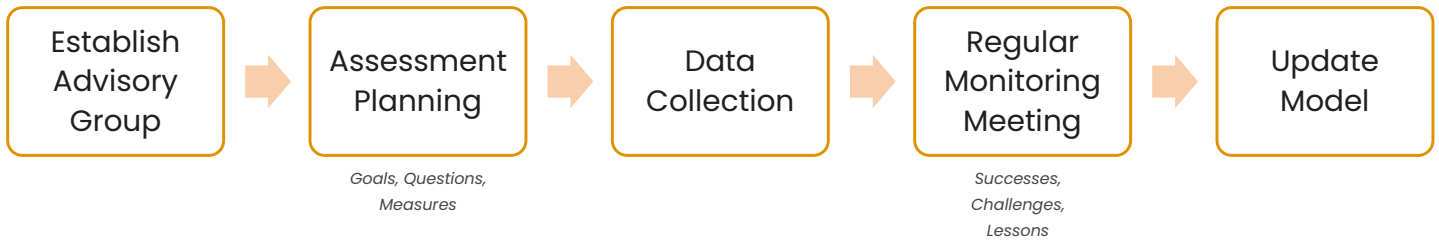
**Consider using the Results-Based Accountability (RBA) framework<sup>28</sup> to assess SCU performance aligned to:**

- Quantity of SCU services
- Quality of SCU services
- The impact or outcome of SCU services

\*From the shared vision, create assessment questions to use throughout the duration of Phase 1, such as:

- Is there a need to scale and increase services?
- Are resources being used efficiently in the pilot? Will they be used efficiently with an increase in services?
- How effective is the current approach? Will it be effective with an increase in services?
- Is the current approach appropriately tailored to the Berkeley community? Is it appropriate for the Berkeley community?

<sup>28</sup> The City of Berkeley is using RBA for performance monitoring efforts and therefore may benefit from using RBA for the SCU model too.

**Figure 4: Rapid Monitoring, Assessment, and Learning Process**

A rapid monitoring, assessment, and learning process can happen in multiple venues. Some questions may be assessed on a quarterly basis, while others can happen on a monthly or weekly basis.

### Considerations for Implementation:

- The rapid assessment process will need to establish clear roles for leading the meetings and decision-making, especially between the SCU program manager and central coordinating leadership.
- The rapid assessment process will benefit from clear timelines and processes for reviewing data, discussing changes and adaptations, and sharing findings across relevant stakeholders.
- The rapid assessment process may have multiple processes or venues based on specific data points or meeting frequencies. Clarify who should be attending, such as Dispatch, the alternative phone number (if applicable), the SCU mobile team, HHCS leadership, and others.

**Recommendation #23**

## Conduct a formal annual evaluation.

Several components of the SCU – including the model’s services, the SCU mobile team’s training, the deployment determinations of Dispatch and/or the alternative phone line, and impacts and outcomes for service utilizers – offer potential for demonstrating the success of the model through formal evaluation. The evaluation should measure whether the SCU model is progressing towards the intended outcomes, as well as suggest opportunities for modifications and expansion. Design of a formal, annual evaluation is best done early in program planning.

**Evaluation may define:**

- A Theory of Change or Logic Model
- Short-term and medium-term goals

**Evaluation could measure:**

- Fiscal analysis, especially evaluation of progress towards the City’s aim of reducing BPD’s budget by 50%
- Systems change effectiveness, including evaluation of progress towards City’s goal of reducing the footprint of BPD to criminal and imminent threats
- Program efficacy/effectiveness, quality of service
- Service utilizer outcomes
- Ongoing barriers and challenges that Phase 2 can address
- Effectiveness of public awareness campaign, whether community members know about it
- Impacts aligned to a Racial Equity Impact Assessment<sup>29</sup>

**Evaluation should include:**

- Qualitative and quantitative data
- Perspectives from SCU personnel
- Perspectives from service utilizers
- Perspectives from adjacent organizations, staff, and SCU Steering Committee

**How is the proposed evaluation different than rapid monitoring?**

Evaluation and rapid monitoring, or quality improvement, are complementary and should inform each other. Rapid monitoring is intended for more immediate quality improvement and occurs on more frequent cycles to guide iterative implementation of specific model elements. Evaluation asks broader questions from a greater degree of distance to guide adjustments to the model that will support ongoing effectiveness and sustainability. Staff are typically central to rapid monitoring to facilitate ongoing improvements, but an evaluation is generally conducted by an outside team that has some distance from day-to-day operations.

**Considerations for Implementation**

- If the City of Berkeley intends to contract out the evaluation, then the RFP and contracting process should be initiated early in Phase 0 to allow for adequate planning.

<sup>29</sup> To learn more about Racial Equity Impact Assessments, visit:

[https://www.raceforward.org/sites/default/files/RacialJusticeImpactAssessment\\_v5.pdf](https://www.raceforward.org/sites/default/files/RacialJusticeImpactAssessment_v5.pdf)

## Promoting Public Awareness

Promoting public awareness of the SCU and its aims will be essential to the SCU's success. Public education efforts should be advanced through a variety of methods, including a far-reaching campaign and targeted outreach. These efforts should emphasize that the SCU is a non-police crisis response service and promote how to access the SCU (i.e., which phone number to call). Overall, promoting public awareness is essential to building trust and addressing fears or reluctance that might inhibit people to call for support during a mental health or substance use crisis.

Promoting awareness and establishing relationships with other providers in the response network is also important, especially staff at emergency facilities who may interact with the SCU during the transport of a person who has experienced a mental health or substance use crisis. This type of relationship-building and education can streamline processes to promote positive outcomes for people in crisis.

The following recommendations should be adapted and implemented to advance public education and awareness about the SCU model:



### Key Recommendations

- 24. Launch a public awareness campaign to promote community awareness and education about the SCU.**
- 25. The SCU mobile team should conduct outreach and build relationships with potential service utilizers.**

## Recommendation #24

### Launch a public awareness campaign to promote community awareness and education about the SCU.

For the community to be able to call for an SCU response, they must know that it exists. Stakeholder input throughout this project has indicated that community members must trust that the SCU provides a crisis response without the use of law enforcement for the SCU to be a viable and sought-after crisis response option. For these reasons, promoting public awareness of the SCU and its aims will be essential to the SCU's success.

#### Aims of the campaign:

- Emphasize the SCU as a non-police mental health and crisis response option
- Distinguish the roles and responses of SCU, MCT, and police
- Promote how to access the SCU (i.e., through 911, an alternative number, or 988)
- Describe when SCU will not respond (e.g., social monitoring, weapons) and when it will (e.g., types of services).
- Emphasize the community engagement that informed the model
- Share the availability of Berkeley Open Data
- Promote opportunities for ongoing stakeholder input and feedback

#### Why is it important to launch a public awareness campaign?

To inform the community of this new resource and to distinguish the SCU as a non-police response. Stakeholder input throughout this project has indicated that community members must trust that the SCU provides a crisis response without the use of law enforcement for the SCU to be a viable and sought-after crisis response option.

#### How do other cities promote their crisis response model?

Other cities provided examples of promoting awareness outside of mass media. For example, Portland's Street Response team contracts with street ambassadors with lived experience (via a separate contract with a local CBO) who perform direct outreach to communities and work to explain the team's services and ultimately increase trust with potential service utilizers.

#### Considerations for Implementation

- The methods of the campaign may need to be tailored to the targeted stakeholder groups and may include:
  - Mass media, billboards, advertisements on public transportation, radio announcements, local newspaper announcements, updates to the city's social media and websites, updates to service providers' and CBOs' social media.
  - Business cards with contact information for potential service utilizers.
  - "Meet-and-greets" that the SCU mobile team hosts with service providers at CBOs and emergency facilities.
- The public awareness campaign may have multiple phases, such as first promoting awareness of the SCU and how to access it, and then promoting opportunities for stakeholder feedback.

**Recommendation #25**

## The SCU mobile team should conduct outreach and build relationships with potential service utilizers.

In addition to a public awareness campaign that promotes the SCU as a community resource, shares how to access the SCU, and emphasizes the non-police design, many service utilizers may still be reluctant to engage with a new entity. As a result, to most equitably meet the needs of potential service utilizers and especially substance users, the SCU may need to conduct in-person outreach. This outreach should be targeted to specific groups who are most likely to call the SCU with the aim of establishing trusting relationships and sharing more about their harm reduction approaches.

**Targeted sites for relationship building with potential service utilizers:**

- Encampments
- Safe parking RV lots
- Drop-in centers
- Downtown Berkeley
- People's Park
- Emergency department waiting rooms

**Why might service utilizers be reluctant to engage in services with the SCU?**

Many community members have personally experienced the criminalization of substance use and mental health emergencies, whether through their own experiences or having witnessed the experiences of family, friends, or community members. Such carceral approaches include involuntary psychiatrist holds and unnecessary transport to hospitals. In particular, unsheltered residents and substance users may be more distrustful of a new team and be less likely to call during a crisis. In interviews, unsheltered residents shared that not all of their substance use management are being adequately addressed by current crisis responders and they experience high rates of transport to emergency departments. Many also shared that they fear police retaliation for their substance use. In general, there are several reasons why community members may be hesitant about engaging crisis responders, which could be addressed by individual, relational outreach.

**Why would relationship building improve utilization of the SCU?**

Despite many service utilizers reporting overall distrust of first responders, they also shared that EMTs have developed trusting relationships and strong rapport for handling overdoses. Because of this relationship, service utilizers are more willing to call for an EMT to respond to an overdose. Similarly, having strong relationships built on trust will be key to the success of the SCU.

**Considerations for Implementation**

- If there are periods of low call volume, the SCU may use those times as opportunities to build relationships in communities of potential service utilizers and proactively provide services.
- This outreach may also be implemented based on data and findings or in preparation for Phase 2 expansion and changes.





## System-Level Recommendations

The development of a mental health crisis response model as a component of the City of Berkeley's emergency services should be understood as a systems-change initiative of great magnitude. There are several critical factors that must be attended to in order to realize the full implementation of the SCU and to progress towards its intended outcomes.

### Addressing the Needs of Dispatch

There is an urgent need for a 24/7 mental health and substance use crisis response model that does not rely on law enforcement to provide specialized mental health care. To provide this service, crisis responders must be connected to those in crisis. Thus, the role of Dispatch is essential.

Dispatch needs a full assessment and planning process to address the complexity of the 911 response system. This assessment and planning, though urgent, cannot be done hastily. The SCU will benefit if Dispatch is able to:

- Address the understaffing, under-resourcing, and identified training needs of call takers.
- Plan for a sustainable integration.
- Plan for a variety of scenarios to ensure crisis responder and community safety.
- Participate in the SCU phased-implementation approach and ongoing collaboration with SCU leadership.
- Establish trusting relationships and rapport with the SCU so that call takers are confident in deploying the SCU for scenarios they previously would have deployed MCT or Police.

## A Sufficient Investment of Resources

A lack of sufficient resources is not only a challenge for Dispatch, but is a common challenge expressed by service providers in Berkeley and in other locales. Within the City of Berkeley, both TOT and MCT have challenges meeting the needs of community members because their hours of operation are limited, and they do not have enough staffing and resources to provide 24/7 services. This results in the perception of slow or delayed response times and can decrease the likelihood that callers continue to seek that service. Efforts in other cities, such as the Mental Health First and MACRO initiatives in Oakland and the Street Crisis Response Team in San Francisco, have also had to restrict their hours of availability and services due to a lack of sufficient funding.

Mental health crisis response could be essential in promoting health equity in the City of Berkeley. However, if it is not sufficiently resourced to provide 24/7 crisis response without long wait times, it will not achieve trust, and will become utilized less often and will therefore not achieve the desired systems-change results. This resourcing includes not only the SCU mobile crisis team, but the entirety of the model and related infrastructure, from the call center to program manager. Sufficient resourcing also includes dedicated time by city leadership to support coordination, collaboration, and problem-solving.

## The Role of Trust

Trust was one of the most discussed factors across stakeholder engagement and will be a critical ingredient to the success of this system-wide change initiative. The public awareness campaign and all Phase 0 planning processes must address the concerns and doubts that could undermine trust across community stakeholders, the service provider network, and city leadership.

**Trust will shape whether community members utilize the SCU.** Community members must trust that the SCU:

- Is a non-police crisis response.
- Is accessible and available 24/7.
- Is responsive to emerging needs and ongoing community input and feedback.
- Provides competent harm reduction and non-carceral approaches to mental health and substance use crisis intervention.

**Trusting relationships affect the quality of referrals, warm handoffs, and service linkages across the service provider network.** Service providers emphasized that trust plays a role in:

- Whether they will refer a client to another provider.
- The amount and type of information they disclose about a shared client.
- Whether systems will choose to share and integrate data.

- The quality of collaboration and communication during warm handoffs, care coordination, or at client discharge.

**Trusting relationships are essential to centralized coordination and collaboration among city leadership.**

The SCU model will require a variety of agencies and departments to work together in new ways and toward new ends. Other cities implementing alternative crisis models shared that trust was enhanced across leadership by:

- Aligning on shared values and commitment to improving health outcomes for people in crisis.
- Recognizing and adapting to the varied cultures of city departments, agencies, and CBOs.
- Ensuring decision-making power is allocated in alignment with the aims of the crisis model, such as ensuring that law enforcement does not have an unaligned or inequitable of voice or power in making decisions.
- Reviewing data to promote accountability and celebrate successful outcomes.
- Planning for sufficient time to prepare and participate in collaboration.



## Conclusion: Next Steps & Future Considerations

This report presents recommendations for a model that is responsive to community needs. Still, there were numerous questions, issues, needs, and considerations that surfaced that were beyond the scope of the project. Decisions around those factors could significantly shape the types of services the SCU provides as well as how it is coordinated and administered across agencies. Such considerations are pertinent to the future of the SCU, crisis response, and the mental health service system in Berkeley, and therefore should continue to be discussed by city leadership and those implementing the SCU.

### Long-Term Sustainable Funding

The SCU model requires long-term sustainable funding. A sound fiscal strategy must recognize the robustness of costs associated with the SCU and plan for institutionalizing and sustaining those costs. There are a number of potential funding sources for the SCU model, including Medi-Cal reimbursement, Medi-Cal opportunities through CalAIM, and DHCS grants. However, these funding streams are unlikely to sustain a crisis response model on their own. Other funding and resources may need to be braided into the SCU to effectively implement this model.

While braiding allows for maximizing funding resources, it also requires clear and separate tracking of services based on funding sources and requirements. With multiple funding streams, the target populations, reporting requirements, eligibility criteria, and performance measures can vary greatly. A braided funding model, therefore, requires knowledgeable administrators as well as dedicated time to manage. This can be especially resource-intensive for a CBO implementing the SCU. The SCU model will need to be very clear about the funding requirements and develop an appropriate system for ongoing tracking and reporting.

Different financing mechanisms provide varying levels of sustainability and predictability, considerations which should inform the development of a fiscal strategy for the SCU model. Unfortunately, these recommendations may not be fully realized if there is not a long-term sustainable fiscal strategy. Modifications to the SCU model could negatively impact the quality of service delivery or lessen the population impact.

Across the country, some cities have used a sales tax to fund their alternative crisis response models while others have redirected funds away from police departments. Rather than identifying new or short-term grant awards, a primary consideration for the City of Berkeley should be to look to dollars that can be reinvested from the Berkeley Police Department, in alignment with the Reimagining Public Safety initiative, to develop a sustainable and comprehensive SCU model.

## Continue Planning for 24/7 Live Phone Access to the SCU

Significant planning will be required to fully realize the 24/7 live phone access to the SCU (*refer to recommendations #8, 9, and 10*). Reaching out to existing call centers—such as Alameda County CSS—or to other cities implementing similar crisis models could support the development of the phone access to the SCU. Additional planning is needed to determine, at a minimum:

- Equipment and technology needs
- Staffing requirements for the estimated call volume
- Recruitment, hiring, and training
- Workflow and protocol development
- Cost and funding availability

## The Location of 911 Dispatch Within the Berkeley Police Department

The 911 Communications Center is currently operated by the Berkeley Police Department. This structure affects how Dispatch is funded and who makes decisions. As the role of Dispatch is broadened to coordinate a greater variety of responses to emergencies, there may be advantages to moving Dispatch outside of the Berkeley Police Department, such as improved communication and coordination across relevant agencies. For instance, it has been expressed that Dispatch call takers are currently more comfortable deploying the police than other crisis responders given their long tenure and rapport with police officers, so call takers' ability to establish rapport with the SCU team is needed for them to be comfortable deploying the SCU. Structural changes like this may also align to several of the Reimagining Public Safety initiative's aims. This consideration can be explored as part of the assessment and planning processes of the phased implementation approach.

## Preventing Social Monitoring: Clarifying the SCU's Guiding Principles

The SCU model is designed to ensure that mental health specialists respond to people experiencing mental health crises. However, there is significant and justified concern that the SCU could be co-opted to support the social monitoring and enforcement of unsheltered residents. Clarifying the SCU's guiding principles could support in reifying the intentions of the model to ensure that all practices are aligned with those principles.

There are several elements within the model design where data, ongoing conversation, and service utilizer feedback can ensure that the SCU lives out its intention. One such example is whether and how the SCU would be deployed with the police and/or how the SCU is distinguished from MCT. For example, if a caller reports an unsheltered neighbor is residing on their sidewalk or driveway, this may not qualify for an SCU response. However, if that call is deployed to the police, then the response effectively criminalizes unsheltered Berkeley residents. Such scenarios should be explored as the SCU model is implemented, refined, and expanded.

## Address the Full Spectrum of Mental Health and Substance Use Crisis Needs

Mental health and substance use crises vary in severity along a spectrum. A crisis can present as someone in immediate danger to themselves or others, someone who needs regular support to address their basic needs, or someone who is generally able to manage their needs but needs occasional support to prevent a future crisis.

Throughout this project, many stakeholders expressed that in order to effectively address the challenges of the current system, solutions and changes must engage with the nuances and spectrum of mental health crises:

- Some forms of crisis are readily visible while others are not.
- Some forms of neurodivergence are reported as a mental illness or crisis, but they are not.
- Some forms of crisis occur because the person is unable to access services to meet their needs.
- Some forms of emergency service utilization stem from ongoing unmet basic needs such as food and affordable housing.

Stakeholder participants urged that the concept and definition of a mental health crisis and crisis services be expanded to not only support crisis intervention but also prevention, diversion, and follow-up. The following two considerations should be further explored because they may support the SCU model. Both considerations represent a form of

reimagined public safety and may be realized with additional resources, such as funds divested from Berkeley Police Department:

### **Expand the SCU Model to Include a Follow-up Care and Coordination Team**

There will likely be a need for a team to receive referrals from the SCU mobile team and connect with service utilizers for follow-up care. Follow-up care could include referrals, system navigation, and case management support. This team may also need to conduct outreach to make contact with service utilizers and address barriers to care as needed. For example, some service utilizers may be unable to follow through with a referral if they do not have reliable access to transportation or experience challenges maintaining scheduled appointments. This team could potentially be funded by the 988 funding allocated to dedicated follow-up teams deployed from 988 crisis call centers.<sup>30</sup>

There are many lessons that should be learned from the existing Transitional Outreach Team (TOT), such as challenges they face with adequate staffing and funding or constraints and limitations with who they can serve. Any initiatives around follow-up care should augment rather than duplicate the TOT.

### **Increase the Number of Sites for Non-emergency Care for Berkeley Residents**

Throughout this project, stakeholder participants emphasized the need for sites for non-emergency care, such as drop-in centers, day centers, sobering sites, and respite centers. These services are important for harm reduction and crisis prevention, and as such would support the outcomes of the SCU model. There may be opportunities in Phase 0 or Phase 1 to reserve beds at a shelter or similar care facility as a temporary measure, ensuring persons in crisis have access to these beds after engaging with the SCU. However, increasing the overall number of sites for non-emergency care would require a longer-term investment

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<sup>30</sup> Santos, M (2021). New suicide prevention hotline aims to divert callers from police. *Crosscut*. <https://crosscut.com/politics/2021/07/new-suicide-prevention-hotline-aims-divert-callers-police>

 **Appendix**



## Appendix A: Launch Timeline & Phased Implementation Approach

### Phase 0 – Launch Timeline

Nov 2021 – May 2022

| System-Level: Planning, Launch, Implementation |                                                                                             | HHCS | Steering Committee | Dispatch | Contracted CBO |
|------------------------------------------------|---------------------------------------------------------------------------------------------|------|--------------------|----------|----------------|
|                                                | Engage community on feedback to SCU Model recommendations                                   | X    | X                  |          |                |
|                                                | Engage community on SCU RFP requirements                                                    | X    |                    |          |                |
| Dec                                            | Dispatch leadership communicates and champions (internally) the SCU change-initiative       |      |                    | X        |                |
|                                                | Plan for Dispatch assessment (e.g., determine if RFP needed)                                | X    |                    | X        |                |
| Jan                                            | Make decisions about 24/7, live phone line to SCU (option A, B, C)                          | X    | X                  | X        |                |
| Feb                                            | Issue RFP for SCU                                                                           | X    |                    |          |                |
|                                                | <i>Issue RFP for SCU alternative phone line (TBD)</i>                                       | X    |                    |          |                |
|                                                | RFP Deadline                                                                                |      |                    |          |                |
| Mar                                            | Review all RFPs                                                                             | X    | X                  |          |                |
|                                                | Select awardee for SCU                                                                      | X    | X                  |          |                |
|                                                | Begin planning for site visits                                                              | X    |                    | X        | X              |
| Apr                                            | Contract process for SCU                                                                    | X    |                    |          |                |
| May                                            | Hire SCU personnel (mobile team, supportive and administrative roles, Dispatch/phone staff) |      |                    |          | X              |
|                                                | Hire mental health clinician to support Dispatch assessment & planning                      | X    |                    | X        |                |
|                                                | Build relationships across all new personnel                                                | X    | X                  | X        | X              |
| June - Aug                                     | <i>Plan &amp; Implement Recommendations: Refer to Phase 0 Implementation Approach</i>       |      |                    |          |                |

| Phased Implementation Approach                                                                              | Phase 0                                                                                                                                                                                                                                                                                                                                               |                                                      | Phase 1                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Phase 2                                                                           | Future, Beyond Phase 2 |
|-------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|------------------------|
|                                                                                                             | Nov 2021 - Aug 2022                                                                                                                                                                                                                                                                                                                                   |                                                      | Implementation<br>Sept 2022 - Aug 2023                                                                                                                      | Planning for Phase 2<br>Sept 2023 - Feb 2024                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Feb 2024+                                                                         |                        |
| <b>SCU Mobile Team Recommendations</b>                                                                      |                                                                                                                                                                                                                                                                                                                                                       |                                                      |                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                   |                        |
| 1 The SCU should respond to mental health crises and substance use emergencies without a police co-response | Clarify specific factors and codes for all suggested SCU call types<br><br>Develop triage criteria and workflows across all SCU call-types and services.<br><br>Coordinate with other entities (BPD, MCT, UCPD) for differentiation and/or collaboration.                                                                                             | <i>SCU mobile team goes live, providing services</i> |                                                                                                                                                             | Consider additional types of calls for service that they can respond to where armed police officers are not needed or aligned to a reimagined definition of public safety, such as:<br><br>- Completing documentation while providing crisis services where a traditional "police report" is needed, such as in cases of sexual assault, sexual harassment, and rape<br>- Petty theft<br>- Nonviolent conflicts, such as neighbor disputes or youth behavioral issues<br>- Minor assaults, with no weapons present<br>- Proactive support at events that may trigger a crisis (e.g., during an encampment sweep) | Integrate other SCU model elements (e.g., follow-up care team [Report Section V]) |                        |
| 2 The SCU should operate 24/7                                                                               |                                                                                                                                                                                                                                                                                                                                                       |                                                      |                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                   |                        |
| 3 Staff a 3-person SCU mobile team to respond to mental health and substance use emergencies                |                                                                                                                                                                                                                                                                                                                                                       |                                                      |                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                   |                        |
| 4 Equip the SCU Mobile Team with vans                                                                       | Procure vans                                                                                                                                                                                                                                                                                                                                          |                                                      |                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                   |                        |
| 5 The SCU Mobile Team should provide transport to a variety of locations                                    | Introduce SCU to emergency facility staff at all transport destinations                                                                                                                                                                                                                                                                               |                                                      |                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                   |                        |
| 6 Equip the SCU mobile team with supplies to meet the array of clients' needs                               | Procure supplies                                                                                                                                                                                                                                                                                                                                      |                                                      |                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                   |                        |
| 7 Clearly distinguish the SCU from MCT                                                                      | Develop clear roles and parameters for SCU and MCT teams by collaborating across Dispatch, the SCU Steering Committee, the current MCT team, and other relevant leadership<br><br><i>Note: These decisions are essential for developing triage criteria and workflows and for communicating to the general public in a public awareness campaign.</i> |                                                      | Evaluate the role of MCT and the efficacy of having both teams.<br><br>Make recommendations for Phase 2, such as changes to each team's scope or processes. | Communicate to general public and relevant service providers about changes relevant to the distinguished roles of MCT and SCU                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                   |                        |

| Phased Implementation Approach                                                                                             | Phase 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                         | Phase 1                                                                                                                                                                                                                                                                                           |                                                                                 | Phase 2   | Future, Beyond Phase 2                                                                                                                                                  |
|----------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|-----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                                                            | Nov 2021 - Aug 2022                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                         | Implementation<br>Sept 2022 - Aug 2023                                                                                                                                                                                                                                                            | Planning for Phase 2<br>Sept 2023 - Feb 2024                                    | Feb 2024+ | 2                                                                                                                                                                       |
| <b>Accessing the SCU Crisis Response</b>                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                   |                                                                                 |           |                                                                                                                                                                         |
| 8 Participate in the Dispatch assessment and planning process to prepare for future integration                            | <p>Decide the most effective method for 24/7, live phone access to the SCU (Option A, B, C)</p> <p>Dispatch makes investments in staffing and technologies, as needed</p> <p>SCU model discusses with Dispatch the necessary data (variables, definitions, timelines, privacy, etc.) to be collected during each Phase of implementation</p> <p>Dispatch begins planning for changes to CAD or other data systems</p>                                                                                                                                                                                                                                                                                | <p>Dispatch makes investments in staffing and technologies, as needed</p> <p><i>Dispatch implements Phase 1 protocols, as determined by Phase 0 planning (Option A, B, C)</i></p>                                                                                                                       | <p>Implement new triage criteria and workflows</p>                                                                                                                                                                                                                                                |                                                                                 |           |                                                                                                                                                                         |
| 9 Ensure the community has a 24/7 live phone line to access the SCU                                                        | <p>Implement and adapt 24/7, live phone line access to SCU (Option A, B, C)</p> <p>Adapt protocols for other Berkeley crisis responders (Fire, EMS/Falck, MCT, Police) to request SCU support through the alternative phone number</p> <p>Dispatch and HHCS/SCU identify opportunities for Phase 1 implementation (based on Option A, B, C), such as:<br/>                     - Phase 1 call types for SCU deployment OR preliminary calls that Dispatch will transfer to the alternative phone line in early Phase 1 (e.g., welfare checks)<br/>                     - Dispatch supports alternative phone line to develop aligned triage criteria and workflows to support future integration</p> | <p><i>If Option B or C:<br/>                     Plan for how calls will be triaged and prioritized from the two separate sources (alternative number and 911) in deploying the SCU mobile teams in Phase 2</i></p>                                                                                     | <p>Determine if the SCU should respond to crises by sight ("proactive" deployment and intervention)</p> <p>Determine if the SCU should self-deploy by listening to the police radio (based on other models: Eugene's CAHOOTS, Denver's STAR, and San Francisco's Street Crisis Response Team)</p> | <p><i>If Option B or C:<br/>                     Integrate SCU into 911</i></p> |           |                                                                                                                                                                         |
| 10 Plan for embedding a mental health or behavioral health clinician(s) into Dispatch to support triage and SCU deployment | <p>Dispatch hires one clinician to support the Dispatch assessment process and to support triage criteria and workflow development for calls routed to SCU</p> <p>Clinician attends trainings and site observations with Dispatch and SCU</p> <p>Clinician(s) supports planning for triage criteria, call-types, etc. (as relevant: Option A, B, C may affect timing of this)</p> <p><i>If Option A:<br/>                     Dispatch prepares for fully embedding clinician(s), including clarifying their roles and supervision structure</i></p> <p><i>If Option B or C: implement this in Phase 2</i></p>                                                                                       | <p>Clinician(s) support Dispatch based on the assessment findings and next steps, such as:<br/>                     - supervises call-takers triaging mental health crisis calls<br/>                     - provides trainings to call-takers based on 2019 Auditor's Report and ongoing assessment</p> |                                                                                                                                                                                                                                                                                                   |                                                                                 |           | <p>Assess whether clinician(s) can provide services beyond SCU deployment, including basic telemedicine and psychiatric screenings or psychiatric crisis assessment</p> |

**Phased Implementation Approach**

|                                                                                                                                                                                                                                | Phase 0<br>Nov 2021 - Aug 2022                                                                                                                                                                                                                                                                                                                       | Phase 1                                |                                              | Phase 2<br>Feb 2024+ | Future, Beyond Phase<br>2 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|----------------------------------------------|----------------------|---------------------------|
|                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                      | Implementation<br>Sept 2022 - Aug 2023 | Planning for Phase 2<br>Sept 2023 - Feb 2024 |                      |                           |
| <b>Implement a Comprehensive, 24/7 Mental Health Crisis Response Model</b>                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                      |                                        |                                              |                      |                           |
| <p>Fully staff a comprehensive model to ensure the success of the SCU mobile team, including supervisory and administrative support roles for SCU</p> <p>11 Operate one SCU mobile team per shift for three 10-hour shifts</p> |                                                                                                                                                                                                                                                                                                                                                      |                                        |                                              |                      |                           |
| <p>12 Operate one SCU mobile team per shift for three 10-hour shifts</p>                                                                                                                                                       | <p>incorporate into training itineraries to allow for these periods of travel and training.<br/><i>Note: City of Berkeley and/or the contracted CBO may need to reach out to the other cities and programs to solidify travel and training plans prior to the hiring of any individual personnel.</i></p>                                            |                                        |                                              |                      |                           |
| <p>13 SCU staff and Dispatch personnel should travel to alternative crisis programs for in-person observation and training</p>                                                                                                 | <p>Allot time after the site visit(s) for debriefing, reflecting on lessons learned, and discussing how to integrate key takeaways into the SCU model.</p> <p>Include in debrief and planning conversations personnel that traveled for site observations, HHCS staff, additional Dispatch leadership, and Steering Committee members as needed.</p> |                                        |                                              |                      |                           |
| <p>14 Prepare the SCU mobile team with training, informed by community needs</p>                                                                                                                                               | <p>Plan the training schedule based on community needs, ongoing assessment and planning, and prerequisite skills and experiences of hired personnel</p>                                                                                                                                                                                              |                                        |                                              |                      |                           |

| Phased Implementation Approach                                                                                                    | Phase 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                        | Phase 1                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                | Phase 2   | Future, Beyond Phase 2                                                                                                                                                                                |
|-----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|-----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                                                                   | Nov 2021 - Aug 2022                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                        | Implementation<br>Sept 2022 - Aug 2023                                                                                                                                                                                                                                                                                                                                                                                                              | Planning for Phase 2<br>Sept 2023 - Feb 2024                   | Feb 2024+ | 2                                                                                                                                                                                                     |
| <b>Administration and Evaluation</b>                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                |           |                                                                                                                                                                                                       |
| 15 Contract the SCU Model to a CBO                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Extend contract and provide funding for Phase 2, as applicable |           | Determine if the SCU can be administered through the City of Berkeley, elevating it to the status of Police and Fire as an essential citywide emergency service and ensuring long-term sustainability |
| 16 Integrate SCU into existing data systems                                                                                       | Assess feasibility of data integration across various systems and sources: assess system capacity needs to realize integration, seek consultation on legal issues surrounding patient protections and sharing health data across providers<br><br>Evaluate implications for Recommendation 18 (care coordination case management meetings) based on feasibility and adaptations from this recommendation (Recommendation 16)<br><br>Maintain and strengthen data privacy before SCU is integrated with Dispatch (given that Dispatch is situated within Berkeley Police and that many health conditions can be criminalized and prosecuted) |                                                                        | Continue: Assess feasibility of data integration across various systems and sources: assess system capacity needs to realize integration, seek consultation on legal issues surrounding patient protections and sharing health data across providers<br><br>Coordinate with Alameda County Care Connect to plan for bi-directional data feeds with the Community Health Record (CHR)<br><br>Plan for access to EHRs and other relevant data systems |                                                                |           |                                                                                                                                                                                                       |
| 17 Collect and publish mental health crisis response data publicly on Berkeley's Open Data Portal                                 | Coordinate with City of Berkeley to add new data to Portal<br><br>Plan for how regularly data will be refreshed/updated on Portal                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Publish data regularly                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                |           |                                                                                                                                                                                                       |
| 18 Implement care coordination case management meetings for crisis service providers                                              | Involve all relevant agencies in planning to define, align, and adjust data definitions, variables, and collection practices. (e.g., 911-Dispatch, MCT, BPD, BFD, Falck, HHCS, SCU, etc.)<br><br>Engage potential participants to plan for Phase 1 implementation of care coordination case management meetings (identify and confirm participants, confirm meeting intervals, set meeting times, etc.)                                                                                                                                                                                                                                     | Convene and implement care coordination meetings                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                |           |                                                                                                                                                                                                       |
| 19 Implement centralized coordination and leadership across city agencies to support the success of mental health crisis response | Engage potential participants to plan for Phase 1 implementation of centralized coordination and leadership meetings (identify and confirm participants, confirm meeting intervals, set meeting times, etc.)                                                                                                                                                                                                                                                                                                                                                                                                                                | Convene and implement centralized coordination and leadership meetings |                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                |           |                                                                                                                                                                                                       |

| Phased Implementation Approach                                                                          | Phase 0                                                                                                                                                                                                                                                                     | Phase 1                                                                                                                |                                                | Phase 2   | Future, Beyond Phase 2 |
|---------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-----------|------------------------|
|                                                                                                         | Nov 2021 - Aug 2022                                                                                                                                                                                                                                                         | Implementation<br>Sept 2022 - Aug 2023                                                                                 | Planning for Phase 2<br>Sept 2023 - Feb 2024   | Feb 2024+ | 2                      |
| <i>Administration and Evaluation (continued)</i>                                                        |                                                                                                                                                                                                                                                                             |                                                                                                                        |                                                |           |                        |
| 20 Continue the existing SCU Steering Committee as an advisory body                                     | Identify additional Steering Committee members<br><br>Invite and engage new members<br><br>Adapt processes, group norms and agreements, and/or meeting schedules, as relevant<br>Decide on methods and intervals for collecting community input and feedback during Phase 1 | Hold regular meetings of SCU Steering Committee; incorporate decision-making processes across other Recommendations    |                                                |           |                        |
| 21 Solicit ongoing community input and feedback                                                         | Develop a plan to communicate the opportunities for community and feedback; incorporate into public awareness campaign                                                                                                                                                      | Solicit ongoing community input and feedback; incorporate decision-making processes across other Recommendations       |                                                |           |                        |
| 22 Adopt a rapid monitoring, assessment, and learning process                                           | Plan for the evaluation and rapid assessment processes to use overlapping data and be mutually-supportive and streamlined<br><br>Plan for all data definitions and collection processes to be aligned across rapid assessment and evaluation aims.                          | Ensure that the evaluation findings are available for the latter six-months of Phase 1 to support planning for Phase 2 | Review evaluation findings<br>Plan for Phase 2 |           |                        |
| 23 Conduct a formal, annual evaluation                                                                  | Plan for public awareness campaign, including targeted modalities, targeted audiences, and/or phased timing<br><br>Launch public awareness campaign                                                                                                                         | Continue public awareness campaign, as necessary                                                                       |                                                |           |                        |
| 24 Launch a public awareness campaign to promote community awareness and education about the SCU        | Conduct targeted outreach and establish trusting relationships between SCU and community members, promoting utilization of SCU                                                                                                                                              | Continue targeted outreach and build relationships as necessary                                                        |                                                |           |                        |
| 25 The SCU mobile team should conduct outreach and build relationships with potential service utilizers |                                                                                                                                                                                                                                                                             |                                                                                                                        |                                                |           |                        |

## Appendix B: Sample Shift Structure & Redundancy Needs

| Model Component | Phase   | Staffing Needs | Shift Type    | M                     | T                     | W                     | Th                    | F                     | Sa                    | Su                    | No. of shifts (week 1) | No. of shifts (week 2) | No. of staff per unit | No. of units | No. of FTE needed | Notes |                                           |
|-----------------|---------|----------------|---------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|------------------------|------------------------|-----------------------|--------------|-------------------|-------|-------------------------------------------|
| SCU             | Phase 1 | Shift 1        | 10-hour shift | mobile unit A         | mobile unit A         | mobile unit A         | mobile unit B         | mobile unit E         | mobile unit E         | mobile unit E         | mobile unit a          | 3                      | 4                     | 3            | 6                 | 18    | Assumes one mobile unit per shift         |
|                 |         | Shift 2        | 10-hour shift | mobile unit B         | mobile unit B         | mobile unit B         | mobile unit C         | mobile unit F         | mobile unit F         | mobile unit F         | mobile unit b          | 4                      | 3                     | 3            |                   |       | Assumes a three-person mobile unit        |
|                 |         | Shift 3        | 10-hour shift | mobile unit C         | mobile unit C         | mobile unit C         | mobile unit D         | mobile unit D         | mobile unit D         | mobile unit D         | mobile unit c          | 4                      | 3                     | 3            |                   |       | Six clinicians, six peers, six therapists |
|                 |         |                |               |                       |                       |                       |                       |                       |                       |                       | mobile unit d          | 4                      | 3                     | 3            |                   |       |                                           |
|                 |         |                |               |                       |                       |                       |                       |                       |                       |                       | mobile unit e          | 3                      | 4                     | 3            |                   |       |                                           |
|                 |         |                |               |                       |                       |                       |                       |                       |                       |                       | mobile unit f          | 3                      | 4                     | 3            |                   |       |                                           |
| SCU             | Phase 1 | Shift 1        | 10-hour shift | clinical supervisor A | clinical supervisor A | clinical supervisor A | clinical supervisor B | clinical supervisor E | clinical supervisor E | clinical supervisor E | clinical supervisor A  | 3                      | 4                     | 1            | 6                 | 6     |                                           |
|                 |         | Shift 2        | 10-hour shift | clinical supervisor B | clinical supervisor B | clinical supervisor B | clinical supervisor C | clinical supervisor F | clinical supervisor F | clinical supervisor F | clinical supervisor B  | 4                      | 3                     | 1            |                   |       |                                           |
|                 |         | Shift 3        | 10-hour shift | clinical supervisor C | clinical supervisor C | clinical supervisor C | clinical supervisor D | clinical supervisor D | clinical supervisor D | clinical supervisor D | clinical supervisor C  | 4                      | 3                     | 1            |                   |       |                                           |
|                 |         |                |               |                       |                       |                       |                       |                       |                       |                       | clinical supervisor D  | 4                      | 3                     | 1            |                   |       |                                           |
|                 |         |                |               |                       |                       |                       |                       |                       |                       |                       | clinical supervisor E  | 3                      | 4                     | 1            |                   |       |                                           |
|                 |         |                |               |                       |                       |                       |                       |                       |                       |                       | clinical supervisor F  | 3                      | 4                     | 1            |                   |       |                                           |

|                        |         |                |               |                          |                          |                          |                          |                          |                          |                          |                          |   |     |   |   |   |                                                                                                                                                       |
|------------------------|---------|----------------|---------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|---|-----|---|---|---|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| SCU                    | Phase 1 | shift business | 8-hour shift  | program manager          | program manager          | program manager          | program manager          | program manager          | -                        | -                        | program manager          | 5 | n/a | 1 | 1 | 1 | Assumes mobile unit peers are supervised by clinical supervisor during shift; this specialist is for other professional supports for Peer Specialists |
|                        |         | shift business | 8-hour shift  | peer supervisor          | peer supervisor          | peer supervisor          | peer supervisor          | peer supervisor          | -                        | -                        | peer supervisor          | 5 | n/a | 1 | 1 | 1 |                                                                                                                                                       |
|                        |         |                |               |                          |                          |                          |                          |                          |                          |                          |                          |   |     |   |   |   |                                                                                                                                                       |
| Alternative Phone Line | Phase 1 | Shift 1        | 12-hour shift | call team A              | call team A              | call team A              | call team B              | call team D              | call team D              | call team D              | call team a              | 3 | 4   | 2 | 4 | 8 | Assumes two call receptionists per shift                                                                                                              |
|                        |         | Shift 2        | 12-hour shift | call team B              | call team B              | call team B              | call team C              | call team C              | call team C              | call team C              | call team b              | 4 | 3   | 2 |   |   |                                                                                                                                                       |
|                        |         |                |               |                          |                          |                          |                          |                          |                          |                          | call team c              | 4 | 3   | 2 |   |   |                                                                                                                                                       |
|                        |         |                |               |                          |                          |                          |                          |                          |                          |                          | call team d              | 3 | 3   | 2 |   |   |                                                                                                                                                       |
|                        |         |                |               |                          |                          |                          |                          |                          |                          |                          |                          |   |     |   |   |   |                                                                                                                                                       |
| Dispatch               | Phase 0 | shift business | 8-hour shift  | BH/MH triage clinician   | BH/MH triage clinician   | BH/MH triage clinician   | BH/MH triage clinician   | BH/MH triage clinician   | -                        | -                        | BH/MH triage clinician   | 5 | n/a | 1 | 1 | 1 |                                                                                                                                                       |
|                        | Phase 1 | Shift 1        | 12-hour shift | BH/MH triage clinician A | BH/MH triage clinician A | BH/MH triage clinician A | BH/MH triage clinician A | BH/MH triage clinician C | BH/MH triage clinician C | BH/MH triage clinician C | BH/MH triage clinician A | 4 | 3   | 1 | 4 |   | Assumes one clinician per dispatch shift                                                                                                              |



|  |         |               |                            |                            |                            |                            |                            |                            |                            |                            |   |   |   |  |  |  |  |
|--|---------|---------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|---|---|---|--|--|--|--|
|  | Shift 2 | 12-hour shift | BH/MH triage clinic<br>n B | BH/MH triage clinic<br>n B | BH/MH triage clinic<br>n B | BH/MH triage clinic<br>n B | BH/MH triage clinic<br>n D | BH/MH triage clinic<br>n D | BH/MH triage clinic<br>n D | BH/MH triage clinic<br>n B | 4 | 3 | 1 |  |  |  |  |
|  |         |               |                            |                            |                            |                            |                            |                            |                            | BH/MH triage clinic<br>n C | 3 | 4 | 1 |  |  |  |  |
|  |         |               |                            |                            |                            |                            |                            |                            |                            | BH/MH triage clinic<br>n D | 3 | 4 | 1 |  |  |  |  |

## Appendix C: Budget

| Salaries, wages, benefits               | FTE  | Salary        | Cost/Year              | Notes                                                                                    | Source                                                                                                                                                                                                                                                            |
|-----------------------------------------|------|---------------|------------------------|------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>BH Licensed Clinician / Psych-NP</b> | 6    | \$ 178,000.00 | \$ 1,068,000.00        | JobsEQ "Nurse Practitioner"                                                              | JobsEQ Mean Annual Wages for San Francisco-Oakland-Bay Area                                                                                                                                                                                                       |
| <b>Mental Health Peer Specialist</b>    | 6    | \$ 77,500.00  | \$ 465,000.00          | JobsEQ "Health Education Specialists"                                                    | JobsEQ Mean Annual Wages for San Francisco-Oakland-Bay Area                                                                                                                                                                                                       |
| <b>BH Licensed Therapist / LCSW</b>     | 6    | \$ 85,800.00  | \$ 514,800.00          | JobsEQ "Mental Health and Substance Abuse Social Worker"                                 | JobsEQ Mean Annual Wages for San Francisco-Oakland-Bay Area                                                                                                                                                                                                       |
| <b>Clinical Supervisor</b>              | 6    | \$ 178,000.00 | \$ 1,068,000.00        | JobsEQ "Nurse Practitioner"; unable to find accurate salaries for a supervisory position |                                                                                                                                                                                                                                                                   |
| <b>Peer Specialist Supervisor</b>       | 1    | \$ 85,800.00  | \$ 85,800.00           | unable to find accurate salary range; using LCSW range                                   |                                                                                                                                                                                                                                                                   |
| <b>Program Manager</b>                  | 1    | \$ 105,000.00 | \$ 105,000.00          |                                                                                          |                                                                                                                                                                                                                                                                   |
| <b>Phase 0 Dispatch MH/BH Clinician</b> | 1    | \$ 105,782.00 | \$ 105,782.00          | "SUPERV PUBLIC SFTY DISP"                                                                | <a href="https://www.cityofberkeley.info/uploadedFiles/Human_Resources/Level_3_-_General/ClassificationAndSalaryListingByTitle.pdf">https://www.cityofberkeley.info/uploadedFiles/Human_Resources/Level_3_-_General/ClassificationAndSalaryListingByTitle.pdf</a> |
| <b>Subtotal</b>                         |      |               | \$ 3,412,382.00        | Total FTE Salary                                                                         |                                                                                                                                                                                                                                                                   |
| <b>Subtotal</b>                         |      |               | \$ 853,095.50          | Fringe Benefits, 25%                                                                     |                                                                                                                                                                                                                                                                   |
| <b>Total Salary + Benefits</b>          |      |               | <b>\$ 4,265,477.50</b> |                                                                                          |                                                                                                                                                                                                                                                                   |
| <b>Ongoing materials and services</b>   |      |               | <b>Cost/Year</b>       | <b>Notes</b>                                                                             |                                                                                                                                                                                                                                                                   |
| <b>Evaluation</b>                       |      |               | \$ 185,000.00          | Used cost of RDA feasibility study as estimate                                           |                                                                                                                                                                                                                                                                   |
| <b>Vehicle maintenance</b>              | 4    | \$ 20,000.00  | \$ 80,000.00           | Estimate provided by Berkeley Fire                                                       |                                                                                                                                                                                                                                                                   |
| <b>Advertisement &amp; PR</b>           | 12   | \$ 2,000.00   | \$ 24,000.00           | Includes community education workshops, advertising, outreach and engagement             |                                                                                                                                                                                                                                                                   |
| <b>Small equipment &amp; supplies</b>   | 1200 | \$ 20.00      | \$ 24,000.00           | Wound care, hygiene, harm reduction, meals, transportation vouchers,                     |                                                                                                                                                                                                                                                                   |

|                                                                 |    |              |                        |                                                                                                                                                                                 |  |
|-----------------------------------------------------------------|----|--------------|------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
|                                                                 |    |              |                        | <i>clothing, blankets, etc.<br/>Based on SF SCRT data, assumes 100 contacts with clients per month, \$20 per client contact; SF SCRT budgeted 10k and said they needed more</i> |  |
| <b>Office supplies and postage</b>                              | 12 | \$ 200.00    | \$ 2,400.00            |                                                                                                                                                                                 |  |
| <b>Communications</b>                                           | 12 | \$ 600.00    | \$ 7,200.00            |                                                                                                                                                                                 |  |
| <b>Printing and copying</b>                                     | 12 | \$ 100.00    | \$ 1,200.00            |                                                                                                                                                                                 |  |
| <b>Travel and transportation</b>                                | 12 | \$ 100.00    | \$ 1,200.00            | <i>Local travel for care coordination &amp; meetings</i>                                                                                                                        |  |
| <b>Training and meetings</b>                                    | 12 | \$ 1,000.00  | \$ 12,000.00           | <i>Equity, team dynamics, and other ongoing training</i>                                                                                                                        |  |
| <b>Licenses/fees/subscriptions</b>                              | 12 | \$ 50.00     | \$ 600.00              |                                                                                                                                                                                 |  |
| <b>Insurance</b>                                                |    |              | \$ -                   |                                                                                                                                                                                 |  |
| <b>Contract services</b>                                        |    |              | \$ -                   |                                                                                                                                                                                 |  |
| <b>Legal services</b>                                           |    |              | \$ -                   |                                                                                                                                                                                 |  |
| <b>Audit and consulting</b>                                     |    |              | \$ -                   |                                                                                                                                                                                 |  |
| <b>Utilities</b>                                                |    |              | \$ -                   |                                                                                                                                                                                 |  |
| <b>Facilities</b>                                               |    |              | \$ -                   |                                                                                                                                                                                 |  |
| <b>Subtotal</b>                                                 |    |              | \$ 337,600.00          | <i>ongoing materials and services</i>                                                                                                                                           |  |
| <b>Subtotal: Personnel and non-personnel recurring subtotal</b> |    |              | \$ 4,603,077.50        |                                                                                                                                                                                 |  |
| <b>Administrative overhead</b>                                  |    |              | \$ 276,184.65          | <i>6% for all recurring costs</i>                                                                                                                                               |  |
| <b>Total recurring cost</b>                                     |    |              | <b>\$ 4,879,262.15</b> |                                                                                                                                                                                 |  |
|                                                                 |    |              |                        |                                                                                                                                                                                 |  |
| <b>One time cost</b>                                            |    |              | <b>Cost/Year</b>       | <b>Notes</b>                                                                                                                                                                    |  |
| <b>Vehicle</b>                                                  | 5  | \$ 60,000.00 | \$ 300,000.00          | <i>Assume 60k per van with wheelchair capacity</i>                                                                                                                              |  |
| <b>Recruitment</b>                                              | 27 | \$ 4,000.00  | \$ 108,000.00          | <i>Median national average of recruiting new employee</i>                                                                                                                       |  |

|                                                                           |   |             |                        |                                                                                                                                               |
|---------------------------------------------------------------------------|---|-------------|------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Training (SCU staff and Dispatch)</b>                                  |   |             | \$ 75,000.00           | Assume training for all Dispatch, BPD, Fire, MCT, & SCU staff; both program onboarding and emerging best practices related to crisis response |
| <b>Technology (computers, phones, etc.)</b>                               |   |             | \$ 25,000.00           | Laptop/tablets, cell phones for all staff, MiFi, portable chargers                                                                            |
| <b>Rapid assessment</b>                                                   |   |             | \$ 40,000.00           | Evaluation planning meetings, data request development, community-input meetings                                                              |
| <b>Community outreach and education (including materials development)</b> |   |             | \$ 25,000.00           | Curriculum development, materials, advertisement, outreach (SF SCRT hired consultant to do this work)                                         |
| <b>Subtotal</b>                                                           |   |             | \$ 573,000.00          |                                                                                                                                               |
| <b>Administrative overhead</b>                                            |   |             | \$ 34,380.00           | 6% for all one-time costs                                                                                                                     |
| <b>Total one-time cost</b>                                                |   |             | <b>\$ 607,380.00</b>   |                                                                                                                                               |
|                                                                           |   |             |                        |                                                                                                                                               |
| <b>Recommendations</b>                                                    |   |             | <b>Cost/Year</b>       | <b>Notes</b>                                                                                                                                  |
| <b>Signing bonus</b>                                                      | 7 | \$ 5,000.00 | \$ 35,000.00           | Signing bonus recommended for licensed clinical staff                                                                                         |
| <b>Technical Assistance</b>                                               |   |             | \$ 15,000.00           | Consultation from existing similar alternative models                                                                                         |
|                                                                           |   |             |                        |                                                                                                                                               |
|                                                                           |   |             |                        |                                                                                                                                               |
| <b>Total additional recommendations</b>                                   |   |             | <b>\$ 50,000.00</b>    |                                                                                                                                               |
|                                                                           |   |             |                        |                                                                                                                                               |
| <b>Total cost with recommendations</b>                                    |   |             | <b>\$ 5,536,642.15</b> | Estimated cost for program and recommendations                                                                                                |
|                                                                           |   |             |                        |                                                                                                                                               |

## Appendix D: Anticipated Incident Volume

|                                                                      |                 | Potential Daily Incidents for SCU (Average) | Potential Incidents per <b>shift</b> for SCU (Average) |
|----------------------------------------------------------------------|-----------------|---------------------------------------------|--------------------------------------------------------|
| Average daily BMH-Crisis incidents (FY15-19)<br><i>MCT, TOT, CAT</i> | 10.73 incidents | 19.82                                       | 6.61                                                   |
| Average daily BPD MH Incidents (FY14-20)                             | 28.91 incidents |                                             |                                                        |
| Average time on task for transports BFD & Falck                      | 101.48 minutes  |                                             |                                                        |

|                                          | Denver <sup>31</sup><br>6 months, 1 team, not<br>citywide, not 24/7 | Portland <sup>32</sup><br>6 months, 1 team, not<br>citywide, not 24/7 | CAHOOTS <sup>33</sup><br>Annual, 1-2 teams, 24/7 |
|------------------------------------------|---------------------------------------------------------------------|-----------------------------------------------------------------------|--------------------------------------------------|
| Average incidents per shift              | 5.75                                                                | 3                                                                     | (Per hour) 1.81                                  |
| % incidents that resulted in a transport | 14.30%                                                              | 6.27%                                                                 | 23.38%                                           |
| % transports that were to the hospital   | 16.82%                                                              | 58.33%                                                                |                                                  |
| Average minutes on task                  | 24.65                                                               | 19.33                                                                 |                                                  |
| Reduction of BPD calls                   | 2.75%                                                               | 4.60%                                                                 | 5-8%                                             |

<sup>31</sup> STAR Program Evaluation (2021, January 08). [https://wp-denverite.s3.amazonaws.com/wp-content/uploads/sites/4/2021/02/STAR\\_Pilot\\_6\\_Month\\_Evaluation\\_FINAL-REPORT.pdf](https://wp-denverite.s3.amazonaws.com/wp-content/uploads/sites/4/2021/02/STAR_Pilot_6_Month_Evaluation_FINAL-REPORT.pdf)

<sup>32</sup> City of Portland

Bureau of Fire and Rescue (2021, October). Portland street response: Six-month evaluation. <https://www.portland.gov/sites/default/files/2021/psu-portland-street-response-six-month-evaluation-final.pdf>

<sup>33</sup> Eugene Police Department Crim Analysis Unit (2020, August 21). CAHOOTS program analysis. <https://www.eugene-or.gov/DocumentCenter/View/56717/CAHOOTS-Program-Analysis>





Office of the City Manager

CONSENT CALENDAR  
December 13, 2022

To: Honorable Mayor and Members of the City Council  
 From: Dee Williams-Ridley, City Manager  
 Submitted by: Lisa Warhuus, Director, Health, Housing and Community Services  
 Subject: Contract: Bonita House for Specialized Care Unit Provider

RECOMMENDATION

Adopt a Resolution authorizing the City Manager to execute a contract and any amendments with Bonita House (Contractor) to implement Berkeley's Specialized Care Unit for a two-year pilot. Services will begin on February 1, 2023 and extend to January 30, 2025 in an amount not to exceed \$4,500,000.

FISCAL IMPACTS OF RECOMMENDATION

Funding for this contract will be recommended for appropriation through the second amendment to the appropriations ordinance in the American Rescue Plan Act Fund (Fund 354) in the amount of \$4,250,000. Funding for this contract in the amount of \$250,000 is available in the FY2023 budget in the One-Time Grant Fund (Fund 336). The total not to exceed cost for this contract is \$4,500,000.

CURRENT SITUATION AND ITS EFFECTS

The Specialized Care Unit (SCU) is a Strategic Plan Priority Project, advancing our goal to champion and demonstrate social and racial equity. The City of Berkeley released a Request for Proposals (RFP) to contract with a community-based organization (CBO) to serve as and implement the SCU. The contracted CBO will implement the Specialized Care Unit model based on the recommendations provided by Resource Development Associates and the associated analysis from the SCU Steering Committee (Attachments 1 and 2).

The City conducted RFP Specification No. 22-11533-C with proposals due no later than August 23, 2022. A Bidder's Conference was held on July 18, 2022 with answers to questions subsequently published on the City's website. The City received three proposals. The selection committee was comprised of leadership and staff from the Department of Health, Housing and Community Services (HHCS) and the Berkeley Fire Department, as well as community members from the Mental Health Commission and Berkeley Community Safety Coalition.

## BACKGROUND

In response to the killing of George Floyd by Minneapolis police in May 2020 and the ensuing protests across the nation, a conversation emerged about how policing can be done differently. The Berkeley City Council initiated a wide-reaching process to re-imagine safety in the City of Berkeley. As part of the Re-Imagining Public Safety process, the City engaged in research and planning to implement a 24/7 SCU to respond to and support people who are experiencing a mental health or substance use crisis without direct involvement of the police. The SCU will be different than the City's current Mobile Crisis Team that is a partnership of HHCS' Mental Health Division (HHCS/MH) and the Police Department.

Design for the SCU began in Fall 2020 with contracted consultant, Resource Development Associates (RDA), and the establishment of the SCU Steering Committee, an advisory group of HHCS and Berkeley Fire Department staff as well as representation from the Berkeley Mental Health Commission and Berkeley Community Safety Coalition. The City of Berkeley, in partnership with RDA, conducted extensive community engagement and stakeholder analysis to determine a model that would best serve the Berkeley community. This work culminated in 25 recommendations for the implementation of the SCU (Attachment 1). These recommendations for implementation were subsequently evaluated by the SCU Steering Committee, with accompanying analysis to further create a SCU that would meet the community need in Berkeley (Attachment 2). These recommendations and accompanying analysis formed the scope of work, staffing plans, and operational considerations to implement the SCU.

## ENVIRONMENTAL SUSTAINABILITY AND CLIMATE IMPACTS

No environmental sustainability and climate impacts directly associated with this recommendation have been identified.

## RATIONALE FOR RECOMMENDATION

The City conducted a competitive bid process and Bonita House successfully met the bid requirements and ranked highest among all bidders given their demonstrated experience in the fields of crisis care provision, trauma informed harm reduction services, project management, and managing federal funds. Bonita House has detailed implementation plans and presents clear guiding principles for SCU services including the use of harm reduction techniques during substance use emergencies, trauma informed care in mental health emergencies, and coordination with the City of Berkeley in alignment with the recommendations in Attachments 1 and 2.

## ALTERNATIVE ACTIONS CONSIDERED

The City Council could choose not to proceed with SCU implementation, and reallocate the federal recovery funds to another local priority. Because that would not be consistent with prior Council action and community support, staff are not recommending that option.



CONTACT PERSON

Lisa Warhuus, Director, Health, Housing and Community Services, 510-981-5404

Attachments:

1: Resolution

2: City of Berkeley Specialized Care Unit Crisis Response Recommendations  
(Research Development Associates)

3: Information Report: Presentation and Discussion of Reports Submitted by  
Reimagining Public Safety Task Force and National Institute for Criminal Justice Reform

RESOLUTION NO. ##,###-N.S.

CONTRACT: BONITA HOUSE FOR SPECIALIZED CARE UNIT PROVIDER

WHEREAS the City of Berkeley passed an omnibus package to reimagine public safety, including the establishment of a Specialized Care Unit (SCU) to respond to nonviolent behavioral health calls, and

WHEREAS an extensive community and stakeholder engagement effort resulted in design and implementation recommendations from Resource Development Associates and the SCU Steering Committee, and

WHEREAS the City conducted RFP specification number 22-11533-C with proposals due no later than August 23, 2022, and

WHEREAS, the City received three proposals in response to this RFP, and

WHEREAS two finalists were invited to meet with the selection committee for a more in-depth review of their proposal and describe their past work with responding to mental health and substance use crises in the City of Berkeley, resulting in the selection of Bonita House as the best qualified community-based organization.

NOW THEREFORE, BE IT RESOLVED by the Council of the City of Berkeley that the City Manager is authorized to execute a contract and any amendments with Bonita House (Contractor) to implement Berkeley's Specialized Care Unit for a two-year pilot. Services will begin on February 1, 2023 and extend to January 30, 2025. Funding in the amount of \$4,250,000 will be recommended for appropriation through the second amendment to the appropriations ordinance in the American Rescue Plan Act Fund (Fund 354) and funding in the amount of \$250,000 is available in the FY2023 budget in the One-Time Grant Fund (Fund 336) for a total not to exceed of \$4,500,000.



# City of Berkeley

## Specialized Care Unit

### Crisis Response Recommendations



City of Berkeley

# **Specialized Care Unit (SCU) Crisis Response Recommendations**

Sarah Ferrell

Caroline de Bie

Sasha Gayle-Schneider

Amalia Egri Freedman

Nicole Gamache-Kocol

Jamie Dorsey

Kevin Wu

This report was developed by Resource Development Associates under contract with the City of Berkeley.

Resource Development Associates, 2021





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## Executive Summary

As part of the larger effort to Reimagine Public Safety, the City of Berkeley contracted with Resource Development Associates (RDA) to conduct a feasibility study for a Specialized Care Unit (SCU), an alternative mental health and substance use crisis response model that does not involve law enforcement.

This is the third of three distinct reports for this effort. The first report ([“Crisis Response Models Report”](#)) presents a summary of crisis response programs in the United States and internationally. The second report ([“Mental Health Crisis Response Services and Stakeholder Perspectives Report”](#)) is the result of engagement with stakeholders of the crisis system, including City of Berkeley and Alameda County agencies, local community-based organizations (CBOs), local community leaders, and utilizers of Berkeley’s crisis response services, and presents a summary of key themes to inform the SCU model.

This third report is intended to guide implementation of the SCU model and includes:

- Core components and guiding aims of the SCU model;
- Stakeholder and best practice-driven design recommendations;
- Considerations for planning and implementation;
- A phased implementation approach;
- System-level recommendations; and
- Future design considerations.

Each recommendation put forth in this report is deeply rooted in the stakeholder feedback included in the two previous reports. This report presents RDA’s recommendations based on this year-long project, which the City of Berkeley may adapt and adjust as necessary.

## Key Recommendations

1. The SCU should respond to mental health crises and substance use emergencies without a police co-response.
2. The SCU should operate 24/7.
3. Staff a three-person SCU mobile team to respond to mental health and substance use emergencies.
4. Equip the SCU mobile team with vans.
5. The SCU mobile team should provide transport to a variety of locations.
6. Equip the SCU mobile team with supplies to meet the array of clients' needs.
7. Clearly distinguish the SCU from MCT.
8. Participate in the Dispatch assessment and planning process to prepare for future integration.
9. Ensure the community has a 24/7 live phone line to access the SCU.
10. Plan for embedding a mental health or behavioral health clinician into Dispatch to support triage and SCU deployment.
11. Fully staff a comprehensive model to ensure the success of the SCU mobile team, including supervisory and administrative support.
12. Operate one SCU mobile team per shift for three 10-hour shifts.
13. SCU staff and Dispatch personnel should travel to alternative crisis programs for in-person observation and training.
14. Prepare the SCU mobile team with training.
15. Contract the SCU model to a CBO.
16. Integrate the SCU into existing data systems.
17. Collect and publish mental health crisis response data publicly on Berkeley's Open Data Portal.
18. Implement care coordination case management meetings for crisis service providers.
19. Implement centralized coordination and leadership across city agencies to support the success of mental health crisis response.
20. Continue the existing SCU Steering Committee as an advisory body.
21. Solicit ongoing community input and feedback.
22. Adopt a rapid monitoring, assessment, and learning process.
23. Conduct a formal annual evaluation.
24. Launch a public awareness campaign to promote community awareness and education about the SCU.
25. The SCU mobile team should conduct outreach and build relationships with potential service utilizers.



# Introduction

## Project Background

In response to the killing of George Floyd by Minneapolis police in May 2020 and the ensuing protests across the nation for this and many other similar tragedies, a national conversation emerged about how policing can be done differently in local communities. The Berkeley City Council initiated a wide-reaching process to reimagine safety in the City of Berkeley. As part of that process, in July 2020, the Council directed the City Manager to pursue reforms to limit the Berkeley Police Department's (BPD) scope of work to "primarily violent and criminal matters." These reforms included, in part, the development of a Specialized Care Unit (SCU) to respond to mental health crises without the involvement of law enforcement.

In order to inform the development of an SCU, the City of Berkeley contracted with Resource Development Associates (RDA) to conduct a feasibility study that includes community-informed program design recommendations, a phased implementation plan, and funding considerations.

## The Need for Specialized Mental Health Crisis Response

Just as a physical health crisis requires treatment from a medical professional, a mental health crisis requires response from a mental health professional. Unfortunately, across the country and in Berkeley, police are typically deployed to respond to mental health and substance use crises.

Without the proper infrastructure and resources in place, cities are unable to adequately meet the needs of people experiencing a mental health and/or substance use crisis. Relying on police officers to respond to the majority of mental health 911 calls endangers the safety and well-being of community members. Tragically, police are 16 times more likely to kill someone with a mental illness compared to those without a mental illness.<sup>1</sup> A November 2016 study published in the *American Journal of Preventative Medicine* estimated that 20% to 50% of fatal encounters with law enforcement involved an individual with a mental illness.<sup>2</sup> As a result, communities have begun to consider the urgent need for crisis response models that deploy mental health professionals rather than police. An analysis found that the 10 largest police departments in the U.S. paid out nearly 250 billion dollars in settlements in 2014, much of which were related to wrongful-

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<sup>1</sup> Szabo, L. (2015). People with mental illness 16 times more likely to be killed by police. *USA Today*. <https://www.usatoday.com/story/news/2015/12/10/people-mentalillness-16-times-more-likely-killed-police/77059710/>

<sup>2</sup> DeGue, S., Fowler, K.A., & Calkins, C. (2016). Deaths due to use of lethal force by law enforcement. *American Journal of Preventive Medicine*, 51(5), S173-S187. [https://www.ajpmonline.org/article/S0749-3797\(16\)30384-1/fulltext](https://www.ajpmonline.org/article/S0749-3797(16)30384-1/fulltext)



death lawsuits of people in a mental health crisis.<sup>3</sup> Law enforcement should not be the primary responders to mental health crises.

A 2012 Department of Justice report outlines that policing in the U.S. does not necessarily keep people safer but instead, militaristic policing causes more harm than good and disproportionately impacts communities of color. The report further assessed that over-policing requires more resources without producing benefits to public safety, draining resources that could otherwise be used for more effective public safety strategies.<sup>4</sup>

Nationally, the negative impacts of policing and police violence have been declared a public health issue.<sup>5</sup> Extensive data shows that aggressive policing is a threat to physical and mental health: inappropriate stops are associated with increased anxiety, depression, PTSD, or long-term health conditions like diabetes. In 2016, at least 76,440 nonfatal injuries due to law enforcement were reported and at least 1,091 deaths were reported. However, due to insufficient monitoring and surveillance of law enforcement violence, these statistics are underestimated.<sup>6</sup>

The impacts of policing disproportionately harm people of color, especially Black Americans, making policing an issue of racial justice. Police disproportionately stop, arrest, shoot, and kill Black Americans. Other marginalized populations, such as people with mental illness, people who identify as transgender, people experiencing homelessness, and people who use drugs, are also subjected to increased police stops, verbal and sexual harassment, and death.<sup>7</sup>

In California, Alameda County has the highest rate of 5150 psychiatric holds in the entire state,<sup>8</sup> which may indicate inadequate provision of mental health crisis services. Of those individuals placed on a 5150 psychiatric hold in Alameda County and transferred to a psychiatric emergency services unit, 75-85% of the cases did not meet medical necessity criteria to be placed in inpatient acute psychiatric care. This demonstrates an overuse of emergency psychiatric services in Alameda County. Such overuse creates challenges in local communities such as lengthy wait times for ambulance services which are busy

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<sup>3</sup> Elinson, Z. & Frosch, D. (2015). Cost of police-misconduct cases soars in big U.S. cities. *Wall Street Journal*. <https://www.wsj.com/articles/cost-of-police-misconduct-cases-soars-in-big-u-s-cities-1437013834>

<sup>4</sup> Ashton, P., Petteruti, A., & Walsh, N. (2012). Rethinking the blues: How we police in the U.S. and at what cost. *Justice Policy Institute, U.S. Department of Justice*. <https://www.ojp.gov/ncjrs/virtual-library/abstracts/rethinking-blues-how-we-police-us-and-what-cost>

<sup>5</sup> American Public Health Association. Addressing law enforcement violence as a public health issue. Policy number: 201811. 2018. <https://www.apha.org/policies-and-advocacy/public-health-policy-statements/policy-database/2019/01/29/law-enforcement-violence>.

<sup>6</sup> Ibid.

<sup>7</sup> Ibid.

<sup>8</sup> INN Plan – Alameda County: Community Assessment and Transport Team (CATT) (2018, October 25). *California Mental Health Services Oversight and Accountability Commission*.

[https://mhsoac.ca.gov/sites/default/files/documents/2018-10/Alameda\\_INN%20Project%20Plan\\_Community%20Assessment%20and%20Transport%20Team\\_8.6.2018\\_Final.pdf](https://mhsoac.ca.gov/sites/default/files/documents/2018-10/Alameda_INN%20Project%20Plan_Community%20Assessment%20and%20Transport%20Team_8.6.2018_Final.pdf)

transporting and discharging individuals on 5150 holds. The overuse of involuntary psychiatric holds can be traumatizing for people experiencing crisis, as well as for their friends and family.

The overuse of involuntary psychiatric holds is also an issue of racial justice. Police and ambulance workers have been found to bring Black patients with psychoses to psychiatric emergency service more frequently than non-Black patients with psychoses.<sup>9</sup> For example, in San Francisco, Black adults are overrepresented in psychiatric emergency services, relative to overall population size.<sup>10</sup>

Based on 911 call data from 2001 to 2003 in San Francisco, a study found that neighborhoods with higher proportions of Black residents generate relatively fewer mental health-related 911 calls. The authors suggest that underutilization of 911 by the Black community can result in delayed treatment, therefore increasing the risk posed to the health and safety of people in crisis and their communities. The study highlights the common distrust of law enforcement among communities of color. Such distrust and fear of law enforcement may mean that people of color do not trust that mental health-related calls will be handled appropriately if they seek support for a mental health crisis through 911. The study reinforced that “law enforcement officers’ role in the disposition of calls makes them de facto gatekeepers to safety net services for persons with mental disorders.”<sup>11</sup>

It is within this context that many Berkeley community members are calling for a more just, equitable, and health-focused crisis response system, in part due to the distrust of institutions of policing or those closely intertwined with police. A variety of stakeholder groups, including the Berkeley Mental Health Commission and the Berkeley Community Safety Coalition, have long advocated for a community-designed 24/7 crisis care model and to reduce the role of law enforcement in crisis response.

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<sup>9</sup> Kessell, E.R., Alvidrez, J., McConnell, W.A. & Shumway, M. (2009). Effect of racial and ethnic composition of neighborhoods in San Francisco on rates of mental health-related 911 calls. *Psychiatric Services*, 60(10), 1376-1378. <https://ps.psychiatryonline.org/doi/pdf/10.1176/ps.2009.60.10.1376>

<sup>10</sup> Ibid.

<sup>11</sup> Kessell, E.R., Alvidrez, J., McConnell, W.A. & Shumway, M. (2009). Effect of racial and ethnic composition of neighborhoods in San Francisco on rates of mental health-related 911 calls. *Psychiatric Services*, 60(10), 1376-1378. <https://ps.psychiatryonline.org/doi/pdf/10.1176/ps.2009.60.10.1376>

In a concurrent project for the City of Berkeley’s Reimagining Public Safety initiative, the National Institute for Criminal Justice Reform found that among many Berkeley residents, there is a lack of trust in and satisfaction with the Berkeley Police Department. They found that:<sup>12</sup>

- Non-White respondents were more likely to indicate that the Berkeley Police Department is not effective at all compared to White respondents;
- 17.1% of Black respondents and 7.6% of Latinx respondents reported that police had harassed them personally in comparison to only 4.3% of White respondents;
- Respondents are less likely to call 911 during emergencies related to mental health or substance use crisis (57.9%) in comparison to an emergency not involving mental health or substance use (86.2%); and
- Substantially more Black respondents indicated extreme reluctance to call 911 as compared with other groups.

Additionally, the report shared that across all respondents, 65.9% indicated a preference for trained mental health providers to respond to mental health and substance use emergencies “with support from police when needed” and 14.9% indicated a preference “with no police involvement at all.” In total, 80.8% of respondents indicated a preference for trained mental health providers to respond to calls related to mental health and substance use.<sup>13</sup>

Clearly, there is an urgent need for a more racially just, equitable, and health-focused mental health crisis response system. The SCU could be well poised to address these inequities by providing specialized mental health crisis intervention, de-escalation, and stabilization without the presence of law enforcement.

## Inputs to the Recommendations

This report includes core components and guiding aims of the SCU model, considerations for planning and implementing the SCU model, a phased implementation approach, stakeholder-driven design recommendations, system-level recommendations, and next steps and future design considerations. Each recommendation that RDA puts forth in this report is deeply rooted in the following sources of input:

- Crisis Response Models Report (Report 1 of this series of 3)
- Mental Health Crisis Response Services and Stakeholder Perspectives Report (Report 2 of this series of 3)
- Ongoing engagement with the SCU Steering Committee and the City’s Health, Housing & Community Services Department (HHCS)

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<sup>12</sup> National Institute for Criminal Justice Reform (2021). Reimagining public safety: Draft final report and implementation plan. [https://www.cityofberkeley.info/uploadedFiles/Clerk/Level\\_3\\_-\\_Commissions/Draft%20Final%20Report%20and%20Implementation%20Plan%20FNL%20DRFT%2010.30.21.pdf](https://www.cityofberkeley.info/uploadedFiles/Clerk/Level_3_-_Commissions/Draft%20Final%20Report%20and%20Implementation%20Plan%20FNL%20DRFT%2010.30.21.pdf)

<sup>13</sup> Ibid.

- Learnings from the simultaneous Reimagining Public Safety initiative
- Best practices research

The recommendations presented in this report are directly informed from the strengths, challenges, gaps in services, and lessons learned from crisis response programs around the country. Those considerations, however, must be uniquely tailored to the Berkeley community based on the existing crisis response system and the needs and perspectives of Berkeley residents. Together, the recommendations and implementation approaches presented here are informed by findings from the robust community engagement and citywide processes of the past year.

### **Crisis Response Models Report**

As part of this feasibility study, RDA reviewed the components of nearly 40 crisis response programs in the United States and internationally, including virtually meeting with 10 programs between June and July 2021. A synthesized summary of RDA’s findings, including common themes that emerged across the programs, how they were implemented, considerations and rationale for design components, and overall key lessons learned can be found in the [Crisis Response Models Report](#).

### **Mental Health Crisis Response Services and Stakeholder Perspectives Report**

With the guidance and support of the SCU Steering Committee, facilitated by the Director of City of Berkeley’s Health, Housing and Community Services Department (HHCS), RDA conducted a large volume of community and agency outreach and qualitative data collection activities in June and July 2021. Because BIPOC, LGBTQ+, unhoused, and other communities are disproportionately represented in public mental health and incarceration systems—particularly ones designed for punishment and sentencing to prisons—their input was sought to advance the goal of achieving health equity and community safety.

Crisis response service users described their routes through these systems, providing their perspectives about their experiences and how these experiences impact their lives in a way that other stakeholders are not able or qualified to do. The goal of the immense amount of outreach and qualitative data collection was to understand the variety of perspectives in the local community regarding how mental health crises are currently being responded to as well as the community’s desire for a different crisis response system that would better serve its population and needs. Such perspectives are necessary to improve the quality of service delivery and, moreover, to inform structural changes across the crisis response system.

The synthesis of the City of Berkeley’s current mental health crisis system and themes from qualitative data collection can be found in the [Mental Health Crisis Response Services and Stakeholder Perspectives Report](#)



# The SCU Model: Planning & Implementation

## Core Components

The recommendations presented in this report represent a model that is responsive to community needs, but as planning continues throughout 2021 and into 2022, new considerations and constraints may arise. As dynamics evolve and more information is obtained and assessed, the model must be flexible and adaptable. There are several components that should, however, remain core to the SCU model:

- The SCU responds to mental health and substance use crises.
- The SCU responds with providers specialized in mental health and substance use.
- The SCU model does not include police as a part of the crisis response.
- The SCU is not an adjunct to nor overseen by a policing entity (e.g., Police, Fire, or CERN<sup>14</sup>).

With these core components in mind, the SCU model and phased approach were designed to address the challenges, gaps in services, and community aspirations shared by numerous stakeholders throughout Berkeley. The SCU model seeks to:

- Address the urgent need for a non-police crisis response.
- Disrupt the processes of criminalization that harm Black residents and other residents of color, substance users, people experiencing homelessness, and others who experience structural marginalization.
- Increase the availability, accessibility, and quality of mental health crisis services.
- Provide quality harm reduction services for substance use emergencies.
- Strengthen collaboration and system integration across the crisis and wraparound service network.
- Be responsive to ongoing community feedback and experiences.
- Build and repair trust with community members and increase public awareness of newly available services.

## A System-wide Change Initiative

The development of a mental health crisis response model as a component of the City of Berkeley's emergency services should be understood as a systemwide change initiative of great magnitude. Developing a shared narrative around community health and well-being while reducing harm, trauma, and unnecessary use of force may build collective support for the SCU model across City of Berkeley agencies and departments. Other cities implementing non-police crisis response models found that garnering buy-in from other

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<sup>14</sup> Community Emergency Response Network (CERN) is a model recommended by the National Institute for Criminal Justice Reform through the Reimagining Public Safety process.

city or county departments requires collaboration from the earliest planning stages. Cities shared that when they focused these conversations about shared objectives between the crisis response program and the police, police began to see the program as a resource to them, as mental health professionals could often better handle mental health crises because of their training and backgrounds. Alignment on shared goals and values may support leadership across the City of Berkeley to identify and advance the best resource(s) for responding to mental health needs and substance use crises. An effective systemwide change initiative will also require all involved leaders to communicate and champion the shared vision.

The SCU model requires not only collaboration, but also structural changes and integration across other entities. For one, the SCU's ability to respond to crises relies in large part on the 911 Communications Center ("Dispatch"). However, in 2019, a Berkeley City Auditor's report<sup>15</sup> elevated that the understaffing of Dispatch has led to staffing levels that cannot meet the call volume of residents and has increased call wait times. Increased wait times for 911 callers have negative implications for the safety and well-being of service utilizers and community members. Increased wait times also have negative implications for service providers and crisis responders that are responding to a potentially more advanced state of crisis. Additionally, inadequate staffing levels rely on overtime spending to fund Dispatch, which increases the cost of the entity.

The Auditor's report also recommended increased training for Dispatchers to manage and respond to mental and behavioral health crisis calls, including the management of suicidal callers and persons with mental illness. The well-being and stress of call takers are also of concern. In all, if they are not addressed, such resource shortages and unmet training needs could have a significant impact on the SCU's success.

Other entities that will be affected by the implementation of the SCU model include Berkeley Fire, who responds to crises through Dispatch, and the Mobile Crisis Team (MCT), who provide mental health crisis services in partnership with the Berkeley Police Department. These entities, in addition to Dispatch and the SCU, will have to establish new working relationships and protocols to effectively serve the community together.

Dispatch is an immensely complex system. Integrating the SCU into such a system, while addressing staff capacity and training needs, will take significant planning and coordination, as well as funding. For these reasons, the recommendations for the planning and implementation of the SCU model are laid out in a phased implementation approach to allow for sufficient preparation of Dispatch while providing urgently needed mental health crisis response to community members.

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<sup>15</sup> Berkeley City Auditor. (2019, April 25). 911 Dispatchers: Understaffing Leads to Excessive Overtime and Low Morale. [https://www.cityofberkeley.info/uploadedFiles/Auditor/Level\\_3\\_-\\_General/Dispatch%20Workload\\_Fiscal%20Year%202018.pdf](https://www.cityofberkeley.info/uploadedFiles/Auditor/Level_3_-_General/Dispatch%20Workload_Fiscal%20Year%202018.pdf)



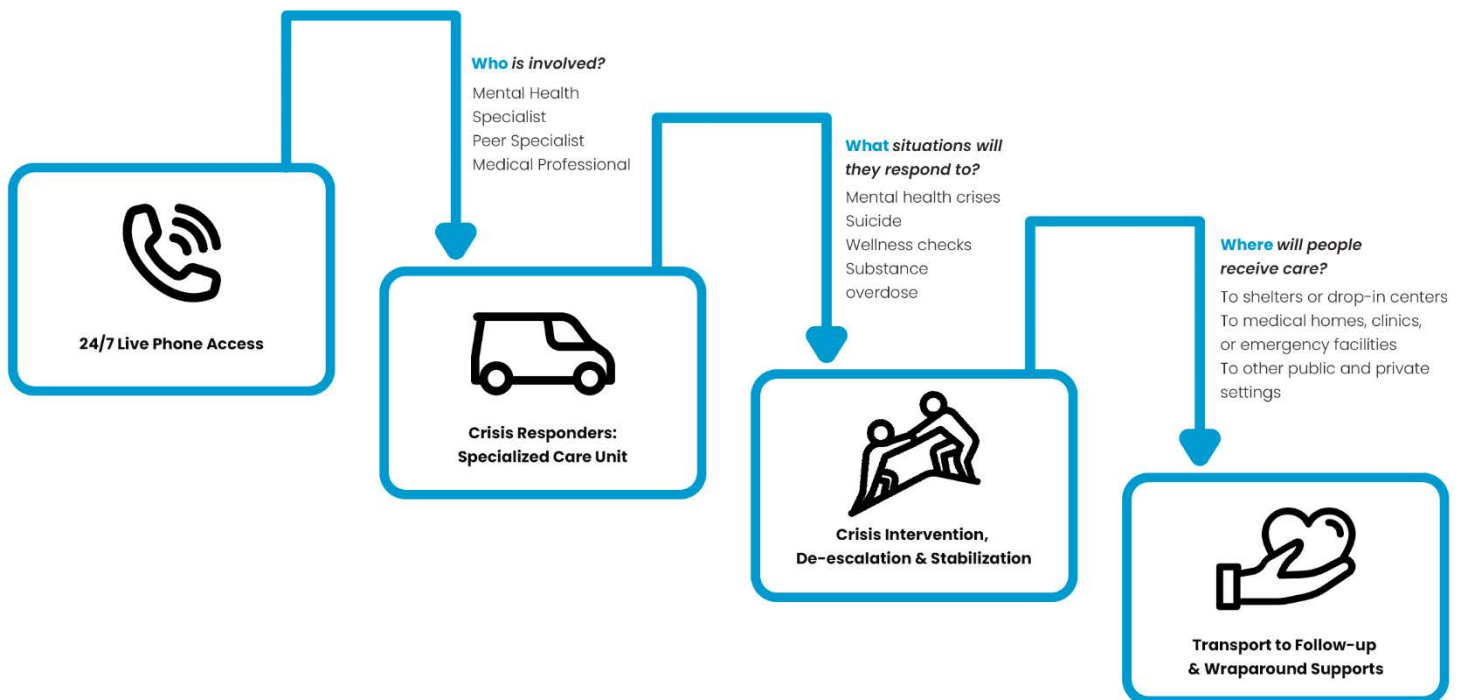
## Recommendations

### Overview

This report presents recommendations that address what is required for SCU model. Figure 1, below, provides an overview of the specialized care unit's response. Figure 2 shows the many components required for a comprehensive 24/7 SCU model.

### The Specialized Care Unit: Crisis Response

**Figure 1: An overview of the SCU crisis response.**



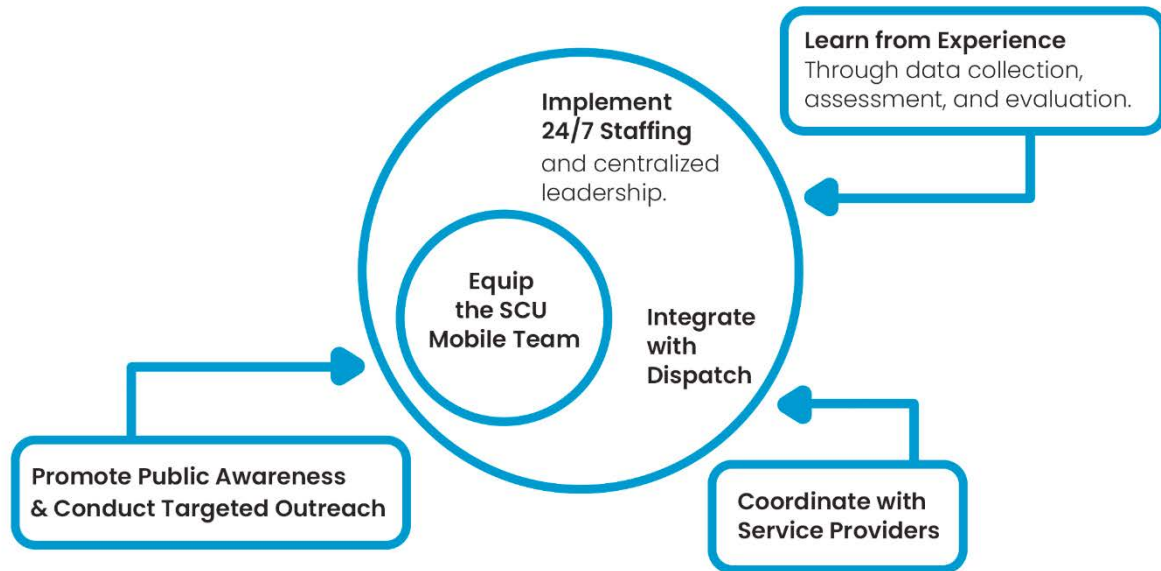
Community members experiencing or witnessing a mental health or substance use crisis will be able to call the SCU through a 24/7 live phone line, from which the SCU mobile team will be deployed to the crisis. The SCU mobile team will include specialists who support a person in crisis with intervention, de-escalation, and stabilization techniques. If necessary, the SCU will also be able to transport a person in crisis to locations that promote the person's safety and care.





## The SCU Model: A Comprehensive 24/7 Crisis Response

**Figure 2: An Overview of the comprehensive 24/7 SCU model.**



The SCU is not solely a mobile team that delivers specialized care during mental health and substance use crises, but rather requires a comprehensive model. This model includes clinical and administrative staff to ensure 24/7 live access to the phone line and SCU mobile team. The model also requires centralized leadership and system integration to realize systemwide changes. As this new model is implemented, it will require ongoing data collection, assessment, and iteration to ensure it is meeting the needs of the community. And, the model requires that community members know that they can call a non-police, specialized mental health and substance use crisis team.





### Phased Implementation

A phased approach will support a successful rollout of the SCU model while planning for integration across city agencies. These timelines may be ambitious given the magnitude of this systems-change initiative and the dependencies of the various model components. While the phased implementation approach represents an ideal timeline and is responsive to the urgent need for specialized mental health and substance use crisis response in Berkeley, it may need to be adjusted to realize the success of the SCU.

Refer to **Appendix A** for a complete phased implementation roadmap.

**Figure 3: An overview of the phased implementation approach.**

| PHASE 0                                                                                                                                                                                                                                                                                                                                                    | PHASE 1                                                                                                                                                                                                                                                                                                |                                                                                                                                   | PHASE 2                                                                                                      |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|
| Nov 2021 – Aug 2022                                                                                                                                                                                                                                                                                                                                        | Sept 2022 – Aug 2023                                                                                                                                                                                                                                                                                   | Sept 2023 – Feb 2024                                                                                                              | Feb 2024+                                                                                                    |
| <ul style="list-style-type: none"> <li>• Engage SCU Steering Committee &amp; community stakeholders on RFP; launch RFP</li> <li>• SCU staff: Contracting, hiring, training</li> <li>• Dispatch: Planning &amp; assessment</li> <li>• Establish preliminary triage criteria, workflows and protocols</li> <li>• Launch public awareness campaign</li> </ul> | <ul style="list-style-type: none"> <li>• SCU implements crisis response services</li> <li>• Dispatch implements integration or components based on Phase 0 planning</li> <li>• Conduct rapid assessment, monitoring, and iteration</li> <li>• Engage centralized leadership in coordination</li> </ul> | <ul style="list-style-type: none"> <li>• Review annual evaluation and rapid assessments</li> <li>• Prepare for Phase 2</li> </ul> | <ul style="list-style-type: none"> <li>• Implement changes based on evaluation and community need</li> </ul> |



## SCU Mobile Team

The goal of the SCU is to provide specialized care during mental health crises and substance use emergencies, including crisis intervention, de-escalation, and stabilization. This specialized care does not require a police response but instead should be a three-person team of medical and behavioral health specialists. The SCU will need to be equipped to address the nuanced variety of crisis needs across mental health and substance use emergencies.

By providing 24/7 SCU services, the City of Berkeley asserts that mental health crisis response is of the same importance as other crisis services and limits the need to use the police to respond to such crises. Overall, the SCU model aims to disrupt the criminalization of substance use and mental illness and advance racial justice in the City of Berkeley. There are several considerations for how to most effectively promote the safety of crisis responders, persons in crisis, and general community members.

The following recommendations are aligned to best practices and emerging alternative models, while being rooted in community-driven recommendations. Each recommendation is tailored to the City of Berkeley and provides key considerations to support planning and implementation:



### Key Recommendations

- 1. The SCU should respond to mental health crises and substance use emergencies without a police co-response.**
- 2. The SCU should operate 24/7.**
- 3. Staff a three-person SCU mobile team to respond to mental health and substance use emergencies.**
- 4. Equip the SCU mobile team with vans.**
- 5. The SCU mobile team should provide transport to a variety of locations.**
- 6. Equip the SCU mobile team with supplies to meet the array of clients' needs.**
- 7. Clearly distinguish the SCU from MCT.**

## Recommendation #1

# The SCU should respond to mental health crises and substance use emergencies without a police co-response.

The goal of the SCU is to provide specialized care during mental health crises and substance use emergencies. Below are suggested guidelines of when the SCU should and should not respond to a call.

### Types of calls SCU **should** respond to:

- Suicide
- Drug overdose
- Welfare check
- Suspicious circumstance
- Complaint of an intoxicated person
- Social disorder
- Indecent exposure
- Trespassing
- Disturbance

### Types of calls SCU should **not** respond to:

- Confirmed presence of firearm, knife, or other serious weapon
- Social monitoring and enforcement (e.g., of unsheltered residents in public spaces)
- Calls that Dispatch already deems do not need an in-person response (e.g., argument with a neighbor, minor noise violation)

### Location of calls SCU should respond to:

- Public settings (e.g., parks, sidewalks, vehicles)
- Commercial settings (e.g., pharmacies, restaurants)
- Private settings (e.g., homes)

Note: These guidelines and types of calls will need to be further explored to develop triage criteria that adequately reflect all the considerations for when the SCU will respond to crises.

### Why isn't the SCU responding with police?

Stakeholders consistently emphasized the need to provide non-police mental health crisis response options, noting that police are primarily trained in issues of imminent public safety threats, not mental health care. Rather than duplicating the MCT's model, the SCU model provides a new option for those better served by a non-police response. A dedicated response unit for mental health, behavioral health, and substance use emergencies will also help to build community trust and increase the likelihood that someone will call for help when they are in a crisis.

### Why is the SCU responding to calls at public and private locations? Is that safe?

A mental health crisis can happen anywhere, so the SCU must be able to respond to mental health and substance use crises in both public and private settings. Any variables around the safety of responding to a crisis in a private setting should be assessed before deploying the SCU team (e.g., the presence of a serious weapon).

### How were the types of calls decided?

Research from alternative models in other cities, community stakeholders' perceptions of existing needs in Berkeley, and input from crisis responders in the City of Berkeley all indicate that these call types may be well suited for behavioral health and mental health specialists instead of police. The nuances within any of these call types will be further planned for throughout Phase 0.

### Considerations for Implementation

#### Safety & Weapons:

- Not all weapons pose the same risk to crisis responders, so triage and deployment protocols should be aligned to best practices and standards of practice. The SCU may be able to respond to some calls where a weapon is present. The criteria for this safety precaution should be evaluated and planned for during Phase 0.
- If there is a mental health or substance use emergency where a weapon is present, then MCT-Police co-response should be deployed rather than the SCU.
- If the SCU mobile team is on scene but feels their safety is in imminent danger, they should have the ability to call in the MCT-Police co-response as backup support.

#### Coordinating with Other Entities

- Mobile Crisis Team: The types of calls, triage criteria, and workflows will need to be differentiated for deploying MCT versus SCU.
- Berkeley Police Department: When BPD is on scene and MCT is not available, BPD and SCU will need clear processes for whether police can bring the SCU to support. Similarly, BPD and SCU will need clear processes for when/how SCU leaves if they call the BPD to a scene.

**Recommendation #2**

## The SCU should operate 24/7.

The SCU mobile team should be available to respond to a crisis in person 24 hours per day, 7 days per week. Not having services available 24/7 was the most common challenge expressed by stakeholders about the current mental health crisis response system. In contrast, other crisis services like Fire and Police are available 24/7. By operating the SCU 24/7, the City of Berkeley asserts that mental health crisis response is of the same importance as other crisis services and negates the need to use police to respond to such crises. The need for 24/7 service is supported by national trends, as although some cities have implemented alternative crisis models with limited hours, many of them shared that they plan to expand to 24/7 to meet community needs.

### **Why does the SCU need to be available 24/7? Why can't it operate only during peak hours?**

A mental health or substance use crisis can happen at any time. Stakeholders stressed the importance of having mental health crisis response services available 24 hours per day and 7 days per week. If community members are to trust in the SCU as an ongoing and authentic alternative to police involvement, services need to be available whenever someone calls.

### **Considerations for Implementation**

All other supporting elements described throughout this report will need to accommodate 24/7 availability, such as:

- Phone access to the SCU
- Certain personnel roles, like a Clinical Supervisor
- Staffing structure that allows redundancy of personnel to cover each shift
- Equipment and infrastructure including the number of vans for the mobile team

## Recommendation #3

# Staff a three-person SCU mobile team to respond to mental health and substance use emergencies.

The array of mental health, behavioral health, and substance use services offered by the SCU require staff with varying professional specialties. The following roles are necessary to adequately provide these services:

### 1. A Mental Health Specialist

This role will be the primary provider of mental health services with the ability to conduct 5150 assessments, and therefore need to be licensed. They should have significant training in mental health and behavioral health conditions and disorders, crisis de-escalation, and counseling.

- Recommended position: Licensed Behavioral Health Clinician
- Possible positions: Licensed Clinical Social Worker (LCSW), Associate Clinical Social Worker (ASW), SUD or AOD Counselor, psychologist

### 2. A Peer Specialist

This role should have lived experience with mental health crises and systems, substance use crises or addiction, and be equipped to support system navigation for a person in crisis.

- Recommended position: Peer Specialist
- Other possible positions: Community Health Worker, Case Manager

### 3. A Medical Professional

This role should be able to identify physical health issues that may be contributing to or exacerbating a mental health crisis, including psychosomatic drug interactions. They should be able to administer single-dose psychiatric medicines and have training in harm reduction theory and approaches. They can also assess and triage for higher levels of medical care as needed.

- Recommended position: Psychiatric Nurse Practitioner (Psych-NP)
- Other possible positions: Nurse Practitioner (NP), EMT, Paramedic

### Why a three-person team?

These three distinct roles create a team that can effectively provide the necessary range of specialized services and can engage in organic collaboration to address each crisis. Cities who have implemented similar models spoke to the advantage of team members taking different roles in each scenario based on each client's needs and preferences.

### Why is the mental health specialist conducting 5150 assessments?

The SCU's aim is to reduce the overall number of involuntary holds through effective crisis intervention, de-escalation, and stabilization. However, ensuring the SCU has the ability to conduct 5150 assessments and involuntary holds rather than calling in the police to do the assessment can reduce interactions between people experiencing mental health crisis and police. Additionally, enabling the SCU to conduct the 5150

assessment is a more trauma-informed model because it eliminates the need for a person in crisis to interact with multiple teams and reduces the time it takes to respond to a crisis from start to finish.

### **Why is there a peer on the team?**

The peer is a critical member of the crisis team. Other systems shared that a person in crisis may be most responsive to a peer who has gone through a similar experience and that, at times, peers' unique training and skills allow them to engage that person more effectively than other specialties. Berkeley stakeholder participants emphasized the invaluable contributions of peer specialists, noting that they may be best equipped to lead the de-escalation before the mental health specialist or medical professional steps in to administer care because a person in crisis may be most responsive to someone that has similar lived experience.

### **Why is there a medical professional on the team? Why a Psych-NP?**

Mental health and physical health needs often co-present, with physical needs ranging from basic first aid (e.g., wound care, dehydration) to reactions to substances, such as overdoses or drug interactions. A medical professional, such as a Psych-NP, brings the clinical expertise to understand how physical ailments, chronic medical conditions, and psychiatric conditions affect a service utilizer (e.g., someone with hypertension and schizophrenia using methamphetamines). Other medical professionals, such as NPs, may also have sufficient training to meet the mental health and substance use needs of service utilizers. These situations do not require the expertise of a paramedic or doctor who are trained to respond to emergencies and deliver life-saving care.

### **Considerations for Implementation:**

- The number of mobile teams required will be based on multiple variables including community needs, call volume, and budget (for a more in-depth description, *refer to recommendation #12*).
- There may be challenges in staffing the SCU mobile team with these specific roles, such as the Psych-NP. The SCU model may need to allow for a variety of specialists to fill each of the three main roles.
- Across these roles, the SCU mobile team should have the following competencies:
  - Lived experience of behavioral health or mental health needs, homelessness, addiction or substance use, and/or incarceration
  - Emphasis on dual diagnosis (mental health and substance use) training, psychosomatic interactions, substance use management, and harm reduction
  - Identities reflective of those most harmed by the current system of care and/or those who are most likely to use or benefit from the SCU services
  - Multilingual
- Across these roles, the SCU mobile team will need to be trained on a variety of topics (for a full list, *refer to recommendation #14*). These may be desirable prerequisite skills, such as:
  - Disarming without the use of weapon
  - Motivational interviewing
  - Naloxone administration
  - Harm reduction
  - Trauma-informed care

## Recommendation #4

### Equip the SCU mobile team with vans.

Based on the scope of services, the SCU mobile team will need a vehicle to arrive at each call, carry equipment and supplies, and transport clients to another location. A well-equipped van should be both welcoming and physically accessible to clients and easily maneuverable by staff.

#### SCU vans should include:

- Wheelchair accessible features
- Lights affixed to the top of the van, allowing for sidewalk parking
- Locked supply cabinets
- Rear tinted windows for client privacy
- Rear doors not operable from the inside
- Power ports to charge laptops, tablets, and phones
- Comfortable seating
- SCU logo on the side of the van so the community can easily identify the team

#### SCU vans should **not** include:

- Sirens
- A plexiglass barrier between the front and back seats

#### Why not use an ambulance?

There are several reasons why an ambulance is not the appropriate vehicle for the SCU:

- Ambulances must transport to a receiving emergency department when transporting from the field (a call for service from a community member), which may not always be the most appropriate end point for the level of care required (*refer to recommendation #5*).
- Ambulances require a special license to drive and would require the inclusion of an EMT or paramedic on staff and would therefore increase the expense of the SCU.
- Ambulances are more expensive to purchase and maintain than a van.
- A van is potentially less stigmatizing and traumatizing for a person in crisis.

#### Why were these specific features chosen?

All van specifications are based on lessons learned from alternative crisis response programs in other cities and experiences and insight shared by the Berkeley Fire Department. Many van features, such as locked supply cabinets and locked rear doors, are designed to increase the safety of both crisis responders and a person in crisis. Other van features support the SCU mobile teams to provide a variety of services.

#### Why shouldn't the van have sirens or a plexiglass barrier?

Sirens can draw unnecessary public attention, thereby reducing privacy for a person in crisis, while both sirens and plexiglass barriers can exacerbate the stigmatization, traumatization, and criminalization of mental health and substance use crises.

#### Considerations for Implementation

The number of vans required will be based on the number of SCU mobile teams and shift structure/overlap (*refer to recommendation #12*).



## Recommendation #5

### The SCU mobile team should provide transport to a variety of locations.

The SCU should provide a level of care appropriate to each specific crisis with the aim of de-escalating crises, preventing emergencies, and promoting well-being. The SCU will transport service utilizers in the SCU van (*refer to recommendation #4*) unless there is a medical need that requires the SCU to request an ambulance for transport.

#### The SCU will transport service utilizers to:

- Inpatient units of psychiatric emergency departments
- Primary care providers, psychiatric facilities, or urgent care
- Crisis stabilization units, detox centers, or sobering centers
- Drop-in centers and other CBOs
- Shelter or housing sites
- Domestic violence service sites
- Long-term programs including residential rehabilitation sites
- Requested public locations (e.g., parks)
- Requested private locations (e.g., home)

#### Considerations when deciding transport location:

- Transport can be voluntary or involuntary, based on a 5150 assessment
- The SCU should be able to deny the request of a person in crisis for transportation based on their assessment of the appropriate level of care
- The SCU will need to assess safety or liability concerns for the service utilizer or other bystanders based on transport location (e.g., not transporting an intoxicated person home where another person is present at the home)

#### Why should the SCU transport service utilizers to so many different locations?

The SCU model aims to support diversion of people experiencing crises away from jails and hospitals and into the appropriate community-based care and resources. Some crises can be resolved on scene, while others will require transport to another location. Even if a crisis is de-escalated on scene, service utilizers may benefit from being transported to another location for additional care or resources. Throughout this project, stakeholder participants emphasized that the level of need outweighs the available resources and providers in Berkeley and Alameda County. Providing transport to a variety of locations and resources allows the SCU to provide the level of care appropriate to each specific crisis and increases the possibility of providing care in an overwhelmed service network. *Refer to Section V for long-term recommendations for addressing the needs of the service network.*

#### Considerations for Implementation

- Established, trust-based relationships with community partners and warm handoff procedures will improve overall quality of care and can reduce the amount of time required when dropping off a client.
- Staff at emergency facilities will need to be familiar with the SCU, including the van, logo, and uniforms, to be prepared to receive transported clients in a timely and responsive manner, reducing “wall time.”
- Triage criteria and workflows should support the SCU in assessing where and how to transport a person in crisis.
- Triage criteria and workflows for transport should address the safety implications for both the person in crisis and other community members.

**Recommendation #6**

## Equip the SCU mobile team with supplies to meet the array of clients' needs.

The SCU will be responding to a variety of calls, each with their own specific needs. The supplies needed will vary depending on the call. Below is a suggested list of supplies the SCU should carry, generated from the input of stakeholders and other alternative crisis response programs. These supplies will facilitate a harm reduction approach and directly contribute to the health and well-being of the person in crisis.

- |                         |                                                                                                                                                                                                                                                                                                 |
|-------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Medical supplies</b> | <ul style="list-style-type: none"> <li>• First aid kit</li> <li>• Personal protective equipment</li> <li>• Wound care supplies</li> <li>• Stethoscope</li> <li>• Blood pressure armband</li> <li>• Oxygen</li> <li>• Intravenous bags</li> <li>• Single-dose psychiatric medications</li> </ul> |
|-------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

- |                                |                                                                                                                                                                                                                             |
|--------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Client engagement items</b> | <ul style="list-style-type: none"> <li>• Food and water</li> <li>• Clothing, blankets, and socks</li> <li>• Transportation vouchers</li> <li>• "Mercy beers" and cigarettes</li> <li>• Tampons and hygiene packs</li> </ul> |
|--------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

- |                                  |                                                                                                                                                                                          |
|----------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Community health supplies</b> | <ul style="list-style-type: none"> <li>• Safe sex supplies and pregnancy tests</li> <li>• Naloxone</li> <li>• Clean needles and glassware</li> <li>• Sharps disposal supplies</li> </ul> |
|----------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

- |                   |                                                                                                                                                                  |
|-------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Technology</b> | <ul style="list-style-type: none"> <li>• Cell phones</li> <li>• Data-enabled tablets</li> <li>• Computer Aided Dispatch (CAD)</li> <li>• Police radio</li> </ul> |
|-------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|

- |                 |                                                                                                        |
|-----------------|--------------------------------------------------------------------------------------------------------|
| <b>Uniforms</b> | <ul style="list-style-type: none"> <li>• Casual dress: polo or sweatshirt with the SCU logo</li> </ul> |
|-----------------|--------------------------------------------------------------------------------------------------------|

### **Why does the SCU need to carry client engagement items?**

These items can help initiate an interaction while also meeting the basic needs of clients while they are experiencing a crisis.

### **Why does the SCU need to carry community health supplies?**

These supplies can help address an underlying physical health need or provide harm reduction for substance use crises.

### **Why does the SCU need technology and uniforms?**

The team needs cell phones and data-enabled tablets for mobile data entry. The tablets should be preloaded with an electronic health record (EHR) application so staff can access client history to provide more effective, tailored care. Wearing a casual uniform can help the team appear more approachable to clients and be easily identifiable. Uniforms that look more like traditional emergency response uniforms can be triggering for clients who have had traumatic experiences with emergency responders.

### **Considerations for Implementation**

- The need for basic provisions among service utilizers is often significant and therefore affects the model's budget. To effectively plan for the program budget, San Francisco's Street Crisis Response Team shared that they budgeted for \$20 in supplies per client contact but quickly exceeded their \$10,000 annual budget. Denver's STAR program noted that these supplies were in high demand and the budget was supplemented with donations.
- Staff should track which supplies are used most often and which supplies are requested by clients that the SCU does not carry.

## Recommendation #7

### Clearly distinguish the SCU from MCT.

Once the SCU model is implemented, there will be two teams responding to mental health crisis calls in the City of Berkeley: the Specialized Care Unit and the Mobile Crisis Team. It will be necessary to clearly distinguish the role of these two teams so that the proper response is deployed for each situation. The general public will also need to be informed regarding the two teams, how to access them, and why.

Suggested scenarios when MCT and Police should be deployed instead of the SCU:

- If there is a confirmed presence of a serious weapon during a mental health crisis, the police and MCT would be deployed.
- If the police request mental health support during a crisis, MCT will be deployed as a co-response.
- If the SCU is on a call and needs backup or cannot successfully intervene, they would call for an MCT-police co-response.

#### **If there's an SCU, why should the MCT still exist?**

When the police respond due to the presence of a weapon or other element outlined above, a joint response that includes clinical staff to support the intervention is a best practice and community asset, delivering a trauma-informed response focused on de-escalation. This is especially true for a person in crisis with past traumatic experiences with the police. The MCT remains an important resource that can reduce the negative impacts of police presence during situations where a mental health crisis intersects with issues of imminent public safety.

#### **Why is it important to distinguish MCT from the SCU?**

**Trust & Acceptability of SCU:** MCT responds to the majority of their calls with police backup. Because SCU is a non-police crisis response option, clearly distinguishing the two models will be essential in establishing and maintaining community trust to increase utilization of the SCU, particularly among groups most at risk of harm from police violence.

**Logistics for Deploying the Right Team:** Dispatch will need tools and training to clearly differentiate the teams' roles to effectively deploy the right team for each mental health crisis call.

#### **Considerations for Implementation**

- All triage criteria and workflows need to be reflective of the differentiation between SCU and MCT. This includes the triage criteria and workflows for Dispatch and/or the alternative phone line and Alameda County's Crisis Support Services (CSS) (*refer to recommendation #9*).
- The distinction between MCT and the SCU, particularly around availability and police involvement, should be emphasized in the public awareness campaign (*refer to recommendation #24*).
- Tracking the acuity levels of calls, as well as whether MCT and police were called in for backup, can help refine the Dispatch process and ensure that the right team is deployed.

## Accessing the SCU Crisis Response: Dispatch & Alternative Phone Number

Implementing the SCU as a 24/7 mental health and substance use crisis model requires that community members have reliable and equitable access to the team. By integrating the SCU crisis response into 911 and Dispatch's processes, mental health crisis services will be elevated to the same level of importance as Fire and Police when calling for emergency services, thus promoting community access to specialized crisis care. To reach this goal, the SCU model, City of Berkeley leadership, and Dispatch will need to work together during assessment and planning processes.

The need to develop and implement the SCU model is urgent. Yet Dispatch is a complex, under-resourced, and overburdened system. To achieve structural change that ensures sustainability, significant planning and coordination is essential.

There are several possibilities for how to advance the SCU-911 integration aligned to the phased implementation approach. The following recommendations are aligned to best practices and emerging alternative models and responsive to the needs and concerns expressed by community stakeholder participants. Each recommendation should be further explored, assessed, and discussed across City of Berkeley leadership:



### Key Recommendations

- 8. Participate in the Dispatch assessment and planning process to prepare for future integration.**
- 9. Ensure the community has a 24/7 live phone line to access the SCU.**
- 10. Plan for embedding a mental health or behavioral health clinician into Dispatch to support triage and SCU deployment.**

## Recommendation #8

### Participate in the Dispatch assessment and planning process to prepare for future integration.

Ultimately, the SCU should be integrated into 911 and Dispatch protocols. To reach this goal, the SCU model, City of Berkeley leadership, and Dispatch will need to work together during assessment and planning.

Dispatch, through the Berkeley Fire Department, has conducted a Request for Proposal process and selected a consulting firm to support enhancements to the deployment of Fire and EMS/Ambulance services. That assessment and planning process should integrate SCU implementation, preparing for the SCU to be a mental health emergency response on par with police and fire emergency calls.

#### **If this is a non-police response model, why is Dispatch involved?**

An effective mental health crisis response that increases community safety, well-being, and health outcomes relies on the SCU actually being deployed to community members in crisis. Dispatch has established infrastructure and technology that could effectively and safely deploy the SCU mobile team. Moreover, 911 is a well-known resource to the general public, which many people do seek during crises. In 2017, Dispatch received 256,000 calls.<sup>16</sup> For these reasons, integration of the SCU into 911 and Dispatch's processes is an important method for deploying the SCU team to people experiencing a mental health or substance use crisis.

#### **Will another assessment and planning process delay the launch of the SCU?**

Dispatch's expertise and experience are a critical asset to lead the assessment, planning, and implementation of revised 911 procedures that include the SCU. The Dispatch assessment and planning project is slated to begin in 2022; by incorporating assessment and planning for the SCU into an existing project, it will initiate the process several months sooner than if a separate and new project were to be initiated. Additionally, integrating both projects will ensure consistent and simultaneous efforts rather than disjointed efforts that require backtracking or undoing of work and decisions.

### Considerations for Implementation

- A systems-change initiative of this magnitude will need identified shared aims and goals.
- A systems-change initiative of this magnitude will need Dispatch leadership to champion the effort and communicate early, often, and positively about the upcoming changes.
- By participating in Dispatch's assessment and planning processes, the SCU model can identify opportunities early on that support the integration, such as using aligned terminology and data collection processes.
- A Dispatch representative should join the SCU Steering Committee (*refer to recommendation #20*).
- Dispatch leadership should join the model's centralized coordinating body (*refer to recommendation #19*).

<sup>16</sup> Berkeley City Auditor. (2019, April 25). 911 Dispatchers: Understaffing Leads to Excessive Overtime and Low Morale.

[https://www.cityofberkeley.info/uploadedFiles/Auditor/Level\\_3\\_-\\_General/Dispatch%20Workload\\_Fiscal%20Year%202018.pdf](https://www.cityofberkeley.info/uploadedFiles/Auditor/Level_3_-_General/Dispatch%20Workload_Fiscal%20Year%202018.pdf)

**Recommendation #9****Ensure the community has a 24/7 live phone line to access the SCU.**

Implementing the SCU as a 24/7 mental health and substance use crisis model requires a 24/7 live phone line to ensure community members have reliable and equitable access to mental health crisis response. The 24/7 availability is essential for community members to feel confident in the availability of the mental health crisis response, as stakeholders reported that MCT's alternative phone number—which is not live and relies on voicemail and callbacks—does not feel like a reliable resource during crises.

The need to develop and implement the SCU model is urgent and at the same time must achieve structural change to ensure sustainability. Implementing a process for the short-term that must be undone would be an inefficient use of funds and may confuse the public and exacerbate distrust. For these reasons, the following three options should be further considered and assessed for how to most effectively ensure 24/7 live access to the SCU crisis response:

1. Option A: Use the existing 911 Communications Center (“Dispatch”) to deploy the SCU.
2. Option B: Contract to a CBO that can staff and implement an alternative number phone line as part of the SCU model.
3. Option C: Use the 988 National Suicide Prevention Lifeline to receive, triage, and assess all mental health crisis calls.

Table 1 below highlights several factors to consider related to timeline and staff capacity, funding, safety, system integration, and public awareness. Based on these factors, it appears that Option A (using the existing 911 Communications Center to deploy the SCU) would be the best option for the City of Berkeley. However, these factors should be further discussed by City of Berkeley leadership across HHCS and Dispatch with careful consideration of the phased implementation approach and timeline.

**Table 1: Options and factors to assess when planning for the community to have 24/7 live phone line access to the SCU.**

|                                      | <b>Option A *Recommended Option*</b>                                                                                                                                                                                                                                                                                                                                                   | <b>Option B</b>                                                                                                                                                                               | <b>Option C</b>                                                                                                                                                                                                                      |
|--------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                      | <b>Use 911 and existing Communications Center (“Dispatch”) to deploy the SCU.</b>                                                                                                                                                                                                                                                                                                      | <b>Contract to a CBO that can staff and implement an alternative number phone line as part of the SCU model.</b>                                                                              | <b>Use the 988 national phone line to receive, triage, and assess all mental health crisis calls.<sup>17</sup></b>                                                                                                                   |
| <b>Timeline &amp; Staff Capacity</b> | <p>Assess Dispatch’s ability to recruit, hire, and train new staff on a timeline aligned to the phased implementation approach.</p> <p>Consider the amount of resources and time required for Dispatch to train existing staff on new protocols.</p> <p>Consider Dispatch’s capacity to support the SCU adoption and integration in addition to the current accreditation process.</p> | <p>Assess whether a CBO can realistically implement both the SCU model and an alternative phone number (i.e., call center), including recruiting, hiring, and training all new personnel.</p> | <p>Monitor the alignment of national, state, and county timelines for 988 implementation.</p> <p>Assess whether the 988 call center will be staffed appropriately for the additional call volume brought in by requests for SCU.</p> |
| <b>Funding</b>                       | <p>Estimate the additional funds required for Dispatch to recruit new personnel (i.e., a recruitment team) and manage the Human Resource capacity to support additional staff.</p>                                                                                                                                                                                                     | <p>Estimate the cost to create and operate an independent 24/7 live alternative phone line.</p>                                                                                               | <p>Explore the amount of funding and resourcing available for 988 to assess whether the funds sufficiently support the 24/7 SCU.</p>                                                                                                 |

<sup>17</sup> Gold, J. (2021). How will California’s new 988 mental health line actually work? *U.S. News*. <https://www.usnews.com/news/health-news/articles/2021-10-12/how-will-californias-new-mental-health-hotline-actually-work>



**Option A (Recommended)**

**Option B**

**Option C**

**Safety Promotes Safety**

Evaluate and compare each option’s ability to establish protocols or infrastructure to support the safety of crisis responders and community members.

Dispatch already has established protocols and technology to track the crisis responder’s location/position through CAD.

Assess the resources and timing required for a CBO to ensure sufficient training on the use of the CAD system and radio communication.

Assess the ability for existing Alameda CSS and 988 technology to integrate with Dispatch’s CAD system and radio communication.

Dispatch already has established protocols and technology to maintain radio communication between Dispatch and crisis responders, especially during rapid changes in a situation.

Assess workflows and processes that would affect the number of times a caller must repeat triage/assessment; estimate whether there will be an increase in dropped calls.

Evaluate the effectiveness of existing processes to transfer calls between Alameda CSS and Dispatch.

Dispatch already has established protocols and technology to streamline the handling and transfer of calls so that a person in crisis does not have to repeat their story multiple times, thereby reducing the number of dropped calls.

Consider if a non-911 entity will more effectively reduce police-community interactions during mental health and substance use crises.

Consider if the 988 entity will more effectively reduce police-community interactions during mental health and substance use crises.

**Risks to Safety**

Evaluate and compare the potential risks to the safety of crisis responders and community members across each option.

Consider whether Dispatch will be more likely to deploy the police than the SCU during initial model implementation.

Consider whether alternative phone line personnel will be more likely to deploy the SCU than transferring calls to 911.

Consider whether community members will be confused about 988 and may believe it is only for suicide prevention rather than the full spectrum of mental health and substance use crises, and therefore be less likely to call 988.

Evaluate whether community members’ fear of a police response, will reduce the utility, acceptability, and accessibility of the SCU.

Evaluate whether community members will be more likely to call an alternative phone number than 911 if they are experiencing a mental health or substance use crisis.

**Option A (Recommended)****Option B****Option C****System Integration**

N/A  
(911 is already integrated with Berkeley Fire, Falck, and Alameda County CSS)

Explore the process for a CBO to assess and prepare callers if they need to transfer the call to 911, such as if the presence of weapons is confirmed. Evaluate the effects, such as a slowed response time or increased risk of a dropped call.

Consider whether the transfer of calls to 911 (i.e., calls ineligible for SCU) will undermine community trust in the alternative phone line.

Determine the feasibility of integrating a CBO's technology to allow for the transfer of calls between Alameda CSS and Dispatch.

Determine the feasibility of a CBO's technology to receive calls from Fire and Falck if they request the SCU.

Determine whether Alameda County will be able to deploy a Berkeley-specific team (the SCU) for only Berkeley residents as a component within the larger 988 model.

Assess what will be required for a county system to deploy a model administered by a CBO, such as additional contracts, MOUs, or staff licensure requirements.

**Public Awareness**

Consider what will be required of a public awareness campaign to build community trust in 911 to deploy the SCU as a non-police response.

Consider what will be required of a public awareness campaign to inform Berkeley residents both about the SCU as a non-police crisis response and promote an alternative phone number to access the SCU.

Assess the public awareness and education planned for 988.

Assess whether the Alameda County 988 public awareness campaign can be adjusted for Berkeley to communicate the availability of the SCU through 988.

### **Why consider different options for phone access to the SCU?**

The numerous factors that should be assessed to determine the best option for phone access to the SCU will require a significant amount of collaboration and detailed planning across city leadership, which requires time throughout Phase 0. The general public is familiar with 911 as a crisis response resource. As a result, 911 could be an important method of ensuring mental health and substance use crises are routed to the SCU mobile team. However, stakeholders, especially residents of color and Black residents, consistently shared that the fear of physical violence, criminalization, or retaliation by police in response to mental health and substance use emergencies is a barrier to calling 911. Therefore, a non-911 option may support community members to feel confident in the SCU as a non-police mental health crisis response. Considering and assessing the full array of options will ensure the best approach for a reliable and equitable access to 24/7 mental health crisis response.

### **Why is Option A elevated as the recommended option?**

Overall, Option A is recommended because it appears to be a better fit for the SCU model. It will most likely be the more cost-effective option, will allow for the SCU mobile team to be launched soonest, and will align to the phased implementation approach and the future integration of the SCU into 911.

By pursuing Option A, preparation with Dispatch can begin sooner than the other options, thus allowing for additional time to plan and prepare. This additional planning time can be used to address concerns regarding safety, community trust, and public awareness. Integrating the SCU into 911 from the initial phases of implementation may also support a streamlined and efficient integration. In contrast, Option B will likely require significantly more funding to create an entirely new call center, which may become obsolete once 988 is implemented, nationally. The feasibility and expense of standing up an entirely new call center (option B) may be prohibitive. Option C will require significant coordination with Alameda County and has many implications that are outside of the control of the City of Berkeley, which could cause delays or challenges to the implementation of the SCU model.

Additionally, 911 has established technology and infrastructure for receiving and triaging phone calls, deploying crisis responders, tracking the crisis response to promote responder safety, and collecting data that is essential for monitoring, evaluation, and follow-up. Moreover, for the public awareness campaign, it may be easier to communicate the SCU as a non-police response through 911 than it is to both communicate the SCU as a non-police response and to publicize an alternative phone number.

### **Why might the model implement an alternative phone number? (Option B or Option C)**

First, due to existing community distrust of policing systems, it is important to establish the SCU response as a non-police response. By implementing the alternative phone number first, community members may be encouraged to utilize the SCU. Second, the existing Dispatch system is complex, overburdened, and underfunded. In order to have a successful integration of the SCU within 911, it may require more time for planning for a sustainable integration that ensures community safety. Third, lessons learned from other cities implementing alternative models may indicate this order would support SCU success. For example, the Portland Street Response team can be accessed through both 911 and a non-emergency phone number connected to Dispatch. However, they found that calls from 911 were prioritized rather than calls from the alternative line when deploying the team. Berkeley will need to establish clear prioritization and triage protocols so that the highest-acuity calls receive adequate responses, rather than the response being determined by the source of the call.

### Do other cities use multiple phone numbers?

From the reviewed models, at least seven use two or more lines for emergency crisis calls:

- Olympia, WA: Crisis Response Unit
- Sacramento, CA: Department of Community Response
- Austin, TX: Expanded Mobile Crisis Outreach Team (EMCOT)
- Oakland, CA: Mobile Evaluation Team (MET)
- Portland, OR: Portland Street Response
- Eugene, OR: Crisis Assistance Helping Out on the Streets (CAHOOTS)
- Denver, CO: Supported Team Assisted Response (STAR)

### If the model uses an alternative phone line, what happens if people still call 911 when they are having a mental health crisis?

Dispatch should have the option to forward calls to the SCU alternative phone line, where those staff can triage the call and deploy the SCU. Establishing these protocols will be part of the assessment and planning process. It is also important that a public awareness campaign promotes access to the SCU team (*refer to recommendation #24*).

### Additional Considerations for Implementation:

- The phone line will require dedicated office space and equipment to process calls and deploy the SCU.
- The phone line will need technology and protocols to ensure data collection and integrity to support monitoring and evaluation (*refer to recommendations #22 and #23*).
- The phone line will require enough staff to maintain a 24/7 live response including staff to receive calls and supervisory staff. This team will need to be sufficiently staffed to account for shift overlap, sick leave, and vacation time.
- Additional data collection and planning will be required to determine the adequate number of call takers and fully implement the phone line.
- Option A may require that Dispatch makes more gradual changes to triage criteria, deploying the SCU to a more limited scope of call types with a gradual increase in SCU deployment through Phase 1 implementation.
- Either option B or option C would still require the phone line entity to collaborate with Dispatch to develop types of calls, triage criteria, and workflows to allow for future integration of SCU into Dispatch.
- The future structure of the 911 Communications Center within Berkeley Police Department should be evaluated (*refer to Section V*).

*\*Please note: Dispatch uses specific terminology that may not be accurately represented here. The language in these recommendations should be understood from a lay perspective rather than rigid technical language (e.g., call takers versus dispatchers, assessment versus triage versus decision-trees).*

## Recommendation #10

# Plan for embedding a mental health or behavioral health clinician into Dispatch to support triage and SCU deployment.

Embedding a mental or behavioral health clinician within the Dispatch represents a new process for Berkeley's Dispatch and broadens Dispatch's lens from being solely a Police entity to an entity that includes clinical specialists. Dispatch must be involved in planning for this additional team member.

### **Why should Dispatch have a clinician in the call center?**

Embedding a mental health clinician in emergency call centers is an emerging best practice, though only a few cities nationally report staffing their call centers with clinicians. The few cities that have included mental health clinicians in their call centers have found them to be a useful resource. Where implemented, clinicians provide specialized training for call takers to handle behavioral health crisis calls, receive transferred behavioral health crisis calls, and provide guidance.<sup>18</sup>

### **How does having a clinician in Dispatch promote community or crisis responder safety?**

Berkeley Dispatch is deeply committed to the safety of crisis responders. In interviews for this project, Austin's EMCOT program<sup>19</sup> shared that embedding a clinician within their call center increased communication around safety and risk assessment during triage, including increased deployment of the crisis response team. They also shared that this integration improved handoffs for telehealth conducted by the clinician. Berkeley should plan for embedding a clinician in Dispatch to support with de-escalation and determinations because it could promote safety.

### **Why does the clinician need to be part of planning in Phase 0 if implementation is in Phase 1?**

This change represents a structural shift for Dispatch, incorporates new roles for a specialized skillset, and changes several workflows. As a result, having a clinician participate in planning in Phase 0 will support successful implementation in future phases. Additionally, given the current significant understaffing and under-resourcing of Dispatch, the clinician can augment staff capacity without Dispatch having to acquire a new, specialized skillset.

### **Considerations for Implementation:**

- Calls that do not require an in-person response should continue to be sent to Alameda County CSS for phone support.
- Staffing structures will need to be adapted, such as determining which roles supervise the clinician and which roles the clinician supervises.
- The clinician may be able to provide training and ongoing professional development to support call takers to identify and address mental health calls.
- There may be a need for multiple clinicians depending on their role and the call volume.
- This recommendation will need to be adapted based on how recommendations #8 and #9 are implemented.

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<sup>18</sup> Velazquez, T & Clark-Moorman, K. (2021). New research suggests 911 call centers lack resources to handle behavioral health crises. *ResearchGate*.

[https://www.researchgate.net/publication/355684339\\_New\\_Research\\_Suggests\\_911\\_Call\\_Centers\\_Lack\\_Resources\\_to\\_Handle\\_Behavioral\\_Health\\_Crises](https://www.researchgate.net/publication/355684339_New_Research_Suggests_911_Call_Centers_Lack_Resources_to_Handle_Behavioral_Health_Crises)

<sup>19</sup> Read more about the EMCOT program here: <http://www.austintexas.gov/edims/pio/document.cfm?id=348966>

## Implement a Comprehensive 24/7 Mental Health Crisis Response Model

There are many considerations for realizing the full implementation of a 24/7 model including hiring personnel, establishing clear roles, and providing office space and required materials. Staffing a comprehensive model should seek to address the perceived challenges of existing crisis response systems throughout Berkeley, such as not having 24/7 availability or sufficient staff capacity.

The following recommendations are designed to leverage the lessons learned from other cities implementing non-police crisis response models and be responsive to the needs and concerns expressed by community stakeholder participants. Each recommendation should be further explored as launch and implementation progresses:



### Key Recommendations

- 11. Fully staff a comprehensive model to ensure the success of the SCU mobile team, including supervisory and administrative support.**
- 12. Operate one SCU mobile team per shift for three 10-hour shifts.**
- 13. SCU staff and Dispatch personnel travel to alternative crisis programs for in-person observation and training.**
- 14. Prepare the SCU mobile team with training.**

## Recommendation #11

Fully staff a comprehensive model to ensure the success of the SCU mobile team, including supervisory and administrative support.

In addition to the three-person SCU mobile team (*recommendation #3*), the 24/7 live phone line (*recommendation #9*), and the clinician in Dispatch (*recommendation #10*), the SCU will require supervisory and administrative support roles. These roles will support the day-to-day services and operations of the SCU mobile team. They also will participate in case management meetings (*recommendation #18*), rapid assessment and monitoring (*recommendation #22*), and model evaluation (*recommendation #23*).

### Recommended Personnel Roles & Types of Responsibilities<sup>20</sup>:

#### Program Manager

- Review data from implementation, lead rapid assessment process, support changes and iteration to model
- Liaise with city, Dispatch, and central leadership around implementation, rapid assessment, and coordination
- Manage contract and budget
- Manage scheduling and shifts

#### Clinical Supervisors

- Oversee and support SCU mobile team, provide consultation for medical and mental health services
- Plan and lead training and professional development for SCU mobile team
- Collaborate with peer specialist supervisor on how to best support SCU mobile team
- Share client and staff feedback to program manager for rapid assessment and monitoring

#### Peer Specialist Supervisor

- Oversee and support peer specialists on SCU mobile team with an emphasis on emotional support for peers
- Plan and lead training and professional development for SCU mobile team, with an emphasis on utilizing peer specialists and other forms of team communication and support (e.g., advocacy, equal value, communication)
- Collaborate with clinical supervisor

#### Call Takers / Call Center (*pending implementation of recommendations #8-10*)

- Receive calls from the 24/7 live phone line; triage calls and deploy SCU mobile team, as required
- Receive calls from Dispatch
- Transfer calls that do not require in-person services to Alameda County CSS
- Participate in case management care coordination meetings, as relevant

<sup>20</sup> Refer to **Appendix B** for the number of personnel, availability, shifts, and a sample shift structure

## Considerations for Implementation

Availability or shift structure for roles:

- The program manager and peer specialist supervisor roles should be available during traditional business hours.
- The clinical supervisor role should be available 24/7 and will require redundancy in hiring.
- The call center will need to be staffed to ensure a 24/7 live phone line. If Option B is pursued (*refer to recommendation #9*), the call center should be situated within the SCU model rather than a separate CBO. This could promote morale and team identity and will increase the quality and efficiency of communication.

Office & Equipment Needs:

- The SCU model will need an office space that accommodates all personnel and their roles, such as daily huddles, desks, and equipment.<sup>21</sup>
- Stakeholders suggested that the SCU would benefit from developing relationships with service utilizers and their families. If these opportunities are pursued as part of the SCU's function, then office space could also accommodate service utilizer and family consultations and/or open "office hours" for relationship building.

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<sup>21</sup> Refer to **Appendix C** for the budget and additional office equipment needs, such as computers, phones, printers, etc.



## Recommendation #12

### Operate one SCU mobile team per shift for three 10-hour shifts.

In order to staff a crisis response model that operates 24/7, the SCU should staff one mobile team per shift for three 10-hour shifts. We estimate that the SCU would respond to three to six incidents per 10-hour shift, with each incident requiring 20 to 120 minutes for response and closure. This should generally be manageable by one SCU mobile team.<sup>22</sup>

#### Why 10-hour shifts?

Based on feedback from those operating similar models as well as from community stakeholders, 10-hour shifts are common in residential settings and tend to work well for clinical and mental health staff. There are often labor union protections for shifts longer than 10 hours. Three 10-hour shifts would provide 24/7 coverage while allowing for some overlap before and after each shift.

#### Why should shifts overlap?

The SCU mobile team shifts should overlap so that the team can conclude engagement with a person in crisis before their shift ends. The next shift would be able to respond to a crisis call that comes in towards the end of the preceding team's shift. The overlap also supports team huddles for care coordination. The shift structure and overlap should include time for the required paperwork at the end of the shift so that there is not an expectation that paperwork is completed during off hours.

#### Will one SCU mobile team be sufficient?

This estimate is comparable to the call and incident volume reported by Denver's STAR pilot, Portland's Street Response pilot, and Eugene's CAHOOTS program. Though the city population of Denver and Portland are 5.8 and 5.3 times larger than Berkeley's population, respectively, their pilots are restricted to smaller geographic units of the city; Denver and Portland both operate only 1 mobile crisis response team per shift. Eugene's city population is 1.4 times the population of Berkeley, and Eugene operates 1 crisis team per shift, with an additional team during peak hours of 10am-12pm and 5pm-10pm.<sup>23</sup>

#### Considerations for Implementation

- Staffing structure will require redundancy to allow for personnel to take vacation and sick days, and in anticipation of periodic vacancies.<sup>24</sup>
- Staffing structure may need to plan for on-call or floater shifts.

<sup>22</sup> Estimates for SCU call volume are based on analysis of call and service volume by MCT from 2015 to 2019, the Auditor's Report and analysis of Berkeley Police Department's call and service volume from 2015 to 2019, and analysis of Berkeley Fire's and Falck's transport volume and time on task from 2019 to 2021. Please refer to **Appendix D** for more specific analysis and estimates.

<sup>23</sup> The City of Eugene (2019-03240). <https://www.eugene-or.gov/DocumentCenter/View/56579/2019-03240-White-Bird-CAHOOTS-Services---SIGNED>

<sup>24</sup> Refer to **Appendix B** for the number of personnel, availability, and a sample shift structure.

## Recommendation #13

### SCU staff and Dispatch personnel should travel to alternative crisis programs for in-person observation and training.

Although Berkeley's SCU model will be uniquely designed and tailored for the Berkeley community, there are many opportunities to learn from successes and challenges of other models that have implemented non-police mental health crisis response programs. For example, the Denver STAR team shared that their Dispatch team benefited greatly from traveling to Eugene, OR to observe and learn about the CAHOOTS model and plan their deployment protocols.

#### Options for city programs to visit:

- CAHOOTS: Eugene, OR
- STAR: Denver, CO
- EMCOT: Austin, TX

#### Recommended personnel to attend:

- Dispatch: Supervisor
- SCU: Clinical Supervisor and Program Manager
- Phone line staff, as relevant (refer to recommendation #9)

#### Potential program components to observe during site visit:

- Triage criteria and workflows
- Assessing for risk and safety
- Working with the mental health clinicians embedded in Dispatch
- Coordinating and prioritizing calls between 911 and an alternative phone number
- SCU mobile team services and team coordination
- Role clarification

#### Why should Dispatch and SCU staff travel to these sites together?

This training opportunity would support the collaboration between the SCU and Dispatch in planning for the phased integration. By traveling to the sites together, SCU and Dispatch will not only hear the same questions and answers but can ideate and collaborate on adaptations for the Berkeley SCU model. Finally, this is an important opportunity for relationship building between SCU staff and Dispatch, which is essential to this systems-change initiative.

#### Considerations for Implementation

- Travel costs will need to be included in the initial budget; estimates for consulting fees from the sites are already included.<sup>25</sup>

<sup>25</sup> Refer to **Appendix C** for the estimated SCU model budget.

## Recommendation #14

### Prepare the SCU mobile team with training.

The SCU will require training in a set of specific skill areas to be best equipped to provide mental health crisis response. The personnel hired should already have demonstrated their specialized skill set in previous employment settings; training will therefore support the team to align on how to implement their skills. Training also supports teams to work together and with other entities effectively, such as Dispatch, which is essential in crisis response.

#### The SCU mobile team should be trained in the following topics:

- General de-escalation techniques
- Disarming without use of weapon
- Substance use management
- Naloxone administration
- Harm reduction theory and practice
- First aid
- Situational awareness and self-defense
- Radio communication
- Motivational interviewing
- Implicit bias, cultural competency, and racial equity
- Trauma-informed care
- Training on data collection protocols and data integrity (refer to recommendations #17 and #18)
- Compliance with confidentiality and HIPAA when interacting with Police and/or Dispatch

#### How long will it take to train staff?

Eugene's CAHOOTS program includes at least 40 hours of classroom training and 500 to 600 hours of field training for all new staff.<sup>26</sup> This equates to 12.5 to 15 weeks of training when calculated on a full-time basis.

#### What informed these suggested training topics?

These training topics were generated from a variety of alternative model program recommendations and input from Berkeley service providers and community stakeholders.

#### Considerations for Implementation:

- The phased approach timeline incorporates an estimate aligned to CAHOOTS' model, with room for adaptation.
- Training should be provided to all new SCU staff as they are added to the team, regardless of start date.
- Additional training topics may be identified by the SCU team.

<sup>26</sup> Beck, J., Reuland, M., & Pope L. (2020). Case Study: CAHOOTS. Vera. <https://www.vera.org/behavioral-health-crisis-alternatives/cahoots>

## Administration and Evaluation

There are many considerations for effectively administering and monitoring implementation of a new, 24/7 mental health crisis response model. Effective implementation includes ongoing collaboration and decision-making at both the structural and provider levels.

At a structural level, the SCU model will require cross-system coordination for implementing new processes and therefore will require leadership across the City of Berkeley and SCU to collaborate around ongoing program monitoring, data review and transparency, and system integration. At a provider level, the SCU model will require collaboration and communication to support care coordination and case management for people that have experienced crisis as well as to elevate emerging challenges and successes.

Moreover, the community can—and must—provide essential advisory capacities. The community should be actively engaged to provide input and feedback throughout the planning and implementation of the SCU, including through the SCU Steering Committee and ongoing opportunities for the general public.

The following recommendations were informed by the lessons learned from other cities implementing alternative crisis models and aim to be reflective of the perspectives shared by the project’s stakeholder participants. Each recommendation should be a starting point to promote cross-sector collaboration, adjusting to accommodate the evolution of the SCU:



### Key Recommendations

- 15. Contract the SCU model to a CBO.**
- 16. Integrate the SCU into existing data systems.**
- 17. Collect and publish mental health crisis response data publicly on Berkeley’s Open Data Portal.**
- 18. Implement care coordination case management meetings for crisis service providers.**
- 19. Implement centralized coordination and leadership across city agencies to support the success of mental health crisis response.**
- 20. Continue the existing SCU Steering Committee as an advisory body.**
- 21. Solicit ongoing community input and feedback.**
- 22. Adopt a Rapid Monitoring, Assessment, and Learning process.**
- 23. Conduct a formal annual evaluation.**

## Recommendation #15

### Contract the SCU model to a CBO.

The administrative structure of crisis response systems across the country varies significantly. Some are administered by government agencies, some are run in collaboration between a government agency and CBO, and some are entirely operated by CBOs. There are several reasons why the SCU model should be contracted to a CBO, at least through Phase 2 of the phased implementation approach.

#### The SCU crisis response model would benefit from being contracted to a CBO for several reasons:

- **Supports a quick launch:** CBOs are often able to move more nimbly than government agencies, especially as it relates to hiring; adequately staffing the SCU mobile crisis team is a critical element in timely implementation. Given the urgent need, the ability to launch the SCU quickly and provide non-police mental health crisis response services is critical.
- **Established relationships with community members:** Stakeholders made it clear that CBOs have developed strong relationships with service utilizers accessing mental health support, homelessness resources, street medicine, and system navigation and referrals. CBOs in Berkeley have expertise in the community that can be leveraged to advance the SCU's crisis response efforts.
- **Referral networks and partnerships:** A CBO with established networks and partnerships would be well positioned to support service utilizers with referrals as well as transport to community-based resources. Additionally, these relationships can support warm handoffs at transport locations.

#### Considerations for Implementation

- To contract with a CBO, the City of Berkeley will have to issue a Request for Proposals (RFP). The RFP process will need to evaluate a CBO's capacity to develop and implement a model of this size on this timeline.
- The City should identify a backup plan if no qualified CBOs respond to the RFP.
- The CBO's practices should align to the values and principles of the SCU. The City may need to use contracts and MOU specifications to require:
  - Adequate and equitable wages for all SCU staff and crisis responders, especially peer specialists and peer specialist supervisors.
  - A representative and equitable hiring process that prioritizes staff who are reflective of those most marginalized and harmed by existing crisis response options and the criminal legal system.
  - Necessary data and metrics to collect and report as well as ensuring sufficient technological systems to meet these needs.
- CBOs may face challenges inherent in the contract structure, which should be evaluated and protected against as these challenges can undermine sustainability and longevity.
  - Short-term funding: only funding the SCU in one-year increments can reduce staff retention and inhibit investments in operations (*refer to Section V*).
  - Overhead costs: allocate enough funds for overhead costs (e.g., salary, training, and office equipment), which are critical to SCU success.
  - Contract monitoring: data collection, monitoring, and evaluation are essential to the success and iteration of the SCU but should not be prohibitive to the work.
- There may be additional needs or considerations around data and system integration (*refer to recommendation #16*) and the collaboration across administration and leadership if a CBO implements the SCU; these may need to be included in the contract.
- All recommendations are written with a contracted CBO in mind; additional implications may arise during planning and Phase 0.

## Recommendation #16

### Integrate the SCU into existing data systems.

Having access to patient data will support the SCU to provide tailored, informed, and equitable services for those experiencing mental health and substance use crises. Access to existing data systems, such as an EHR, will not only ensure that the SCU has access to relevant patient information, but also that other providers are aware when, how, and why their client might be interacting with crisis response. Finally, integrating the SCU into existing data systems will ensure aligned and consistent data collection, which is essential for the rapid assessment monitoring (*refer to recommendation #22*) and evaluation (*refer to recommendation #23*).

There are many factors outside of the purview of the SCU, HHCS, or even that City of Berkeley that affect whether data and system integration can be achieved. These factors include patient privacy and legal protections (i.e., HIPAA), technological capabilities, available funding, logistics across private and government entities, and more. As a result, this recommendation is included as an aspiration that should be planned for in future phases and may not be realized during Phase 1 of implementation.

- Bidirectional, live data feeds should be integrated between the SCU and other data sources, including but not limited to:
  - EHRs used by major medical systems and Federally Qualified Health Centers (FQHC)
  - Alameda County's Community Health Record (CHR)
  - Alameda County's YellowFin

#### **Why does the SCU need to access service utilizers' records, such as EHRs?**

Access to an EHR allows crisis responders to make informed decisions based on a service utilizer's health history. This access also enables crisis responders to communicate directly with a service utilizer's existing support team, such as psychiatrists or case managers, when providing crisis response or referring the service utilizer for follow-up care.

#### **Is it common for crisis responders and clinicians to have access to service utilizer records?**

Many other crisis response programs enable access to these sources of data. For example, the Alameda County Community Assessment and Transport Team (CATT) has access to the county's CHR. Providers at FQHCs, including programs like Lifelong's Street Medicine Team, have access to an integrated EHR. Berkeley Mental Health (BMH) is already integrated with the county's YellowFin reporting system. Other city models, such as Denver STAR, enable their crisis responders to access existing data systems.

#### **Why should the data feeds be bidirectional?**

Not only do crisis responders need to access service utilizer medical history, but the data they collect during a crisis response should be entered into the centralized data systems so that a service utilizer's existing support team has an updated and complete case history. The county's CHR has live data feeds from many providers and so the SCU's data should also have bidirectional capabilities when possible.

## Considerations for Implementation

- The Berkeley City Attorney and IT have signed onto the county's CHR, and many CBOs and medical providers have also already signed onto the CHR, which could facilitate the SCU's integration into this system.
- The SCU will need access to EHRs and the CHR to participate in client case management meetings (*refer to recommendation #18*).
- SCU team members will need training and support to accurately enter data into these platforms, which is essential to data integrity.
- Legal protections for confidentiality and consent will have to be carefully assessed to determine the feasibility of this recommendation and implementation approach.
- Many health conditions can be criminalized and prosecuted. The SCU data must be separate from Dispatch and CAD data because Dispatch is situated within Berkeley Police Department. Presently, Dispatch does not have access to EHRs or the CHR, and in the future, this separation should continue.

## Recommendation #17

# Collect and publish mental health crisis response data publicly on Berkeley's Open Data Portal

Data collection is essential to monitoring and evaluation and spans across the SCU mobile team and supporting personnel, Dispatch and/or the alternative phone line, and central leadership. Given how many different personnel and agencies will be collecting and reviewing data, it is essential that data collection be planned for early in Phase 0 to ensure alignment, accuracy, and data integrity.

- Types of data that should be collected and published:
  - Call volume
  - Time of calls received
  - Service areas
  - Response times
  - Speed of deployment
  - Determinations and dispositions of Dispatch (including specific coding for violence, weapons, and emergency)
  - All determinations and deployed teams from Dispatch
  - Percentage of calls responded to by SCU of all calls sent to SCU
  - Type or level of service needed compared to the initial determination at the point of Dispatch
  - Service utilizer outcomes
  - Number of 5150 assessments conducted
  - Number of 5150s confirmed and involuntary holds placed
  - Number of transports conducted
  - Location of transport destinations
  - Type of referrals made
  - Priority needs of clients served (housing, mental health)
  - Number of requests for police involvement
  - Racial demographics of service utilizers
  - Other relevant characteristics of service utilizers, such as homelessness status or dementia

*Note: not an exhaustive list.*

- Examples of public data dashboards from alternative crisis models:
  - [Portland's Street Response data dashboards](#)
  - [NYC's B-HEARD monthly data reports](#)



### How does data collection promote community safety and health?

Nationally, many emergency call centers lack consistent data collection and internal sharing and review, suggesting city administrators and leaders are unable to effectively use data to understand the scope of behavioral crisis and response in their communities.<sup>27</sup> Collecting data in a way that can be used among program administrators will be essential in supporting the success of the SCU and positive outcomes for the community. Moreover, during this project, it was impossible for RDA to conduct an “apples-to-apples” analysis between data from any of the contributing agencies (Police, Fire and Falck, MCT, Dispatch/Auditor’s Report) because the data entry practices across each agency are inconsistent. Specifically, the variables that each agency records for each call response are not the same. In instances where there were similarities in the types of variables used between agencies, the values that they each used to enter or code their data were not comparable.

### Why does publishing data publicly matter?

Publishing data through Berkeley’s Open Data Portal could promote transparency around crisis response services, address community stakeholders’ distrust of the system, and keep the community informed about the SCU and the city’s crisis response services.

### Considerations for Implementation

- Multiple agencies are likely to engage in data collection that contributes to the SCU model. All data variables and definitions should be aligned to ensure system integration and data integrity, including:
  - CAD data
  - Additional 911 and Dispatch data (as applicable)
  - Alternative phone number data (as applicable)
  - SCU mobile team data
  - EHR data
  - CHR data
- Personnel will need ample training on data collection, including variable definitions and data entry processes, to ensure a high degree of data integrity.
- Staff will need adequate technology to collect and report on data (*refer to recommendation #6*).

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<sup>27</sup> Velazquez, T & Clark-Moorman, K. (2021). New research suggests 911 call centers lack resources to handle behavioral health crises. *ResearchGate*.

[https://www.researchgate.net/publication/355684339\\_New\\_Research\\_Suggests\\_911\\_Call\\_Centers\\_Lack\\_Resources\\_to\\_Handle\\_Behavioral\\_Health\\_Crises](https://www.researchgate.net/publication/355684339_New_Research_Suggests_911_Call_Centers_Lack_Resources_to_Handle_Behavioral_Health_Crises)

**Recommendation #18**

## Implement care coordination case management meetings for crisis service providers.

Service utilizers often receive care across multiple agencies and individual service providers, but transparency and visibility of service utilizers that move in and out of these agencies is a challenge. Regular case management coordination meetings across organizations and providers could help to address the perceived lack of coordination across different services and to improve the care coordination for service utilizers, such as those discharged from inpatient facilities.

**Who should participate:**

- SCU mobile team
- Service providers and case managers identified through CHR and EHRs
- Partners and those receiving referrals at CBOs
- A designated meeting coordinator (e.g., SCU program manager, city staff)

**What the meetings should achieve:**

- Discuss care for shared service utilizers
- Discuss needs of high service utilizers, services provided
- Discuss successes or challenges with warm handoffs and referral pathways

**How is care coordination relevant to crisis response?**

Care coordination supports providers in making informed decisions about the services to provide and can prevent future crisis. Throughout the project's qualitative data collection, service providers in Berkeley commonly provided the idea of care coordination meetings between the SCU and providers; they expressed that if their clients access SCU crisis services, they would benefit from collaborating with the SCU. The REACH Edmonton program also shared that meetings for frontline workers to discuss shared clients increased positive client outcomes. Finally, Berkeley's Transitional Outreach Team (TOT) shared challenges they have encountered when providing follow-up care after MCT responds to an incident, especially communicating with the many external providers that interact with a single service utilizer.

**Why is there a coordinator role in these meetings? Who is that?**

Based on the lessons learned from other cities implementing alternative crisis response models, such as the REACH Edmonton and Denver STAR programs, care coordination meetings will require a centralized coordinator or leader from the SCU. Frontline workers do not have the capacity to manage these meetings, which includes scheduling, note taking, preparing data, following up on items as necessary, and other duties. The care coordinator may be an administrative staff member of the SCU, such as the program manager, or a staff member from the City of Berkeley who oversees many of the relevant contracted providers (beyond the SCU).

### Considerations for Implementation:

- These meetings will require a clear owner to manage meeting topics, prepare data, identify non-urgent items for follow-up, and ensure equitable power and time talking, especially for peer specialists. The SCU program manager may be best poised for this role.
- Integrated data systems that allow for sharing data and reviewing case history across providers would enhance care coordination and case management (*refer to recommendation #16*).
- There may be a benefit to call takers joining these meetings if they identify and document who is in crisis.

## Recommendation #19

# Implement centralized coordination and leadership across city agencies to support the success of mental health crisis response.

Overall, programs benefit from ensuring there are one or more people responsible for coordinating the program at a birds-eye view. As a new mental health crisis response initiative, the SCU model will require cross-system coordination for implementing new processes, training, monitoring, and evaluation. Moreover, because these initiatives span across Dispatch and/or an alternative phone number, the SCU mobile team, and other referral entities like Fire, Police, MCT, TOT, and mental health and social service providers, a centralized coordinating body will be essential to the success of this far-reaching initiative.

### Who should participate:

- Berkeley Dispatch
- Berkeley Department of Public Health
- Berkeley Mental Health (BMH)
- Berkeley Health, Housing & Community Services Department (HHCS)
- SCU Program Manager
- Berkeley Fire Department
- Berkeley Police Department
- Other relevant parties as the project evolves

### What the meetings should achieve:

- Progress along the phases of implementation
- Lead the rapid assessment processes and regularly review data
- Review SCU Steering Committee feedback
- Review service utilizer and stakeholder feedback
- Prioritize issues
- Make decisions

### Additional outcomes:

- Increase open communication across city agencies
- Build trust across crisis responders and city departments
- Align all partners on shared values for increasing community health and well-being

### Why is the Berkeley Police Department involved in this leadership body if the SCU is a non-police response?

Because the police currently respond to all mental health calls received through 911, any decision about shifting specific call and service types from police to SCU will require BPD buy-in, communication, and planning. Moreover, Dispatch is currently situated within BPD, and therefore, BPD leadership will be required to assess and approve changes to Dispatch. For instance, to ensure that all SCU data is kept confidential and separate from police, BPD will need to support planning for CAD data to integrate with SCU in a compliant manner. Finally, police may be able to request SCU deployment, so these types of protocols will need BPD's input.

### Considerations for Implementation:

- These meetings will need a clear owner to schedule meeting times, prioritize agenda topics, prepare data, identify non-urgent items for follow-up, and coordinate follow-up communication to relevant stakeholders.
- A data dashboard will support data review and rapid assessment processes.
- Some agencies may have strong bargaining presence or positional power, such as BPD. It is important that these meetings uphold equitable power and weight in making decisions.
- Throughout Phase 0 and Phase 1, this group may need to meet on a weekly basis.
- Additional stakeholders may need to be added to this group (permanently or ad hoc for specific topics), such as representatives from emergency departments, John George Psychiatric Hospital, or other city or county stakeholders.
- As the model progresses, this group may discuss opportunities to improve the mental health crisis system at a broader scale, beyond the scope of the SCU's crisis response, such as more inter-county and inter-city coordination on systemic issues related to housing.

**Recommendation #20**

## Continue the existing SCU Steering Committee as an advisory body.

Presently, the SCU Steering Committee has representatives with ties to community groups and stakeholders. The SCU Steering Committee should continue as an advisory body to incorporate into decision-making spaces the perspectives that may otherwise be neglected in government spaces.

The SCU Steering Committee should continue to advocate for marginalized communities in the SCU model design and delivery by taking on an advisory role through Phase 0 and Phase 1 of implementation, at a minimum.

**The current participants should remain, if they choose, including:**

- Berkeley Community Safety Coalition
- Representatives from the Mental Health Commission
- HHCS staff
- BMH staff
- Berkeley Fire

**Additional participants should be added, including:**

- Relevant staff from the SCU or administrative CBO, such as the program manager or clinical supervisor
- Dispatch personnel, particularly someone in a leadership position who can both promote change and holds expertise relevant to implementation

**Considerations for Implementation**

- HHCS staff should maintain the role of coordinating the SCU Steering Committee, even if a contracted CBO leads the SCU, because HHCS will lead other aspects of oversight including contract management.
- Additional participants may be added to the SCU Steering Committee at different times. For example, Dispatch personnel should join earlier in Phase 0 of implementation, while SCU personnel will join once that team is fully staffed in Phase 1.

**Recommendation #21**

## Solicit ongoing community input and feedback.

Governments often face barriers in hearing from community members that are the most structurally marginalized. However, engaging existing coalitions and networks designed to represent marginalized service users' perspectives can support more equitable engagement. Intentional outreach for these opportunities is essential because, historically, government institutions and other structures have prevented the full and meaningful engagement of Black people, Indigenous people, people of color, working class and low-income people, immigrants and undocumented people, people with disabilities, unhoused people, people who use drugs, people who are neurodivergent, LGBTQ+ people, and other structurally marginalized people. Prioritizing the engagement, participation, and recommendations of the community members most harmed by existing institutions, including those most harmed by police violence, will ensure that systems of inequity are not reproduced by a crisis response model.

Instead, community engagement can support the SCU to address structural inequities. In addition to the SCU Steering Committee, ongoing opportunities for the community to provide input to decisions as well as feedback about their experiences will be valuable to the SCU model throughout Phase I.

**Suggested methods to receive community input and feedback:**

- Focus groups
- Town halls or community forums
- On-site outreach
- Questionnaire
- Online feedback "box"

**Modalities should ensure equitable access to participation:**

- Online and in person
- Large groups, small groups, and one-on-one
- Anonymous
- Written and verbal
- Translation and interpretation

**Encourage participation among:**

- Service utilizers
- Community members with mental health and behavioral health needs who have not yet engaged with the SCU
- Service providers at CBOs, especially those receiving SCU transports and referrals

**Address structural barriers to participation by:**

- Using convenient, accessible, and geographically diverse locations
- Offering events at varying times to accommodate different schedules
- Providing financial compensation
- Providing childcare

**Why is more community engagement needed if community input informed the model?**

The robust community engagement that contributed significantly to the development of this model demonstrates the valuable perspective and knowledge held by community members about the types of services needed and how to make them more accessible and acceptable. Soliciting ongoing feedback once the SCU is launched will provide insight to how well the model is meeting community members' needs and where barriers to crisis care persist, servicing both quality improvement and evaluative needs.

**Why should ongoing community engagement be conducted?**

Community input and feedback should not be limited to the end of Phase 1 as part of a summative evaluation, but instead be ongoing to account for the changing landscape of SCU model implementation and the needs of both service utilizers and the broader community. It will also support ongoing iteration of the SCU throughout Phase 1, while planning for more complex modifications in Phase 2.

**Considerations for Implementation**

- The opportunities for community input and feedback should be held regularly, such as monthly, or quarterly.
- Frequent service utilizers, perhaps identified during the SCU's first three months of implementation, could be the primary recruitment base for feedback.
- Address barriers to equitable participation in feedback, such as by providing childcare, transportation vouchers, or financial compensation for time.
- Community feedback should be evaluated as essential data points that directly inform the rapid assessment processes (*refer to recommendation #22*).

## Recommendation #22

### Adopt a rapid monitoring, assessment, and learning process.

Many crisis response programs use data to monitor their ongoing progress and successes, modify and expand program pilots, and measure outcomes and impact to inform ongoing quality improvement efforts. Data collection, data system integration, centralized coordination across city leadership, the SCU Steering Committee, and ongoing input and feedback from community members and service utilizers (*recommendations #16, #17, #19, #20, and #21*) should all contribute to the monitoring that supports ongoing implementation, assessment, and iteration.

#### **A rapid assessment process will likely need to:**

- Develop a shared vision for the SCU model.
- Develop goals for the SCU model.
- Create assessment questions to guide the monitoring and learning process.\*
- Define indicators or measures.
- Use a mixed-methods approach, including quantitative programmatic data and feedback from service utilizers, staff, and other stakeholders.

#### **All model components will benefit from assessment, including:**

- Availability of the team, accessibility of Dispatch and/or alternative phone line, response time
- Services provided, expertise of mobile team, training
- Equipment, vehicles, and supplies
- Transport, service linkages and handoffs, partnerships with CBOs
- Case management meetings and centralized leadership coordination
- Data collection, data integration, data integrity, and data transparency
- Public awareness campaign

#### **Consider using the Results-Based Accountability (RBA) framework<sup>28</sup> to assess SCU performance aligned to:**

- Quantity of SCU services
- Quality of SCU services
- The impact or outcome of SCU services

\*From the shared vision, create assessment questions to use throughout the duration of Phase 1, such as:

- Is there a need to scale and increase services?
- Are resources being used efficiently in the pilot? Will they be used efficiently with an increase in services?
- How effective is the current approach? Will it be effective with an increase in services?
- Is the current approach appropriately tailored to the Berkeley community? Is it appropriate for the Berkeley community?

<sup>28</sup> The City of Berkeley is using RBA for performance monitoring efforts and therefore may benefit from using RBA for the SCU model too.



**Figure 4: Rapid Monitoring, Assessment, and Learning Process**

A rapid monitoring, assessment, and learning process can happen in multiple venues. Some questions may be assessed on a quarterly basis, while others can happen on a monthly or weekly basis.

### Considerations for Implementation:

- The rapid assessment process will need to establish clear roles for leading the meetings and decision-making, especially between the SCU program manager and central coordinating leadership.
- The rapid assessment process will benefit from clear timelines and processes for reviewing data, discussing changes and adaptations, and sharing findings across relevant stakeholders.
- The rapid assessment process may have multiple processes or venues based on specific data points or meeting frequencies. Clarify who should be attending, such as Dispatch, the alternative phone number (if applicable), the SCU mobile team, HHCS leadership, and others.

**Recommendation #23**

## Conduct a formal annual evaluation.

Several components of the SCU – including the model’s services, the SCU mobile team’s training, the deployment determinations of Dispatch and/or the alternative phone line, and impacts and outcomes for service utilizers – offer potential for demonstrating the success of the model through formal evaluation. The evaluation should measure whether the SCU model is progressing towards the intended outcomes, as well as suggest opportunities for modifications and expansion. Design of a formal, annual evaluation is best done early in program planning.

**Evaluation may define:**

- A Theory of Change or Logic Model
- Short-term and medium-term goals

**Evaluation could measure:**

- Fiscal analysis, especially evaluation of progress towards the City’s aim of reducing BPD’s budget by 50%
- Systems change effectiveness, including evaluation of progress towards City’s goal of reducing the footprint of BPD to criminal and imminent threats
- Program efficacy/effectiveness, quality of service
- Service utilizer outcomes
- Ongoing barriers and challenges that Phase 2 can address
- Effectiveness of public awareness campaign, whether community members know about it
- Impacts aligned to a Racial Equity Impact Assessment<sup>29</sup>

**Evaluation should include:**

- Qualitative and quantitative data
- Perspectives from SCU personnel
- Perspectives from service utilizers
- Perspectives from adjacent organizations, staff, and SCU Steering Committee

**How is the proposed evaluation different than rapid monitoring?**

Evaluation and rapid monitoring, or quality improvement, are complementary and should inform each other. Rapid monitoring is intended for more immediate quality improvement and occurs on more frequent cycles to guide iterative implementation of specific model elements. Evaluation asks broader questions from a greater degree of distance to guide adjustments to the model that will support ongoing effectiveness and sustainability. Staff are typically central to rapid monitoring to facilitate ongoing improvements, but an evaluation is generally conducted by an outside team that has some distance from day-to-day operations.

**Considerations for Implementation**

- If the City of Berkeley intends to contract out the evaluation, then the RFP and contracting process should be initiated early in Phase 0 to allow for adequate planning.

<sup>29</sup> To learn more about Racial Equity Impact Assessments, visit:

[https://www.raceforward.org/sites/default/files/RacialJusticeImpactAssessment\\_v5.pdf](https://www.raceforward.org/sites/default/files/RacialJusticeImpactAssessment_v5.pdf)

## Promoting Public Awareness

Promoting public awareness of the SCU and its aims will be essential to the SCU's success. Public education efforts should be advanced through a variety of methods, including a far-reaching campaign and targeted outreach. These efforts should emphasize that the SCU is a non-police crisis response service and promote how to access the SCU (i.e., which phone number to call). Overall, promoting public awareness is essential to building trust and addressing fears or reluctance that might inhibit people to call for support during a mental health or substance use crisis.

Promoting awareness and establishing relationships with other providers in the response network is also important, especially staff at emergency facilities who may interact with the SCU during the transport of a person who has experienced a mental health or substance use crisis. This type of relationship-building and education can streamline processes to promote positive outcomes for people in crisis.

The following recommendations should be adapted and implemented to advance public education and awareness about the SCU model:



### Key Recommendations

- 24. Launch a public awareness campaign to promote community awareness and education about the SCU.**
- 25. The SCU mobile team should conduct outreach and build relationships with potential service utilizers.**

## Recommendation #24

### Launch a public awareness campaign to promote community awareness and education about the SCU.

For the community to be able to call for an SCU response, they must know that it exists. Stakeholder input throughout this project has indicated that community members must trust that the SCU provides a crisis response without the use of law enforcement for the SCU to be a viable and sought-after crisis response option. For these reasons, promoting public awareness of the SCU and its aims will be essential to the SCU's success.

#### Aims of the campaign:

- Emphasize the SCU as a non-police mental health and crisis response option
- Distinguish the roles and responses of SCU, MCT, and police
- Promote how to access the SCU (i.e., through 911, an alternative number, or 988)
- Describe when SCU will not respond (e.g., social monitoring, weapons) and when it will (e.g., types of services).
- Emphasize the community engagement that informed the model
- Share the availability of Berkeley Open Data
- Promote opportunities for ongoing stakeholder input and feedback

#### Why is it important to launch a public awareness campaign?

To inform the community of this new resource and to distinguish the SCU as a non-police response. Stakeholder input throughout this project has indicated that community members must trust that the SCU provides a crisis response without the use of law enforcement for the SCU to be a viable and sought-after crisis response option.

#### How do other cities promote their crisis response model?

Other cities provided examples of promoting awareness outside of mass media. For example, Portland's Street Response team contracts with street ambassadors with lived experience (via a separate contract with a local CBO) who perform direct outreach to communities and work to explain the team's services and ultimately increase trust with potential service utilizers.

#### Considerations for Implementation

- The methods of the campaign may need to be tailored to the targeted stakeholder groups and may include:
  - Mass media, billboards, advertisements on public transportation, radio announcements, local newspaper announcements, updates to the city's social media and websites, updates to service providers' and CBOs' social media.
  - Business cards with contact information for potential service utilizers.
  - "Meet-and-greets" that the SCU mobile team hosts with service providers at CBOs and emergency facilities.
- The public awareness campaign may have multiple phases, such as first promoting awareness of the SCU and how to access it, and then promoting opportunities for stakeholder feedback.

**Recommendation #25**

## The SCU mobile team should conduct outreach and build relationships with potential service utilizers.

In addition to a public awareness campaign that promotes the SCU as a community resource, shares how to access the SCU, and emphasizes the non-police design, many service utilizers may still be reluctant to engage with a new entity. As a result, to most equitably meet the needs of potential service utilizers and especially substance users, the SCU may need to conduct in-person outreach. This outreach should be targeted to specific groups who are most likely to call the SCU with the aim of establishing trusting relationships and sharing more about their harm reduction approaches.

**Targeted sites for relationship building with potential service utilizers:**

- Encampments
- Safe parking RV lots
- Drop-in centers
- Downtown Berkeley
- People's Park
- Emergency department waiting rooms

**Why might service utilizers be reluctant to engage in services with the SCU?**

Many community members have personally experienced the criminalization of substance use and mental health emergencies, whether through their own experiences or having witnessed the experiences of family, friends, or community members. Such carceral approaches include involuntary psychiatrist holds and unnecessary transport to hospitals. In particular, unsheltered residents and substance users may be more distrustful of a new team and be less likely to call during a crisis. In interviews, unsheltered residents shared that not all of their substance use management are being adequately addressed by current crisis responders and they experience high rates of transport to emergency departments. Many also shared that they fear police retaliation for their substance use. In general, there are several reasons why community members may be hesitant about engaging crisis responders, which could be addressed by individual, relational outreach.

**Why would relationship building improve utilization of the SCU?**

Despite many service utilizers reporting overall distrust of first responders, they also shared that EMTs have developed trusting relationships and strong rapport for handling overdoses. Because of this relationship, service utilizers are more willing to call for an EMT to respond to an overdose. Similarly, having strong relationships built on trust will be key to the success of the SCU.

**Considerations for Implementation**

- If there are periods of low call volume, the SCU may use those times as opportunities to build relationships in communities of potential service utilizers and proactively provide services.
- This outreach may also be implemented based on data and findings or in preparation for Phase 2 expansion and changes.



## System-Level Recommendations

The development of a mental health crisis response model as a component of the City of Berkeley's emergency services should be understood as a systems-change initiative of great magnitude. There are several critical factors that must be attended to in order to realize the full implementation of the SCU and to progress towards its intended outcomes.

### Addressing the Needs of Dispatch

There is an urgent need for a 24/7 mental health and substance use crisis response model that does not rely on law enforcement to provide specialized mental health care. To provide this service, crisis responders must be connected to those in crisis. Thus, the role of Dispatch is essential.

Dispatch needs a full assessment and planning process to address the complexity of the 911 response system. This assessment and planning, though urgent, cannot be done hastily. The SCU will benefit if Dispatch is able to:

- Address the understaffing, under-resourcing, and identified training needs of call takers.
- Plan for a sustainable integration.
- Plan for a variety of scenarios to ensure crisis responder and community safety.
- Participate in the SCU phased-implementation approach and ongoing collaboration with SCU leadership.
- Establish trusting relationships and rapport with the SCU so that call takers are confident in deploying the SCU for scenarios they previously would have deployed MCT or Police.

## A Sufficient Investment of Resources

A lack of sufficient resources is not only a challenge for Dispatch, but is a common challenge expressed by service providers in Berkeley and in other locales. Within the City of Berkeley, both TOT and MCT have challenges meeting the needs of community members because their hours of operation are limited, and they do not have enough staffing and resources to provide 24/7 services. This results in the perception of slow or delayed response times and can decrease the likelihood that callers continue to seek that service. Efforts in other cities, such as the Mental Health First and MACRO initiatives in Oakland and the Street Crisis Response Team in San Francisco, have also had to restrict their hours of availability and services due to a lack of sufficient funding.

Mental health crisis response could be essential in promoting health equity in the City of Berkeley. However, if it is not sufficiently resourced to provide 24/7 crisis response without long wait times, it will not achieve trust, and will become utilized less often and will therefore not achieve the desired systems-change results. This resourcing includes not only the SCU mobile crisis team, but the entirety of the model and related infrastructure, from the call center to program manager. Sufficient resourcing also includes dedicated time by city leadership to support coordination, collaboration, and problem-solving.

## The Role of Trust

Trust was one of the most discussed factors across stakeholder engagement and will be a critical ingredient to the success of this system-wide change initiative. The public awareness campaign and all Phase 0 planning processes must address the concerns and doubts that could undermine trust across community stakeholders, the service provider network, and city leadership.

**Trust will shape whether community members utilize the SCU.** Community members must trust that the SCU:

- Is a non-police crisis response.
- Is accessible and available 24/7.
- Is responsive to emerging needs and ongoing community input and feedback.
- Provides competent harm reduction and non-carceral approaches to mental health and substance use crisis intervention.

**Trusting relationships affect the quality of referrals, warm handoffs, and service linkages across the service provider network.** Service providers emphasized that trust plays a role in:

- Whether they will refer a client to another provider.
- The amount and type of information they disclose about a shared client.
- Whether systems will choose to share and integrate data.

- The quality of collaboration and communication during warm handoffs, care coordination, or at client discharge.

**Trusting relationships are essential to centralized coordination and collaboration among city leadership.**

The SCU model will require a variety of agencies and departments to work together in new ways and toward new ends. Other cities implementing alternative crisis models shared that trust was enhanced across leadership by:

- Aligning on shared values and commitment to improving health outcomes for people in crisis.
- Recognizing and adapting to the varied cultures of city departments, agencies, and CBOs.
- Ensuring decision-making power is allocated in alignment with the aims of the crisis model, such as ensuring that law enforcement does not have an unaligned or inequitable of voice or power in making decisions.
- Reviewing data to promote accountability and celebrate successful outcomes.
- Planning for sufficient time to prepare and participate in collaboration.





## **Conclusion: Next Steps & Future Considerations**

This report presents recommendations for a model that is responsive to community needs. Still, there were numerous questions, issues, needs, and considerations that surfaced that were beyond the scope of the project. Decisions around those factors could significantly shape the types of services the SCU provides as well as how it is coordinated and administered across agencies. Such considerations are pertinent to the future of the SCU, crisis response, and the mental health service system in Berkeley, and therefore should continue to be discussed by city leadership and those implementing the SCU.

### **Long-Term Sustainable Funding**

The SCU model requires long-term sustainable funding. A sound fiscal strategy must recognize the robustness of costs associated with the SCU and plan for institutionalizing and sustaining those costs. There are a number of potential funding sources for the SCU model, including Medi-Cal reimbursement, Medi-Cal opportunities through CalAIM, and DHCS grants. However, these funding streams are unlikely to sustain a crisis response model on their own. Other funding and resources may need to be braided into the SCU to effectively implement this model.

While braiding allows for maximizing funding resources, it also requires clear and separate tracking of services based on funding sources and requirements. With multiple funding streams, the target populations, reporting requirements, eligibility criteria, and performance measures can vary greatly. A braided funding model, therefore, requires knowledgeable administrators as well as dedicated time to manage. This can be especially resource-intensive for a CBO implementing the SCU. The SCU model will need to be very clear about the funding requirements and develop an appropriate system for ongoing tracking and reporting.

Different financing mechanisms provide varying levels of sustainability and predictability, considerations which should inform the development of a fiscal strategy for the SCU model. Unfortunately, these recommendations may not be fully realized if there is not a long-term sustainable fiscal strategy. Modifications to the SCU model could negatively impact the quality of service delivery or lessen the population impact.

Across the country, some cities have used a sales tax to fund their alternative crisis response models while others have redirected funds away from police departments. Rather than identifying new or short-term grant awards, a primary consideration for the City of Berkeley should be to look to dollars that can be reinvested from the Berkeley Police Department, in alignment with the Reimagining Public Safety initiative, to develop a sustainable and comprehensive SCU model.

## Continue Planning for 24/7 Live Phone Access to the SCU

Significant planning will be required to fully realize the 24/7 live phone access to the SCU (*refer to recommendations #8, 9, and 10*). Reaching out to existing call centers—such as Alameda County CSS—or to other cities implementing similar crisis models could support the development of the phone access to the SCU. Additional planning is needed to determine, at a minimum:

- Equipment and technology needs
- Staffing requirements for the estimated call volume
- Recruitment, hiring, and training
- Workflow and protocol development
- Cost and funding availability

## The Location of 911 Dispatch Within the Berkeley Police Department

The 911 Communications Center is currently operated by the Berkeley Police Department. This structure affects how Dispatch is funded and who makes decisions. As the role of Dispatch is broadened to coordinate a greater variety of responses to emergencies, there may be advantages to moving Dispatch outside of the Berkeley Police Department, such as improved communication and coordination across relevant agencies. For instance, it has been expressed that Dispatch call takers are currently more comfortable deploying the police than other crisis responders given their long tenure and rapport with police officers, so call takers' ability to establish rapport with the SCU team is needed for them to be comfortable deploying the SCU. Structural changes like this may also align to several of the Reimagining Public Safety initiative's aims. This consideration can be explored as part of the assessment and planning processes of the phased implementation approach.

## Preventing Social Monitoring: Clarifying the SCU's Guiding Principles

The SCU model is designed to ensure that mental health specialists respond to people experiencing mental health crises. However, there is significant and justified concern that the SCU could be co-opted to support the social monitoring and enforcement of unsheltered residents. Clarifying the SCU's guiding principles could support in reifying the intentions of the model to ensure that all practices are aligned with those principles.

There are several elements within the model design where data, ongoing conversation, and service utilizer feedback can ensure that the SCU lives out its intention. One such example is whether and how the SCU would be deployed with the police and/or how the SCU is distinguished from MCT. For example, if a caller reports an unsheltered neighbor is residing on their sidewalk or driveway, this may not qualify for an SCU response. However, if that call is deployed to the police, then the response effectively criminalizes unsheltered Berkeley residents. Such scenarios should be explored as the SCU model is implemented, refined, and expanded.

## Address the Full Spectrum of Mental Health and Substance Use Crisis Needs

Mental health and substance use crises vary in severity along a spectrum. A crisis can present as someone in immediate danger to themselves or others, someone who needs regular support to address their basic needs, or someone who is generally able to manage their needs but needs occasional support to prevent a future crisis.

Throughout this project, many stakeholders expressed that in order to effectively address the challenges of the current system, solutions and changes must engage with the nuances and spectrum of mental health crises:

- Some forms of crisis are readily visible while others are not.
- Some forms of neurodivergence are reported as a mental illness or crisis, but they are not.
- Some forms of crisis occur because the person is unable to access services to meet their needs.
- Some forms of emergency service utilization stem from ongoing unmet basic needs such as food and affordable housing.

Stakeholder participants urged that the concept and definition of a mental health crisis and crisis services be expanded to not only support crisis intervention but also prevention, diversion, and follow-up. The following two considerations should be further explored because they may support the SCU model. Both considerations represent a form of

reimagined public safety and may be realized with additional resources, such as funds divested from Berkeley Police Department:

### **Expand the SCU Model to Include a Follow-up Care and Coordination Team**

There will likely be a need for a team to receive referrals from the SCU mobile team and connect with service utilizers for follow-up care. Follow-up care could include referrals, system navigation, and case management support. This team may also need to conduct outreach to make contact with service utilizers and address barriers to care as needed. For example, some service utilizers may be unable to follow through with a referral if they do not have reliable access to transportation or experience challenges maintaining scheduled appointments. This team could potentially be funded by the 988 funding allocated to dedicated follow-up teams deployed from 988 crisis call centers.<sup>30</sup>

There are many lessons that should be learned from the existing Transitional Outreach Team (TOT), such as challenges they face with adequate staffing and funding or constraints and limitations with who they can serve. Any initiatives around follow-up care should augment rather than duplicate the TOT.

### **Increase the Number of Sites for Non-emergency Care for Berkeley Residents**

Throughout this project, stakeholder participants emphasized the need for sites for non-emergency care, such as drop-in centers, day centers, sobering sites, and respite centers. These services are important for harm reduction and crisis prevention, and as such would support the outcomes of the SCU model. There may be opportunities in Phase 0 or Phase 1 to reserve beds at a shelter or similar care facility as a temporary measure, ensuring persons in crisis have access to these beds after engaging with the SCU. However, increasing the overall number of sites for non-emergency care would require a longer-term investment

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<sup>30</sup> Santos, M (2021). New suicide prevention hotline aims to divert callers from police. *Crosscut*. <https://crosscut.com/politics/2021/07/new-suicide-prevention-hotline-aims-divert-callers-police>



**Appendix**



## Appendix A: Launch Timeline & Phased Implementation Approach

### Phase 0 – Launch Timeline

Nov 2021 – May 2022

| System-Level: Planning, Launch, Implementation |                                                                                             | HHCS | Steering Committee | Dispatch | Contracted CBO |
|------------------------------------------------|---------------------------------------------------------------------------------------------|------|--------------------|----------|----------------|
|                                                | Engage community on feedback to SCU Model recommendations                                   | X    | X                  |          |                |
|                                                | Engage community on SCU RFP requirements                                                    | X    |                    |          |                |
| Dec                                            | Dispatch leadership communicates and champions (internally) the SCU change-initiative       |      |                    | X        |                |
|                                                | Plan for Dispatch assessment (e.g., determine if RFP needed)                                | X    |                    | X        |                |
| Jan                                            | Make decisions about 24/7, live phone line to SCU (option A, B, C)                          | X    | X                  | X        |                |
| Feb                                            | Issue RFP for SCU                                                                           | X    |                    |          |                |
|                                                | <i>Issue RFP for SCU alternative phone line (TBD)</i>                                       | X    |                    |          |                |
|                                                | RFP Deadline                                                                                |      |                    |          |                |
| Mar                                            | Review all RFPs                                                                             | X    | X                  |          |                |
|                                                | Select awardee for SCU                                                                      | X    | X                  |          |                |
|                                                | Begin planning for site visits                                                              | X    |                    | X        | X              |
| Apr                                            | Contract process for SCU                                                                    | X    |                    |          |                |
| May                                            | Hire SCU personnel (mobile team, supportive and administrative roles, Dispatch/phone staff) |      |                    |          | X              |
|                                                | Hire mental health clinician to support Dispatch assessment & planning                      | X    |                    | X        |                |
|                                                | Build relationships across all new personnel                                                | X    | X                  | X        | X              |
| June - Aug                                     | <i>Plan &amp; Implement Recommendations: Refer to Phase 0 Implementation Approach</i>       |      |                    |          |                |

**Phased Implementation Approach**

|                                                                                                             | Phase 0                                                                                                                                                                                                                                                                                                                                           |                                                                               | Phase 1                                                                                   |                                                                                                                                                         | Phase 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Future, Beyond Phase 2                                                            |
|-------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
|                                                                                                             | Nov 2021 - Aug 2022                                                                                                                                                                                                                                                                                                                               |                                                                               | Implementation<br>Sept 2022 - Aug 2023                                                    | Planning for Phase 2<br>Sept 2023 - Feb 2024                                                                                                            | Feb 2024+                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                   |
| <b>SCU Mobile Team Recommendations</b>                                                                      |                                                                                                                                                                                                                                                                                                                                                   |                                                                               |                                                                                           |                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                   |
| 1 The SCU should respond to mental health crises and substance use emergencies without a police co-response | Clarify specific factors and codes for all suggested SCU call types                                                                                                                                                                                                                                                                               | Develop triage criteria and workflows across all SCU call-types and services. | Coordinate with other entities (BPD, MCT, UCPD) for differentiation and/or collaboration. | <i>SCU mobile team goes live, providing services</i>                                                                                                    | <p>Consider additional types of calls for service that they can respond to where armed police officers are not needed or aligned to a reimagined definition of public safety, such as:</p> <ul style="list-style-type: none"> <li>- Completing documentation while providing crisis services where a traditional "police report" is needed, such as in cases of sexual assault, sexual harassment, and rape</li> <li>- Petty theft</li> <li>- Nonviolent conflicts, such as neighbor disputes or youth behavioral issues</li> <li>- Minor assaults, with no weapons present</li> <li>- Proactive support at events that may trigger a crisis (e.g., during an encampment sweep)</li> </ul> | Integrate other SCU model elements (e.g., follow-up care team [Report Section V]) |
| 2 The SCU should operate 24/7                                                                               |                                                                                                                                                                                                                                                                                                                                                   |                                                                               |                                                                                           |                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                   |
| 3 Staff a 3-person SCU mobile team to respond to mental health and substance use emergencies                |                                                                                                                                                                                                                                                                                                                                                   |                                                                               |                                                                                           |                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                   |
| 4 Equip the SCU Mobile Team with vans                                                                       | Procure vans                                                                                                                                                                                                                                                                                                                                      |                                                                               |                                                                                           |                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                   |
| 5 The SCU Mobile Team should provide transport to a variety of locations                                    | Introduce SCU to emergency facility staff at all transport destinations                                                                                                                                                                                                                                                                           |                                                                               |                                                                                           |                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                   |
| 6 Equip the SCU mobile team with supplies to meet the array of clients' needs                               | Procure supplies                                                                                                                                                                                                                                                                                                                                  |                                                                               |                                                                                           |                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                   |
| 7 Clearly distinguish the SCU from MCT                                                                      | Develop clear roles and parameters for SCU and MCT teams by collaborating across Dispatch, the SCU Steering Committee, the current MCT team, and other relevant leadership<br><i>Note: These decisions are essential for developing triage criteria and workflows and for communicating to the general public in a public awareness campaign.</i> |                                                                               |                                                                                           | Evaluate the role of MCT and the efficacy of having both teams.<br>Make recommendations for Phase 2, such as changes to each team's scope or processes. | Communicate to general public and relevant service providers about changes relevant to the distinguished roles of MCT and SCU                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                   |

| Phased Implementation Approach                                                                                             | Phase 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                         | Phase 1                                                                                                                                                                                                                                                                                           |                                                                                 | Phase 2   | Future, Beyond Phase 2                                                                                                                                                  |
|----------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|-----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                                                            | Nov 2021 - Aug 2022                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                         | Implementation<br>Sept 2022 - Aug 2023                                                                                                                                                                                                                                                            | Planning for Phase 2<br>Sept 2023 - Feb 2024                                    | Feb 2024+ | 2                                                                                                                                                                       |
| <b>Accessing the SCU Crisis Response</b>                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                   |                                                                                 |           |                                                                                                                                                                         |
| 8 Participate in the Dispatch assessment and planning process to prepare for future integration                            | <p>Decide the most effective method for 24/7, live phone access to the SCU (Option A, B, C)</p> <p>Dispatch makes investments in staffing and technologies, as needed</p> <p>SCU model discusses with Dispatch the necessary data (variables, definitions, timelines, privacy, etc.) to be collected during each Phase of implementation</p> <p>Dispatch begins planning for changes to CAD or other data systems</p>                                                                                                                                                                                                                                                                                | <p>Dispatch makes investments in staffing and technologies, as needed</p> <p><i>Dispatch implements Phase 1 protocols, as determined by Phase 0 planning (Option A, B, C)</i></p>                                                                                                                       | <p>Implement new triage criteria and workflows</p>                                                                                                                                                                                                                                                |                                                                                 |           |                                                                                                                                                                         |
| 9 Ensure the community has a 24/7 live phone line to access the SCU                                                        | <p>Implement and adapt 24/7, live phone line access to SCU (Option A, B, C)</p> <p>Adapt protocols for other Berkeley crisis responders (Fire, EMS/Falck, MCT, Police) to request SCU support through the alternative phone number</p> <p>Dispatch and HHCS/SCU identify opportunities for Phase 1 implementation (based on Option A, B, C), such as:<br/>                     - Phase 1 call types for SCU deployment OR preliminary calls that Dispatch will transfer to the alternative phone line in early Phase 1 (e.g., welfare checks)<br/>                     - Dispatch supports alternative phone line to develop aligned triage criteria and workflows to support future integration</p> | <p><i>If Option B or C:<br/>                     Plan for how calls will be triaged and prioritized from the two separate sources (alternative number and 911) in deploying the SCU mobile teams in Phase 2</i></p>                                                                                     | <p>Determine if the SCU should respond to crises by sight ("proactive" deployment and intervention)</p> <p>Determine if the SCU should self-deploy by listening to the police radio (based on other models: Eugene's CAHOOTS, Denver's STAR, and San Francisco's Street Crisis Response Team)</p> | <p><i>If Option B or C:<br/>                     Integrate SCU into 911</i></p> |           |                                                                                                                                                                         |
| 10 Plan for embedding a mental health or behavioral health clinician(s) into Dispatch to support triage and SCU deployment | <p>Dispatch hires one clinician to support the Dispatch assessment process and to support triage criteria and workflow development for calls routed to SCU</p> <p>Clinician attends trainings and site observations with Dispatch and SCU</p> <p>Clinician(s) supports planning for triage criteria, call-types, etc. (as relevant: Option A, B, C may affect timing of this)</p> <p><i>If Option A:<br/>                     Dispatch prepares for fully embedding clinician(s), including clarifying their roles and supervision structure</i></p> <p><i>If Option B or C: implement this in Phase 2</i></p>                                                                                       | <p>Clinician(s) support Dispatch based on the assessment findings and next steps, such as:<br/>                     - supervises call-takers triaging mental health crisis calls<br/>                     - provides trainings to call-takers based on 2019 Auditor's Report and ongoing assessment</p> |                                                                                                                                                                                                                                                                                                   |                                                                                 |           | <p>Assess whether clinician(s) can provide services beyond SCU deployment, including basic telemedicine and psychiatric screenings or psychiatric crisis assessment</p> |



**Phased Implementation Approach**

|                                                                                                                                                   | Phase 0<br>Nov 2021 - Aug 2022                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Phase 1                                                                                                                                          |                                              | Phase 2<br>Feb 2024+ | Future, Beyond Phase<br>2 |
|---------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|----------------------|---------------------------|
|                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Implementation<br>Sept 2022 - Aug 2023                                                                                                           | Planning for Phase 2<br>Sept 2023 - Feb 2024 |                      |                           |
| <b>Implement a Comprehensive, 24/7 Mental Health Crisis Response Model</b>                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                  |                                              |                      |                           |
| 11 Fully staff a comprehensive model to ensure the success of the SCU mobile team, including supervisory and administrative support roles for SCU |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                  |                                              |                      |                           |
| 12 Operate one SCU mobile team per shift for three 10-hour shifts                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                  |                                              |                      |                           |
| 13 SCU staff and Dispatch personnel should travel to alternative crisis programs for in-person observation and training                           | <p>incorporate into training itineraries to allow for these periods of travel and training.<br/><i>Note: City of Berkeley and/or the contracted CBO may need to reach out to the other cities and programs to solidify travel and training plans prior to the hiring of any individual personnel.</i></p> <p>Allot time after the site visit(s) for debriefing, reflecting on lessons learned, and discussing how to integrate key takeaways into the SCU model.</p> <p>Include in debrief and planning conversations personnel that traveled for site observations, HHCS staff, additional Dispatch leadership, and Steering Committee members as needed.</p> |                                                                                                                                                  |                                              |                      |                           |
| 14 Prepare the SCU mobile team with training, informed by community needs                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Plan the training schedule based on community needs, ongoing assessment and planning, and prerequisite skills and experiences of hired personnel |                                              |                      |                           |

| Phased Implementation Approach                                                                                                    | Phase 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                        | Phase 1                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                | Phase 2   | Future, Beyond Phase 2                                                                                                                                                                                |
|-----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|-----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                                                                   | Nov 2021 - Aug 2022                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                        | Implementation<br>Sept 2022 - Aug 2023                                                                                                                                                                                                                                                                                                                                                                                                              | Planning for Phase 2<br>Sept 2023 - Feb 2024                   | Feb 2024+ | 2                                                                                                                                                                                                     |
| <b>Administration and Evaluation</b>                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                |           |                                                                                                                                                                                                       |
| 15 Contract the SCU Model to a CBO                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Extend contract and provide funding for Phase 2, as applicable |           | Determine if the SCU can be administered through the City of Berkeley, elevating it to the status of Police and Fire as an essential citywide emergency service and ensuring long-term sustainability |
| 16 Integrate SCU into existing data systems                                                                                       | Assess feasibility of data integration across various systems and sources: assess system capacity needs to realize integration, seek consultation on legal issues surrounding patient protections and sharing health data across providers<br><br>Evaluate implications for Recommendation 18 (care coordination case management meetings) based on feasibility and adaptations from this recommendation (Recommendation 16)<br><br>Maintain and strengthen data privacy before SCU is integrated with Dispatch (given that Dispatch is situated within Berkeley Police and that many health conditions can be criminalized and prosecuted) |                                                                        | Continue: Assess feasibility of data integration across various systems and sources: assess system capacity needs to realize integration, seek consultation on legal issues surrounding patient protections and sharing health data across providers<br><br>Coordinate with Alameda County Care Connect to plan for bi-directional data feeds with the Community Health Record (CHR)<br><br>Plan for access to EHRs and other relevant data systems |                                                                |           |                                                                                                                                                                                                       |
| 17 Collect and publish mental health crisis response data publicly on Berkeley's Open Data Portal                                 | Coordinate with City of Berkeley to add new data to Portal<br><br>Plan for how regularly data will be refreshed/updated on Portal                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Publish data regularly                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                |           |                                                                                                                                                                                                       |
| 18 Implement care coordination case management meetings for crisis service providers                                              | Involve all relevant agencies in planning to define, align, and adjust data definitions, variables, and collection practices. (e.g., 911-Dispatch, MCT, BPD, BFD, Falck, HHCS, SCU, etc.)<br><br>Engage potential participants to plan for Phase 1 implementation of care coordination case management meetings (identify and confirm participants, confirm meeting intervals, set meeting times, etc.)                                                                                                                                                                                                                                     | Convene and implement care coordination meetings                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                |           |                                                                                                                                                                                                       |
| 19 Implement centralized coordination and leadership across city agencies to support the success of mental health crisis response | Engage potential participants to plan for Phase 1 implementation of centralized coordination and leadership meetings (identify and confirm participants, confirm meeting intervals, set meeting times, etc.)                                                                                                                                                                                                                                                                                                                                                                                                                                | Convene and implement centralized coordination and leadership meetings |                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                |           |                                                                                                                                                                                                       |

| Phased Implementation Approach                                                                          | Phase 0                                                                                                                                                                                                                                                                     | Phase 1                                                                                                                |                                                | Phase 2   | Future, Beyond Phase 2 |
|---------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-----------|------------------------|
|                                                                                                         | Nov 2021 - Aug 2022                                                                                                                                                                                                                                                         | Implementation<br>Sept 2022 - Aug 2023                                                                                 | Planning for Phase 2<br>Sept 2023 - Feb 2024   | Feb 2024+ | 2                      |
| <i>Administration and Evaluation (continued)</i>                                                        |                                                                                                                                                                                                                                                                             |                                                                                                                        |                                                |           |                        |
| 20 Continue the existing SCU Steering Committee as an advisory body                                     | Identify additional Steering Committee members<br><br>Invite and engage new members<br><br>Adapt processes, group norms and agreements, and/or meeting schedules, as relevant<br>Decide on methods and intervals for collecting community input and feedback during Phase 1 | Hold regular meetings of SCU Steering Committee; incorporate decision-making processes across other Recommendations    |                                                |           |                        |
| 21 Solicit ongoing community input and feedback                                                         | Develop a plan to communicate the opportunities for community and feedback; incorporate into public awareness campaign                                                                                                                                                      | Solicit ongoing community input and feedback; incorporate decision-making processes across other Recommendations       |                                                |           |                        |
| 22 Adopt a rapid monitoring, assessment, and learning process                                           | Plan for the evaluation and rapid assessment processes to use overlapping data and be mutually-supportive and streamlined<br><br>Plan for all data definitions and collection processes to be aligned across rapid assessment and evaluation aims.                          | Ensure that the evaluation findings are available for the latter six-months of Phase 1 to support planning for Phase 2 | Review evaluation findings<br>Plan for Phase 2 |           |                        |
| 24 Launch a public awareness campaign to promote community awareness and education about the SCU        | Plan for public awareness campaign, including targeted modalities, targeted audiences, and/or phased timing<br><br>Launch public awareness campaign                                                                                                                         | Continue public awareness campaign, as necessary                                                                       |                                                |           |                        |
| 25 The SCU mobile team should conduct outreach and build relationships with potential service utilizers | Conduct targeted outreach and establish trusting relationships between SCU and community members, promoting utilization of SCU                                                                                                                                              | Continue targeted outreach and build relationships as necessary                                                        |                                                |           |                        |

## Appendix B: Sample Shift Structure & Redundancy Needs

| Model Component | Phase   | Staffing Needs | Shift Type    | M                     | T                     | W                     | Th                    | F                     | Sa                    | Su                    | No. of shifts (week 1) | No. of shifts (week 2) | No. of staff per unit | No. of units | No. of FTE needed | Notes |                                           |
|-----------------|---------|----------------|---------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|------------------------|------------------------|-----------------------|--------------|-------------------|-------|-------------------------------------------|
| SCU             | Phase 1 | Shift 1        | 10-hour shift | mobile unit A         | mobile unit A         | mobile unit A         | mobile unit B         | mobile unit E         | mobile unit E         | mobile unit E         | mobile unit a          | 3                      | 4                     | 3            | 6                 | 18    | Assumes one mobile unit per shift         |
|                 |         | Shift 2        | 10-hour shift | mobile unit B         | mobile unit B         | mobile unit B         | mobile unit C         | mobile unit F         | mobile unit F         | mobile unit F         | mobile unit b          | 4                      | 3                     | 3            |                   |       | Assumes a three-person mobile unit        |
|                 |         | Shift 3        | 10-hour shift | mobile unit C         | mobile unit C         | mobile unit C         | mobile unit D         | mobile unit D         | mobile unit D         | mobile unit D         | mobile unit c          | 4                      | 3                     | 3            |                   |       | Six clinicians, six peers, six therapists |
|                 |         |                |               |                       |                       |                       |                       |                       |                       |                       | mobile unit d          | 4                      | 3                     | 3            |                   |       |                                           |
|                 |         |                |               |                       |                       |                       |                       |                       |                       |                       | mobile unit e          | 3                      | 4                     | 3            |                   |       |                                           |
|                 |         |                |               |                       |                       |                       |                       |                       |                       |                       | mobile unit f          | 3                      | 4                     | 3            |                   |       |                                           |
| SCU             | Phase 1 | Shift 1        | 10-hour shift | clinical supervisor A | clinical supervisor A | clinical supervisor A | clinical supervisor B | clinical supervisor E | clinical supervisor E | clinical supervisor E | clinical supervisor A  | 3                      | 4                     | 1            | 6                 | 6     |                                           |
|                 |         | Shift 2        | 10-hour shift | clinical supervisor B | clinical supervisor B | clinical supervisor B | clinical supervisor C | clinical supervisor F | clinical supervisor F | clinical supervisor F | clinical supervisor B  | 4                      | 3                     | 1            |                   |       |                                           |
|                 |         | Shift 3        | 10-hour shift | clinical supervisor C | clinical supervisor C | clinical supervisor C | clinical supervisor D | clinical supervisor D | clinical supervisor D | clinical supervisor D | clinical supervisor C  | 4                      | 3                     | 1            |                   |       |                                           |
|                 |         |                |               |                       |                       |                       |                       |                       |                       |                       | clinical supervisor D  | 4                      | 3                     | 1            |                   |       |                                           |
|                 |         |                |               |                       |                       |                       |                       |                       |                       |                       | clinical supervisor E  | 3                      | 4                     | 1            |                   |       |                                           |
|                 |         |                |               |                       |                       |                       |                       |                       |                       |                       | clinical supervisor F  | 3                      | 4                     | 1            |                   |       |                                           |

|                        |         |                |               |                          |                          |                          |                          |                          |                          |                          |                          |   |     |   |   |   |                                                                                                                                                       |
|------------------------|---------|----------------|---------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|---|-----|---|---|---|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| SCU                    | Phase 1 | shift business | 8-hour shift  | program manager          | program manager          | program manager          | program manager          | program manager          | -                        | -                        | program manager          | 5 | n/a | 1 | 1 | 1 | Assumes mobile unit peers are supervised by clinical supervisor during shift; this specialist is for other professional supports for Peer Specialists |
|                        |         | shift business | 8-hour shift  | peer supervisor          | peer supervisor          | peer supervisor          | peer supervisor          | peer supervisor          | -                        | -                        | peer supervisor          | 5 | n/a | 1 | 1 | 1 |                                                                                                                                                       |
|                        |         |                |               |                          |                          |                          |                          |                          |                          |                          |                          |   |     |   |   |   |                                                                                                                                                       |
| Alternative Phone Line | Phase 1 | Shift 1        | 12-hour shift | call team A              | call team A              | call team A              | call team B              | call team D              | call team D              | call team D              | call team a              | 3 | 4   | 2 | 4 | 8 | Assumes two call receptionists per shift                                                                                                              |
|                        |         | Shift 2        | 12-hour shift | call team B              | call team B              | call team B              | call team C              | call team C              | call team C              | call team C              | call team b              | 4 | 3   | 2 |   |   |                                                                                                                                                       |
|                        |         |                |               |                          |                          |                          |                          |                          |                          |                          | call team c              | 4 | 3   | 2 |   |   |                                                                                                                                                       |
|                        |         |                |               |                          |                          |                          |                          |                          |                          |                          | call team d              | 3 | 3   | 2 |   |   |                                                                                                                                                       |
|                        |         |                |               |                          |                          |                          |                          |                          |                          |                          |                          |   |     |   |   |   |                                                                                                                                                       |
| Dispatch               | Phase 0 | shift business | 8-hour shift  | BH/MH triage clinician   | BH/MH triage clinician   | BH/MH triage clinician   | BH/MH triage clinician   | BH/MH triage clinician   | -                        | -                        | BH/MH triage clinician   | 5 | n/a | 1 | 1 | 1 |                                                                                                                                                       |
|                        | Phase 1 | Shift 1        | 12-hour shift | BH/MH triage clinician A | BH/MH triage clinician A | BH/MH triage clinician A | BH/MH triage clinician A | BH/MH triage clinician C | BH/MH triage clinician C | BH/MH triage clinician C | BH/MH triage clinician A | 4 | 3   | 1 | 4 |   | Assumes one clinician per dispatch shift                                                                                                              |

|  |         |               |                            |                            |                            |                            |                            |                            |                            |                            |   |   |   |  |  |  |  |
|--|---------|---------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|---|---|---|--|--|--|--|
|  | Shift 2 | 12-hour shift | BH/MH triage clinic<br>n B | BH/MH triage clinic<br>n B | BH/MH triage clinic<br>n B | BH/MH triage clinic<br>n B | BH/MH triage clinic<br>n D | BH/MH triage clinic<br>n D | BH/MH triage clinic<br>n D | BH/MH triage clinic<br>n B | 4 | 3 | 1 |  |  |  |  |
|  |         |               |                            |                            |                            |                            |                            |                            |                            | BH/MH triage clinic<br>n C | 3 | 4 | 1 |  |  |  |  |
|  |         |               |                            |                            |                            |                            |                            |                            |                            | BH/MH triage clinic<br>n D | 3 | 4 | 1 |  |  |  |  |

## Appendix C: Budget

| Salaries, wages, benefits               | FTE  | Salary        | Cost/Year              | Notes                                                                                    | Source                                                                                                                                                                                                                                                            |
|-----------------------------------------|------|---------------|------------------------|------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>BH Licensed Clinician / Psych-NP</b> | 6    | \$ 178,000.00 | \$ 1,068,000.00        | JobsEQ "Nurse Practitioner"                                                              | JobsEQ Mean Annual Wages for San Francisco-Oakland-Bay Area                                                                                                                                                                                                       |
| <b>Mental Health Peer Specialist</b>    | 6    | \$ 77,500.00  | \$ 465,000.00          | JobsEQ "Health Education Specialists"                                                    | JobsEQ Mean Annual Wages for San Francisco-Oakland-Bay Area                                                                                                                                                                                                       |
| <b>BH Licensed Therapist / LCSW</b>     | 6    | \$ 85,800.00  | \$ 514,800.00          | JobsEQ "Mental Health and Substance Abuse Social Worker"                                 | JobsEQ Mean Annual Wages for San Francisco-Oakland-Bay Area                                                                                                                                                                                                       |
| <b>Clinical Supervisor</b>              | 6    | \$ 178,000.00 | \$ 1,068,000.00        | JobsEQ "Nurse Practitioner"; unable to find accurate salaries for a supervisory position |                                                                                                                                                                                                                                                                   |
| <b>Peer Specialist Supervisor</b>       | 1    | \$ 85,800.00  | \$ 85,800.00           | unable to find accurate salary range; using LCSW range                                   |                                                                                                                                                                                                                                                                   |
| <b>Program Manager</b>                  | 1    | \$ 105,000.00 | \$ 105,000.00          |                                                                                          |                                                                                                                                                                                                                                                                   |
| <b>Phase 0 Dispatch MH/BH Clinician</b> | 1    | \$ 105,782.00 | \$ 105,782.00          | "SUPERV PUBLIC SFTY DISP"                                                                | <a href="https://www.cityofberkeley.info/uploadedFiles/Human_Resources/Level_3_-_General/ClassificationAndSalaryListingByTitle.pdf">https://www.cityofberkeley.info/uploadedFiles/Human_Resources/Level_3_-_General/ClassificationAndSalaryListingByTitle.pdf</a> |
| <b>Subtotal</b>                         |      |               | \$ 3,412,382.00        | Total FTE Salary                                                                         |                                                                                                                                                                                                                                                                   |
| <b>Subtotal</b>                         |      |               | \$ 853,095.50          | Fringe Benefits, 25%                                                                     |                                                                                                                                                                                                                                                                   |
| <b>Total Salary + Benefits</b>          |      |               | <b>\$ 4,265,477.50</b> |                                                                                          |                                                                                                                                                                                                                                                                   |
| <b>Ongoing materials and services</b>   |      |               | <b>Cost/Year</b>       | <b>Notes</b>                                                                             |                                                                                                                                                                                                                                                                   |
| <b>Evaluation</b>                       |      |               | \$ 185,000.00          | Used cost of RDA feasibility study as estimate                                           |                                                                                                                                                                                                                                                                   |
| <b>Vehicle maintenance</b>              | 4    | \$ 20,000.00  | \$ 80,000.00           | Estimate provided by Berkeley Fire                                                       |                                                                                                                                                                                                                                                                   |
| <b>Advertisement &amp; PR</b>           | 12   | \$ 2,000.00   | \$ 24,000.00           | Includes community education workshops, advertising, outreach and engagement             |                                                                                                                                                                                                                                                                   |
| <b>Small equipment &amp; supplies</b>   | 1200 | \$ 20.00      | \$ 24,000.00           | Wound care, hygiene, harm reduction, meals, transportation vouchers,                     |                                                                                                                                                                                                                                                                   |

|                                                                 |    |              |                        |                                                                                                                                                                                 |  |
|-----------------------------------------------------------------|----|--------------|------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
|                                                                 |    |              |                        | <i>clothing, blankets, etc.<br/>Based on SF SCRT data, assumes 100 contacts with clients per month, \$20 per client contact; SF SCRT budgeted 10k and said they needed more</i> |  |
| <b>Office supplies and postage</b>                              | 12 | \$ 200.00    | \$ 2,400.00            |                                                                                                                                                                                 |  |
| <b>Communications</b>                                           | 12 | \$ 600.00    | \$ 7,200.00            |                                                                                                                                                                                 |  |
| <b>Printing and copying</b>                                     | 12 | \$ 100.00    | \$ 1,200.00            |                                                                                                                                                                                 |  |
| <b>Travel and transportation</b>                                | 12 | \$ 100.00    | \$ 1,200.00            | <i>Local travel for care coordination &amp; meetings</i>                                                                                                                        |  |
| <b>Training and meetings</b>                                    | 12 | \$ 1,000.00  | \$ 12,000.00           | <i>Equity, team dynamics, and other ongoing training</i>                                                                                                                        |  |
| <b>Licenses/fees/subscriptions</b>                              | 12 | \$ 50.00     | \$ 600.00              |                                                                                                                                                                                 |  |
| <b>Insurance</b>                                                |    |              | \$ -                   |                                                                                                                                                                                 |  |
| <b>Contract services</b>                                        |    |              | \$ -                   |                                                                                                                                                                                 |  |
| <b>Legal services</b>                                           |    |              | \$ -                   |                                                                                                                                                                                 |  |
| <b>Audit and consulting</b>                                     |    |              | \$ -                   |                                                                                                                                                                                 |  |
| <b>Utilities</b>                                                |    |              | \$ -                   |                                                                                                                                                                                 |  |
| <b>Facilities</b>                                               |    |              | \$ -                   |                                                                                                                                                                                 |  |
| <b>Subtotal</b>                                                 |    |              | \$ 337,600.00          | <i>ongoing materials and services</i>                                                                                                                                           |  |
| <b>Subtotal: Personnel and non-personnel recurring subtotal</b> |    |              | \$ 4,603,077.50        |                                                                                                                                                                                 |  |
| <b>Administrative overhead</b>                                  |    |              | \$ 276,184.65          | <i>6% for all recurring costs</i>                                                                                                                                               |  |
| <b>Total recurring cost</b>                                     |    |              | <b>\$ 4,879,262.15</b> |                                                                                                                                                                                 |  |
|                                                                 |    |              |                        |                                                                                                                                                                                 |  |
| <b>One time cost</b>                                            |    |              | <b>Cost/Year</b>       | <b>Notes</b>                                                                                                                                                                    |  |
| <b>Vehicle</b>                                                  | 5  | \$ 60,000.00 | \$ 300,000.00          | <i>Assume 60k per van with wheelchair capacity</i>                                                                                                                              |  |
| <b>Recruitment</b>                                              | 27 | \$ 4,000.00  | \$ 108,000.00          | <i>Median national average of recruiting new employee</i>                                                                                                                       |  |



|                                                                           |   |             |                        |                                                                                                                                               |
|---------------------------------------------------------------------------|---|-------------|------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Training (SCU staff and Dispatch)</b>                                  |   |             | \$ 75,000.00           | Assume training for all Dispatch, BPD, Fire, MCT, & SCU staff; both program onboarding and emerging best practices related to crisis response |
| <b>Technology (computers, phones, etc.)</b>                               |   |             | \$ 25,000.00           | Laptop/tablets, cell phones for all staff, MiFi, portable chargers                                                                            |
| <b>Rapid assessment</b>                                                   |   |             | \$ 40,000.00           | Evaluation planning meetings, data request development, community-input meetings                                                              |
| <b>Community outreach and education (including materials development)</b> |   |             | \$ 25,000.00           | Curriculum development, materials, advertisement, outreach (SF SCRT hired consultant to do this work)                                         |
| <b>Subtotal</b>                                                           |   |             | \$ 573,000.00          |                                                                                                                                               |
| <b>Administrative overhead</b>                                            |   |             | \$ 34,380.00           | 6% for all one-time costs                                                                                                                     |
| <b>Total one-time cost</b>                                                |   |             | <b>\$ 607,380.00</b>   |                                                                                                                                               |
|                                                                           |   |             |                        |                                                                                                                                               |
| <b>Recommendations</b>                                                    |   |             | <b>Cost/Year</b>       | <b>Notes</b>                                                                                                                                  |
| <b>Signing bonus</b>                                                      | 7 | \$ 5,000.00 | \$ 35,000.00           | Signing bonus recommended for licensed clinical staff                                                                                         |
| <b>Technical Assistance</b>                                               |   |             | \$ 15,000.00           | Consultation from existing similar alternative models                                                                                         |
|                                                                           |   |             |                        |                                                                                                                                               |
|                                                                           |   |             |                        |                                                                                                                                               |
| <b>Total additional recommendations</b>                                   |   |             | <b>\$ 50,000.00</b>    |                                                                                                                                               |
|                                                                           |   |             |                        |                                                                                                                                               |
| <b>Total cost with recommendations</b>                                    |   |             | <b>\$ 5,536,642.15</b> | Estimated cost for program and recommendations                                                                                                |
|                                                                           |   |             |                        |                                                                                                                                               |

## Appendix D: Anticipated Incident Volume

|                                                                      |                 | Potential Daily Incidents for SCU (Average) | Potential Incidents per <b>shift</b> for SCU (Average) |
|----------------------------------------------------------------------|-----------------|---------------------------------------------|--------------------------------------------------------|
| Average daily BMH-Crisis incidents (FY15-19)<br><i>MCT, TOT, CAT</i> | 10.73 incidents | 19.82                                       | 6.61                                                   |
| Average daily BPD MH Incidents (FY14-20)                             | 28.91 incidents |                                             |                                                        |
| Average time on task for transports BFD & Falck                      | 101.48 minutes  |                                             |                                                        |

|                                          | Denver <sup>31</sup><br>6 months, 1 team, not<br>citywide, not 24/7 | Portland <sup>32</sup><br>6 months, 1 team, not<br>citywide, not 24/7 | CAHOOTS <sup>33</sup><br>Annual, 1-2 teams, 24/7 |
|------------------------------------------|---------------------------------------------------------------------|-----------------------------------------------------------------------|--------------------------------------------------|
| Average incidents per shift              | 5.75                                                                | 3                                                                     | (Per hour) 1.81                                  |
| % incidents that resulted in a transport | 14.30%                                                              | 6.27%                                                                 | 23.38%                                           |
| % transports that were to the hospital   | 16.82%                                                              | 58.33%                                                                |                                                  |
| Average minutes on task                  | 24.65                                                               | 19.33                                                                 |                                                  |
| Reduction of BPD calls                   | 2.75%                                                               | 4.60%                                                                 | 5-8%                                             |

<sup>31</sup> STAR Program Evaluation (2021, January 08). [https://wp-denverite.s3.amazonaws.com/wp-content/uploads/sites/4/2021/02/STAR\\_Pilot\\_6\\_Month\\_Evaluation\\_FINAL-REPORT.pdf](https://wp-denverite.s3.amazonaws.com/wp-content/uploads/sites/4/2021/02/STAR_Pilot_6_Month_Evaluation_FINAL-REPORT.pdf)

<sup>32</sup> City of Portland

Bureau of Fire and Rescue (2021, October). Portland street response: Six-month evaluation. <https://www.portland.gov/sites/default/files/2021/psu-portland-street-response-six-month-evaluation-final.pdf>

<sup>33</sup> Eugene Police Department Crim Analysis Unit (2020, August 21). CAHOOTS program analysis. <https://www.eugene-or.gov/DocumentCenter/View/56717/CAHOOTS-Program-Analysis>



Office of the City Manager

02

ACTION CALENDAR

March 10, 2022

To: Honorable Mayor and Members of the City Council

From: Dee Williams-Ridley, City Manager

Submitted by: Lisa Warhuus, Director, Health, Housing, and Community Services

Subject: Presentation and Discussion of Reports Submitted by Reimaging Public Safety Task Force and National Institute for Criminal Justice Reform

SUMMARY

On July 14, 2020, in Resolution No. 69, 501-N.S. City Council passed a package of items providing direction for the development of a new paradigm of public safety in Berkeley. As part of the items that were adopted, City Council adopted Item 18c (Referral to City Manager to Re-imagine Policing Approaches to Public Safety Using a Process of Robust Community Engagement, to Develop a Path Forward to Transforming Public Safety and Policing in Berkeley) and Item 18d (“Transform Community Safety and Initiate a Robust Community Engagement”) which directs the City Manager to engage a qualified firm(s) or individual (s) to lead a robust, inclusive, and transparent community engagement process with the goal of achieving a new and transformative model of positive equitable and community centered safety for Berkeley. Council will hear from both the National Institute for Criminal Justice Reform and from the Reimaging Public Safety Task Force with two reports with creative approaches to address the council direction. City Staff will receive community feedback and collect additional information from council with the goal of returning in April 2022 with a report and recommendations on a path forward to transforming public safety and policing in Berkeley. However since the Specialized Care Unit is an integral part of the future we have included this report which provides the Specialized Care Unit (SCU) Steering Committee’s response to the recommendations from Research Development Associates (RDA) for the implementation of Berkeley’s SCU. Considerations from this response will be incorporated into SCU implementation planning along with RDA’s recommendations.

CURRENT SITUATION AND ITS EFFECTS

As part of its Re-Imagining Public Safety process, the City of Berkeley has been engaged in planning to implement a SCU. The City contracted with RDA to conduct best practice research and a community engagement process in order to make recommendations for the best SCU model for Berkeley. To oversee and advise on this process, the City formed an SCU Steering Committee consisting of representatives from the Health, Housing, and Community Services Department, the Berkeley Fire

Department, appointees of the Mental Health Commission, and community representatives from the Berkeley Community Safety Coalition.

With guidance from the Steering Committee, RDA created three reports. The first report provides detailed information about 37 alternative crisis response models that have been implemented in the United States and internationally. The second report provides information about Berkeley's current crisis response system and also summarizes stakeholder perspectives gathered through a deep community engagement process conducted by RDA, in which input was gathered from utilizers of Berkeley's crisis response services, local community-based organizations (CBOs), local community leaders, and City of Berkeley and Alameda County agencies. RDA's third and final report utilized information gathered in completing the first two reports and makes specific recommendations for an SCU model for Berkeley. RDA's twenty-five recommendations are below, followed by the Steering Committee's response to these recommendations.

#### RDA RECOMMENDATIONS FOR AN SCU FOR BERKELEY

RDA's recommendations are categorized into five sets as follows:

##### *Recommendations 1-7: The SCU Mobile Team*

1. The SCU should respond to mental health crises and substance use emergencies without a police co-response.
2. The SCU should operate 24/7.
3. Staff a three-person SCU mobile team to respond to mental health and substance use emergencies.
4. Equip the SCU mobile team with vans.
5. The SCU mobile team should provide transport to a variety of locations.
6. Equip the SCU mobile team with supplies to meet the array of clients' needs.
7. Clearly distinguish the SCU from the Mobile Crisis Team.

##### *Recommendations 8-10: Assessing the SCU Crisis Response: Dispatch & Alternative Phone Number*

8. Participate in the Dispatch assessment and planning process to prepare for future integration.
9. Ensure the community has a 24/7 live phone line to access the SCU.
10. Plan for embedding a mental health or behavioral health clinician into Dispatch to support triage and SCU deployment.

##### *Recommendations 11-14: Implement a Comprehensive 24/7 Mental Health Crisis Response Model*

11. Fully staff a comprehensive model to ensure the success of the SCU mobile team, including supervisory and administrative support.

12. Operate one SCU mobile team per shift for three 10-hour shifts.
13. SCU staff and Dispatch personnel should travel to alternative crisis programs for in-person observation and training.
14. Prepare the SCU mobile team with training.

*Recommendations 15-23: Administration and Evaluation*

15. Contract the SCU model to a CBO.
16. Integrate the SCU into existing data systems.
17. Collect and publish mental health crisis response data publicly on Berkeley's Open Data Portal.
18. Implement care coordination case management meetings for crisis service providers.
  
19. Implement centralized coordination and leadership across city agencies to support the success of mental health crisis response.
20. Continue the existing SCU Steering Committee as an advisory body.
21. Solicit ongoing community input and feedback.
22. Adopt a rapid monitoring, assessment, and learning process.
23. Conduct a formal annual evaluation.

*Recommendations 24-25: Promoting Public Awareness*

24. Launch a public awareness campaign to promote community awareness and education about the SCU.
25. The SCU mobile team should conduct outreach and build relationships with potential service utilizers.

SCU STEERING COMMITTEE RESPONSE

Following completion of RDA's final report, the SCU Steering Committee (Committee) held detailed discussions and further analyzed each category of recommendations. The purpose of these discussions, which occurred over two 90-minute meetings in January 2022, was to establish where there was broad agreement among steering committee members and where individual members differed, and also to add additional considerations where needed. While there was strong agreement among steering committee members with most of RDA's recommendations, there were some nuances and additional considerations that should be considered as part of SCU implementation.

Recommendations 1-7: The SCU Mobile Team

The Committee supports these recommendations with a few points of added clarification. Related to the first recommendation (*respond to mental health crises and substance use emergencies without a police co-response*), the Committee agrees that the SCU should maintain its independence from the Berkeley Police Department (BPD), however acknowledges that there may be incidents that involve a threat of violence. In

these exception cases, the SCU should have protocols to activate BPD to provide support. Similarly, the Committee recommends that if BPD is called to respond to a mental health and/or substance use crisis, and there is no threat of violence present, they should be able to transfer the client to an SCU response.

Regarding the third recommendation (*staff a three-person SCU mobile team to respond to mental health and substance use emergencies*), the Committee believes that the level of required medical expertise on the SCU should be flexible, given constraints in hiring and potential lack of qualified candidates. There was some disagreement among Committee members about the level of medical expertise necessary on the SCU team. While one member in particular noting that a “peer” with basic medical training may be sufficient and more relatable, most members agreed that SCU users could benefit from a higher level of medical expertise that could be applied on the spot. The Committee also identified that, while the type of medical expertise could vary, it would be ideal to have a SCU member who could identify a medical need due to drug use versus a preexisting condition, such as an infected wound from using needles.

Not providing adequate medical expertise, instead relying on the Fire Department to provide urgent medical attention as needed, may result in patients being transported to the hospital, where there may be a lack of continued care. Ensuring some amount of medical expertise on the SCU will help maintain the spirit of the Unit to provide holistic care to individuals in crisis. This will continue to evolve in the implementation of the pilot program.

#### Recommendations 8-10: Assessing the SCU Crisis Response: Dispatch & Alternative Phone Number

The Steering Committee agrees with recommendations 8 and 9, yet would like to recommend an alternative to recommendation 10 (*plan for embedding a mental health or behavioral health clinician into Dispatch to support triage and SCU deployment*). The Committee agrees that it is important for the SCU to be well-coordinated with the 911 Communications Center, which is currently under the Berkeley Police Department, but does not agree that the behavioral health clinician, with mental health and substance use expertise, needs to physically sit in the dispatch space. The Committee is concerned that co-locating this individual with 911 Dispatch could lead to a misconception, and resulting lack of trust, about whether or not the SCU includes a police response. The Committee was also concerned that it would be challenging for an embedded individual with a unique roll that is a stretch beyond the current dispatch culture. Currently, most dispatch communications protocols are general and not tailored to responding to behavioral health calls, which could lead to law enforcement being deployed, instead of the SCU. During the implementation phase, the Committee recommends that the individual who provides dispatch services for the SCU should receive training, build relationships with the 911 Communications Center to ensure coordinated deployment of the appropriate resource, and should be physically located near or at the location where the rest of the SCU staff is stationed. This training would

be in addition to training recommended for existing dispatch staff to help them assign calls and effectively utilize the SCU.

#### Recommendations 11-14: Implement a Comprehensive 24/7 Mental Health Crisis Response Model

The Steering Committee offered additional suggestions to recommendations 11, 13, and 14. For 11, the Committee acknowledges that despite difficulty hiring new staff, it will be good to plan for redundancy in hiring to be able to keep the SCU fully-staffed for all shifts to provide continued coverage when staff are on vacation, sick, etc. Additionally, the team should avoid creating silos based on technical expertise by hiring a supervisor who is cross-trained in each of the different fields to help with team cohesion. This cross-training will be especially useful for a supervisor who is familiar with mental health and substance use, including harm reduction techniques and medication-assisted treatment (MAT). It is the Committee's view that this will support individuals who use drugs and desire to engage in this service delivery.

As the SCU moves into the implementation phase, the Committee supports the recommendation for team members to travel to other cities to learn from similar teams, and emphasizes that the Peer Supervisor should also be included in these visits. These training opportunities should focus on teams with a variety of expertise including: behavioral health, mental health, substance use, harm reduction techniques, and MAT. This will support cross-training and provide additional context for the Peer Supervisor to help support a successful team. Additionally, the Steering Committee recognizes that there are a variety of trainings that will be applicable and necessary for the SCU before they begin responding in the community. It will be important to prioritize specific trainings in the initial rollout, and add more trainings as the SCU progresses. While training is important, it must be balanced with the urgent need to fill this crisis response gap in the Berkeley community.

#### Recommendations 15-23: Administration and Evaluation

The SCU Steering Committee supports these recommendations and wants to make sure that the City will maintain a coordinated and collaborative relationship with the contracted Community-Based Organization (CBO). The City of Berkeley, in partnership with the SCU Steering Committee, will continue to discuss the exact parameters of contracting the work of the SCU to a CBO. This contract will be different than a traditional contract, given the required integration with current City services, and partnership across City departments. In addition, the Steering Committee recognizes that providing a physical space for the SCU may be a hurdle given Berkeley's geography. The implementation group should think creatively to provide a useful space to serve the staff, even if it means looking just outside Berkeley borders (i.e. North Oakland, Albany).

Developing a finance strategy will be critical for the long-term sustainability of the SCU. Inherent in developing a contract with a CBO will be the identification of known funding

for a considerable period of time, as no CBO will agree to stand something up this big for a short period of time without a plan for continuity. Recommendations 15-23 do not speak explicitly to financing the SCU (this is in the latter part of the report under the section “Systems Recommendations”) but should have been named here more explicitly since it is fundamental to Administration and Evaluation. The Committee anticipates that funding will be a combination of state and federal funding for crisis response services, as well as Medi-Cal reimbursement of crisis services. The Committee recommends pulling a finance team together early to start strategizing how the SCU will be funded long term through this variety of sources.

#### Recommendations 24-25: Promoting Public Awareness

The Steering Committee supports these recommendations and further recommends relying on multiple forms of direct outreach and broader communications, given the City of Berkeley’s limited messaging capacity. The Committee believes that the City of Berkeley should leverage the work of trusted partners to provide education about the SCU, such as the Lifelong Medical Street Medicine team. As the SCU gets started, members of the Unit should also conduct field outreach to introduce themselves, explain their duties, and provide a way to contact if needed. This field outreach will help build trust in the early stages.

#### BACKGROUND

RDA’s recommendations, along with considerations generated in this response by the Steering Committee, will inform implementation of the SCU.

In its third report, RDA also provided a set of “Systems Recommendations” that the Committee did not address for this report, but will address as part of implementation and sustainability planning. These are addressed thoroughly in the report and include:

- Addressing the needs of dispatch
- A sufficient investment of resources
- The role of trust

The report concludes with “Next Steps and Future Considerations” (also not addressed for this report) and include discussion of:

- Long-term sustainable funding
- The location of 911 dispatch within the Berkeley Police Department
- Preventing social monitoring: clarifying the SCU’s guiding principles
- Address the full spectrum of mental health and substance use crisis needs

#### ENVIRONMENTAL SUSTAINABILITY AND CLIMATE IMPACTS





Office of the City Manager

CONSENT CALENDAR  
December 13, 2022

To: Honorable Mayor and Members of the City Council

From: Dee Williams-Ridley, City Manager

Submitted by: Lisa Warhuus, Director, Health, Housing and Community Services

Subject: Reserving Predevelopment Funds for the Development of Affordable Housing at the North Berkeley BART Station.

RECOMMENDATION

Adopt a Resolution:

1. Reserving \$500,000 for the selected development team to support the development of affordable housing at the North Berkeley BART site, contingent on the team's selection and approval by the BART Board at its December 1, 2022 meeting, and the team's timely submission of a completed predevelopment application demonstrating they meet the City's funding criteria.
2. Authorizing the City Manager to execute all original or amended documents or agreements to effectuate this action.

FISCAL IMPACTS OF RECOMMENDATION

City Council reserved \$53M in funding for the BART sites at their April 27, 2021 meeting through Resolution 69,833-N.S. Of that total reservation, \$13M will come from Affordable Housing Mitigation Fees, and \$40M will come from Measure O. The Measure O portion will be available in the third and fourth issuances, expected in 2025 and 2027. Predevelopment funding for the BART sites, including this current request for \$500,000, will come from Affordable Housing Mitigation Fees already collected. Funding will be recommended for appropriation through the second amendment to the appropriations ordinance in the Affordable Housing Mitigation Fee fund (Fund 120). In the event that a different development team is selected by the BART Board, there will be no fiscal impacts until the second phase of predevelopment.

CURRENT SITUATION AND ITS EFFECTS

In order to minimize project delays, this report was drafted prior to the completion of the developer selection process and will be withdrawn if a development team that did not request predevelopment funds is selected.

BART issued a Request for Qualifications (RFQ) in July 2022 to select a team to develop housing at the North Berkeley BART station site. Through the RFQ, the City offered up to \$2M in predevelopment funding to encourage nonprofit participation. The

predevelopment funding was authorized by Council on April 27, 2021 with Resolution 69,833-N.S. The predevelopment funds are available in two phases: 1) up to \$500,000 to support the nonprofit partner's share of the master planning and predevelopment costs, and 2) up to \$1.5M to support predevelopment activities for specific affordable housing projects located at the North Berkeley BART site.

Four development teams responded to the RFQ, including a team comprised of BRIDGE Housing Corporation (BRIDGE), East Bay Asian Local Development Corporation (EBALDC), Berkeley Food and Housing Project (BFHP) and Avalon. On behalf of the development team, BRIDGE applied for \$500,000 in predevelopment funding. The BRIDGE team was the only development team that applied for the phase 1 predevelopment funds. Those funds may be used to pay for the nonprofit development team members' collective share of the early costs related to the BART Exclusive Negotiating Agreement (ENA), station access study, and other master planning and predevelopment costs. BRIDGE indicated in their application that, if selected, the team (including Avalon) plans to leverage approximately \$840,000 in their own resources to pay the balance of those costs.

A selection panel with equal representation of City and BART staff reviewed the qualifications of all teams, interviewed the team leads, and attended the public presentations on November 10, 2022. Based on their cumulative score, the panel selected the BRIDGE team, and the BART Board of Supervisors considered entering into an Exclusive Negotiating Agreement (ENA) with that team on December 1, 2022.

Funding predevelopment activities at North Berkeley BART is a Strategic Plan Priority Project, advancing our goal to create affordable housing and housing support service for our most vulnerable community members.

## BACKGROUND

For the past few years, the City has been working closely with BART on the development of the North Berkeley and Ashby BART sites. The City and BART entered into a Memorandum of Understanding in March 2020 that provided a framework for the collaboration, including processes for public participation and an estimated timeline for selecting developers. The MOU was amended in December 2020 to reflect schedule delays due to the pandemic. The City created a BART Community Advisory Group (CAG), made up of 15 members of the public to develop a vision for affordable housing, land use, station access, building form, and new public spaces. The CAG met throughout 2020 and 2021 at public meetings and community workshops, and provided feedback on the new zoning regulations impacting the North Berkeley BART site. The City and BART entered into a Memorandum of Agreement (MOA) in June 2022 to address additional aspects of the collaboration.

The CAG was instrumental in shaping the City - BART Joint Vision and Priorities for Transit-Oriented Development for Ashby and North Berkeley Stations (JVP). The JVP

articulates the shared goals of the City and BART, including the goal of achieving at least 35% affordability at each site.

To support the shared affordable housing goal at the BART sites, City Council set aside \$53M through Resolution 69,833-N.S. on April 27, 2021. Of that, \$13M will come from Affordable Housing Mitigation Fees and \$40M from Measure O. The Measure O funds will be available after the third and fourth issuances, currently anticipated for 2025 and 2027. Council also indicated that a portion of the BART set-aside funds could be used to support predevelopment activities. Predevelopment funding sources are limited, and by offering predevelopment loans with favorable terms, the City and BART were hoping to attract more nonprofit developers. The predevelopment funds are only available to nonprofits, to cover their proportional share of master planning costs.

#### ENVIRONMENTAL SUSTAINABILITY AND CLIMATE IMPACTS

Creating new affordable housing in Berkeley that allows lower income individuals and families to live closer to transit will advance the goal of making the City more economically and racially equitable, and reduces greenhouse gas emissions by reducing vehicle-miles-traveled and decreasing reliance on personal vehicles. New affordable housing developments are typically built to third-party green building standards (either GreenPoint or LEED Gold).

#### RATIONALE FOR RECOMMENDATION

There are early and significant costs associated with transforming the current parking lot at the North Berkeley BART station to a vibrant residential community serving a mix of incomes and household types. The selected developer team will need to pay BART's ENA fees, station access fees, and other costs related to master planning, infrastructure, and predevelopment work. There are few sources of predevelopment funding available, and most come with interest rates higher than what the City offers which would add costs to creating affordable housing.

#### ALTERNATIVE ACTIONS CONSIDERED

Since the City agreed in the MOA and RFQ to make this funding available for the selected nonprofit developer, and since the BRIDGE team qualifies for this funding under the City's Housing Trust Fund criteria, staff did not consider any alternative actions. However, the City could choose not to provide predevelopment support at this time. The BRIDGE team would need to secure other sources of financing, which may have less favorable loan terms than the City's predevelopment loan. This would add costs to the project, and make it more expensive to deliver new affordable housing units.

#### CONTACT PERSON

Jenny Wyant, Senior Community Development Project Coordinator, HHCS, 510-981-5228

Reserving Predevelopment Funds for the  
Development of Affordable Housing at the North Berkeley BART Station

CONSENT CALENDAR  
December 13, 2022

Attachments:  
1: Resolution

RESOLUTION NO. ##,###-N.S.

RESERVING AFFORDABLE HOUSING MITIGATION FEES FOR  
PREDEVELOPMENT AT THE NORTH BERKELEY BART SITE

WHEREAS, the City Council established a Housing Trust Fund Program (HTF) to guide the City's work to assist in the development and expansion of housing affordable to low and moderate income persons who either work or reside within the City of Berkeley (City), and authorized the City Manager to implement the Program; and

WHEREAS, there is a great need for affordable and special needs housing in the City of Berkeley as stated in the General Plan Housing Element and the City of Berkeley's Consolidated plan; and

WHEREAS, the City and BART are collaborating on the development of the North Berkeley BART site, and articulated shared goals in a Memorandum of Understanding, Memorandum of Agreement, and Joint Vision and Priorities for Transit-Oriented Development for Ashby and North Berkeley Stations; and

WHEREAS, the City and BART are committed to achieving a minimum of 35% affordable housing at each BART site; and

WHEREAS, on April 27, 2021, with Resolution 69,883-N.S., the City Council reserved \$53 million, to be divided between the two BART site, as the subsidy needed to achieve 35% affordability, and allowed for a portion of that funding to be considered for predevelopment costs associated with affordable housing; and

WHEREAS, the \$53 million includes \$40 million in Measure O funds, and \$13 million in Affordable Housing Mitigation Fees; and

WHEREAS, in July 2022, BART issued a Request for Qualifications (RFQ) to select a team to develop new housing at the North Berkeley BART site and created an RFQ selection panel with equal representation from the City and BART; and

WHEREAS, four teams responded to the RFQ, including a team made up BRIDGE Housing Corporation (BRIDGE), East Bay Asian Local Development Corporation, Berkeley Food and Housing Project, and Avalon; and

WHEREAS, after a competitive process during which the RFQ selection panel scored teams on their qualifications, an interview, and a public presentation, the RFQ selection panel chose the BRIDGE team; and

WHEREAS, the BART Board of Supervisors confirmed that selection on December 1, 2022; and

December 13, 2022

WHEREAS, the BRIDGE team requested \$500,000 in predevelopment funding from the City's set-aside funds; and

WHEREAS, the City's BART set-aside of Measure O funds will be available after the third and fourth issuances, currently projected for 2025 and 2027, and therefore any predevelopment support for the BART projects will be allocated from the \$13 million set-aside of Affordable Housing Mitigation Fees.

NOW THEREFORE, BE IT RESOLVED by the Council of the City of Berkeley that it approves the reservation of \$500,000 of Affordable Housing Mitigation Fees (Fund 120) to BRIDGE Housing Corporation or its affiliate to support master planning and predevelopment activities related to the development of affordable housing at the North Berkeley BART site, contingent on the selection and approval of this team by the BART Board at its December 1, 2022 meeting.

BE IT FURTHER RESOLVED that the City's Housing Trust Fund program guidelines will apply to the use of these funds.

BE IT FURTHER RESOLVED that the City Manager, or her designee, is hereby authorized to execute all original or amended documents or agreements in accordance with the intent of this Resolution; a signed copy of said documents, agreements, and any amendments will be kept on file in the Office of the City Clerk.



Office of the City Manager

CONSENT CALENDAR  
December 13, 2022

To: Honorable Mayor and Members of the City Council  
From: Dee Williams-Ridley, City Manager  
Submitted by: Scott Ferris, Director, Parks Recreation & Waterfront  
Subject: Contract: California Constructores for Ohlone Park (East) Playground Replacement and Site Improvements Project

RECOMMENDATION

Adopt a Resolution:

1. Approving the plans and specifications for the Ohlone Park (East) Playground Replacement and Site Improvements Project; and
2. Accepting the bid of the lowest responsive and responsible bidder, California Constructores; and
3. Authorizing the City Manager to execute a contract and any amendments, extensions or other change orders until completion of the project in accordance with the approved plans and specifications, with California Constructores, for the Ohlone Park (East) Playground Replacement and Site Improvements Project at 1933 Hearst Avenue, in an amount not to exceed \$1,120,344 which includes a contract amount of \$933,620 and a 20% contingency in the amount of \$186,724.

FINANCIAL IMPLICATIONS

The total budget needed for construction is \$1,120,344. Funding in the amount of \$959,693 for this construction is available in the FY2023 budget in the Parks Tax Fund (Fund 138), Measure T1 Fund (Fund 511), and Capital Improvements (Fund 501) Fund.

Additional funding in the amount of \$160,651 will be recommended for appropriation through the second amendment to the appropriations ordinance in the Parks Tax (Fund 138) and Measure T1 Fund (Fund 511).

**Construction**

|                                            |             |
|--------------------------------------------|-------------|
| California Constructores (lowest bid)..... | \$933,620   |
| 20% Contingency.....                       | \$186,724   |
| <hr/>                                      |             |
| Total Construction Cost                    | \$1,120,344 |

**Funding**

|                                 |           |
|---------------------------------|-----------|
| Parks Tax Fund (Fund 138).....  | \$380,344 |
| Measure T1 Fund (Fund 511)..... | \$440,000 |

Contract: California Constructores for Ohlone Park (East)  
Playground Replacement and Site Improvements Project

CONSENT CALENDAR  
December 13, 2022

|                           |                    |
|---------------------------|--------------------|
| CIP Fund (Fund 501) ..... | \$300,000          |
| <u>Total Funding</u>      | <u>\$1,120,344</u> |

CURRENT SITUATION AND ITS EFFECTS

The existing playgrounds on the easternmost parcel of Ohlone Park, at 1933 Hearst Avenue, Berkeley, CA 94709, are in need of replacement. The project includes demo and removal of existing play equipment and site work, relocation of the existing 5-12 playground to be adjacent to the 2-5 playground, new playground equipment and play area surfacing, sidewalk and pathways in conformance with current ADA standards, landscaping, irrigation and ancillary work.

Ohlone Park (East) Playground Replacement and Site Improvements Project is a Strategic Plan Priority Project, advancing our goal to provide state-of-the-art, well-maintained infrastructure, amenities, and facilities.

BACKGROUND

The project was advertised for bids on Monday, October 3, 2022, and bids were opened on Tuesday, November 1, 2022. The City received 7 bids, from a low base bid of \$933,619.68 to a high base bid of \$1,315,000.00. With the exception of the lowest bid, all bids were above the amount budgeted for this project. The determination of the lowest responsive and responsible bidder was based on the price for base bid work, as indicated in the bid documents.

The Living Wage Ordinance does not apply to this project since construction contracts are, pursuant to City policy, subject to State prevailing wage laws. The contractor will need to submit a certification of Compliance for the Equal Benefits Ordinance. The contract will be subject to the Community Workforce Agreement.

ENVIRONMENTAL SUSTAINABILITY AND CLIMATE IMPACTS

The construction contract includes requirements to comply with the City’s Environmentally Preferable Purchasing Policy and Construction and Demolition Waste program of at least 50%. The project is a renovation of an existing playground area and will not negatively affect natural habitat.

RATIONALE FOR RECOMMENDATION

The playground replacement and site improvements are needed as part of the City’s ongoing program to repair, renovate and improve accessibility at non-compliant or aging Parks facilities. The City does not have in-house labor or equipment resources to complete this renovation project.

ALTERNATIVE ACTIONS CONSIDERED

None

CONTACT PERSON

Scott Ferris, Director, Parks Recreation & Waterfront, 510-981-6700  
Evelyn Chan, Supervising Civil Engineer, Parks Recreation & Waterfront, 510-981-6430



Contract: California Constructors for Ohlone Park (East)  
Playground Replacement and Site Improvements Project

CONSENT CALENDAR  
December 13, 2022

Attachments:

1: Resolution

2: Bid Results

RESOLUTION NO. ##,###-N.S.

CONTRACT: CALIFORNIA CONSTRUCTORES FOR THE OHLONE PARK (EAST)  
PLAYGROUND REPLACEMENT AND SITE IMPROVEMENTS PROJECT

WHEREAS, the playgrounds at Ohlone Park (East) are in need of renovation; and

WHEREAS, the City has neither the in-house labor nor the equipment necessary to undertake this project; and

WHEREAS, invitation for bids was duly advertised on October 3, 2022, bids were opened on November 1, 2022, and the City received 7 bids; and

WHEREAS, California Constructores was determined to be the lowest responsive and responsible bidder, and references for California Constructores were provided and checked out satisfactorily; and

WHEREAS, funding in the amount of \$959,693 for this construction is available in the FY2023 budget in the Parks Tax Fund (Fund 138), Measure T1 Fund (Fund 511), and Capital Improvements (Fund 501) Fund. Additional funding in the amount of \$160,651 will be recommended for appropriation through the second amendment to the appropriations ordinance in the Parks Tax and Measure T1 Fund.

NOW THEREFORE, BE IT RESOLVED by the Council of the City of Berkeley that the Plans and Specifications for Specification No. 22-11418-C for the Ohlone Park (East) Playground Replacement and Site Improvements Project are approved; and

BE IT FURTHER RESOLVED that that the construction contract is awarded to California Constructores as the lowest responsive and responsible bidder for a total contract amount of \$933,620, which includes the base bid only; and

BE IT FURTHER RESOLVED that the Council of the City of Berkeley authorizes the City Manager to execute a contract and any amendments, extensions, or change orders until completion of the project in accordance with the approved plans and specifications with California Constructores for the Ohlone Park (East) Playground Replacement and Site Improvements Project in an amount not to exceed \$1,120,344, which includes a contract amount of \$933,620 and a 20% contingency in the amount of \$186,724 for unforeseen circumstances. A record signature copy of the agreement and any amendments to be on file in the Office of the City Clerk.



**City of Berkeley  
Abstract of Bid Worksheet**

Finance Department  
General Services Division

**FOR: Ohlone Park (East) Playground Replacement and Site Improvements  
Spec. # 22-11418-C**

**Bid Date: 11/1/2022**

| Bidders                            | Base Bid     | ALT. #1 | ALT. #2 | ALT. #3 | required w/ bid |             |  |  |  |  |  |  |  |  |  |  |  |
|------------------------------------|--------------|---------|---------|---------|-----------------|-------------|--|--|--|--|--|--|--|--|--|--|--|
|                                    |              |         |         |         | Bid Bond        | Addenda (2) |  |  |  |  |  |  |  |  |  |  |  |
| 1 CALIFORNIA CONSTRUCTORES         | 933,619.68   | 8000    | 8880    | 12800   | X               | X           |  |  |  |  |  |  |  |  |  |  |  |
| 2 KAREX ENGINEERING                | 1,118,000.00 | 7500    | 7500    | 15000   | X               | -1          |  |  |  |  |  |  |  |  |  |  |  |
| 3 MARINA                           | 1,265,000.00 | 11000   | 2000    | 2000    | X               | X           |  |  |  |  |  |  |  |  |  |  |  |
| 4 BAY CONSTRUCTION COMPANY         | 1,315,000.00 | 14000   | 9000    | 4000    | X               | X           |  |  |  |  |  |  |  |  |  |  |  |
| 5 OBS ENGINEERING INC              | 1,186,000.00 | 17000   | 12500   | 5000    | X               | X           |  |  |  |  |  |  |  |  |  |  |  |
| 6 REDGWICK CONSTRUCTION CO         | 1,294,800.00 | 25200   | 25200   | 35100   | X               | X           |  |  |  |  |  |  |  |  |  |  |  |
| 7 REDWOOD ENGINEERING CONSTRUCTION | 1,289,000.00 | 15000   | 5000    | 20000   | X               | X           |  |  |  |  |  |  |  |  |  |  |  |
| 8                                  |              |         |         |         |                 |             |  |  |  |  |  |  |  |  |  |  |  |
| 9                                  |              |         |         |         |                 |             |  |  |  |  |  |  |  |  |  |  |  |
| 10                                 |              |         |         |         |                 |             |  |  |  |  |  |  |  |  |  |  |  |

Bid Recorder: Talia Stewart  510.981.7320, 2022 08-12 PM

Bid Opener: Josh Roben 

Project Manager: Stacey Rutherford 

2180 Milvia Street, Berkeley, CA 94704 Tel: 510.981.7320 TDD: 510.981.6903 Fax: 510.981.7390  
E-mail: [finance@ci.berkeley.ca.us](mailto:finance@ci.berkeley.ca.us)





Office of the City Manager

CONSENT CALENDAR  
December 13, 2022

To: Honorable Mayor and Members of the City Council  
 From: Dee Williams-Ridley, City Manager  
 Submitted by: Liam Garland, Director, Public Works  
 Subject: Contracts: Consultants for On-Call Transportation Planning Services

RECOMMENDATION

Adopt five Resolutions authorizing the City Manager to execute individual contracts and any amendments, each for the period January 1, 2023 through June 30, 2028 for a total amount of all contracts not to exceed \$5,000,000 with the following consultants for On-call Transportation Planning Services:

1. Alta Planning + Design, Inc. for an amount not to exceed \$1,000,000.
2. Community Design + Architecture for an amount not to exceed \$1,000,000.
3. Fehr & Peers for an amount not to exceed \$1,000,000.
4. NN Engineering, Inc. for an amount not to exceed \$1,000,000
5. Toole Design Group, LLC for an amount not to exceed \$1,000,000.

FISCAL IMPACTS OF RECOMMENDATION

As an on-call contract, funding is subject to appropriation in the FY 2023 fiscal year and future fiscal year Transportation budgets in various funds to be determined, as planning, design and engineering needs for projects arise. Task orders to consultants to complete work under these contracts will be issued only when the necessary funds are available and appropriated. Award of an on-call contract does not guarantee any set level of expenditure until a task order is issued.

CURRENT SITUATION AND ITS EFFECTS

The Public Works Department uses consultants to support a variety of work plan programs and projects. The Transportation Division within Public Works has used contracts for work that is specialized, such as environmental review; bicycle and pedestrian plan implementation; preparation of complex grant applications; and civil and traffic engineering. On-call consultants have also enabled the City to meet tight schedules when short-term work needs to be done.

The Transportation Division will utilize these services as needed to complete an update to the City's Bicycle Plan; develop a Berkeley Transit Plan; update the City's Vision Zero Action Plan; support staff in completing grant applications; and complete other potential long- and short-term tasks under the consulting services categories listed in the RFQ. These categories are: Multi-Modal/Complete Streets Transportation Planning; Traffic

Engineering; Project Development, Funding and Management; Urban Design and Streetscape Improvements; and Environmental Analysis.

### BACKGROUND

On July 20, 2022, the City released a Request for Qualifications (RFQ) under Specification No. 22-11508-C for On-call Transportation Planning Services. The RFQ requested Statements of Qualification from firms, or teams of firms, to assist Public Works Transportation staff with complex planning, design and traffic engineering projects.

Submittals were due September 13, 2022, and the City received eight eligible Statements of Qualification. A selection panel of Public Works staff reviewed and scored each submittal. Staff recommends contracting with five firms: Alta Planning + Design, Community Design + Architecture, Fehr & Peers, NN Engineering, and Toole Design Group, the firms that received the highest scores.

### ENVIRONMENTAL SUSTAINABILITY AND CLIMATE IMPACTS

The projects that will be undertaken by the on-call transportation planning consultants were selected to improve transportation safety and efficiency, and to promote overall transportation sustainability and resiliency for Berkeley. These projects are intended to increase the number of Berkeley residents and visitors walking, biking, and taking transit, while decreasing vehicle miles travelled and related greenhouse gas emissions. This is consistent with the Berkeley Climate Action Plan, which sets a target of reducing transportation emissions 80% below year 2000 levels by 2050. The Plan further states that transportation modes such as public transit, walking, and bicycling must become the primary means of fulfilling the City's mobility needs in order to meet this target.

### RATIONALE FOR RECOMMENDATION

All submittals were reviewed and scored according to the criteria in the RFQ. Staff selected firms that were deemed the most qualified to assist the City.

### ALTERNATIVE ACTIONS CONSIDERED

Projects could be carried out by current City staff. However, that would require long-term reassignment of transportation planning, traffic engineering and civil engineering staff resources that would significantly delay or defer other work plan priorities.

### CONTACT PERSON

Farid Javandel, Deputy Director of Transportation, Public Works, 981-7061  
Beth Thomas, Principal Planner, Public Works, 981-7068

### Attachments:

- 1: Resolution: Alta Planning + Design, Inc.
- 2: Resolution: Community Design + Architecture
- 3: Resolution: Fehr & Peers
- 4: Resolution: NN Engineering, Inc.
- 5: Resolution: Toole Design Group, LLC

RESOLUTION NO. ##,###-N.S.

CONTRACT: ALTA PLANNING + DESIGN, INC. FOR ON-CALL TRANSPORTATION  
PLANNING SERVICES

WHEREAS, on July 20, 2022, the City released a Request for Qualifications (Specification No. 22-11508-C) seeking firms or individuals to provide On-call Transportation Planning Services; and

WHEREAS, on September 13, 2022, the City received eight submissions, which were reviewed and rated; and

WHEREAS, the submission from Alta Planning + Design, Inc. has been found to be fully qualified and responsive to the City's request; and

WHEREAS, funding is currently available in the FY 2023 budget and additional funding will be identified and requested for appropriation as projects arise.

NOW THEREFORE, BE IT RESOLVED by the Council of the City of Berkeley that the City Manager is authorized to approve a contract and any amendments with Alta Planning + Design, Inc. for On-call Transportation Planning Services for the contract period of January 1, 2023 through June 30, 2028 in an amount not to exceed \$1,000,000. A record signature copy of said contract and any amendments is to be on file in the Office of the City Clerk.

RESOLUTION NO. ##,###-N.S.

CONTRACT: COMMUNITY DESIGN + ARCHITECTURE FOR ON-CALL  
TRANSPORTATION PLANNING SERVICES

WHEREAS, on July 20, 2022, the City released a Request for Qualifications (Specification No. 22-11508-C) seeking firms or individuals to provide On-call Transportation Planning Services; and

WHEREAS, on September 13, 2022, the City received eight submissions, which were reviewed and rated; and

WHEREAS, the submission from Community Design + Architecture has been found to be fully qualified and responsive to the City's request; and

WHEREAS, funding is currently available in the FY 2023 budget and additional funding will be identified and requested for appropriation as projects arise.

NOW THEREFORE, BE IT RESOLVED by the Council of the City of Berkeley that the City Manager is authorized to approve a contract and any amendments with Community Design + Architecture for On-call Transportation Planning Services for the contract period of January 1, 2023 through June 30, 2028 in an amount not to exceed \$1,000,000. A record signature copy of said contract and any amendments is to be on file in the Office of the City Clerk.



RESOLUTION NO. ##,###-N.S.

CONTRACT: FEHR & PEERS FOR ON-CALL TRANSPORTATION PLANNING SERVICES

WHEREAS, on July 20, 2022, the City released a Request for Qualifications (Specification No. 22-11508-C) seeking firms or individuals to provide On-call Transportation Planning Services; and

WHEREAS, on September 13, 2022, the City received eight submissions, which were reviewed and rated; and

WHEREAS, the submission from Fehr & Peers has been found to be fully qualified and responsive to the City's request; and

WHEREAS, funding is currently available in the FY 2023 budget in project budgets and additional funding will be identified and requested for appropriation as projects arise.

NOW THEREFORE, BE IT RESOLVED by the Council of the City of Berkeley that the City Manager is authorized to approve a contract and any amendments with Fehr & Peers for On-call Transportation Planning Services for the contract period of January 1, 2023 through June 30, 2028 in an amount not to exceed \$1,000,000. A record signature copy of said contract and any amendments is to be on file in the Office of the City Clerk.

RESOLUTION NO. ##,###-N.S.

CONTRACT: NN ENGINEERING, INC. FOR ON-CALL TRANSPORTATION PLANNING SERVICES

WHEREAS, on July 20, 2022, the City released a Request for Qualifications (Specification No. 22-11508-C) seeking firms or individuals to provide On-call Transportation Planning Services; and

WHEREAS, on September 13, 2022, the City received eight submissions, which were reviewed and rated; and

WHEREAS, the submission from NN Engineering, Inc. has been found to be fully qualified and responsive to the City's request; and

WHEREAS, funding is currently available in the FY 2023 budget and additional funding will be identified and requested for appropriation as projects arise.

NOW THEREFORE, BE IT RESOLVED by the Council of the City of Berkeley that the City Manager is authorized to approve a contract and any amendments with NN Engineering, Inc. for On-call Transportation Planning Services for the contract period of January 1, 2023 through June 30, 2028 in an amount not to exceed \$1,000,000. A record signature copy of said contract and any amendments is to be on file in the Office of the City Clerk.

RESOLUTION NO. ##,###-N.S.

CONTRACT: TOOLE DESIGN GROUP, LLC FOR ON-CALL TRANSPORTATION  
PLANNING SERVICES

WHEREAS, on July 20, 2022, the City released a Request for Qualifications (Specification No. 22-11508-C) seeking firms or individuals to provide On-call Transportation Planning Services; and

WHEREAS, on September 13, 2022, the City received eight submissions, which were reviewed and rated; and

WHEREAS, the submission from Toole Design Group, LLC has been found to be fully qualified and responsive to the City's request; and

WHEREAS, funding is currently available in the FY 2023 budget and additional funding will be identified and requested for appropriation as projects arise.

NOW THEREFORE, BE IT RESOLVED by the Council of the City of Berkeley that the City Manager is authorized to approve a contract and any amendments with Toole Design Group, LLC for On-call Transportation Planning Services for the contract period of January 1, 2023 through June 30, 2028 in an amount not to exceed \$1,000,000. A record signature copy of said contract and any amendments is to be on file in the Office of the City Clerk.





CONSENT CALENDAR  
December 13, 2022

To: Honorable Mayor and Members of the City Council  
 From: Dee Williams-Ridley, City Manager  
 Submitted by: Liam Garland, Director, Public Works  
 Subject: Contracts: On-Call Architectural Services: ELS Architecture and Urban Design; Noll & Tam Architects; and Siegel & Strain Architects

RECOMMENDATION

Adopt three Resolutions authorizing the City Manager to execute contracts and any amendments with the following firms for on-call architectural design services in support of the City's annual Facilities CIP program, each from January 1, 2023 through December 31, 2025:

1. ELS Architecture and Urban Design (ELS), for an amount not to exceed \$3,333,334.
2. Noll & Tam Architects (N&T), for an amount not to exceed \$3,333,333.
3. Siegel & Strain Architects (SSA), for an amount not to exceed \$3,333,333.

FISCAL IMPACTS OF RECOMMENDATION

Funding for this on-call contract will be identified within capital project budgets and requested for appropriation via future Amendments to the FY 2023 Annual Appropriations Ordinance or in future fiscal years as projects arise based on department needs. Funds anticipated to be used for Public Works and Parks, Recreation, and Waterfront facilities projects are Capital Improvement Fund 501, Measure T1 511, and Parks Tax 138. These contracts are essential since they provide architectural consulting services for City facilities within the Public Works (PW) and Parks, Recreation, and Waterfront (PRW) Departments. The contracts also support the City's T1 Program and the Capital Improvement Program. A number of the City's facilities are outdated and in need of replacement or upgrade. These on-call contracts will allow the repair of problems before they occur and provide safe, reliable, and code-compliant facilities

CURRENT SITUATION AND ITS EFFECTS

Requests for Qualifications (RFQ) were issued on June 2, 2022 (Specification No. 22-11419-C), seeking qualified firms or individuals to provide on-call architectural design services in support of the City's annual Facilities Capital Improvement Projects (CIP) and T1 projects.

On June 30, 2022, the City received 18 proposals from architectural firms, which were evaluated by a review panel. ELS, Noll & Tam, and Siegel & Strain were determined to be the best qualified to meet the City's needs.

The services provided by this contractor will support the Strategic Plan goal to provide state-of-the-art, well-maintained infrastructure, amenities, and facilities.

### BACKGROUND

The City operates 95 facilities, not including Library facilities and those leased to other entities. The 95 facilities include 39 in PRW's inventory and 56 under Public Works.

Over the next several years, the Engineering Division of the Public Works Department (PW) and the Parks, Recreation, and Waterfront Department (PRW) are expecting significantly increased workloads, resulting from deferred maintenance, on-going capital projects, and T1 projects. The second T1 phase includes design or construction of over fifteen building facility projects during the next three years. Architectural consultants are necessary to support PW and PRW staff to complete these projects as needed.

### ENVIRONMENTAL SUSTAINABILITY AND CLIMATE IMPACTS

There are no negative environmental effects of this action. These contracts will help ensure the successful completion of facility capital improvement projects, which will incorporate sustainable elements from resolutions and ordinances administered by the City's Office of Energy and Sustainable Development, the City of Berkeley Revised General Plan, the City's Climate Action Plan, and CalGreen.

### RATIONALE FOR RECOMMENDATION

ELS, Noll & Tam, and Siegel & Strain have particular expertise in architectural design services. They were the top three ranked firms and are the best qualified to meet the City's needs.

City staff recommends awarding a contract to all three consultants to get the best value for the City, because it will distribute the anticipated workload, create an alternative source for services, and secure more competitive proposals.

### ALTERNATIVE ACTIONS CONSIDERED

No alternative actions were considered since the City needs assistance from architectural services firms to complete the required work. Architectural design support will be critical to complete T1 and CIP projects within the established time frame.

### CONTACT PERSON

Joe Enke, Manager of Engineering, Public Works (510) 981-6411  
Elmar Kapfer, Supervising Civil Engineer, Public Works (510) 981-6435  
Farid Javandel, Deputy Director of Transportation, Public Works (510) 981-7061

### Attachments:

- 1: Resolution: Contract with ELS Architecture and Urban Design
- 2: Resolution: Contract with Noll & Tam Architects
- 3: Resolution: Contract with Siegel & Strain Architects

RESOLUTION NO. ##,###-N.S.

CONTRACT: ELS ARCHITECTURE AND URBAN DESIGN FOR ON-CALL  
ARCHITECTURAL SERVICES FOR CAPITAL IMPROVEMENT PROJECTS

WHEREAS, on June 2, 2022 the City released a Request for Qualifications (Specification No. 22-11419-C) seeking firms or individuals to provide on-call architectural design services for capital improvement projects; and

WHEREAS, on June 30, 2022, the City received eighteen (18) submissions, which were reviewed and rated; and

WHEREAS, the submission from ELS Architecture and Urban Design has been found to be fully qualified and responsive to the City's request; and

WHEREAS, funding will be identified and requested for appropriation as projects arise; and

NOW THEREFORE, BE IT RESOLVED by the Council of the City of Berkeley that the City Manager is authorized to approve a contract and any amendments with ELS Architecture and Urban Design for on-call architectural design services for capital improvement projects for the contract period of January 1, 2023 through December 31, 2025 in an amount not to exceed \$3,333,334. A record signature copy of said contract and any amendments to be on file in the Office of the City Clerk.

RESOLUTION NO. ##,###-N.S.

CONTRACT: NOLL & TAM ARCHITECTS FOR ON-CALL ARCHITECTURAL SERVICES FOR CAPITAL IMPROVEMENT PROJECTS

WHEREAS, on June 2, 2022 the City released a Request for Qualifications (Specification No. 22-11419-C) seeking firms or individuals to provide on-call architectural design services for capital improvement projects; and

WHEREAS, on June 30, 2022, the City received eighteen (18) submissions, which were reviewed and rated; and

WHEREAS, the submission from Noll & Tam Architects has been found to be fully qualified and responsive to the City's request; and

WHEREAS, funding will be identified and requested for appropriation as projects arise; and

NOW THEREFORE, BE IT RESOLVED by the Council of the City of Berkeley that the City Manager is authorized to approve a contract and any amendments with Noll & Tam Architects for on-call architectural design services for capital improvement projects for the contract period of January 1, 2023 through December 31, 2025 in an amount not to exceed \$3,333,333. A record signature copy of said contract and any amendments to be on file in the Office of the City Clerk.



RESOLUTION NO. ##,###-N.S.

CONTRACT: SIEGEL & STRAIN ARCHITECTS FOR ON-CALL ARCHITECTURAL SERVICES FOR CAPITAL IMPROVEMENT PROJECTS

WHEREAS, on June 2, 2022 the City released a Request for Qualifications (Specification No. 22-11419-C) seeking firms or individuals to provide on-call architectural design services for capital improvement projects; and

WHEREAS, on June 30, 2022, the City received eighteen (18) submissions, which were reviewed and rated; and

WHEREAS, the submission from Siegel & Strain Architects. has been found to be fully qualified and responsive to the City's request; and

WHEREAS, funding will be identified and requested for appropriation as projects arise; and

NOW THEREFORE, BE IT RESOLVED by the Council of the City of Berkeley that the City Manager is authorized to approve a contract and any amendments with Siegel & Strain Architects for on-call architectural design services for capital improvement projects for the contract period of January 1, 2023 through December 31, 2025 in an amount not to exceed \$3,333,333. A record signature copy of said contract and any amendments to be on file in the Office of the City Clerk.





Office of the City Manager

CONSENT CALENDAR  
December 13, 2022

To: Honorable Mayor and Members of the City Council  
 From: Commission on Disability  
 Submitted by: Michai Freeman, Chairperson, Commission on Disability  
 Subject: Authorization for an Additional Commission on Disability Meeting in 2022

RECOMMENDATION

Adopt a Resolution authorizing one additional meeting of the Commission on Disability in 2022.

FISCAL IMPACTS OF RECOMMENDATION

None.

CURRENT SITUATION AND ITS EFFECTS

The Commission on Disability requests approval to hold a Special Meeting in December 2022, for the purpose of discussing and providing information to City Council on the Bike Plan, Auto Captioning at city meetings, and the elevator ordinance. Submission of this report for authorization of the additional meeting was approved by the Commission on Disability at its October 26, 2022 meeting. (Vote: Ayes: Freeman, Walsh. Noes: None. Abstain: None. Absent: Singer. Motion/Second: Freeman/Walsh)

BACKGROUND

Resolution No. 68,258-N.S. governs the number of meetings for boards and commissions and places the Commission on Disability in Category B with a maximum of 10 meetings per year. In 2022, the Commission has held the maximum of 10 meetings from January through October.

ENVIRONMENTAL SUSTAINABILITY AND CLIMATE IMPACTS

There are no identifiable environmental impacts or opportunities associated with this report.

RATIONALE FOR RECOMMENDATION

The additional meeting requested for December is an opportunity for the Commission to provide information to Council members for consideration on matters of concern to Berkeley residents. The work planning of the Commission advances the City Strategic Plan Priority Goal of providing state-of-the art, well maintained infrastructure, amenities, and facilities.

ALTERNATIVE ACTIONS CONSIDERED

None.

CITY MANAGER

The City Manager concurs with the content and recommendations of the Commission's Report.

CONTACT PERSON

Andrew Brozyna, Secretary, Commission on Disability, (510) 981-6396

Attachments:

1: Resolution

RESOLUTION NO. ##,###-N.S.

AUTHORIZING ADDITIONAL MEETING FOR THE COMMISSION ON DISABILITY

WHEREAS, Resolution No. 68,258-N.S. stipulates how many annual meetings are allowed for Berkeley's commissions and places the Commission on Disability in Category B, with a maximum of 10 meetings per year; and

WHEREAS, the Commission on Disability plans to hold an additional meeting in December for the purpose of discussing and providing information to City Council on the Bike Plan, Auto Captioning at city meetings, and the elevator ordinance.

NOW THEREFORE, BE IT RESOLVED by the Council of the City of Berkeley that the Council authorizes one additional meeting in 2022 for the Commission on Disability.





[Commission Name]

CONSENT CALENDAR  
December 13, 2022

To: Honorable Mayor and Members of the City Council

From: Disaster and Fire Safety Commission

Submitted by: Weldon Bradstreet, Vice Chairperson, Disaster and Fire Safety Commission

Subject: Measure FF Budget Recommendation - Expanded Fire Prevention Inspection Program

RECOMMENDATION

Summary. With the risk of catastrophic wildfire steadily increasing due to climate change, the Disaster and Fire Safety Commission (DFSC) recommends prioritizing wildfire fuel reduction in the FY 23 and FY 24 Measure FF budget by expanding the Fire Department's Fire Prevention Inspection Program and fully enforcing the existing Fire Code to clear vegetation build-up and overgrowth within 100 feet of structures in Berkeley's Very High Fire Severity Zones (VHFSZs) (Fire Zones 2 and 3). In addition, the Fire Code would be strengthened as needed to require removal of hazardous vegetation on the entirety of properties beginning in FY 25. The program would provide for City vegetation management crews to clear vegetation where property owners opt into the program or fail to comply, with no-interest liens placed upon properties to recover direct costs upon transfer. Special emphasis should be placed on eucalyptus groves due to their high flammability and potential to create spot fires.

Funding for this expanded program, together with the Fire Department's existing home inspection program, which is focused on creating defensible space around structures, would be supported by devoting 21 percent and 26 percent of Measure FF revenues for FY 23 and FY 24, respectively. (See table below.)

Description. The Fire Department's existing home inspection program is focused primarily on ensuring 30 feet of defensible space around structures in Fire Zones 2 and 3. Consistent with Berkeley's and California's regulations, the DFSC recommends that the program be expanded to routinely require defensible space within 100 feet of any structure, particularly on any portion of a slope, including the removal of particularly fire-prone vegetation. The City should develop additional regulations to require removal of highly fire-prone vegetation on the entirety of properties beginning in FY 25. Highly fire-prone vegetation is widely recognized to include eucalyptus, Monterey pine, juniper, and limited other species.

The DFSC also recommends that the City expand its capability, possibly in conjunction with the Parks and Recreation Department, to clear brush and remove trees as necessary to meet existing regulations where property owners fail to comply, with liens placed upon properties to recover direct costs upon transfer, as provided under BFC Sec. 4907.2.2. As a City program is likely to provide economies of scale, other efficiencies, and expert guidance, and as the health and safety of Berkeley residents is promoted by facilitating compliance, property owners should be allowed to opt into the City's vegetation clearance program with cost-recovery provided through property liens. In either case, no interest should be assessed on direct costs, given the public benefits and the availability of Measure FF funds to carry the cost.

This proposed program is consistent with the recommendations of the Hills Emergency Forum, of which the City is a member along with other East Bay authorities, to thin and remove hazardous vegetation on private property as well as public property.<sup>1</sup> The initial phase of the program (FY 23) would be focused on requiring removal of debris build-up on the ground, loose bark to 8 feet above ground, tree limbs to 10 feet above ground, and saplings and subordinate trees that could ignite upper canopy throughout each property. The second phase (planned in FY 23, implemented beginning no later than FY 24) would require removal of hazardous trees and other hazardous vegetation, provide for any necessary erosion control measures, and encourage revegetation with native, fire-resistant species. Beginning in FY 25, property owners would be required to properly maintain their entire property, adding or clarifying Fire Code provisions as necessary that the Fire Department and the DFSC would develop in consultation with the City Attorney for Council's consideration. The proposed budgets may include a program manager, additional inspectors, expert consultants, and crews as needed.

Three additional elements of the program should include: (a) removal of trees and vegetation on private and City property to meet existing regulations that require unobstructed 20-foot clearance for emergency egress and emergency vehicle access<sup>2</sup>; (b) removal of hazardous trees and vegetation on City property as needed,<sup>3</sup> and (c) removal of large trees posing public safety hazards on private property that have been identified outside of the VHFSZs, included in this program as an equity measure, if possible.<sup>4</sup> The cost of clearing City property could be funded through Measure FF as needed.

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<sup>1</sup> See Hills Emergency Forum (<http://www.hillsemergencyforum.org/MgmtRecmdtn.html>).

<sup>2</sup> Cal. Code Regs. tit. 14 § 1273.01.

<sup>3</sup> The City's Parks and Recreation Department is currently addressing these hazards in city parks and may largely complete the effort in FY 22.

<sup>4</sup> Consultation with the City Attorney as to the ability to expend Measure FF funds on trees posing safety hazards other than wildfire is advised.



## Measure FF Budget Recommendation - Expanded Fire Prevention Inspection CONSENT CALENDAR Program

December 13, 2022

| <b>RECOMMENDATIONS - EXPANDED INSPECTION PROGRAM</b>                                     |                     |                     |
|------------------------------------------------------------------------------------------|---------------------|---------------------|
|                                                                                          | <b>FY 23 \$</b>     | <b>FY 24 \$</b>     |
| Continue current (FY 22) spending on Inspection Program, recurring) ( <u>Estimated</u> ) | \$ 1,000,000        | \$ 1,080,000        |
| Expanded Program*                                                                        | \$ 770,000          | \$ 1,140,000        |
| Develop new fire safety regulations as needed                                            | \$ -                | \$ -                |
| <b>Total</b>                                                                             | <b>\$ 1,770,000</b> | <b>\$ 2,220,000</b> |
| <b>Measure FF Annual Revenue</b>                                                         | <b>\$ 8,500,000</b> | <b>\$ 8,500,000</b> |
| <b>TOTAL % FF Funds</b>                                                                  | <b>21%</b>          | <b>26%</b>          |

\* Cost of fuel removal, where necessary, to be recovered via property liens

POLICY COMMITTEE RECOMMENDATION

On November 21, 2022, the Public Safety Committee adopted the following action: M/S/C (Kesarwani/Wengraf) Positive recommendation to adopt the City Manager's recommendation as presented in the companion report. Vote: All Ayes.

FISCAL IMPACTS OF RECOMMENDATION

This DFSC recommendation addresses the prioritization of Measure FF funds and will have no impact on General Funds. However, by prioritizing the reduction of flammable vegetation throughout Berkeley's VHFSZs, these recommendations will reduce the likelihood of wildfire and the intensity and severity of any wildfires that occur in the City, which would destroy homes and other property and have other far-reaching negative fiscal impacts, including exacerbation of the existing housing crisis.

The Fire Department recently abandoned an application for a CalOES/FEMA grant to address hazardous vegetation due to competing priorities, disqualifying events, costs and disproportionate commitment of staff time needed for grant application and performance.<sup>5</sup>

CURRENT SITUATION AND ITS EFFECTS

At the April 27 Special Meeting, the commission passed a motion to recommend prioritizing wildfire fuel reduction in the FY 23 and FY 24 Measure FF budget by expanding the Fire Department's Fire Prevention Inspection Program and fully enforcing the existing Fire Code to clear vegetation build-up and overgrowth within 100 feet of structures in Berkeley's Very High Fire Severity Zones (VHFSZs) (Fire Zones 2 and 3). M/SC: (Stein, Bradstreet) Ayes: Bradstreet, Rader, Cutler, Stein, Simmons; Noes: Bedolla, Abstain: None; Absent: Dean, Degenkolb.

<sup>5</sup> BFD Monthly Report to the DFSC, March 23, 2022.

The Fire Department's existing home inspection program is generally limited to addressing a 30-foot radius around structures in Fire Zones 2 and 3, and removal of hazardous vegetation (e.g., eucalyptus and junipers) is generally not required. Therefore, the inspection program does not address major areas of vegetation build-up and hazardous trees on private land. Such vegetation is widely recognized to contribute to the likelihood, severity and speed of a wildfire and thus poses an immediate wildfire threat to the City. As discussed below, however, California's and Berkeley's regulations provide for more aggressive inspections and enforcement.

## BACKGROUND

Measure FF passed on November 3, 2020, with a 74.2 percent "yes" vote and generates approximately \$8.5 million annually. Among other important objectives, including improvements to the 9-1-1 dispatch system, training facility improvements, and funding of new ambulances and technicians, the measure supports wildfire prevention and preparedness activities including vegetation management. In a 2020 community survey, a tax for wildfire prevention received 69 percent approval from residents and was the most popular rationale for a new tax to support fire and emergency services.<sup>6</sup>

Measure FF funds have been used in part to create a home inspection program housed in the Fire Department, which is aimed primarily at creating 30 feet of "defensible space" around structures. "Defensible space" means the area adjacent to a structure where wildfire prevention or protection practices are implemented to provide defense from an approaching wildfire or to minimize the spread of a structure fire to wildlands or surrounding areas.<sup>7</sup> Slope is a primary factor that increases an area's susceptibility to wildfire.<sup>8</sup> Berkeley's Fire Department inspectors may require additional treatments within 100 feet of any property,<sup>9</sup> however this is the "exception rather than the rule."<sup>10</sup> State

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<sup>6</sup> See p. 5 of the supplemental material for item 13 on the June 2, 2020 Council meeting: [https://www.cityofberkeley.info/Clerk/City\\_Council/2020/06\\_June/City\\_Council\\_06-02-2020\\_-\\_Regular\\_Meeting\\_Agenda.aspx](https://www.cityofberkeley.info/Clerk/City_Council/2020/06_June/City_Council_06-02-2020_-_Regular_Meeting_Agenda.aspx).

<sup>7</sup> See Cal. Gov. Code Sec. 51177(a) and BFC Sec. 4907.2.1. <https://berkeley.municipal.codes/BMC/19.48.020>.

<sup>8</sup> See CalFire, Prepare for Wildfire – Defensible Space, <https://www.readyforwildfire.org/prepare-for-wildfire/get-ready/defensible-space/>.

<sup>9</sup> Berkeley Fire Department, "Fire Prevention Inspection Report, Wildland-Urban Interface Area" (Rev. 05/2020) (included in June 1, 2021, Berkeley Fire Department mailing to Berkeley property owners).

<sup>10</sup> According to Chief May of the BFD, "State law technically makes a property owner responsible for providing defensible space on their property out to a distance of 100 ft. from structures. However, the same law allows for varying intensity of vegetation management between 0 ft. – 30 ft. and 30 ft. – 100 ft. from structures. Based on our local lot size and geometry the Berkeley Fire Department is concentrating on the space

law, however, requires 100 feet of defensible space for all properties in wildfire-urban interface areas,<sup>11</sup> and most of Fire Zones 2 and 3 is on slopes. Given the threat of wildfire and given that many private property areas within Berkeley contain dense and hazardous vegetation that will go untreated under current practice, Berkeley should fully enforce state requirements, which are consistent with Berkeley's Fire Code that requires maintenance of an effective firebreak by "removing and clearing away flammable vegetation and combustible growth." Flammable vegetation is widely recognized to include eucalyptus, Monterey pine, juniper and limited other species.<sup>12,13</sup>

Berkeley has many areas of vegetative fuel build-up that are beyond 30 feet of any structure. Examples of large such areas include numerous concentrations of eucalyptus and other hazardous vegetation that exist throughout Fire Zones 2 and 3, including canyons with creeks, such as Cerritos Creek and Codornices Creek canyons, and areas between homes on the long slopes between tiered streets that are often untended and overgrown. Eucalyptus trees are a particular hazard, due to their high fuel-loading per acre, ease of ignition, fire intensity and flame length.<sup>14</sup>

The Hillside Fire Safety Group has identified seven eucalyptus groves of 15 trees or more on 103 private properties and three groves of 15 trees or more in three City parks (Remillard, Cragmont Rock and Glendale-La Loma). Smaller groups or single trees have also been found on 16 private properties and on seven other City properties (Two parks and 5 Right-of-Ways). In total, Eucalyptus trees have been found on approximately 119 private properties and 10 City locations. The 10 groves private and City property account for most of the approximately 717 eucalyptus trees north of the

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0 ft. – 30 ft. from structures as well as within 10 ft. of road and street frontages. There may be some circumstances where [defensible space] greater than 30 ft. is necessary and achievable, but these will be exceptions rather than the rule. There is no requirement to 'groom hillsides' (i.e., to cut/trim vegetation just to cut vegetation). Vegetation management is required where conditions in one of the defensible spaces around a structure or other target area require it." (Response to October 18, 2021, questions posed by DFSC Commissioner Rader.)

<sup>11</sup> See CalFire, "Homeowners Checklist" (2009). <https://www.readyforwildfire.org/wp-content/uploads/Homeowners-Checklist.pdf>

<sup>12</sup> See notes 13, 14, 22, and 28 *infra*.

<sup>13</sup> Flammable vegetation expressly does not include "[s]pecimens of trees, ornamental shrubbery or similar plants which are used as ground cover, if they do not form a means of rapidly transmitting fire from the native growth to any building or structure." BFC Sec. 4907.2.

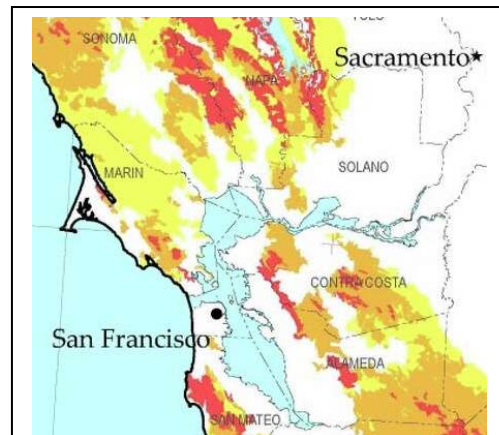
<sup>14</sup> See East Bay Regional Park District, "Blue Gum Eucalyptus: A Wildfire Threat" (<http://www.hillsemergencyforum.org/docs/EucTreatment.pdf>); Russell and McBride, 2002, Agree et al., 1973, and Chenny, 1981, as cited in J.R. McBride's Fuel Management Proposal for Claremont and Strawberry Canyons, 2019. (Available at <https://www.claremontcanyon.org/fuel-management-proposal>.)

UC Berkeley and Berkeley Lab campuses.<sup>15</sup> When one adds the approximately 415 Eucalyptus trees along the northern boundary of the UC Berkeley and Berkeley Lab campus, the total number of Eucalyptus trees in north Berkeley is 1,132. This does not include the Eucalyptus trees further to the south inside the UC Berkeley and Berkeley Lab campuses.

A significantly smaller number of additional hazardous trees exist in Fire Zone 3 (Panoramic Hill) and in the Fire Zone 2 area south of campus (areas of which burned in the 1991 Tunnel Fire). Many, if not most, of these areas require clean up. Better fuel management can also enable firefighters to assemble and more safely undertake fire suppression activities.<sup>16</sup>

The consultant recently hired by the Fire Department to prepare its Community Wildfire Protection Plan (CWPP) has explained the “unparalleled” potential of burning eucalyptus embers to create spot fires, which create some of the most destructive wildfires. The consultant noted that “[p]revention of crown fire in eucalyptus in the Berkeley/Oakland hills, and elsewhere in the East Bay is of paramount importance to the fire safety of a very large population.”<sup>17</sup> For this reason, eucalyptus groves should be prioritized in the City’s inspection program.

It is well understood that ladder fuels can carry fire from ground fuels to tree crowns where it can become a devastating fire that quickly spreads.<sup>18</sup> Within its “State Responsibility Area,” CalFIRE has embarked on many programs to reduce fuel loads and create horizontal and vertical fuel breaks to protect California’s most wildfire-vulnerable communities.<sup>19</sup> CalFIRE is not responsible for densely populated areas, however, which falls to local governments such as Berkeley. (See Figure at right.) While CalFIRE addresses fuel loads in areas near or adjacent to vulnerable urban areas, it is



CalFire map shows Northern California's fire severity zones, with red areas, including the Berkeley hills, signifying very high risk. Much of the very-high-risk areas shown have burned in

<sup>15</sup> Hillside Fire Safety Group presentation to the DFSC Rock Park and additional groves and trees in areas not

<sup>16</sup> Note 14 *supra* (McBride 2019).

<sup>17</sup> Carol Rice, Wildland Res Mgt, UC Berkeley [Wildland](#) pp. 25-27 (July 2020 Draft). Emphasis added.

<sup>18</sup> See CalFIRE, Fire and Fuels Treatment: <https://www.fire.ca.gov/programs/resource-management/resource-protection-improvement/wildfire-resilience/forest-stewardship/fire-and-fuels-treatment/>.

<sup>19</sup> See, e.g., CalFIRE’s Fuel Reduction Guide (2021) (<https://www.fire.ca.gov/media/4jqerfjh/fuels-reduction-guide-final-2021-interactive.pdf>).

obviously at least equally important to address fuel loads *within* dense urban areas to reduce the likelihood and impacts of catastrophic wildfire.

The California Constitution generally prohibits “gifts of public funds” to any public or private person; however, such gifts are allowed for a public purpose, and that public purpose is to be liberally construed.<sup>20</sup> The city and state have numerous programs that spend public funds on private property for the purposes of disaster preparedness and public safety.<sup>21</sup> Using public funds to reduce fuels that significantly contribute to the risk of wildfire would likely be considered a public purpose, particularly given the limited incidental benefits that would accrue to landowners. Berkeley’s City Attorney should confirm this view.

### ENVIRONMENTAL SUSTAINABILITY

Acting on these recommendations will reduce the likelihood, intensity and severity of a wildfire in the City, potentially avoiding devastating and far-reaching human and environmental impacts in our City. Burnt landscapes can be slow to recover and can lead to polluted water sources, erosion or landslides, and health impacts from airborne ash.<sup>22</sup>

The proposed City-run crews would promote the replacement of flammable, non-native tree and shrub species with natural, more fire-resistant native species that provide superior habitat for many insect, avian, and mammal species, compared with eucalyptus.<sup>23</sup> To prevent regrowth of eucalyptus, City crews should rely on non-pesticidal, manual sprouting control for several years following eucalyptus removal, if

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<sup>20</sup> See League of California Cities, “Gift of Public Funds (Spoiler Alert: It’s Illegal)” at p. 1. Available at: <https://www.cacities.org/Resources-Documents/Member-Engagement/Professional-Departments/City-Attorneys/Library/2016/Annual-2016/10-2016-Annual-Forbath-Gift-of-Public-Funds-Spoile.aspx>.

<sup>21</sup> Several City of Berkeley programs provide public funds for private benefit, including a FEMA-funded seismic retrofit program providing grants of up to \$150,000 (see [https://www.cityofberkeley.info/uploadedFiles/Planning\\_and\\_Development/Level\\_3\\_-\\_Building\\_and\\_Safety/RetrofitGrants\\_ProgramRules.pdf](https://www.cityofberkeley.info/uploadedFiles/Planning_and_Development/Level_3_-_Building_and_Safety/RetrofitGrants_ProgramRules.pdf)), and a free fuel chipper and debris bin program, funded through a refuse bill surcharge (see [https://www.cityofberkeley.info/fire\\_fuel\\_program/](https://www.cityofberkeley.info/fire_fuel_program/)). Alameda County offers grants of up to \$10,000 per homeowner to abate lead hazards (see <https://www.achhd.org/programs/leadfunding.htm>).

<sup>22</sup> Cartier, K. M. S. (2022), U.S. fires quadrupled in size, tripled in frequency in 20 years, *Eos*, 103, <https://doi.org/10.1029/2022EO220188>. Published on 08 April 2022.

<sup>23</sup> See: California Native Plant Society East Bay (<https://ebcnps.org/conservation/balancing-fire-safety-with-native-ecosystem-protection-2022-02/>); Hills Emergency Forum (<http://www.hillsemergencyforum.org/MgmtRecmdtn.html>); East Bay Regional Park District, “Blue Gum Eucalyptus: A Wildfire Threat” (<http://www.hillsemergencyforum.org/docs/EucTreatment.pdf>);



stumps are not removed. In drafting expanded or clarified portions of the Fire Code, the City should consider requiring property owners to employ manual sprouting control and revegetation with fire-resistant native species that also promote erosion control as necessary. The Hills Emergency Forum, of which the City is a member along with other East Bay authorities, has developed best management practices (BMPs) to reduce potential environmental impacts of fuel reduction projects and to comply with various laws and regulations which may be consulted.<sup>24</sup>

The revegetation component of the program is expected to partially mitigate the carbon impact of removing hazardous trees. The City could mitigate remaining carbon impacts by using additional Measure FF funds to supplement the City's existing program to plant trees in northwest and southwest Berkeley.<sup>25</sup>

Permits are not required to prune or remove any tree on private property, with the exception of coast live oak<sup>26</sup> (which is not fire-prone).

Land use projects that require trees to be cut down are often not considered significant environmental effects under the California Environmental Quality Act (CEQA).<sup>27</sup> While the City may nevertheless find "detriment" under the City's zoning ordinance for impacts not considered significant, the environmental and public safety benefits of removing hazardous vegetation more than outweigh any such detriments, particularly given the revegetation element of the program.

#### RATIONALE FOR RECOMMENDATION

The geography, weather patterns, drought conditions and dense vegetation in the East Bay create ideal conditions for wildfire, which could have devastating consequences to Berkeley. Reducing these fuels wherever they exist has been identified as a high priority in the CWPPs of other East Bay jurisdictions<sup>28</sup> that have identified eucalyptus and Monterey pine as a particular hazard "due to their rapid growth, height at maturity,

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<sup>24</sup> See Hills Emergency Forum, Best Management Practices Working Paper, 10/17/08 (<http://www.hillsemergencyforum.org/docs/BMPs.pdf>).

<sup>25</sup> See *Berkeleyside*, "Berkeley residents can request free saplings to combat tree inequity" (March 8, 2022) (<https://www.berkeleyside.org/2022/03/08/trees-make-life-better-berkeley>). Also see: [https://www.cityofberkeley.info/tree\\_planting/](https://www.cityofberkeley.info/tree_planting/).

<sup>26</sup> See City of Berkeley, Tree Pruning and Removal ([https://www.cityofberkeley.info/pruning\\_removal/](https://www.cityofberkeley.info/pruning_removal/)).

<sup>27</sup> See City of Berkeley, General Information on CEQA ([https://www.cityofberkeley.info/Planning\\_and\\_Development/Land\\_Use\\_Division/Environmental\\_Review\\_\(CEQA\).aspx](https://www.cityofberkeley.info/Planning_and_Development/Land_Use_Division/Environmental_Review_(CEQA).aspx)).

<sup>28</sup> See the CWPPs of El Cerrito-Kensington, Contra Costa County, Alameda County and others available at the website of the Diablo Firesafe Council, [www.diablofiresafe.org](http://www.diablofiresafe.org). Also see EBRPD, note 5 *supra*.

dense foliage, shallow root structure, flammability, breakability or invasiveness.”<sup>29</sup> “[E]ucalyptus ... are subject to torching and crown fires with potential high ember flight rates into residential areas.”<sup>30</sup>

UC Berkeley (UCB) has also recognized the threat, having cleared eucalyptus trees in Claremont Canyon.<sup>31</sup> UCB is currently in the process of removing eucalyptus and other trees and ladder fuels in the hills behind UCB along the Jordan Fire Trail, as part of a larger plan entailing the widespread removal of eucalyptus trees.<sup>32</sup> LBNL is currently seeking \$2.9 million from CalFire to remove all 1,500 eucalyptus trees on its property.<sup>33</sup>

The areas containing the greatest mass of hazardous fuel build-up in Berkeley exist on private property beyond 30 feet of any structure (or 100 feet on slopes) and are not currently being routinely addressed by the Fire Department’s residential vegetation management inspection program. Removal of hazardous vegetation is the most effective and timely means available to the City for reducing the severe risk of wildfire. In addition, tall trees posing public safety hazards have been identified outside of the VHFSZs and should be included in this program if possible.

The City could pattern the program after the Parks & Recreation’s vegetation removal program (or expand the program), where Parks conducts competitive bidding and issues umbrella contracts to several firms that are then called upon for specific jobs. Parks may also have procedures to cost share where private property is involved.

The DFSC estimates that all of Berkeley’s hazardous vegetation could be removed by continuing this program for an additional one to three years beyond FY 24, depending on the rate of homeowner opt-in to the City’s clearance program and compliance failure rates, the actual cost of removing trees and revegetating, and the timeliness of any necessary changes to the Fire Code.

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<sup>29</sup> See *El Cerrito - Kensington Wildfire Action Plan*, p. 1.7. Also see *Contra Costa County Community Wildfire Protection Plan Update*, p. 2.5 and *Sunol Wildfire Action Plan* at 4.2.

<sup>30</sup> *Ibid.*

<sup>31</sup> See <https://www.dailycal.org/2021/01/19/uc-berkeley-project-removes-claremont-canyon-trees-for-evacuation-route/#:~:text=In%20a%20project%20spearheaded%20by%20UC%20Berkeley%2C%20eucalyptus,November%202020%2C%20according%20to%20campus%20spokesperson%20Janet%20Gilmore.>

<sup>32</sup> See <https://www.berkeleyside.org/2021/09/06/popular-cal-trail-closes-fire-safety-work/>.

<sup>33</sup> Personal correspondence between Jennifer Tang, Director of Community Relations, Lawrence Berkeley National Laboratory and Henry DeNero, Hillside Fire Safety Group, January 2022.

Measure FF Budget Recommendation - Expanded Fire Prevention Inspection CONSENT CALENDAR  
Program

December 13, 2022

Adopting this recommendation will ensure that the City immediately reduces the extreme risk of wildfire, reduces the likelihood of ignition of homes and other structures in the event of wildfire, and meets the City's obligations under Measure FF.

#### ALTERNATIVE ACTIONS CONSIDERED

The DFSC considered and rejected an alternate proposal that would have used Measure FF funds to pay for the removal of hazardous vegetation, rather than requiring property owners to do so at their own expense or via placement of liens.

The Fire Department may have alternative proposed recommendations for the expenditure of Measure FF funds.

#### CITY MANAGER

See Companion Report

#### CONTACT PERSON

Keith May, Secretary, Disaster and Fire Safety Commission, 510-981-5508





Office of the City Manager

CONSENT CALENDAR  
December 13, 2022

To: Honorable Mayor and Members of the City Council  
From: Dee Williams-Ridley, City Manager  
Submitted by: David Sprague, Interim Fire Chief  
Subject: Companion Report: Measure FF Budget Recommendation – Expanded Fire Prevention Inspection Program

RECOMMENDATION

That the Berkeley City Council reaffirms its support for the work being conducted by the Fire Department (Department) and considers the Disaster and Fire Safety Commission’s (DFSC) Report during the FY24 budget process if the DFSC chooses to resubmit an updated version at that time.

POLICY COMMITTEE RECOMMENDATION

On November 21, 2022, the Public Safety Committee adopted the following action: M/S/C (Kesarwani/Wengraf) Positive recommendation to adopt the City Manager’s recommendation as presented in the companion report. Vote: All Ayes.

FISCAL IMPACTS OF RECOMMENDATION

There is no fiscal impact to this recommendation.

CURRENT SITUATION AND ITS EFFECTS

The Department continues to implement all the programs and projects funded by Measure FF which were reviewed and approved by the City Council and supported by the DFSC in the FY22 budget process. These included long-term projects associated with wildfire prevention and response, modernizing the city’s Emergency Medical Services system, focusing on the training and development of an historically young and inexperienced workforce, and funding work to lay out a plan to modernize the communications center. These projects are critical to ensure the right resource is sent to the right call, the operational readiness of personnel and resources, ensure adequate staffing, improve retention, ensure that employees are trained and prepared to respond and mitigate all incidents to which they are called.

With regard to the DFSC’s recommendation that the City expand defensible space inspection and mitigation efforts out to 100 feet from any structure, the Department already requires this of homeowners but has, and will continue to focus on, enforcement and mitigation of vegetation Zone 1 (0-30 ft) and the upcoming new State requirement to implement Zone 0 - Ember Resistant Zone that will start at the perimeter of a

structure and extend five feet. When Zone 0 is implemented, Zone 1 will be modified to 5-30'.

The Department's early efforts to create defensible space in the VHFSZ 2 and 3 have included direction to property owners that they initially concentrate on Zone 1 (0-30'). However, Department messaging to property owners has been consistent in explaining that owners are responsible for vegetation management out to 100' from any structure. There are several reasons why early Department efforts have been concentrated more heavily on Zone 1 (0-30'). Most significantly, addressing fuels in Zone 1 (0-30') will mitigate almost 70% of the landmass in the VHFSZ 2 and 3. Zone 2 (30-100') only accounts for approximately 27% of landmass in VHFSZ 2 and 3. When the public right-of-way, of which large portions are paved and generally not considered combustible, is removed from the equation, the landmass of Zone 2 (30-100') drops to less than 18% (17.3%) of the VHFSZ 2 and 3 landmass. Vegetation on the margins of most paved areas falls within the Zone 1 (0-30'). The science of defensible space, State statutes, and the direction of the State Board of Forestry and Fire Protection place a greater emphasis on creation of defensible space closer to structures (Zone 0, 0-5' from structures), rather than farther from structures (Zone 2, 30-100').

Berkeley has prioritized the areas closest to structures and roadways for initial mitigation. Research on structure losses during wildfires shows that most structure ignitions occur within 30' of a structure based on combustibles in this area and ember cast. Vegetation adjacent to roadways potentially threatens evacuating residents and access for first responders. Property owners' efforts within these areas will provide the largest and quickest yield in terms of prevention of home ignition during a wildfire. Reducing fuels within 30' of structures, managing vegetation along the rights-of-way, and fire hardening structures will have more immediate and significant impacts than using limited available resources to enforce management of vegetation in Zone 2 (30-100').

### BACKGROUND

At the April 27, 2022 special meeting of the DFSC, the Commission voted to recommend that City Council prioritize wildfire fuel reduction in the FY 23 and FY 24 Fire Department (Department) budget by expanding the fire Prevention Inspection Program and fully enforcing the existing Fire Code to clear vegetation build-up and overgrowth within the 100 feet of structures in Berkeley's Very High Fire Severity Zones (VHFSZs) (Fire Zones 2 and 3).

The Department is moving forward with creating a resilient, safe, connected, and prepared city through a variety of programs and projects, some of which are funded by Measure FF. The Department has provided the DFSC multiple reports and presentations through the FY22 and FY23 budget development seasons that included budget priorities and spending plans, budget process reporting timelines, fire code updates, mid-year and year-end expenditures. The Department acknowledges that the

DFSC has requested more detailed reporting, and the Department is working to understand what is possible with the new financial management system “ERMA”. The level of detail the DFSC is requesting is not something that has been traditionally provided to Commissions nor has it been easily available to Department administrators (requires significant manual staff work). Creating such a report would be mutually beneficial. The process to do so, and determining what level of detail can be exported, is currently being researched by Staff. At the April 27, 2022 special meeting of the DFSC, Department Staff presented the “Measure FF Budget Proposal” as shared with the City Council Budget Committee on April 22, 2022. The Department’s budget was approved as part of the City’s budget by the City Council on June 28, 2022.

The Community Wildfire Protection Plan (CWPP) is well under way and scheduled to be completed in 2023. The CWPP is a comprehensive risk analysis that addresses local target hazards and includes a community-based action plan to mitigate threats, promote preparedness activities, and ensure resiliency. **The CWPP will serve as the foundation and roadmap for the City’s work to prevent wildfires and limit the spread when they ignite.** The Department has managed the procurement, configuration and implementation of a new mobile vegetation inspection and customer interaction platform. This software will substantively improve the way Department inspectors perform their work. The system will move the department from a paper to digital inspection platform. This will increase the accuracy and detail of information capture and improve data storage and analytics. Inspectors will have a fully customized and robust inspection tool that will allow them to create detailed reports, adding photos and using GPS mapping that will be emailed or mailed to the property owner following an inspection. These reports will include a prioritized list of actions that need to be taken to comply with the Fire Code and align with vegetation management and home hardening best practices. The reports are much more customer friendly than anything that has been used to date. This is anticipated to drive up the number of owners that move ahead with voluntary compliance. As of July 2022, this system is in the final stages of configuration and field testing.

Per California State regulation, the Department has expanded its traditional hazardous fire area vegetation inspection program to include all properties in fire zones 2 and 3; thus, increasing the number of inspections by 83% (+7,184). As the Department was unable to hire permanent staff, ten retired annuitants have spent the better part of the last year focused on completing these inspections, albeit with the legacy inspection system. Basic statistics as of the end of June 2022 are below.

| Inspected | No Violations Found | Violations Found | Re-Inspection Completed | Re-Inspection No Violation Found | Re-Inspection w/Violations Found |
|-----------|---------------------|------------------|-------------------------|----------------------------------|----------------------------------|
| 8055      | 6015                | 2040             | 1595                    | 1269                             | 326                              |

Our community has a robust network of Community Emergency Response Teams (CERT). While these groups have been indispensable in preparing neighbors for disaster, there is room for neighbors to be more engaged specific to wildfire. One of our retired annuitants has been focused on standing up an internal Department program to encourage and support the creation of FireWise groups. The purpose of becoming a FireWise group is to build community, learn and implement vegetation management and home hardening practices, and be better positioned to take advantage of grant funding available for these purposes. The first FireWise group was recently approved by the National Fire Protection Association (NFPA) and there are a dozen more groups that have expressed interest. The process of becoming “recognized” as a Firewise neighborhood/zone is to organize, create a board, and develop a 3-year wildfire reduction plan.

#### ENVIRONMENTAL SUSTAINABILITY AND CLIMATE IMPACTS

Vegetation management is an important part of wildfire preparedness. The Berkeley hills have various species that will likely need to be addressed collectively as a system, balancing the benefits of removal against the impacts to ecosystems. The CWPP will perform a comprehensive analysis of this and include recommendations to move forward.

#### RATIONALE FOR RECOMMENDATION

The goals suggested by the DFSC for FY23 and FY24 have already been approved by City Council and are already underway via the Department’s defensible space inspection program.

Wildfire program requirements are changing at the State and local level (statutes, Board of Forestry regulations, city of Berkeley Community Wildfire Protection Plan) and the Department’s WUI Division is not yet fully formed and staffed. The Department will identify and allocate funding necessary to complete this important work as foundational plans are completed, and programs continue to be built. While the DFSC is well versed in wildfire prevention and is well intentioned in their proposal to divert additional funding at this time, doing so before the WUI Division is fully staffed is premature and would siphon funds from other equally critical programs mentioned in brief at the beginning of this report.

#### ALTERNATIVE ACTIONS CONSIDERED

None.

#### CONTACT PERSON

Keith May, Interim Deputy Fire Chief, 510-981-5508



Environment and Climate Commission

CONSENT CALENDAR  
December 13, 2022

To: Honorable Mayor and Members of the City Council  
 From: Environment and Climate Commission  
 Submitted by: Ben Gould, Chairperson, Environment and Climate Commission  
 Subject: Zero-Emission Vehicle Parking Support Letter

RECOMMENDATION

Refer to the City Manager to send a letter to State Assemblymember Buffy Wicks and State Senator Nancy Skinner asking them to advance a proposal to allow cities to dedicate parking spaces for Zero-Emission Vehicles (ZEVs).

FISCAL IMPACTS OF RECOMMENDATION

Minimal staff time.

CURRENT SITUATION AND ITS EFFECTS

State law currently prohibits the City of Berkeley from dedicating parking spaces for zero-emission vehicles without also installing an EV charger. EV chargers are expensive, and as a result, they are few and far between on City streets.

As a result, EVs are forced to compete with legacy gas cars for parking spaces, and the City is unable to use parking access as an incentive mechanism to drive adoption and use of EVs.

At its meeting of October 19, 2022, the Environment and Climate Commission approved a motion by a vote of 6-1-0-1 to ask the City Council to send letter to state representatives allowing cities to designate parking for ZEVs. Motion/second Lunaparra, Gould. Ayes: Ranney, Hedlund, McGuire, Tahara, Lunaparra, Gould. Noes: Allen. Abstain: None. Absent: Guliasi.

BACKGROUND

Berkeley has adopted numerous ambitious policies around climate change, including the goal of becoming a fossil free city, carbon neutrality by 2045, and a goal of 100% sustainable transportation by 2040.

In November 2019, the Community Environmental Advisory Commission (CEAC), an ECC predecessor commission, approved a recommendation to City Council to explore operation, parking, or idling of combustion vehicles on City streets beginning in 2045, with the aim of enforcing Berkeley's carbon neutrality goal in transportation.

In late 2020, when this item came before the FITES committee, the City Attorney determined that such a policy would be preempted under state law. The California vehicle code is strictly construed, and as such, powers not explicitly authorized to municipalities are reserved to the state (see *Rumford v. City of Berkeley*, 1982).

As found in *Rumford*, changes to state law are required to lawfully enact the proposed policy.

With the assistance of a state legislator, draft legislation was developed in 2021 which would amend the California Vehicle Code to permit cities and private parking operators to dedicate parking spaces for zero emission vehicles, without requiring the installation of EV charging. (Exemptions are provided for vehicles displaying a disabled placard or license plate). This policy would provide Berkeley with another tool to encourage the use of EVs and help the city achieve its goal of 100% sustainable transportation by 2040.

#### ENVIRONMENTAL SUSTAINABILITY

Sending a letter in and of itself has no sustainability impacts, but if the law were adopted and Berkeley chose to take advantage of it, making parking spaces reserved for EVs would encourage the adoption and use of EVs, reducing greenhouse gas emissions and helping achieve Berkeley's climate goals.

#### CALIFORNIA ENVIRONMENTAL QUALITY ACT (CEQA)

Because this activity does not have the potential to cause a significant effect on the environment, it is covered by the common sense exemption that CEQA applies only to projects which have the potential for causing a significant impact on the environment (CEQA Guidelines 15061(b)(3)).

#### RATIONALE FOR RECOMMENDATION

This item supports the goal of 100% sustainable trips, becoming a fossil-free city, and achieving carbon neutrality.

#### ALTERNATIVE ACTIONS CONSIDERED

ECC considered taking no action, but determined that would fail to advance Berkeley's climate goals.

#### CITY MANAGER

The City Manager takes no position on the content and recommendations of the Commission's Report.

#### CONTACT PERSON

Ben Gould, Chairperson, Environment and Climate Commission, 510-725-9176

Letter of Support for ZEV Parking

CONSENT CALENDAR  
December 13, 2022

Attachments:

Attachment 1: Letter

Attachment 2: Draft bill

[DATE]

[ADDRESS]

**RE: City of Berkeley's Request for Legislation to Authorize Dedicated Zero-Emission Vehicle Parking**

Dear Senator Skinner and Assemblymember Wicks,

The Berkeley City Council would like to request an amendment to the California Vehicle Code to authorize local governments to dedicate parking spaces for zero-emission vehicles, without requiring an EV charger, as a potential strategy for encouraging and increasing the use of zero-emission vehicles.

Berkeley has set ambitious goals of carbon neutrality by 2045, 100% sustainable trips by 2040, and becoming a fossil free city by 2030. We are working aggressively to ensure a rapid, just transition to zero emissions in all sectors of our local economy. Berkeley seeks to implement innovative, forward-thinking policies to achieve these goals, like our first-in-the-nation natural gas ban in 2019, which has become the gold standard statewide.

Cities around the world, including London, Paris, Barcelona, Stuttgart, Amsterdam, and others, are implementing policies to restrict the use of old, polluting gas- and diesel-powered vehicles within their city centers. In California, however, cities lack the ability to implement any similar restrictions. Without authority explicitly granted in the California Vehicle Code, California cities have their hands tied when it comes to how much pollution vehicle operators can produce on local roads.

While broader restrictions on the use of polluting vehicles on city streets could be cost-prohibitive to implement and enforce, Berkeley is interested in exploring the opportunities to encourage zero-emission vehicle usage by restricting certain parking spots, in certain locations, to zero-emission vehicles only (with exceptions for vehicles displaying a disabled placard). We believe this can send an effective signal to residents and businesses to encourage a more rapid transition, and that it can be implemented as part of a comprehensive strategy to ensure continued equitable mobility and accessibility across socioeconomic levels and disability status. Berkeley's existing Electric Mobility Roadmap will serve as a guide in this regard.

Please find attached draft bill language, prepared by the Office of Legislative Counsel, for your consideration in the upcoming legislative cycle.

Sincerely,

Berkeley City Council



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

SECTION 1. Section 22511.2 of the Vehicle Code is amended to read:

22511.2. (a) A parking space served by electric vehicle supply equipment or designated for the exclusive purpose of parking a zero-emission vehicle or a parking space designated as a future electric vehicle charging space shall count as at least one standard automobile parking space for the purpose of complying with any applicable minimum parking space requirements established by a local jurisdiction.

(b) An accessible parking space with an access aisle served by electric vehicle supply equipment or an accessible parking space with an aisle designated as a future electric vehicle charging space shall count as at least two standard automobile parking spaces for the purpose of complying with any applicable minimum parking space requirements established by a local jurisdiction.

(c) This section does not modify the approval requirements for an electric vehicle charging station pursuant to Section 65850.7 of the Government Code.

(d) The following definitions apply for purposes of this section:

(1) "Electric vehicle supply equipment" has the same definition as that term is used in the latest published version of the California Electrical Code, that is in effect, and applies to any level or capacity of supply equipment installed specifically for the purpose of transferring energy between the premises wiring and the electric vehicle.

(2) "Electric vehicle charging space" means a space designated by a local jurisdiction for charging electric vehicles.

(3) "Local jurisdiction" means a city, including a charter city, county, or city and county.

(4) "Zero-emission vehicle" shall have the same definition as in Section 44258 of the Health and Safety Code.

SEC. 2. Section 22511.25 is added to the Vehicle Code, to read:

22511.25. (a) (1) A local authority, by ordinance or resolution, or a person in lawful possession of an offstreet parking facility may designate stalls or spaces in an offstreet parking facility owned or operated by that local authority or person for the exclusive purpose of parking a zero-emission vehicle.

(2) A local authority, by ordinance or resolution, may designate stalls or spaces on a public street within its jurisdiction for the exclusive purpose of parking a zero-emission vehicle.

(b) A person shall not park or leave standing a vehicle in, or obstruct, block, or otherwise bar access to, a stall or space designated pursuant to subdivision (a) unless the vehicle meets the definition of a zero-emission vehicle.

(c) A person may park or leave standing a vehicle that displays either a special identification license plate issued pursuant to Section 5007 or a distinguishing placard issued pursuant to Section 22511.55 or 22511.59 in a stall or space reserved for the exclusive purpose of parking a zero-emission vehicle, even if the vehicle is not a zero-emission vehicle.

(d) For purposes of this section, "zero-emission vehicle" shall have the same definition as in Section 44258 of the Health and Safety Code.

(e) This section does not interfere with existing law governing the ability of local authorities to adopt ordinances related to parking programs within their jurisdiction,



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such as programs that provide free parking in metered areas or municipal garages for electric vehicles.

SEC. 3. The Legislature finds and declares that ensuring access to zero emission vehicle parking spaces is a matter of statewide concern and is not a municipal affair as that term is used in Section 5 of Article XI of the California Constitution. Therefore, Section 1 of this act amending Section of the 22511.2 of the Vehicle Code applies to all cities, including charter cities.

SEC. 4. No reimbursement is required by this act pursuant to Section 6 of Article XIII B of the California Constitution because the only costs that may be incurred by a local agency or school district will be incurred because this act creates a new crime or infraction, eliminates a crime or infraction, or changes the penalty for a crime or infraction, within the meaning of Section 17556 of the Government Code, or changes the definition of a crime within the meaning of Section 6 of Article XIII B of the California Constitution.

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LEGISLATIVE COUNSEL'S DIGEST

Bill No. \_\_\_\_\_  
as introduced, \_\_\_\_\_  
General Subject: Vehicles: local regulation: parking: zero-emission vehicles.

Existing law authorizes a local authority, by ordinance or resolution, and a person in lawful possession of an offstreet parking facility to designate stalls or spaces in an offstreet parking facility owned or operated by that local authority or person, or stalls or spaces on a public street within a local authority's jurisdiction, for the exclusive purpose of charging and parking a vehicle that is connected for electric charging purposes. Under existing law, a violation of the Vehicle Code is an infraction, unless otherwise specified.

This bill would additionally authorize a local authority, by ordinance or resolution, or a person in lawful possession of an offstreet parking facility to designate stalls or spaces in an offstreet parking facility owned or operated by that local authority or person, or stalls or spaces on a public street within a local authority's jurisdiction, for the exclusive purpose of parking a zero-emission vehicle, as specified. The bill would prohibit a person from parking or leaving standing a vehicle in, or obstructing, blocking, or otherwise barring access to, a stall or space designated, as authorized under the bill, unless the vehicle meets the definition of a zero-emission vehicle. Because a violation of this prohibition would be an infraction, the bill would impose a state-mandated local program by creating a new crime.

Existing law requires a parking space served by electric vehicle service equipment and a parking space designated as a future electric vehicle charging space to be counted as at least one standard automobile parking space for the purpose of complying with any applicable minimum parking requirements established by a local jurisdiction.

This bill would also require a parking space designated for the exclusive purpose of parking a zero-emission vehicle to be counted as at least one standard automobile parking space for the purpose of complying with any applicable minimum parking requirements established by a local jurisdiction.

The bill would include findings that changes proposed by this bill address a matter of statewide concern rather than a municipal affair and, therefore, apply to all cities, including charter cities.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: yes.



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Office of the Mayor

CONSENT CALENDAR  
December 13, 2022

To: Honorable Members of the City Council

From: Mayor Jesse Arreguín and Councilmember Sophie Hahn

Subject: Berkeley Holiday Fund: Relinquishment of Council Office Budget Funds to General Fund and Grant of Such Funds

RECOMMENDATION

Adopt a Resolution approving the expenditure of an amount not to exceed \$500 per Councilmember including \$500 from Mayor Arreguin to the Berkeley Holiday Fund's annual campaign with funds relinquished to the City's general fund for this purpose from the discretionary Council Office Budgets of Mayor Arreguin and any other Councilmembers who would like to contribute.

BACKGROUND

The Berkeley Holiday Fund has helped make the holiday season happier for hundreds of Berkeley's neediest residents for 109 years. An all-volunteer organization, the Berkeley Holiday Fund has been partnering with 33 Berkeley service agencies, such as the Health Department, senior centers, Head Start, BOSS, and the Center for Independent Living. By keeping operating costs to a minimum, the Berkeley Holiday Fund ensures that all contributions go directly to help those who need it the most. Last year, they were able to bring a little cheer into the lives of 1,114 Berkeley families distributing almost \$150,000.

The Mayor's office has actively participated in this program for over 25 years by providing application cards and first class postage to Berkeley Holiday Fund recipients. This year the Berkeley Holiday Fund anticipates distributing approximately 1,200 checks to individuals and families. This item requests the City Council approve an expenditure, not to exceed \$500 of funds from the from the Mayor's office budget to help cover these costs.

FINANCIAL IMPLICATIONS

No General Fund impact. \$500 is available from the Mayor's office budget discretionary account.

ENVIRONMENTAL SUSTAINABILITY

There are no identifiable environmental effects or opportunities associated with adopting this recommendation.

Berkeley Holiday Fund 2020

CONSENT CALENDAR  
December 13, 2022

CONTACT PERSON

Mayor Jesse Arreguín 510-981-7100

Attachments:

1: Resolution

2: Letter from Berkeley Holiday Fund

RESOLUTION NO. ##,###-N.S.

BERKELEY HOLIDAY FUND 2022

WHEREAS, the Berkeley Holiday Fund has been making small grants to Berkeley's neediest citizens for 109 years; and

WHEREAS, last year, the Berkeley Holiday Fund distributed almost \$150,000 to 1,144 Berkeley families; and

WHEREAS, Berkeley Holiday Fund partners with 33 Berkeley service agencies including the Health Department, senior centers, Head Start, BOSS, and the Center for Independent Living; and

WHEREAS, the Berkeley Mayor's Office has supported the Berkeley Holiday Fund's efforts for over 25 years by reproducing request forms and providing first class postage costs; and; and

WHEREAS, Mayor Arreguin has surplus funds in his office expenditure account; and

WHEREAS, the Berkeley Holiday Fund seeks funds in the amount of \$500 to help cover the costs of providing checks to Berkeley Holiday Fund recipients; and

WHEREAS, the provision of such services would fulfill the following municipal public purpose of providing services to low income residents of the City of Berkeley.

NOW THEREFORE, BE IT RESOLVED by the Council of the City of Berkeley that funds relinquished by the Mayor and Councilmembers from their Council Office Budget up to \$500 per office shall be granted to the Berkeley Holiday Fund for helping cover the costs of providing checks to Berkeley Holiday Fund recipients.





# BERKELEY HOLIDAY FUND

Post Office Box 9779 ♦ Berkeley, California 94709

www.BerkeleyHolidayFund.org

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Timothy Stokes and Andrea Lewis  
Bibi Tiphane  
Susan Wengraf  
William and Mary Alice Yund

October 17, 2022

The Honorable Jesse Arreguin  
Mayor of Berkeley  
2180 Milvia Street  
Berkeley, CA 94704

Dear Mayor Arreguin:

On behalf of the Board of the Berkeley Holiday Fund, I want to thank the Mayor's office for its continuing, generous support for the Fund's annual disbursement of holiday gifts to Berkeley's neediest citizens. And to you personally for serving as the Honorary Chairperson of the Fund. For 109 years the Fund has solicited donations from the citizens of Berkeley and now partners with almost thirty local social service agencies to identify Berkeley citizens in need of help during the holidays.

Last year, with your help, we were able to offer much needed cheer during the holiday season by sending checks totaling almost \$150,000 and to more than 1,100 individuals and families in Berkeley.

We are requesting that you continue your longstanding support for our efforts. For more than twenty-five years the Mayor's Office has aided the Holiday Fund. We are grateful for your support of the Berkeley Holiday Fund as our Honorary Chairman and the support of the City Council members as Sponsors.

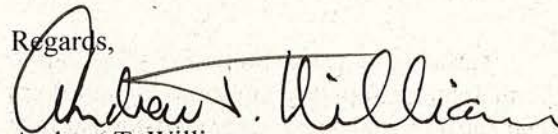
This year we anticipate distributing approximately 1,200 checks to individuals and families, While we fund every request we receive, the number of requests from agencies varies from year to year, and we only send one check to individuals families recommended by multiple agencies.

Since this expenditure requires Council approval, we are formally requesting \$500 in support and are asking for your help in obtaining that approval.

In past years some council members have added funds from their office accounts. We deeply appreciate their support.

Thank you again for all the support and encouragement you have provided in the past to this truly unique Berkeley institution.

Regards,

  
Andrew T. Williams  
Co-Chairperson





Office of the City Manager

PUBLIC HEARING  
December 13, 2022

To: Honorable Mayor and Members of the City Council  
 From: Dee Williams-Ridley, City Manager  
 Submitted by: Jordan Klein, Director, Planning and Development Department  
 Subject: Zoning Ordinance Amendments Making Technical Edits and Corrections to Berkeley Municipal Code (BMC) Title 23

### RECOMMENDATION

Conduct a public hearing and, upon conclusion, adopt the first reading of an Ordinance containing technical edits, corrections and other non-substantive amendments to the following sections of the Zoning Ordinance:

- BMC Section 23.108.020 (Zoning Districts)
- BMC Section 23.202.020 (Allowed Land Uses)
- BMC Section 23.202.140 (R-SMU District)
- BMC Section 23.204.150 (R-BMU District)
- BMC Section 23.204.020 (Allowed Land Uses)
- BMC Section 23.204.060 (C-U District)
- BMC Section 23.204.080 (C-E District)
- BMC Section 23.204.100 (C-SA District)
- BMC Section 23.206.040 (Use-Specific Regulations)
- BMC Section 23.406.050 (Variances)
- BMC Section 23.502.020 (Glossary)

### FISCAL IMPACTS OF RECOMMENDATION

Adoption of the recommended amendments will not result in any costs or revenues to the City.

### CURRENT SITUATION AND ITS EFFECTS

Improving the Zoning Ordinance supports the City's Strategic Plan goal to be a customer-focused organization that provides excellent, timely, easily-accessible service and information to the community.

On October 12, 2021, the City Council adopted a new Zoning Ordinance (Title 23 – Berkeley Municipal Code). This action was the culmination of the first comprehensive review of the Zoning Ordinance since 1999, rewording and reformatting Berkeley's land use regulations to make them easier to understand and administer. Aside from a

specific list of “consent changes” to maintain consistency with State law and codify existing practices, no substantive policy changes were included. The new Zoning Ordinance became effective December 1, 2021.

Since then, certain inconsistencies and inadvertent changes have come to light which need to be corrected to ensure that the Zoning Ordinance accurately reflects City Council policy. The ordinance included with this staff report would make 10 amendments / corrections to the new Zoning Ordinance. These are summarized below in **Table 1**.

**Table 1. Recommended Zoning Ordinance Amendments**

| <b>Subject/Section</b>                                                                                                                                                                       | <b>Issue</b>                                                                                      | <b>Amendment</b>                                                                                                                                                   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Sec 23.108.020<br/>Zoning Districts</b>                                                                                                                                                   | Two subsections of this section were inadvertently deleted in a previous zoning ordinance update. | Replace with original text.                                                                                                                                        |
| <b>Sec 23.202.020:<br/>Residential Districts<br/><i>Allowed Land Uses</i></b>                                                                                                                | A subsection of this section was inadvertently deleted in a previous zoning ordinance update.     | Replace with original text.                                                                                                                                        |
| <b>Sec 23.202.140:<br/>R-SMU Zoning District</b>                                                                                                                                             | The title of the section is not correct; it refers to “Residential Southside District.”           | Correct to read “Residential Southside <u>Mixed-Use</u> District.”                                                                                                 |
| <b>Sec 23.202.150.B.1:<br/>R-BMU Zoning District<br/><i>Definitions</i></b>                                                                                                                  | The definition of Dwelling Units per Acre does not include the word “divided.”                    | Clarify that<br><br><i>1. Dwelling Units per Acre:</i><br>The quotient resulting from the total number of dwelling units on a site <u>divided</u> by the Lot Area. |
| <b>Sec 23.202.150.F:<br/>R-BMU Zoning District<br/><i>Allowed Land Uses<br/>Development Standards<br/>Public Space Design<br/>Preliminary Development Plan<br/>Final Development Pan</i></b> | Subsections include references to incorrect sections.                                             | Correct numbering in references.                                                                                                                                   |
| <b>Sec 23.204.020:<br/>Commercial Districts<br/><i>Allowed Land Uses</i></b>                                                                                                                 | Subsections include references to incorrect sections.                                             | Correct numbering in references.                                                                                                                                   |

| <b>Subject/Section</b>                                                                                       | <b>Issue</b>                                                                                     | <b>Amendment</b>                                                                 |
|--------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
|                                                                                                              | Table states that Short Term Rentals are permitted in the C-N District                           | Clarify that Short Term Rentals are NP in the C-N District.                      |
| <b>Sec 23.204.060:</b><br><b>C-U District</b><br><i>Setback Standards</i>                                    | Table indicates that Solar Access standards apply to lots on the south side of University.       | Clarify that the standards apply to lots on the <u>north</u> side of University. |
| <b>Sec 23.204.080:</b><br><b>C-E District</b><br><i>Land Use Number and Size Limitation</i>                  | Table indicates that no permit is required for a Food Service Establishment in the C-E District. | Clarify that an AUP is required.                                                 |
| <b>Sec 23.204.100:</b><br><b>C-SA District</b><br><i>Modification for Mixed Use and Residential Projects</i> | Section incorrectly includes FAR as a development standard that can be modified with a UP.       | Clarify that FAR cannot be modified with a UP.                                   |
| <b>Sec 23.206.040:</b><br><b>Manufacturing Districts</b><br><i>Arts/Craft Studios</i>                        | Section incorrectly applies to M and MU-LI Districts.                                            | Correct that section applies to M and <u>MM</u> Districts.                       |
| <b>Sec 23.406.050:</b><br><b>Variances</b><br><i>Findings for Approval</i>                                   | Section incorrectly references a Use Permit Application.                                         | Clarify that the section applies to a Variance.                                  |
| <b>Section 23.502.020</b><br><b>Glossary</b><br>Research and Development                                     | BMC does not include most recently-adopted definition of R&D.                                    | Include most recent version.                                                     |

## BACKGROUND

At its meeting of October 19, 2022, the Planning Commission held a public hearing on the proposed amendments,<sup>1</sup> and recommended adoption by a vote of 7-0-1-0 (Moved by Ghosh, Seconded by Mikiten. Ayes: Ghosh, Hauser, Mikiten, Moore, Twu, Vincent, and Wiblin. Noes: None. Abstain: Oatfield. Absent: None).

When the new Zoning Ordinance was presented for adoption by the City Council in October, 2021, staff indicated that routine updates would follow periodically to correct unintended errors and make text edits. This is the fourth such package of amendments.

This Zoning Ordinance revision project was undertaken in response to a City Council referral from January 26, 2016, seeking changes to the ordinance for the benefit of

<sup>1</sup> Agenda-related materials for the October 19, 2022 Planning Commission meeting can be found at: [https://berkeleyca.gov/sites/default/files/legislative-body-meeting-agendas/2022-10-19%20PC%20Agenda%20Packet\\_bookmarked-zc.pdf](https://berkeleyca.gov/sites/default/files/legislative-body-meeting-agendas/2022-10-19%20PC%20Agenda%20Packet_bookmarked-zc.pdf)

public understanding and staff implementation. With this fourth package of technical amendments to the new Zoning Ordinance, this referral has now been completed.

#### ENVIRONMENTAL SUSTAINABILITY AND CLIMATE IMPACTS

There are no identifiable environmental and climate impacts or opportunities associated with the adoption of the proposed amendments.

#### RATIONALE FOR RECOMMENDATION

The proposed Zoning Ordinance amendments are required to ensure that the new Zoning Ordinance accurately reflects the prior ordinance and City Council policy, and does not contain any changes from the old Zoning Ordinance that were not specifically authorized by City Council.

#### ALTERNATIVE ACTIONS CONSIDERED

No alternatives were considered.

#### CONTACT PERSON

Jordan Klein, Director, Planning & Development Department, 510-981-7534  
Justin Horner, Associate Planner, Planning and Development Department, 510-981-7476

#### Attachments:

- 1: Ordinance
- 2: Report to Planning Commission, October 19, 2022
- 3: Council referral from Jan. 26, 2016 to improve Zoning Ordinance usability
- 4: Public Hearing Notice

ORDINANCE NO. -N.S.

AMENDING TITLE 23 OF THE BERKELEY MUNICIPAL CODE TO CORRECT ERRORS AND MAKE NON-SUBSTANTIVE, TECHNICAL EDITS TO THE ZONING ORDINANCE

BE IT ORDAINED by the Council of the City of Berkeley as follows:

Section 1. That Berkeley Municipal Code Section 23.108.020 is amended as follows:

A. *Districts.* Berkeley is divided into districts as shown in Table 23.108-1: Zoning Districts. Unique regulations apply within each district as established in Chapters 23.202--23.208 (Zoning Districts).

Table 23.108-1. ZONING DISTRICTS

| DISTRICT SYMBOL              | NAME OF DISTRICT                       |
|------------------------------|----------------------------------------|
| <b>Residential Districts</b> |                                        |
| R-1                          | Single-Family Residential              |
| R-1A                         | Limited Two-family Residential         |
| ES-R                         | Environmental Safety Residential       |
| R-2                          | Restricted Two-family Residential      |
| R-2A                         | Restricted Multiple-family Residential |
| R-3                          | Multiple-family Residential            |
| R-4                          | Multi-family Residential               |
| R-5                          | High Density Residential               |
| R-S                          | Residential Southside                  |
| R-SMU                        | Residential Southside Mixed Use        |
| R-BMU                        | Residential BART Mixed Use             |
| <b>Commercial Districts</b>  |                                        |
| C-C                          | Corridor Commercial                    |
| C-U                          | University Avenue Commercial           |
| C-N                          | Neighborhood Commercial                |

| DISTRICT SYMBOL                | NAME OF DISTRICT            |
|--------------------------------|-----------------------------|
| C-E                            | Elmwood Commercial          |
| C-NS                           | North Shattuck Commercial   |
| C-SA                           | South Area Commercial       |
| C-T                            | Telegraph Avenue Commercial |
| C-SO                           | Solano Avenue Commercial    |
| C-DMU                          | Downtown Mixed-Use          |
| C-W                            | West Berkeley Commercial    |
| C-AC                           | Adeline Corridor Commercial |
| <b>Manufacturing Districts</b> |                             |
| M                              | Manufacturing               |
| MM                             | Mixed Manufacturing         |
| MU-LI                          | Mixed Use-Light Industrial  |
| MU-R                           | Mixed Use-Residential       |
| <b>Special Districts</b>       |                             |
| SP                             | Specific Plan               |
| U                              | Unclassified                |

B. Undesignated Areas. Any area not specifically designated as a district on the Zoning Map is subject to the Unclassified (U) district requirements.

C. Overlay Zones.

1. The Zoning Ordinance and Zoning Map include the overlay zones shown in Table 23.108-2: Overlay Zones. Overlay zones impose additional regulations on properties beyond what is required by the underlying district. As shown in Table 23.108-2: Overlay Zones, provisions for overlay zones that apply to two or more districts are located in Chapter 23.210 (Overlay Zones). Provisions for overlay zones that apply only in one district are located in the Zoning Ordinance chapter for that district.

**TABLE 23.108-2: OVERLAY ZONES**

| <u>OVERLAY ZONE SYMBOL</u>                                      | <u>NAME OF OVERLAY ZONE</u> | <u>LOCATION IN ZONING ORDINANCE</u>                                          |
|-----------------------------------------------------------------|-----------------------------|------------------------------------------------------------------------------|
| <b><u>Overlay Zones that Apply in Two or More Districts</u></b> |                             |                                                                              |
| <u>H</u>                                                        | <u>Hillside</u>             | <u>23.210.020– Hillside Overlay Zone</u>                                     |
| <u>C</u>                                                        | <u>Civic Center</u>         | <u>23.210.030– Civic Center District Overlay Zone</u>                        |
| <b><u>Overlay Zones that Apply in One District</u></b>          |                             |                                                                              |
| <u>DA</u>                                                       | <u>Downtown Arts</u>        | <u>23.204.130– C-DMU Downtown Mixed-Use District (Arts Overlay District)</u> |

2. If the overlay zone applies a standard to a property that conflicts with the underlying district, the overlay zone standard governs. If the overlay zone is silent on a standard in the underlying district, the underlying district standard applies.

D. Vacated Streets. Where a public street or alley is officially vacated or abandoned, the land area of the street or alley acquires the district classification of the property to which it reverts.

Section 2. That Berkeley Municipal Code Section 23.202.020 is amended as follows:

23.202.020 Allowed Land Uses.

A. *Allowed Land Uses.* Table 23.202-1: Allowed Land Uses in Residential Districts identifies allowed land uses and required permits in the Residential Districts. All land uses are defined in Chapter 23.502--Glossary. Permit requirements are described in Chapter 23.406--Specific Permit Requirements.

B. *Unlisted Land Uses.* Any land use not listed in Table 23.202-1: Allowed Land Uses in Residential Districts is not permitted in the Residential District.

Table 23.202-1. ALLOWED LAND USES IN RESIDENTIAL DISTRICTS

| ZC = Zoning Certificate<br>AUP = ADMINISTRATIVE USE PERMIT<br>UP(PH) = Use Permit<br>NP = Not Permitted<br>* Use-Specific Regulations Apply<br>**--Required permits for specific uses are set forth in the R-BMU Master Development Permit (MDP). See 23.202.150.A and 23.202.150.D | RESIDENTIAL DISTRICTS                      |        |        |                                      |                                            |        |        |        |        |        |        | USE-SPECIFIC REGULATIONS APPLIES TO USES WITH AN ASTERISK FOLLOWING THE PERMIT REQUIREMENT (E.G., ZC*) |                                        |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|--------|--------|--------------------------------------|--------------------------------------------|--------|--------|--------|--------|--------|--------|--------------------------------------------------------------------------------------------------------|----------------------------------------|
|                                                                                                                                                                                                                                                                                     | R-1                                        | R-1A   | ES-R   | R-2                                  | R-2A                                       | R-3    | R-4    | R-5    | R-S    | R-SMU  | R-BMU* |                                                                                                        |                                        |
| <b>Residential Uses</b>                                                                                                                                                                                                                                                             |                                            |        |        |                                      |                                            |        |        |        |        |        |        |                                                                                                        |                                        |
| Accessory Dwelling Unit                                                                                                                                                                                                                                                             | See 23.306--Accessory Dwelling Units       |        | NP     | See 23.306--Accessory Dwelling Units |                                            |        |        |        |        |        |        |                                                                                                        |                                        |
| <b>Dwellings</b>                                                                                                                                                                                                                                                                    |                                            |        |        |                                      |                                            |        |        |        |        |        |        |                                                                                                        |                                        |
| Single-Family                                                                                                                                                                                                                                                                       | UP(PH)                                     | UP(PH) | UP(PH) | UP(PH)                               | UP(PH)                                     | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | NP                                                                                                     |                                        |
| Two-Family                                                                                                                                                                                                                                                                          | NP                                         | UP(PH) | NP     | UP(PH)                               | UP(PH)                                     | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | NP                                                                                                     |                                        |
| Multi-Family                                                                                                                                                                                                                                                                        | NP                                         | NP     | NP     | UP(PH)                               | UP(PH)                                     | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH)                                                                                                 |                                        |
| Group Living Accommodation                                                                                                                                                                                                                                                          | NP                                         | NP     | NP     | NP                                   | NP                                         | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH)                                                                                                 |                                        |
| Senior Congregate Housing                                                                                                                                                                                                                                                           | NP                                         | NP     | NP     | NP                                   | See 23.302.070.H--Use-Specific Regulations |        |        |        |        |        |        |                                                                                                        |                                        |
| Mixed-Use Residential                                                                                                                                                                                                                                                               | NP                                         | NP     | NP     | UP(PH)                               | UP(PH)                                     | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH)                                                                                                 |                                        |
| <b>Public and Quasi-Public Uses</b>                                                                                                                                                                                                                                                 |                                            |        |        |                                      |                                            |        |        |        |        |        |        |                                                                                                        |                                        |
| Child Care Center                                                                                                                                                                                                                                                                   | UP(PH)                                     | UP(PH) | NP     | UP(PH)                               | UP(PH)                                     | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH)                                                                                                 |                                        |
| Club/Lodge                                                                                                                                                                                                                                                                          | UP(PH)                                     | UP(PH) | NP     | UP(PH)                               | UP(PH)                                     | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH)                                                                                                 |                                        |
| Columbaria                                                                                                                                                                                                                                                                          | AUP*                                       | AUP*   | NP     | AUP*                                 | AUP*                                       | AUP*   | AUP*   | AUP*   | AUP*   | AUP*   | AUP*   | NP                                                                                                     | 23.302.070.C--Use-Specific Regulations |
| Community Care Facility                                                                                                                                                                                                                                                             | See 23.202.040.A--Use-Specific Regulations |        |        |                                      |                                            |        |        |        |        |        |        |                                                                                                        |                                        |



| ZC = Zoning Certificate<br>AUP = ADMINISTRATIVE USE PERMIT<br>UP(PH) = Use Permit<br>NP = Not Permitted<br>* Use-Specific Regulations Apply<br>**--Required permits for specific uses are set forth in the R-BMU Master Development Permit (MDP). See 23.202.150.A and 23.202.150.D | RESIDENTIAL DISTRICTS |        |        |        |        |        |            |        |        |        |        | USE-SPECIFIC REGULATIONS APPLIES TO USES WITH AN ASTERISK FOLLOWING THE PERMIT REQUIREMENT (E.G., ZC*) |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|--------|--------|--------|--------|--------|------------|--------|--------|--------|--------|--------------------------------------------------------------------------------------------------------|
|                                                                                                                                                                                                                                                                                     | R-1                   | R-1A   | ES-R   | R-2    | R-2A   | R-3    | R-4        | R-5    | R-S    | R-SMU  | R-BMU* |                                                                                                        |
| Community Center                                                                                                                                                                                                                                                                    | UP(PH)                | UP(PH) | NP     | UP(PH) | UP(PH) | UP(PH) | UP(PH)     | UP(PH) | UP(PH) | UP(PH) | UP(PH) |                                                                                                        |
| Emergency Shelter                                                                                                                                                                                                                                                                   | NP                    | NP     | NP     | NP     | NP     | NP     | See 23.308 |        |        |        |        |                                                                                                        |
| Family Day Care Home, Large                                                                                                                                                                                                                                                         | ZC                    | ZC     | ZC     | ZC     | ZC     | ZC     | ZC         | ZC     | ZC     | ZC     | ZC     |                                                                                                        |
| Family Day Care Home, Small                                                                                                                                                                                                                                                         | ZC                    | ZC     | ZC     | ZC     | ZC     | ZC     | ZC         | ZC     | ZC     | ZC     | ZC     |                                                                                                        |
| Hospital                                                                                                                                                                                                                                                                            | NP                    | NP     | NP     | NP     | NP     | UP(PH) | UP(PH)     | UP(PH) | NP     | UP(PH) | NP     |                                                                                                        |
| Library                                                                                                                                                                                                                                                                             | UP(PH)                | UP(PH) | NP     | UP(PH) | UP(PH) | UP(PH) | UP(PH)     | UP(PH) | UP(PH) | UP(PH) | UP(PH) |                                                                                                        |
| Nursing Home                                                                                                                                                                                                                                                                        | NP                    | NP     | NP     | --     | UP(PH) | UP(PH) | UP(PH)     | UP(PH) | UP(PH) | UP(PH) | NP     |                                                                                                        |
| Park/Playground                                                                                                                                                                                                                                                                     | ZC                    | ZC     | UP     | ZC     | ZC     | ZC     | ZC         | ZC     | ZC     | ZC     | ZC     |                                                                                                        |
| Public Safety and Emergency Service                                                                                                                                                                                                                                                 | UP(PH)                | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH)     | UP(PH) | UP(PH) | UP(PH) | UP(PH) |                                                                                                        |
| Public Utility Substation/Tank                                                                                                                                                                                                                                                      | UP(PH)                | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH)     | UP(PH) | UP(PH) | UP(PH) | UP(PH) |                                                                                                        |
| Religious Assembly                                                                                                                                                                                                                                                                  | UP(PH)                | UP(PH) | NP     | UP(PH) | UP(PH) | UP(PH) | UP(PH)     | UP(PH) | UP(PH) | UP(PH) | UP(PH) |                                                                                                        |
| School                                                                                                                                                                                                                                                                              | UP(PH)                | UP(PH) | NP     | UP(PH) | UP(PH) | UP(PH) | UP(PH)     | UP(PH) | UP(PH) | UP(PH) | UP(PH) |                                                                                                        |
| <b>Commercial Uses</b>                                                                                                                                                                                                                                                              |                       |        |        |        |        |        |            |        |        |        |        |                                                                                                        |

| ZC = Zoning Certificate<br>AUP = ADMINISTRATIVE USE PERMIT<br>UP(PH) = Use Permit<br>NP = Not Permitted<br>* Use-Specific Regulations Apply<br>**--Required permits for specific uses are set forth in the R-BMU Master Development Permit (MDP). See 23.202.150.A and 23.202.150.D | RESIDENTIAL DISTRICTS |      |      |     |      |     |        |        |        |        |         | USE-SPECIFIC REGULATIONS APPLIES TO USES WITH AN ASTERISK FOLLOWING THE PERMIT REQUIREMENT (E.G., ZC*) |                                                          |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|------|------|-----|------|-----|--------|--------|--------|--------|---------|--------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
|                                                                                                                                                                                                                                                                                     | R-1                   | R-1A | ES-R | R-2 | R-2A | R-3 | R-4    | R-5    | R-S    | R-SMU  | R-BMU*  |                                                                                                        |                                                          |
| Alcoholic Beverage Service                                                                                                                                                                                                                                                          | NP                    | NP   | NP   | NP  | NP   | NP  | NP     | NP     | NP     | NP     | UP(PH)* | UP(PH)*                                                                                                | 23.310--Alcoholic Beverage Sales and Service             |
| Food Products Store                                                                                                                                                                                                                                                                 | NP                    | NP   | NP   | NP  | NP   | NP  | NP     | NP     | NP     | NP     | UP(PH)* | UP(PH)*                                                                                                | 23.202.140. B.3--R-SMU Residential Southside District    |
| Food Service Establishment                                                                                                                                                                                                                                                          | NP                    | NP   | NP   | NP  | NP   | NP  | NP     | NP     | NP     | NP     | UP(PH)* | UP(PH)*                                                                                                | 23.302.070. E--Use-Specific Regulations                  |
| Group Class Instruction                                                                                                                                                                                                                                                             | NP                    | NP   | NP   | NP  | NP   | NP  | NP     | NP     | NP     | NP     | NP      | UP(PH)*                                                                                                | 23.202.150. C--R-BMU Residential BART Mixed Use District |
| Gym/Health Club                                                                                                                                                                                                                                                                     | NP                    | NP   | NP   | NP  | NP   | NP  | NP     | NP     | NP     | NP     | NP      | UP(PH)*                                                                                                | 23.202.150. C--R-BMU Residential BART Mixed Use District |
| Hotel, Tourist                                                                                                                                                                                                                                                                      | NP                    | NP   | NP   | NP  | NP   | NP  | UP(PH) | UP(PH) | UP(PH) | UP(PH) | NP      | NP                                                                                                     |                                                          |
| Laundromat and Cleaner                                                                                                                                                                                                                                                              | NP                    | NP   | NP   | NP  | NP   | NP  | NP     | NP     | NP     | NP     | UP(PH)  | UP(PH)                                                                                                 |                                                          |
| Office                                                                                                                                                                                                                                                                              | NP                    | NP   | NP   | NP  | NP   | NP  | UP(PH) | UP(PH) | NP     | UP(PH) | UP(PH)* | UP(PH)*                                                                                                | 23.202.150. C--R-BMU                                     |

| ZC = Zoning Certificate<br>AUP = ADMINISTRATIVE USE PERMIT<br>UP(PH) = Use Permit<br>NP = Not Permitted<br>* Use-Specific Regulations Apply<br>**--Required permits for specific uses are set forth in the R-BMU Master Development Permit (MDP). See 23.202.150.A and 23.202.150.D | RESIDENTIAL DISTRICTS |         |         |         |         |         |         |         |         |         |         | USE-SPECIFIC REGULATIONS APPLIES TO USES WITH AN ASTERISK FOLLOWING THE PERMIT REQUIREMENT (E.G., ZC*)         |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|----------------------------------------------------------------------------------------------------------------|
|                                                                                                                                                                                                                                                                                     | R-1                   | R-1A    | ES-R    | R-2     | R-2A    | R-3     | R-4     | R-5     | R-S     | R-SMU   | R-BMU*  |                                                                                                                |
|                                                                                                                                                                                                                                                                                     |                       |         |         |         |         |         |         |         |         |         |         | Residential BART Mixed Use District                                                                            |
| Parking Lot/Structure                                                                                                                                                                                                                                                               | UP(PH)*               | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | 23.302.070. G-- Unenclosed Accessory Structures in Residential Districts<br>23.322.100--On-site Loading Spaces |
| Personal and Household Service, General                                                                                                                                                                                                                                             | NP                    | NP      | NP      | NP      | NP      | NP      | NP      | NP      | NP      | NP      | ZC*     | 23.202.140. B.2--R-SMU Residential Southside District                                                          |
| Retail, General                                                                                                                                                                                                                                                                     | NP                    | NP      | NP      | NP      | NP      | NP      | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | 23.202.040. B--Use-Specific Regulations                                                                        |
| Veterinary Clinic                                                                                                                                                                                                                                                                   | NP                    | NP      | NP      | NP      | NP      | NP      | NP      | NP      | NP      | UP(PH)  | UP(PH)  |                                                                                                                |
| Theater                                                                                                                                                                                                                                                                             | NP                    | NP      | NP      | NP      | NP      | NP      | NP      | NP      | NP      | NP      | UP(PH)  |                                                                                                                |
| Video Tape/Disk Rental                                                                                                                                                                                                                                                              | NP                    | NP      | NP      | NP      | NP      | NP      | NP      | NP      | NP      | UP(PH)  | NP      |                                                                                                                |

|                                                                                                                                                                                                                                                                                     |                                               |             |             |            |             |            |            |            |            |              |               |                                                                                                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|-------------|-------------|------------|-------------|------------|------------|------------|------------|--------------|---------------|------------------------------------------------------------------------------------------------------------------|
| ZC = Zoning Certificate<br>AUP = ADMINISTRATIVE USE PERMIT<br>UP(PH) = Use Permit<br>NP = Not Permitted<br>* Use-Specific Regulations Apply<br>**--Required permits for specific uses are set forth in the R-BMU Master Development Permit (MDP). See 23.202.150.A and 23.202.150.D | <b>RESIDENTIAL DISTRICTS</b>                  |             |             |            |             |            |            |            |            |              |               | <b>USE-SPECIFIC REGULATIONS</b><br>APPLIES TO USES WITH AN ASTERISK FOLLOWING THE PERMIT REQUIREMENT (E.G., ZC*) |
|                                                                                                                                                                                                                                                                                     | <b>R-1</b>                                    | <b>R-1A</b> | <b>ES-R</b> | <b>R-2</b> | <b>R-2A</b> | <b>R-3</b> | <b>R-4</b> | <b>R-5</b> | <b>R-S</b> | <b>R-SMU</b> | <b>R-BMU*</b> |                                                                                                                  |
| <b>Industrial and Heavy Commercial Uses</b>                                                                                                                                                                                                                                         |                                               |             |             |            |             |            |            |            |            |              |               |                                                                                                                  |
| Commercial Excavation                                                                                                                                                                                                                                                               | UP(P H)                                       | UP(P H)     | UP(P H)     | UP(P H)    | UP(P H)     | UP(P H)    | UP(P H)    | UP(P H)    | UP(P H)    | UP(P H)      | UP(P H)       |                                                                                                                  |
| <b>Other Uses</b>                                                                                                                                                                                                                                                                   |                                               |             |             |            |             |            |            |            |            |              |               |                                                                                                                  |
| Accessory Uses                                                                                                                                                                                                                                                                      | See 23.302.020.A--General Use Regulations     |             |             |            |             |            |            |            |            |              |               |                                                                                                                  |
| Art/Craft Studio                                                                                                                                                                                                                                                                    | NP                                            | NP          | NP          | NP         | NP          | NP         | NP         | NP         | NP         | NP           | NP            | ZC                                                                                                               |
| ATM: Exterior and Attached to Bank or Interior or Exterior and Not With Bank                                                                                                                                                                                                        | NP                                            | NP          | NP          | NP         | NP          | NP         | NP         | NP         | NP         | NP           | NP            | AUP                                                                                                              |
| Home Occupations                                                                                                                                                                                                                                                                    | See 23.302.040--Home Occupations              |             |             |            |             |            |            |            |            |              |               |                                                                                                                  |
| Live/Work                                                                                                                                                                                                                                                                           | NP                                            | NP          | NP          | NP         | NP          | NP         | NP         | NP         | NP         | NP           | NP            | UP(P H)*<br>23.312--Live/Work                                                                                    |
| Public Market, Open Air                                                                                                                                                                                                                                                             | NP                                            | NP          | NP          | NP         | NP          | NP         | NP         | NP         | NP         | NP           | NP            | AUP                                                                                                              |
| Public Market, Enclosed                                                                                                                                                                                                                                                             | NP                                            | NP          | NP          | NP         | NP          | NP         | NP         | NP         | NP         | NP           | NP            | AUP                                                                                                              |
| Short-Term Rental                                                                                                                                                                                                                                                                   | ZC*                                           | ZC*         | NP          | ZC*        | ZC*         | ZC*        | ZC*        | ZC*        | ZC*        | ZC*          | ZC*           | 23.314--Short-Term Rentals                                                                                       |
| Temporary Uses                                                                                                                                                                                                                                                                      | See 23.302.030--Temporary Uses and Structures |             |             |            |             |            |            |            |            |              |               |                                                                                                                  |
| Urban Agriculture, Low-Impact                                                                                                                                                                                                                                                       | ZC*                                           | ZC*         | NP          | ZC*        | ZC*         | ZC*        | ZC*        | ZC*        | ZC*        | ZC*          | ZC*           | 23.318--Urban Agriculture                                                                                        |

| ZC = Zoning Certificate<br>AUP = ADMINISTRATIVE USE PERMIT<br>UP(PH) = Use Permit<br>NP = Not Permitted<br>* Use-Specific Regulations Apply<br>**--Required permits for specific uses are set forth in the R-BMU Master Development Permit (MDP). See 23.202.150.A and 23.202.150.D | RESIDENTIAL DISTRICTS                         |      |      |      |      |      |      |      |      |       |        | USE-SPECIFIC REGULATIONS APPLIES TO USES WITH AN ASTERISK FOLLOWING THE PERMIT REQUIREMENT (E.G., ZC*) |                           |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|------|------|------|------|------|------|------|------|-------|--------|--------------------------------------------------------------------------------------------------------|---------------------------|
|                                                                                                                                                                                                                                                                                     | R-1                                           | R-1A | ES-R | R-2  | R-2A | R-3  | R-4  | R-5  | R-S  | R-SMU | R-BMU* |                                                                                                        |                           |
| Urban Agriculture, High-Impact                                                                                                                                                                                                                                                      | AUP*                                          | AUP* | NP   | AUP* | AUP* | AUP* | AUP* | AUP* | AUP* | AUP*  | AUP*   | AUP*                                                                                                   | 23.318--Urban Agriculture |
| Wireless Telecommunication Facility                                                                                                                                                                                                                                                 | See 23.332--Wireless Communication Facilities |      |      |      |      |      |      |      |      |       |        |                                                                                                        |                           |

C. Use-Specific Regulations. Uses subject to supplemental regulations are shown in Table 23.202-1: Allowed Land Uses in Residential Districts with an asterisk (\*) following the permit requirement (e.g., UP\*). The Use-Specific Regulations column in Table 23.202-1: Allowed Land Uses in Residential Districts identifies the location of these regulations in the Zoning Ordinance.

Section 3. That the title of Berkeley Municipal Code 23.202.140 is amended as follows:

23.202.140 R-SMU Residential Southside Mixed Use District

Section 4. That the Berkeley Municipal Code 23.202.150.B.1 is amended as follows:

1. *Dwelling Units per Acre:* The quotient resulting from the total number of dwelling units on a site divided by the Lot Area.

Section 5. That Berkeley Municipal Code 23.202.150.C.1 is amended as follows:

1. *General.* See Section 23.202.020 (Allowed Land Uses), which indicates identified allowed land uses and which are prohibited.

(a) The initial establishment of a land use in a new building will follow the R-BMU Master Development Plan process outlined in Section 23.202.150.~~D~~G below.

(b) The change of use of an existing building or portion of a building will require the permits indicated in Section 23.202.020 and Table 23.202-1 for the R-BMU District.

(c) Any use not listed in Table 23.202-1 for the R-BMU District can be approved through the Master Development Plan process outlined in Section 23.202.150.D-G below for the initial establishment of a land use in a new building.

(d) Uses subject to supplemental regulations are shown in Table 23.202-1 with an asterisk (\*) following the permit requirement (e.g., ZC\*). The Use-Specific Regulations column in Table 23.204202-1 identifies the location of these regulations in the Zoning Ordinance.

Section 5. That Berkeley Municipal Code Section 23.202.150.F Table 23.202-27 is amended as follows:

Table 23.202-27-28 Permitted Street-Facing Ground Floor Uses

| FRONTAGE LOCATIONS                                                                                                                                                                                                                        | PERMITTED STREET-FACING GROUND FLOOR USES                                                                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Along Ashby and MLK                                                                                                                                                                                                                       | Non-Residential Uses or non-residential accessory spaces to residential buildings, such as community rooms. At least 50% of the combined frontage of MLK and Ashby must include active ground -floor uses.[1] Active uses at corner locations are encouraged. |
| Along Adeline                                                                                                                                                                                                                             | Non-Residential Uses or non-residential accessory spaces to residential buildings, such as community rooms                                                                                                                                                    |
| Along Woolsey, Tremont [2], or fronting interior public spaces                                                                                                                                                                            | Residential or Non-Residential Uses                                                                                                                                                                                                                           |
| Along Sacramento, along the Ohlone Greenway, or within 50 feet of any street corner                                                                                                                                                       | Residential or Non-Residential Uses                                                                                                                                                                                                                           |
| Along Delaware, Acton, or Virginia                                                                                                                                                                                                        | Residential Uses                                                                                                                                                                                                                                              |
| [1] Active uses are commercial uses which generate regular and frequent foot traffic; such uses include businesses in the following use categories: Retail; Personal and Household Services; Food and Alcohol Service, and Entertainment. |                                                                                                                                                                                                                                                               |
| [2] Public entrances for non-residential uses fronting Tremont Street must be located on Woolsey Street.                                                                                                                                  |                                                                                                                                                                                                                                                               |

Section 6. That Berkeley Municipal Code Section 23.202.150.F Table 23.202-28 is amended as follows:

Table 23.202-28-29 R-BMU Development Standards

|                   |            | Supplemental Standards |
|-------------------|------------|------------------------|
| Lot Area, Minimum | No Minimum | 23.304.020             |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                            |                                    |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|------------------------------------|
| Private Usable Open Space, Minimum [1][2]                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                            | 23. <del>302</del> <u>304</u> .090 |
| Per Dwelling Unit                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 40 sf/DU                   | 23. <del>302</del> <u>304</u> .090 |
| Per Group Living Accommodation Resident                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 15 sf/resident             | 23. <del>302</del> <u>304</u> .090 |
| Public Open Space, Minimum                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                            |                                    |
| Per Dwelling Unit                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 35 sf/DU                   |                                    |
| Per Group Living Accommodation Resident                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 18 sf/resident             |                                    |
| Floor Area Ratio (FAR), Maximum                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 4.2                        |                                    |
| Main Building height, Maximum [3]                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 80 feet and 7 stories      | 32.304.050                         |
| Residential Density, Minimum                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 75 dwelling units per acre |                                    |
| <p><b>[1]</b> Private Usable Open Space may be provided as any combination of personal and common private space.</p> <p><b>[2]</b> 50% of the Private Usable Open Space requirement may be fulfilled through the provision of an equal amount of additional Public Open Space.</p> <p><b>[3]</b> Building Height Measurement: In the case of a roof with a parapet wall, building height shall be measured to the top of the roof and parapets may exceed the height limits by up to five feet by right.</p> |                            |                                    |

Section 7. That Berkeley Municipal Code Section 23.202.150.F.3.b.iv is amended as follows:

- iv. Adjacent publicly owned space may contribute to the minimum public space requirement for the project, if it is designed, integrated and maintained as part of the project and complies with all other requirements for public space design identified in this section 23.202.150(~~DE~~)3(b).

Section 8. That Berkeley Municipal Code Section 23.202.150.F.3.c is amended as follows:

- (c) *Rooftop Open Space.* Rooftops may be utilized as Private Usable Open Space or Public Open Space meeting the requirements of 23.202.150.~~AF~~3.a (Additional Open Space Requirements--Definitions). Rooftop space designated Public Open Space must also meet the requirements of 23.202.150.~~AF~~3.bB (Public Space Design). No more than 25% of Public Open Space requirements

can be met with Rooftop Open Space, and such Public Open Space must be independently accessible from the public circulation network.

Section 9. That Berkeley Municipal Code Section 23.202.150.G.4.c is amended as follows:

(c) The Board shall determine whether the proposal conforms to the permit criteria set forth in Section 23.202.150.~~DG~~.8, and may approve or disapprove the application and the accompanying Preliminary Development Plan or require such changes therein or impose such reasonable conditions of approval as are in its judgment necessary to ensure conformity to said criteria and regulations. In so doing, the Board may, in its discretion, authorize submission of the Final Development Plan in stages corresponding to different units or elements of the development. It may do so only upon evidence assuring completion of the entire development in accordance with the Preliminary Development Plan and staged development schedule.

Section 10. That Berkeley Municipal Code Section 23.202.150.G.5.b is amended as follows:

(b) The public notice and hearing process for a Final Development Plan shall be the same as for Use Permits as defined in BMC Section ~~23B.3223.406.040~~, except that notice shall be mailed or delivered to all businesses, residents and owners of property located within five hundred (500) feet of the subject property.

Section 11. That Berkeley Municipal Code Section 23.202.150.G.7 is amended as follows:

7. *Appeal to Council.* The process for appeal to Council for a Master Development Permit, Preliminary Development Plan and/or Final Development Plan shall be the same as for Use Permits as defined in BMC ~~Section Chapter 23B.3223.410~~.

Section 12. That Berkeley Municipal Code Section 23.204.020 Table 23.204-1- is amended as follows:

Table 23.204-1-. Allowed Uses in Commercial Districts



| ZC = Zoning Certificate<br>AUP = Administrative Use Permit<br>UP(PH) = Use Permit<br>NP = Not Permitted<br>-- = Permitted with AUP, see 23.204.020(B)<br>[#] = Table Note Permit Requirement<br>* Use-Specific Regulations Apply | COMMERCIAL DISTRICTS                 |         |        |        |        |         |        |        |        |                     |        | USE-SPECIFIC REGULATIONS            |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|---------|--------|--------|--------|---------|--------|--------|--------|---------------------|--------|-------------------------------------|
|                                                                                                                                                                                                                                  | C-C                                  | C-U     | C-N    | C-E    | C-NS   | C-SA    | C-T    | C-SO   | C-DMU  | C-W                 | C-AC   |                                     |
| <b>Residential Uses</b>                                                                                                                                                                                                          |                                      |         |        |        |        |         |        |        |        |                     |        |                                     |
| Accessory Dwelling Unit                                                                                                                                                                                                          | See 23.306--Accessory Dwelling Units |         |        |        |        |         |        |        |        |                     |        |                                     |
| Dwellings                                                                                                                                                                                                                        |                                      |         |        |        |        |         |        |        |        |                     |        |                                     |
| Single-Family                                                                                                                                                                                                                    | UP(PH)                               | UP(PH)* | UP(PH) | UP(PH) | UP(PH) | UP(PH)  | UP(PH) | UP(PH) | UP(PH) | UP(PH)              | UP(PH) | 23.204.060 .B.3                     |
| Two-Family                                                                                                                                                                                                                       | UP(PH)                               | UP(PH)* | UP(PH) | UP(PH) | UP(PH) | UP(PH)  | UP(PH) | UP(PH) | UP(PH) | UP(PH)              | UP(PH) | 23.204.060 .B.3                     |
| Multi-Family                                                                                                                                                                                                                     | UP(PH)                               | UP(PH)* | UP(PH) | UP(PH) | UP(PH) | UP(PH)  | UP(PH) | UP(PH) | UP(PH) | UP(PH)              | UP(PH) | 23.204.060 .B.3                     |
| Group Living Accommodation                                                                                                                                                                                                       | UP(PH)                               | UP(PH)* | UP(PH) | UP(PH) | UP(PH) | UP(PH)  | UP(PH) | UP(PH) | UP(PH) | UP(PH)              | UP(PH) | 23.204.060 .B.3                     |
|                                                                                                                                                                                                                                  |                                      |         |        |        |        |         |        |        |        |                     |        |                                     |
| Hotel, Residential                                                                                                                                                                                                               | UP(PH)                               | UP(PH)* | UP(PH) | UP(PH) | UP(PH) | UP(PH)  | UP(PH) | UP(PH) | UP(PH) | UP(PH)              | UP(PH) | 23.204.060 .B.3                     |
| Mixed-Use Residential                                                                                                                                                                                                            | UP(PH)                               | UP(PH)* | UP(PH) | UP(PH) | UP(PH) | UP(PH)* | UP(PH) | UP(PH) | UP(PH) | See Table 23.204-41 | UP(PH) | 23.204.060 .B.3;<br>23.204.100 .B.4 |
| Senior Congregate Housing                                                                                                                                                                                                        | See 23.302.070.H                     |         |        |        |        |         |        |        |        |                     |        |                                     |
| <b>Public and Quasi-Public Uses</b>                                                                                                                                                                                              |                                      |         |        |        |        |         |        |        |        |                     |        |                                     |
| Child Care Center                                                                                                                                                                                                                | UP(PH)                               | UP(PH)  | UP(PH) | UP(PH) | UP(PH) | UP(PH)  | UP(PH) | UP(PH) | UP(PH) | UP(PH)              | UP(PH) |                                     |
| Cemetery/Crematory/Mausoleum                                                                                                                                                                                                     | NP                                   | NP      | NP     | NP     | NP     | NP      | NP     | NP     | NP     | NP                  | NP     |                                     |
| Club/Lodge                                                                                                                                                                                                                       | UP(PH)                               | UP(PH)  | UP(PH) | UP(PH) | NP     | UP(PH)  | UP(PH) | NP     | UP(PH) | UP(PH)              | UP(PH) |                                     |
| Columbaria                                                                                                                                                                                                                       | See 23.302.070.C                     |         |        |        |        |         |        |        |        |                     |        |                                     |

| ZC = Zoning Certificate<br>AUP = Administrative Use Permit<br>UP(PH) = Use Permit<br>NP = Not Permitted<br>-- = Permitted with AUP, see 23.204.020(B)<br>[#] = Table Note Permit Requirement<br>* Use-Specific Regulations Apply | COMMERCIAL DISTRICTS                           |        |        |        |                                                 |        |        |        |        |        |        | USE-SPECIFIC REGULATIONS |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|--------|--------|--------|-------------------------------------------------|--------|--------|--------|--------|--------|--------|--------------------------|
|                                                                                                                                                                                                                                  | C-C                                            | C-U    | C-N    | C-E    | C-NS                                            | C-SA   | C-T    | C-SO   | C-DMU  | C-W    | C-AC   |                          |
| Community Care Facility                                                                                                                                                                                                          | AUP                                            | AUP    | AUP    | AUP    | AUP                                             | AUP    | AUP    | AUP    | AUP    | ZC     | AUP    |                          |
| Community Center                                                                                                                                                                                                                 | UP(PH)                                         | UP(PH) | UP(PH) | UP(PH) | UP(PH)                                          | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) |                          |
| Emergency Shelter                                                                                                                                                                                                                | See <a href="#">023.308—Emergency Shelters</a> |        | –      | –      | See <a href="#">23.308 – Emergency Shelters</a> |        |        |        |        |        |        |                          |
| Family Day Care Home, Large                                                                                                                                                                                                      | ZC                                             | ZC     | ZC     | ZC     | ZC                                              | ZC     | ZC     | ZC     | ZC     | ZC     | ZC     |                          |
| Family Day Care Home, Small                                                                                                                                                                                                      | ZC                                             | ZC     | ZC     | ZC     | ZC                                              | ZC     | ZC     | ZC     | ZC     | ZC     | ZC     |                          |
| Hospital                                                                                                                                                                                                                         | UP(PH)                                         | UP(PH) | NP     | NP     | NP                                              | NP     | NP     | NP     | UP(PH) | UP(PH) | NP     |                          |
| Library                                                                                                                                                                                                                          | UP(PH)                                         | UP(PH) | UP(PH) | UP(PH) | UP(PH)                                          | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) |                          |
| Mortuaries and Crematories                                                                                                                                                                                                       | UP(PH)                                         | UP(PH) | NP     | NP     | NP                                              | NP     | NP     | NP     | NP     | UP(PH) | NP     |                          |
| Municipal Animal Shelter                                                                                                                                                                                                         | –                                              | –      | –      | –      | –                                               | –      | –      | –      | –      | –      | --     |                          |
| Nursing Home                                                                                                                                                                                                                     | UP(PH)                                         | UP(PH) | UP(PH) | UP(PH) | UP(PH)                                          | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) |                          |
| Park/Playground                                                                                                                                                                                                                  | ZC                                             | ZC     | ZC     | ZC     | ZC                                              | ZC     | ZC     | ZC     | ZC     | AUP    | ZC     |                          |
| Public Safety and Emergency Service                                                                                                                                                                                              | UP(PH)                                         | UP(PH) | UP(PH) | UP(PH) | UP(PH)                                          | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) |                          |
| Public Utility Substation/Tank                                                                                                                                                                                                   | UP(PH)                                         | UP(PH) | UP(PH) | UP(PH) | UP(PH)                                          | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) |                          |
| Religious Assembly                                                                                                                                                                                                               | UP(PH)                                         | UP(PH) | UP(PH) | UP(PH) | UP(PH)                                          | UP(PH) | UP(PH) | UP(PH) | UP(PH) | AUP    | UP(PH) |                          |

| ZC = Zoning Certificate<br>AUP = Administrative Use Permit<br>UP(PH) = Use Permit<br>NP = Not Permitted<br>-- = Permitted with AUP, see 23.204.020(B)<br>[#] = Table Note Permit Requirement<br>* Use-Specific Regulations Apply | COMMERCIAL DISTRICTS |         |         |         |         |         |         |         |         |         |         | USE-SPECIFIC REGULATIONS                                                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|--------------------------------------------------------------------------|
|                                                                                                                                                                                                                                  | C-C                  | C-U     | C-N     | C-E     | C-NS    | C-SA    | C-T     | C-SO    | C-DMU   | C-W     | C-AC    |                                                                          |
| School                                                                                                                                                                                                                           | UP(PH)               | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  |                                                                          |
| School, Vocational                                                                                                                                                                                                               | AUP                  | AUP     | AUP     | AUP     | AUP     | AUP     | AUP     | AUP     | AUP     | UP(PH)  | AUP     |                                                                          |
| <b>Retail Uses</b>                                                                                                                                                                                                               |                      |         |         |         |         |         |         |         |         |         |         |                                                                          |
| Alcoholic Beverage Retail Sale                                                                                                                                                                                                   | UP(PH)*              | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | NP      | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | 23.204.060 .B.2; 23.310                                                  |
| Cannabis Retailer                                                                                                                                                                                                                | ZC*                  | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | 23.320; 12.21; and 12.22                                                 |
| Cannabis Retailer, Delivery Only                                                                                                                                                                                                 | ZC*                  | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | --      | 23.320; 12.21; and 12.22                                                 |
| Firearm/Munitions Business                                                                                                                                                                                                       | UP(PH)*              | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | NP      | UP(PH)  | UP(PH)* | 23.302.070 .D                                                            |
| Industrial and Mining Products                                                                                                                                                                                                   | --                   | --      | --      | --      | --      | --      | --      | --      | --      | --      | --      |                                                                          |
| Pawn Shop/Auction House                                                                                                                                                                                                          | UP(PH)               | --      | NP      | NP      | NP      | NP      | NP      | NP      | UP(PH)  | UP(PH)  | NP      |                                                                          |
| Pet Store                                                                                                                                                                                                                        | UP(PH)               | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | ZC [3]  | UP(PH)  |                                                                          |
| Retail, General                                                                                                                                                                                                                  | ZC [1]               | ZC [1]  | ZC* [2] | ZC* [2] | ZC* [2] | ZC [1]  | ZC      | ZC* [2] | ZC      | ZC* [3] | ZC*     | 23.204.040 .E (for department stores)<br>23.204.040 .F (for drug stores) |

| ZC = Zoning Certificate<br>AUP = Administrative Use Permit<br>UP(PH) = Use Permit<br>NP = Not Permitted<br>-- = Permitted with AUP, see 23.204.020(B)<br>[#] = Table Note Permit Requirement<br>* Use-Specific Regulations Apply | COMMERCIAL DISTRICTS |         |         |         |         |         |         |         |        |         |         | USE-SPECIFIC REGULATIONS                                |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------|---------|---------|---------|---------|---------|---------|--------|---------|---------|---------------------------------------------------------|
|                                                                                                                                                                                                                                  | C-C                  | C-U     | C-N     | C-E     | C-NS    | C-SA    | C-T     | C-SO    | C-DMU  | C-W     | C-AC    |                                                         |
| Smoke Shop                                                                                                                                                                                                                       | UP(PH)*              | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | NP     | UP(PH)* | UP(PH)* | 23.302.070 .I                                           |
| <b>Personal and Household Service Uses</b>                                                                                                                                                                                       |                      |         |         |         |         |         |         |         |        |         |         |                                                         |
| Personal and Household Services, General                                                                                                                                                                                         | ZC [1]               | ZC [1]  | ZC [2]  | ZC [2]  | ZC [2]  | ZC [1]  | ZC      | ZC [2]  | ZC     | ZC [5]  | ZC      |                                                         |
| Kennels and Pet Boarding                                                                                                                                                                                                         | NP                   | NP      | NP      | NP      | NP      | NP      | NP      | NP      | NP     | UP(PH)  | NP      |                                                         |
| Laundromats and Cleaners                                                                                                                                                                                                         | AUP                  | AUP     | UP(PH)  | UP(PH)  | UP(PH)  | AUP     | AUP     | UP(PH)  | UP(PH) | AUP [4] | AUP     |                                                         |
| Veterinary Clinic                                                                                                                                                                                                                | UP(PH)               | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH) | UP(PH)  | UP(PH)  |                                                         |
| Video Tape/Disk Rental                                                                                                                                                                                                           | ZC [1]               | ZC [1]  | ZC [2]  | AUP     | ZC [2]  | -       | ZC      | ZC [2]  | ZC     | ZC [5]  | NP      |                                                         |
| <b>Office Uses</b>                                                                                                                                                                                                               |                      |         |         |         |         |         |         |         |        |         |         |                                                         |
| Business Support Services                                                                                                                                                                                                        | ZC [1]               | ZC [1]  | ZC [2]  | ZC [2]  | ZC [2]  | ZC [1]  | ZC*     | ZC [2]  | ZC     | ZC [5]  | ZC [6]  | 23.204.110 .B.6                                         |
| Banks and Financial Services, Retail                                                                                                                                                                                             | AUP                  | AUP     | UP(PH)  | UP(PH)  | UP(PH)  | ZC [1]  | AUP*    | UP(PH)  | ZC*    | AUP     | ZC      | 23.204.110 .B.6;<br>23.204.130 .B.3;<br>23.204.130 .D.3 |
| Insurance Agents, Title Companies, Real Estate Agents, Travel Agents                                                                                                                                                             | ZC [1]               | ZC [1]  | ZC* [2] | ZC* [2] | ZC* [2] | ZC [1]  | ZC*     | ZC* [2] | ZC*    | ZC [5]  | ZC [6]  | 23.204.040 .D;<br>23.204.110 .B.6;<br>23.204.130 .D.3   |

| ZC = Zoning Certificate<br>AUP = Administrative<br>Use Permit<br>UP(PH) = Use Permit<br>NP = Not Permitted<br>-- = Permitted with<br>AUP, see<br>23.204.020(B)<br>[#] = Table Note Permit<br>Requirement<br>* Use-Specific<br>Regulations Apply | COMMERCIAL DISTRICTS |             |             |      |            |             |             |            |             |             |            | USE-<br>SPECIFIC<br>REGULAT<br>IONS                            |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|-------------|-------------|------|------------|-------------|-------------|------------|-------------|-------------|------------|----------------------------------------------------------------|
|                                                                                                                                                                                                                                                 | C-C                  | C-U         | C-N         | C-E  | C-NS       | C-SA        | C-T         | C-SO       | C-DMU       | C-W         | C-AC       |                                                                |
| Medical Practitioners                                                                                                                                                                                                                           | ZC<br>[1]            | ZC<br>[1]   | AUP         | NP   | UP(P<br>H) | ZC<br>[1]   | AUP*        | UP(P<br>H) | ZC*         | ZC<br>[5]   | ZC<br>[6]  | 23.204.040<br>.D;<br>23.204.110<br>.B.6;<br>23.204.130<br>.D.3 |
| Non-Chartered<br>Financial Institutions                                                                                                                                                                                                         | UP(P<br>H)*          | UP(P<br>H)* | NP          | NP   | NP         | UP(P<br>H)* | UP(P<br>H)* | NP         | NP          | UP(P<br>H)* | UP(P<br>H) | 23.302.070<br>.F<br>23.204.110<br>.B.6                         |
| Office, Business and<br>Professional                                                                                                                                                                                                            | ZC<br>[1]            | ZC<br>[1]   | AUP*        | AUP* | AUP*       | ZC<br>[1]   | AUP*        | AUP*       | ZC*         | ZC<br>[5]   | ZC<br>[6]  | 23.204.040<br>.B;<br>23.204.110<br>.B.6;<br>23.204.130<br>.D.3 |
| <b>Food and Alcohol Service, Lodging, Entertainment, and Assembly Uses</b>                                                                                                                                                                      |                      |             |             |      |            |             |             |            |             |             |            |                                                                |
| Adult-oriented Business                                                                                                                                                                                                                         | UP(P<br>H)*          | UP(P<br>H)* | NP          | NP   | NP         | NP          | NP          | NP         | UP(P<br>H)* | UP(P<br>H)* | NP         | 23.302.070<br>.A                                               |
| Amusement Device<br>Arcade                                                                                                                                                                                                                      | See 23.204.040.A     |             |             |      |            |             |             |            |             |             |            | 23.302.070<br>.B                                               |
| Bar/Cocktail<br>Lounge/Tavern                                                                                                                                                                                                                   | UP(P<br>H)*          | UP(P<br>H)* | UP(P<br>H)* | -    | NP         | UP(P<br>H)* | UP(P<br>H)* | NP         | UP(P<br>H)* | UP(P<br>H)* | UP(P<br>H) | 23.204.100<br>.B.3;<br>23.204.110<br>.B.2;<br>23.310           |
| Commercial Recreation<br>Center                                                                                                                                                                                                                 | See 23.204.040.A     |             |             |      |            |             |             |            |             |             |            |                                                                |
| Dance/Exercise/Martial<br>Arts/Music Studio                                                                                                                                                                                                     | ZC<br>[1]            | ZC<br>[1]   | ZC<br>[2]   | AUP  | AUP<br>[4] | ZC<br>[1]   | ZC          | AUP        | ZC          | ZC<br>[7]   | ZC         |                                                                |

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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|--------|--------|--------|--------|---------|--------|--------|--------|----------|--------|-----------------------------------|
|                                                                                                                                                                                                                                  | C-C                     | C-U    | C-N    | C-E    | C-NS   | C-SA    | C-T    | C-SO   | C-DMU  | C-W      | C-AC   |                                   |
| Entertainment Establishment                                                                                                                                                                                                      | UP(PH)                  | UP(PH) | UP(PH) | NP     | UP(PH) | UP(PH)  | UP(PH) | UP(PH) | UP(PH) | UP(PH)   | UP(PH) |                                   |
| Food Service Establishment                                                                                                                                                                                                       | See 23.204.040302.070.E |        |        |        |        |         |        |        |        |          |        |                                   |
| Group Class Instruction                                                                                                                                                                                                          | ZC [1]                  | ZC [1] | AUP    | AUP    | AUP*   | ZC [1]  | ZC*    | AUP    | ZC*    | ZC       | ZC     | 23.204.040.B                      |
| Gym/Health Club                                                                                                                                                                                                                  | See 23.204.040.C        |        |        |        |        |         |        |        |        |          |        |                                   |
| Hotels, Tourist                                                                                                                                                                                                                  | UP(PH)                  | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH)  | UP(PH) | UP(PH) | UP(PH) | UP(PH)   | UP(PH) |                                   |
| Motels, Tourist                                                                                                                                                                                                                  | UP(PH)                  | UP(PH) | NP     | NP     | NP     | NP      | NP     | NP     | UP(PH) | UP(PH)   | NP     |                                   |
| Theater                                                                                                                                                                                                                          | UP(PH)                  | UP(PH) | UP(PH) | UP(PH) | NP     | UP(PH)  | UP(PH) | NP     | AUP    | UP(PH)   | UP(PH) |                                   |
| <b>Vehicle Service and Sales Uses</b>                                                                                                                                                                                            |                         |        |        |        |        |         |        |        |        |          |        |                                   |
| Alternative Fuel Station                                                                                                                                                                                                         | UP(PH)                  | UP(PH) | UP(PH) | NP     | UP(PH) | UP(PH)  | NP*    | UP(PH) | NP     | AUP*     | UP(PH) | 23.204.110.B.4;<br>23.204.140.B.3 |
| Electric Vehicle Charging Station                                                                                                                                                                                                | AUP                     | AUP    | AUP    | AUP    | AUP    | AUP     | AUP    | AUP    | AUP    | AUP*     | AUP    |                                   |
| Gasoline Fuel Stations                                                                                                                                                                                                           | UP(PH)                  | UP(PH) | UP(PH) | NP     | UP(PH) | UP(PH)  | NP*    | UP(PH) | NP     | UP(PH)*  | UP(PH) | 23.204.140.B.3                    |
| Large Vehicle Sales and Rental                                                                                                                                                                                                   | AUP                     | NP     | NP     | NP     | NP     | NP      | NP     | NP     | NP     | AUP* [8] | NP     | 23.204.140.B.3                    |
| Small Vehicle Sales and Service                                                                                                                                                                                                  | AUP                     | NP     | NP     | NP     | NP     | UP(PH)* | NP     | NP     | UP(PH) | UP(PH)*  | NP     | 23.204.100.B.5;<br>23.204.140.B.3 |
| Tire Sales and Service                                                                                                                                                                                                           | UP(PH)                  | NP     | NP     | NP     | NP     | NP      | NP     | NP     | NP     | UP(PH)*  | NP     | 23.204.140.B.3                    |

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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--------|--------|--------|--------|---------|--------|--------|--------|----------|--------|---------------------------------------------------------|
|                                                                                                                                                                                                                                  | C-C                  | C-U    | C-N    | C-E    | C-NS   | C-SA    | C-T    | C-SO   | C-DMU  | C-W      | C-AC   |                                                         |
| Vehicle Parts Store                                                                                                                                                                                                              | ZC [1]               | NP     | ZC [2] | ZC [2] | ZC [2] | ZC [1]  | ZC     | ZC [2] | NP     | AUP* [8] | ZC     |                                                         |
| Vehicle Rentals                                                                                                                                                                                                                  | AUP                  | NP     | NP     | NP     | NP     | NP      | NP     | NP     | UP(PH) | AUP* [8] | NP     | 23.204.140 .B.3                                         |
| Vehicle Repair and Service                                                                                                                                                                                                       | AUP                  | NP     | NP     | NP     | NP     | NP      | NP     | NP     | NP     | AUP* [8] | NP     |                                                         |
| Vehicle Sales, New                                                                                                                                                                                                               | AUP                  | NP     | NP     | NP     | NP     | UP(PH)* | NP     | NP     | UP(PH) | AUP* [8] | NP     | 23.204.100 .B.5<br>23.204.140 .B.3                      |
| Vehicle Sales, Used                                                                                                                                                                                                              | AUP                  | NP     | NP     | NP     | NP     | UP(PH)* | NP     | NP     | UP(PH) | UP(PH)*  | NP     | 23.204.100 .B.5;<br>23.204.140 .B.3;<br>23.204.140 .D.4 |
| Vehicle Wash                                                                                                                                                                                                                     | UP(PH)               | NP     | NP     | NP     | NP     | NP      | NP     | NP     | NP     | UP(PH)*  | NP     | 23.204.140 .B.3                                         |
| Vehicle Wrecking                                                                                                                                                                                                                 | NP                   | NP     | NP     | NP     | NP     | NP      | NP     | NP     | NP     | NP       | NP     |                                                         |
| <b>Industrial and Heavy Commercial Uses</b>                                                                                                                                                                                      |                      |        |        |        |        |         |        |        |        |          |        |                                                         |
| Bus/Cab/Truck/Public Utility Depot                                                                                                                                                                                               | --                   | --     | --     | --     | --     | --      | --     | --     | --     | --       | --     |                                                         |
| Commercial Excavation                                                                                                                                                                                                            | UP(PH)               | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH)  | UP(PH) | UP(PH) | --     | NP       | UP(PH) |                                                         |
| Contractors Yard                                                                                                                                                                                                                 | --                   | --     | --     | --     | --     | --      | --     | --     | --     | AUP      | --     |                                                         |
| Dry Cleaning and Laundry Plant                                                                                                                                                                                                   | UP(PH)               | UP(PH) | NP     | --     | UP(PH) | NP      | NP     | NP     | UP(PH) | NP       | NP     |                                                         |
| Laboratory                                                                                                                                                                                                                       |                      |        |        |        |        |         |        |        |        |          |        |                                                         |
| Commercial Physical or Biological                                                                                                                                                                                                | AUP                  | AUP    | NP     | NP     | NP     | NP      | NP     | NP     | AUP    | NP       | NP     |                                                         |

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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--------|--------|--------|--------|--------|--------|--------|---------|---------|--------|--------------------------|
|                                                                                                                                                                                                                                  | C-C                  | C-U    | C-N    | C-E    | C-NS   | C-SA   | C-T    | C-SO   | C-DMU   | C-W     | C-AC   |                          |
| Cannabis Testing                                                                                                                                                                                                                 | AUP                  | AUP    | NP     | NP     | NP     | NP     | NP     | NP     | AUP     | AUP [9] | NP     |                          |
| Manufacturing                                                                                                                                                                                                                    |                      |        |        |        |        |        |        |        |         |         |        |                          |
| Construction Products                                                                                                                                                                                                            | --                   | --     | --     | --     |        | --     | --     | --     | --      | UP(PH)  | --     |                          |
| Light Manufacturing                                                                                                                                                                                                              | --                   | --     | --     | --     |        | --     | --     | --     | --      | AUP [8] | --     |                          |
| Pesticides/Herbicides/Fertilizers                                                                                                                                                                                                | --                   | --     | --     | --     |        | --     | --     | --     | --      | UP(PH)  | --     |                          |
| Petroleum Refining and Products                                                                                                                                                                                                  | --                   | --     | --     | --     |        | --     | --     | --     | --      | UP(PH)  | --     |                          |
| Pharmaceuticals                                                                                                                                                                                                                  | --                   | --     | --     | --     |        | --     | --     | --     | --      | UP(PH)  | --     |                          |
| Primary Production Manufacturing                                                                                                                                                                                                 | --                   | --     | --     | --     | NP     | --     | --     | --     | --      | UP(PH)  | --     |                          |
| Semiconductors                                                                                                                                                                                                                   | --                   | --     | --     | --     | NP     | --     | --     | --     | --      | UP(PH)  | --     |                          |
| Material Recovery Enterprise                                                                                                                                                                                                     | --                   | --     | --     | --     | --     | --     | --     | --     | --      | --      | --     |                          |
| Media Production                                                                                                                                                                                                                 | UP(PH)               | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH)* | AUP     | UP(PH) | 23.204.130 .B.4          |
| Mini-storage                                                                                                                                                                                                                     | UP(PH)               | NP     | NP     | NP     | NP     | NP     | NP     | --     | UP(PH)  | NP      | NP     |                          |
| Recycled Materials Processing                                                                                                                                                                                                    | --                   | --     | --     | --     | --     | --     | --     | --     | --      | --      | --     |                          |
| Recycling Redemption Center                                                                                                                                                                                                      | AUP                  | AUP    | AUP    | AUP    | AUP    | AUP    | AUP    | AUP    | AUP     | AUP     | AUP    |                          |
| Repair Service, Non-Vehicle                                                                                                                                                                                                      | --                   | --     | --     | --     | --     | --     | --     | --     | --      | AUP     | --     |                          |



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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--------|--------|--------|--------|--------|--------|--------|--------|---------|--------|--------------------------|
|                                                                                                                                                                                                                                  | C-C                  | C-U    | C-N    | C-E    | C-NS   | C-SA   | C-T    | C-SO   | C-DMU  | C-W     | C-AC   |                          |
| Research and Development                                                                                                                                                                                                         | -                    | -      | -      | -      | -      | -      | -      | -      | -      | --      | --     |                          |
| Services to Buildings and Dwellings                                                                                                                                                                                              | -                    | -      | -      | -      | -      | -      | -      | -      | -      | AUP     | --     |                          |
| Warehouse                                                                                                                                                                                                                        | UP(PH)               | NP     | NP     | NP     | NP     | NP     | NP     | -      | UP(PH) | NP      | NP     |                          |
| Warehouse-Based Non-Store Retailer                                                                                                                                                                                               | -                    | -      | -      | -      | -      | -      | -      | -      | -      | -       | --     |                          |
| Wholesale Trade                                                                                                                                                                                                                  | -                    | -      | -      | -      | --     | -      | -      | -      | -      | AUP [8] | --     |                          |
| <b>Incidental Uses</b>                                                                                                                                                                                                           |                      |        |        |        |        |        |        |        |        |         |        |                          |
| Amusement Devices                                                                                                                                                                                                                | AUP*                 | AUP*   | AUP*   | AUP*   | AUP*   | AUP*   | AUP*   | AUP*   | AUP*   | AUP*    | UP(PH) | 23.302.070.B             |
| Alcoholic Beverage Service                                                                                                                                                                                                       | See 23.310           |        |        |        |        |        |        |        |        |         |        |                          |
| Cafeteria, On-Site                                                                                                                                                                                                               | UP(PH)               | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | AUP     | UP(PH) |                          |
| Columbaria                                                                                                                                                                                                                       | See 23.302.070.C     |        |        |        |        |        |        |        |        |         |        |                          |
| Food and Beverage for Immediate Consumption                                                                                                                                                                                      | ZC                   | ZC     | AUP    | UP(PH) | UP(PH) | ZC     | AUP    | UP(PH) | ZC     | ZC      | ZC     |                          |
| Food Service Establishment                                                                                                                                                                                                       | See 23.302.070.E     |        |        |        |        |        |        |        |        |         |        |                          |
| Live Entertainment                                                                                                                                                                                                               | See 23.302.020.D     |        |        |        |        |        |        |        |        |         |        |                          |
| Manufacturing                                                                                                                                                                                                                    | AUP                  | AUP    | UP(PH) | UP(PH) | NP     | UP(PH) | AUP    | AUP    | AUP    | AUP     | AUP    |                          |
| Retail Sale of Goods Manufactured On-Site                                                                                                                                                                                        | ZC [1]               | ZC [1] | ZC [2] | ZC [2] | ZC [2] | ZC [1] | ZC     | ZC [2] | ZC     | AUP     | ZC     |                          |

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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--------|---------|------------|--------|--------|--------|--------|------------|---------|--------|--------------------------|
|                                                                                                                                                                                                                                  | C-C                  | C-U    | C-N     | C-E        | C-NS   | C-SA   | C-T    | C-SO   | C-DMU      | C-W     | C-AC   |                          |
| Storage of Goods (>25% gross floor area)                                                                                                                                                                                         | AUP*                 | AUP*   | AUP*    | AUP*       | AUP*   | AUP*   | AUP*   | AUP*   | AUP*       | AUP*    | AUP    | 23.302.020.C             |
| Wholesale Activities                                                                                                                                                                                                             | AUP*                 | AUP*   | UP(PH)* | UP(PH)*    | NP     | AUP*   | AUP*   | AUP*   | AUP*       | AUP     | AUP    | 23.204.080.B.3           |
| <b>Other Miscellaneous Uses</b>                                                                                                                                                                                                  |                      |        |         |            |        |        |        |        |            |         |        |                          |
| Art/Craft Studio                                                                                                                                                                                                                 | AUP                  | AUP    | AUP     | AUP        | AUP    | AUP    | AUP    | AUP    | AUP        | AUP     | ZC [6] |                          |
| ATM, Exterior and Attached to Bank                                                                                                                                                                                               | AUP                  | AUP    | AUP     | UP(PH)     | AUP    | AUP    | AUP    | AUP*   | AUP        | AUP     | AUP    | 23.204.120.B.2           |
| ATM, Interior or Exterior and Not With Bank                                                                                                                                                                                      | UP(PH)               | UP(PH) | UP(PH)  | NP         | UP(PH) | UP(PH) | UP(PH) | NP     | UP(PH)*    | AUP     | UP(PH) | 23.204.130.B.2           |
| Circus/Carnival                                                                                                                                                                                                                  | UP(PH)               | UP(PH) | UP(PH)  | UP(PH)     | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH)     | UP(PH)  | UP(PH) |                          |
| Drive-in Uses                                                                                                                                                                                                                    | UP(PH)               | NP     | NP      | NP         | UP(PH) | UP(PH) | NP     | UP(PH) | NP         | NP      | UP(PH) |                          |
| Home Occupations                                                                                                                                                                                                                 | See 23.302.040       |        |         |            |        |        |        |        |            |         |        |                          |
| Live/Work                                                                                                                                                                                                                        | See 23.312           |        |         |            |        |        |        |        |            |         |        |                          |
| Parking Lot/Structure                                                                                                                                                                                                            | See 23.302.070.G     |        |         |            |        |        |        |        |            |         |        |                          |
| Public Market, Open Air                                                                                                                                                                                                          | AUP                  | AUP    | AUP     | AUP        | AUP    | AUP    | AUP    | AUP    | AUP        | UP(PH)  | AUP    |                          |
| Public Market, Enclosed                                                                                                                                                                                                          | AUP                  | AUP    | AUP     | AUP        | AUP    | AUP    | AUP    | AUP    | AUP        | AUP [9] | AUP    |                          |
| Short-Term Rental                                                                                                                                                                                                                | See 23.314           | NP     | NP      | See 23.314 |        |        |        | NP     | See 23.314 | NP      |        |                          |
| Urban Agriculture, Low-Impact                                                                                                                                                                                                    | ZC*                  | ZC*    | ZC*     | ZC*        | ZC*    | ZC*    | ZC*    | ZC*    | ZC*        | ZC      | ZC     | 23.318                   |
| Urban Agriculture, High-Impact                                                                                                                                                                                                   | AUP*                 | AUP*   | AUP*    | AUP*       | AUP*   | AUP*   | AUP*   | AUP*   | AUP*       | AUP     | AUP    | 23.318                   |

|                                                                                                                                                                                                                                  |                                               |            |            |            |             |             |            |             |              |            |                                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|------------|------------|------------|-------------|-------------|------------|-------------|--------------|------------|---------------------------------|
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|                                                                                                                                                                                                                                  | <b>C-C</b>                                    | <b>C-U</b> | <b>C-N</b> | <b>C-E</b> | <b>C-NS</b> | <b>C-SA</b> | <b>C-T</b> | <b>C-SO</b> | <b>C-DMU</b> | <b>C-W</b> |                                 |
| Wireless Telecommunication Facility                                                                                                                                                                                              | See 23.332--Wireless Communication Facilities |            |            |            |             |             |            |             |              |            |                                 |

Notes:

- [1] Change of use of floor area over 3,000 square feet requires an AUP.
- [2] Change of use of floor area over 2,000 square feet requires an AUP.
- [3] Requires an AUP for uses 3,500 sq. ft. to 7,500 square feet. Requires a Use Permit for uses more than 7,500 sq. ft.
- [4] Requires a Use Permit if 5,000 sq. ft. or more.
- [5] Requires an AUP for uses 3,000 sq. ft. to 5,000 square feet. Requires a Use Permit for uses more than 5,000 sq. ft.
- [6] Requires an AUP for uses 2,500 sq. ft. or greater or 50 ft. wide or greater on Shattuck, between Ward and Russell; Adeline between Russell and the City boundary; on Ashby, east of Adeline; or on the north side of Ashby, west of Adeline.
- [7] Requires a Use Permit if 7,500 square feet or more.
- [8] Requires a Use Permit if either 5,000 sq. ft. or more of floor area or 10,000 square feet or more of lot area.
- [9] Requires a Use Permit if more than 10,000 sq. ft.

**Section 13.** That Berkeley Municipal Code Section 23.204.060.D.1 Table 23.204-12 is amended as follows:

Table 23.204-12. C-U SETBACK STANDARDS

| LOT LINE & PROJECT CONDITIONS                                                                           | REQUIRED SETBACK                                                                     |
|---------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| <b>Front</b>                                                                                            |                                                                                      |
| Ground-floor non-residential uses fronting University Avenue                                            | Average 2 ft.<br>2 ft. at all sidewalk pedestrian entries                            |
| Ground-floor residential uses fronting University Avenue                                                | Average 2 ft.<br>Maximum 10 ft.[1]                                                   |
| Fronting a street other than University Avenue and confronting a non-residential district               | No min.                                                                              |
| <b>Rear</b>                                                                                             |                                                                                      |
| Lots on south side of University Avenue abutting lot in residential district                            | Average 20 ft. [2] [3]                                                               |
| Lots on <del>south-north</del> side of University Avenue                                                | See 23.204.060.D.5--C-U University Commercial District (Solar Access)                |
| All other lots                                                                                          | 10 ft. or 10% of lot depth, whichever is greater                                     |
| Interior Side                                                                                           | No minimum                                                                           |
| Street Side                                                                                             | 2 ft. average                                                                        |
| All setbacks for lots on South Side of University Avenue fronting a street other than University Avenue | As required by 23.304.030.C.2--Setbacks (Lots Adjacent to Residential Districts) [4] |

Notes:

- [1] A maximum setback of 10 feet is only permitted for landscaping that enhances the streetscape and provides privacy for residential units on the first floor.
- [2] Rear setback area must be greater than or equal to the width of the lot in feet multiplied by 20 feet.
- [3] See 23.304.030.C.2.b for allowed reductions.
- [4] If a lot fronting a side street is consolidated into a single project with the adjacent University Avenue-fronting lot, the project must conform to the setback standards in this table.

Section 14. That Berkeley Municipal Code Section 23.204.080.B Table 23.204-20 is amended as follows:

Table 23.204-20. C-E LAND USE NUMBER AND SIZE LIMITATIONS

| USE                                                                  | NUMBER LIMIT | MAXIMUM SIZE  | PERMIT REQUIRED                  |
|----------------------------------------------------------------------|--------------|---------------|----------------------------------|
| Art/Craft Shops, Gift/Novelty Shops, Jewelry/Watch Shops             | No limit     | 1,500 sq. ft. | ZC                               |
| Bookstores, Periodical Stands                                        | No limit     | 2,000 sq. ft. | ZC                               |
| Food Service Establishments [1]                                      | 25 total     | No max.       | No permit required<br><u>AUP</u> |
| Photocopy Stores, Printing, Fax, Magnetic Disk Reproduction Services | No limit     | 1,000 sq. ft. | ZC                               |

Notes:

[1] Excludes food service uses accessory to a food product store. Secondary food service uses associated with all other principal uses are subject to limitations in Table 23.204-20.

[2] Change of use of over 3,000 square feet requires Use Permit.

Section 14. That Berkeley Municipal Code Section 23.204.100.D.2 is amended as follows:

2. Modification for Mixed Use and Residential Projects. The ZAB may modify development standards in Table 23.204-27, Table 23.204-28, and Table 23.204-29, and Table 23.204-30 – excluding FAR – for a mixed-use or residential-only project with a Use Permit, upon making one of the following findings:

- (a) The project encourages utilization of public transit and existing off-street parking facilities in the area of the proposed building;
- (b) The modification allows consistency with the building setbacks existing in the immediate area where a residential building setback would not serve a useful purpose;
- (c) The modification facilitates the construction of affordable housing as defined by the U.S. Department of Housing and Urban Development (HUD) Guidelines; or
- (d) The modification provides consistency with the purposes of the district as listed in Section 23.204.100.A (District Purpose).

Section 15. That Berkeley Municipal Code Section 23.206.040.A is amended as follows:

A. *Art/Craft Studios in the M and ~~MU-LIMM~~ Districts.* Art/craft studios are allowed in the M and ~~MU-LIMM~~ districts only as workspaces. Live/work is not permitted.

Section 16. That Berkeley Municipal Code Section 23.406.050.F.2 is amended as follows:

2. The ZAB shall deny a ~~Use Permit application~~Variance if it determines that it is unable to make any of the required findings.

Section 17. That Berkeley Municipal Code Section 23.502.020.R.8 is amended as follows:

8. *Research and Development.* An establishment ~~comprised of laboratory or other non-office space, which is~~ engaged in ~~one or more of~~ the following activities: 1) industrial, biological or scientific research; and/or 2) product or process design, development, prototyping, and or testing. This may include labs, offices, warehousing, and light manufacturing functions as part of the overall Research and Development use.; and limited manufacturing necessary for the production of prototypes.

Section 18: Copies of this Ordinance shall be posted for two days prior to adoption in the display case located near the walkway in front of the Maudelle Shirek Building, 2134 Martin Luther King Jr. Way. Within 15 days of adoption, copies of this Ordinance shall be filed at each branch of the Berkeley Public Library and the title shall be published in a newspaper of general circulation.



**Planning and Development Department**  
Land Use Planning Division

## STAFF REPORT

DATE: October 19, 2022

TO: Members of the Planning Commission

FROM: Justin Horner, Associate Planner

SUBJECT: Public Hearing on Zoning Ordinance Amendments that Address Technical Edits and Corrections to Berkeley Municipal Code (BMC) Title 23 – Package #4

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### RECOMMENDATION:

Conduct a public hearing to discuss amendments to the following sections of the Berkeley Municipal Code (BMC) and make a recommendation to City Council to approve the amendments.

- BMC Section 23.108.020 (Zoning Districts)
- BMC Section 23.202.020 (Allowed Land Uses)
- BMC Section 23.202.140 (R-SMU District)
- BMC Section 23.204.150 (R-BMU District)
- BMC Section 23.204.020 (Allowed Land Uses)
- BMC Section 23.204.060 (C-U District)
- BMC Section 23.204.080 (C-E District)
- BMC Section 23.204.100 (C-SA District)
- BMC Section 23.206.040 (Use-Specific Regulations)
- BMC Section 23.406.050 (Variances)

### BACKGROUND

On October 12, 2021, the City Council passed Ordinance No. 7,787-NS, which repealed the then-existing Title 23 of the Berkeley Municipal Code and zoning maps (“the old Zoning Ordinance”) and adopted a new Title 23 of the Berkeley Municipal Code and zoning maps (“the new Zoning Ordinance”). The new Zoning Ordinance became effective December 1, 2021.

The new Zoning Ordinance was created as a customer service improvement and was limited in scope to changes that reorganized and reformatted Title 23 to make the City’s zoning code easier to understand and administer. Minor “consent changes” were approved by City Council where changes were needed to bring the Ordinance into compliance with State law or to codify prior zoning interpretations (*Attachment 2*). Other than the “consent changes”, no substantive changes were intended by City Council.

As part of City Council's approval action, staff was directed to regularly return to the Planning Commission and City Council with amendments necessary to maintain the integrity of the new Zoning Ordinance. Amendments presented under this direction should be for the purposes of clarifying the new Zoning Ordinance, fixing mistakes in transcription and correcting unintentional errors. Substantive changes in planning policy are not to be included in this set of routine amendments, but should be presented as separate Zoning Ordinance amendments, consistent with BMC Chapter 23.412 (Zoning Ordinance Amendments).

On June 28, 2022, the City Council adopted Ordinance No. 7,815-NS, which established the Residential BART Mixed Use (R-BMU) District. In the process of codifying the adopted ordinance, a few technical errors were identified. These are also included in this report, as they are corrections of unintentional errors and do not constitute substantive policy changes, similar to the technical edits identified within the new Zoning Ordinance.

## **PROPOSED ZONING ORDINANCE AMENDMENTS**

Since the new Zoning Ordinance came into effect on December 1, 2021, a number of clean-up amendments have been identified. The project team anticipated technical edits and corrections during the roll-out of the new Zoning Ordinance and was prepared with an efficient process and schedule for addressing these requests. This report is the product of that process and is labeled "Package #4" because it is the fourth set of edits to come before Planning Commission.

The proposed Zoning Ordinance amendments are presented in two categories. The first category includes an amendment that requires an explanation or justification. This amendment is presented below with information on what was in the old Zoning Ordinance, what is in the new Zoning Ordinance, and a recommended amendment. The second category includes technical edits such as spelling, punctuation or grammatical errors, simple corrections or inaccurate references. These amendments are summarized in *Table 1: Text Edits and Other Routine Amendments*.

This will be the last package of clean-up amendments the Planning Commission will be asked to consider. Future technical edits will be bundled with subsequent zoning ordinance amendments to streamline the use of City resources and reduce the likelihood of errors resulting from a high volume of concurrent changes.

### **Category One Zoning Ordinance Amendment**

#### **1. BMC Section 23.204.100 (C-SA Zoning District)**

**Old Zoning Ordinance:** Section 23E.52.070.D.5 of the old Zoning Ordinance included provisions to modify development standards in the C-SA with a Use Permit. These standards included height, lot coverage and setbacks. However, there was no provision to modify Floor Area Ratio (FAR).

**New Zoning Ordinance:** Section 23.204.100.D.2 includes the following language:

2. *Modification for Mixed Use and Residential Projects.* The ZAB may modify development standards in Table 23.204-27, Table 23.204-28, and Table 23.204-29, and Table 23.204-30 for a mixed-use or residential-only project with a Use Permit.



Table 23.204-27 (C-SA Development Standards) includes a maximum Floor Area Ratio standard. The inclusion of Table 23.204-27 implies that maximum FAR can be modified.

**Proposed Amendment:** Amend Section 23.204.100.D.2 as follows:

2. *Modification for Mixed Use and Residential Projects.* The ZAB may modify development standards in Table 23.204-27, Table 23.204-28, and Table 23.204-29, and Table 23.204-30—**excluding Floor Area Ratio (FAR)**--for a mixed-use or residential-only project with a Use Permit.

**Category Two Zoning Ordinance Amendments**

The following table includes minor text edits, along with a rationale for each edit.

**Table 1: Text Edits and Other Routine Amendments**

| Zoning Ordinance Section                                 | Proposed Amendment                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Rationale                                                                                                              |                      |                              |                                                          |  |  |   |          |                                                                                     |   |              |                                                                                     |                                                 |  |  |   |            |                                                                                                                        |    |               |                                                                                                             |                                                            |
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| 23.108.020<br>(Zoning Districts)                         | <p>Add back the following text:</p> <p><b>B. Undesignated Areas.</b> Any area not specifically designated as a district on the Zoning Map is subject to the Unclassified (U) district requirements.</p> <p><b>C. Overlay Zones.</b></p> <ol style="list-style-type: none"> <li>5. The Zoning Ordinance and Zoning Map include the overlay zones shown in <b>Error! Reference source not found.</b> Overlay zones impose additional regulations on properties beyond what is required by the underlying district.</li> <li>3. As shown in <b>Error! Reference source not found.</b>, provisions for overlay zones that apply to two or more districts are located in Chapter 23.210 (<b>Error! Reference source not found.</b>). Provisions for overlay zones that apply only in one district are located in the Zoning Ordinance chapter for that district.</li> </ol> <p><b>Table Error! No text of specified style in document.-1: Overlay Zones</b></p> <table border="1" data-bbox="440 1367 1279 1734"> <thead> <tr> <th>OVERLAY ZONE SYMBOL</th> <th>NAME OF OVERLAY ZONE</th> <th>LOCATION IN ZONING ORDINANCE</th> </tr> </thead> <tbody> <tr> <td colspan="3"><b>Overlay Zones that Apply in Two or More Districts</b></td> </tr> <tr> <td>H</td> <td>Hillside</td> <td><b>Error! Reference source not found.</b><b>Error! Reference source not found.</b></td> </tr> <tr> <td>C</td> <td>Civic Center</td> <td><b>Error! Reference source not found.</b><b>Error! Reference source not found.</b></td> </tr> <tr> <td colspan="3"><b>Overlay Zones that Apply in One District</b></td> </tr> <tr> <td>D</td> <td>Dealership</td> <td><b>Error! Reference source not found.</b>.B.5<b>Error! Reference source not found.</b> (Automobile/Motorcycle Sales)</td> </tr> <tr> <td>DA</td> <td>Downtown Arts</td> <td><b>Error! Reference source not found.</b><b>Error! Reference source not found.</b> (Arts Overlay District)</td> </tr> </tbody> </table> <ol style="list-style-type: none"> <li>4. If the overlay zone applies a standard to a property that conflicts with the underlying district, the overlay zone standard governs. If the overlay zone is silent on a standard in the underlying district, the underlying district standard applies.</li> </ol> | OVERLAY ZONE SYMBOL                                                                                                    | NAME OF OVERLAY ZONE | LOCATION IN ZONING ORDINANCE | <b>Overlay Zones that Apply in Two or More Districts</b> |  |  | H | Hillside | <b>Error! Reference source not found.</b> <b>Error! Reference source not found.</b> | C | Civic Center | <b>Error! Reference source not found.</b> <b>Error! Reference source not found.</b> | <b>Overlay Zones that Apply in One District</b> |  |  | D | Dealership | <b>Error! Reference source not found.</b> .B.5 <b>Error! Reference source not found.</b> (Automobile/Motorcycle Sales) | DA | Downtown Arts | <b>Error! Reference source not found.</b> <b>Error! Reference source not found.</b> (Arts Overlay District) | Inadvertent deletion in previous zoning amendment package. |
| OVERLAY ZONE SYMBOL                                      | NAME OF OVERLAY ZONE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | LOCATION IN ZONING ORDINANCE                                                                                           |                      |                              |                                                          |  |  |   |          |                                                                                     |   |              |                                                                                     |                                                 |  |  |   |            |                                                                                                                        |    |               |                                                                                                             |                                                            |
| <b>Overlay Zones that Apply in Two or More Districts</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                        |                      |                              |                                                          |  |  |   |          |                                                                                     |   |              |                                                                                     |                                                 |  |  |   |            |                                                                                                                        |    |               |                                                                                                             |                                                            |
| H                                                        | Hillside                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <b>Error! Reference source not found.</b> <b>Error! Reference source not found.</b>                                    |                      |                              |                                                          |  |  |   |          |                                                                                     |   |              |                                                                                     |                                                 |  |  |   |            |                                                                                                                        |    |               |                                                                                                             |                                                            |
| C                                                        | Civic Center                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>Error! Reference source not found.</b> <b>Error! Reference source not found.</b>                                    |                      |                              |                                                          |  |  |   |          |                                                                                     |   |              |                                                                                     |                                                 |  |  |   |            |                                                                                                                        |    |               |                                                                                                             |                                                            |
| <b>Overlay Zones that Apply in One District</b>          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                        |                      |                              |                                                          |  |  |   |          |                                                                                     |   |              |                                                                                     |                                                 |  |  |   |            |                                                                                                                        |    |               |                                                                                                             |                                                            |
| D                                                        | Dealership                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <b>Error! Reference source not found.</b> .B.5 <b>Error! Reference source not found.</b> (Automobile/Motorcycle Sales) |                      |                              |                                                          |  |  |   |          |                                                                                     |   |              |                                                                                     |                                                 |  |  |   |            |                                                                                                                        |    |               |                                                                                                             |                                                            |
| DA                                                       | Downtown Arts                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>Error! Reference source not found.</b> <b>Error! Reference source not found.</b> (Arts Overlay District)            |                      |                              |                                                          |  |  |   |          |                                                                                     |   |              |                                                                                     |                                                 |  |  |   |            |                                                                                                                        |    |               |                                                                                                             |                                                            |

|                                                                             | <b>D. Vacated Streets.</b> Where a public street or alley is officially vacated or abandoned, the land area of the street or alley acquires the district classification of the property to which it reverts.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                            |  |  |                        |                   |            |
|-----------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|--|--|------------------------|-------------------|------------|
| 23.202.020<br>(Allowed Land Uses – Residential)                             | Add back the following text:<br><br><b>C. Use-Specific Regulations.</b> Uses subject to supplemental regulations are shown in <b>Error! Reference source not found.</b> with an asterisk (*) following the permit requirement (e.g., UP*). The Use-Specific Regulations column in <b>Error! Reference source not found.</b> identifies the location of these regulations in the Zoning Ordinance.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Inadvertent deletion in previous zoning amendment package. |  |  |                        |                   |            |
| 23.202.140<br>(R-SMU District)                                              | Revise title to read:<br><br>23.202.140 R-SMU Residential Southside <u>Mixed-Use</u> District                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Correction                                                 |  |  |                        |                   |            |
| 23.202.150.B.1<br>(R-BMU District -- Definitions)                           | Revise as follows:<br><br>1. <i>Dwelling Units per Acre:</i> The quotient resulting from the total number of dwelling units on a site <b>divided</b> by the Lot Area.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Clarification                                              |  |  |                        |                   |            |
| 23.202.150.C.1<br>(R-BMU District -- Allowed Land Uses)                     | Revise to read as follows:<br><br><b>C. Allowed Land Uses.</b><br><br>1. <i>General.</i> See Section 23.202.020 (Allowed Land Uses), which indicates identified allowed land uses and which are prohibited.<br><br>(a) The initial establishment of a land use in a new building will follow the R-BMU Master Development Plan process outlined in Section 23.202.150. <u>G</u> below.<br><br>(b) The change of use of an existing building or portion of a building will require the permits indicated in Section 23.202.020 and Table 23.202-1 for the R-BMU District.<br><br>(c) Any use not listed in Table 23.202-1 for the R-BMU District can be approved through the Master Development Plan process outlined in Section 23.202.150. <u>G</u> below for the initial establishment of a land use in a new building.<br><br>(d) Uses subject to supplemental regulations are shown in Table 23.202-1 with an asterisk (*) following the permit requirement (e.g., ZC*). The Use-Specific Regulations column in Table 23.202-1 identifies the location of these regulations in the Zoning Ordinance. | Incorrect references                                       |  |  |                        |                   |            |
| 23.202.150.F<br>Table 23.202-28<br>(R-BMU District – Development Standards) | Revise table 23.202-287 to read:<br><br><b>Table 23.202-28: R-BMU Development Standards</b><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2"></th> <th style="text-align: center;">Supplemental Standards</th> </tr> </thead> <tbody> <tr> <td style="width: 33%;">Lot Area, Minimum</td> <td style="width: 33%;">No Minimum</td> <td style="width: 33%; text-align: center;">23.304.020</td> </tr> </tbody> </table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                            |  |  | Supplemental Standards | Lot Area, Minimum | No Minimum |
|                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Supplemental Standards                                     |  |  |                        |                   |            |
| Lot Area, Minimum                                                           | No Minimum                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 23.304.020                                                 |  |  |                        |                   |            |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                           |  |            |                   |          |            |                                         |                |            |                            |  |  |                   |          |  |                                         |                |  |                                 |     |  |                                   |                       |            |                              |                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |  |
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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <table border="1"> <tr> <td>Private Usable Open Space, Minimum [1][2]</td> <td></td> <td>23.304.090</td> </tr> <tr> <td>Per Dwelling Unit</td> <td>40 sf/DU</td> <td>23.304.090</td> </tr> <tr> <td>Per Group Living Accommodation Resident</td> <td>15 sf/resident</td> <td>23.304.090</td> </tr> <tr> <td>Public Open Space, Minimum</td> <td></td> <td></td> </tr> <tr> <td>Per Dwelling Unit</td> <td>35 sf/DU</td> <td></td> </tr> <tr> <td>Per Group Living Accommodation Resident</td> <td>18 sf/resident</td> <td></td> </tr> <tr> <td>Floor Area Ratio (FAR), Maximum</td> <td>4.2</td> <td></td> </tr> <tr> <td>Main Building height, Maximum [3]</td> <td>80 feet and 7 stories</td> <td>32.304.050</td> </tr> <tr> <td>Residential Density, Minimum</td> <td>75 dwelling units per acre</td> <td></td> </tr> <tr> <td colspan="3"> <p><b>[1]</b> Private Usable Open Space may be provided as any combination of personal and common private space.</p> <p><b>[2]</b> 50% of the Private Usable Open Space requirement may be fulfilled through the provision of an equal amount of additional Public Open Space.</p> <p><b>[3]</b> Building Height Measurement: In the case of a roof with a parapet wall, building height shall be measured to the top of the roof and parapets may exceed the height limits by up to five feet by right.</p> </td> </tr> </table> | Private Usable Open Space, Minimum [1][2] |  | 23.304.090 | Per Dwelling Unit | 40 sf/DU | 23.304.090 | Per Group Living Accommodation Resident | 15 sf/resident | 23.304.090 | Public Open Space, Minimum |  |  | Per Dwelling Unit | 35 sf/DU |  | Per Group Living Accommodation Resident | 18 sf/resident |  | Floor Area Ratio (FAR), Maximum | 4.2 |  | Main Building height, Maximum [3] | 80 feet and 7 stories | 32.304.050 | Residential Density, Minimum | 75 dwelling units per acre |  | <p><b>[1]</b> Private Usable Open Space may be provided as any combination of personal and common private space.</p> <p><b>[2]</b> 50% of the Private Usable Open Space requirement may be fulfilled through the provision of an equal amount of additional Public Open Space.</p> <p><b>[3]</b> Building Height Measurement: In the case of a roof with a parapet wall, building height shall be measured to the top of the roof and parapets may exceed the height limits by up to five feet by right.</p> |  |  |  |
| Private Usable Open Space, Minimum [1][2]                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 23.304.090                                |  |            |                   |          |            |                                         |                |            |                            |  |  |                   |          |  |                                         |                |  |                                 |     |  |                                   |                       |            |                              |                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |  |
| Per Dwelling Unit                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 40 sf/DU                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 23.304.090                                |  |            |                   |          |            |                                         |                |            |                            |  |  |                   |          |  |                                         |                |  |                                 |     |  |                                   |                       |            |                              |                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |  |
| Per Group Living Accommodation Resident                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 15 sf/resident                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 23.304.090                                |  |            |                   |          |            |                                         |                |            |                            |  |  |                   |          |  |                                         |                |  |                                 |     |  |                                   |                       |            |                              |                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |  |
| Public Open Space, Minimum                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                           |  |            |                   |          |            |                                         |                |            |                            |  |  |                   |          |  |                                         |                |  |                                 |     |  |                                   |                       |            |                              |                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |  |
| Per Dwelling Unit                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 35 sf/DU                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                           |  |            |                   |          |            |                                         |                |            |                            |  |  |                   |          |  |                                         |                |  |                                 |     |  |                                   |                       |            |                              |                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |  |
| Per Group Living Accommodation Resident                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 18 sf/resident                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                           |  |            |                   |          |            |                                         |                |            |                            |  |  |                   |          |  |                                         |                |  |                                 |     |  |                                   |                       |            |                              |                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |  |
| Floor Area Ratio (FAR), Maximum                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 4.2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                           |  |            |                   |          |            |                                         |                |            |                            |  |  |                   |          |  |                                         |                |  |                                 |     |  |                                   |                       |            |                              |                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |  |
| Main Building height, Maximum [3]                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 80 feet and 7 stories                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 32.304.050                                |  |            |                   |          |            |                                         |                |            |                            |  |  |                   |          |  |                                         |                |  |                                 |     |  |                                   |                       |            |                              |                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |  |
| Residential Density, Minimum                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 75 dwelling units per acre                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                           |  |            |                   |          |            |                                         |                |            |                            |  |  |                   |          |  |                                         |                |  |                                 |     |  |                                   |                       |            |                              |                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |  |
| <p><b>[1]</b> Private Usable Open Space may be provided as any combination of personal and common private space.</p> <p><b>[2]</b> 50% of the Private Usable Open Space requirement may be fulfilled through the provision of an equal amount of additional Public Open Space.</p> <p><b>[3]</b> Building Height Measurement: In the case of a roof with a parapet wall, building height shall be measured to the top of the roof and parapets may exceed the height limits by up to five feet by right.</p> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                           |  |            |                   |          |            |                                         |                |            |                            |  |  |                   |          |  |                                         |                |  |                                 |     |  |                                   |                       |            |                              |                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |  |
| 23.202.150.F.3.b.iv (R-BMU District – Public Space Design)                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <p>Revise the subsection to read:</p> <p>iv. Adjacent publicly owned space may contribute to the minimum public space requirement for the project, if it is designed, integrated and maintained as part of the project and complies with all other requirements for public space design identified in this section 23.202.150(F)3(b).</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                           |  |            |                   |          |            |                                         |                |            |                            |  |  |                   |          |  |                                         |                |  |                                 |     |  |                                   |                       |            |                              |                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |  |
| 23.202.150.F.3.c (R-BMU District – Public Space Design)                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <p>Revise the subsection to read:</p> <p>(c) <i>Rooftop Open Space</i>. Rooftops may be utilized as Private Usable Open Space or Public Open Space meeting the requirements of 23.202.150.F.3 (Additional Open Space Requirements--Definitions). Rooftop space designated Public Open Space must also meet the requirements of 23.202.150.F.3.B (Public Space Design). No more than 25% of Public Open Space requirements can be met with Rooftop Open Space, and such Public Open Space must be independently accessible from the public circulation network.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                           |  |            |                   |          |            |                                         |                |            |                            |  |  |                   |          |  |                                         |                |  |                                 |     |  |                                   |                       |            |                              |                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |  |
| 23.202.150.G.4.c (R-BMU District – Preliminary Development Plan)                                                                                                                                                                                                                                                                                                                                                                                                                                             | <p>Revise the subsection to read:</p> <p>(c) The Board shall determine whether the proposal conforms to the permit criteria set forth in Section 23.202.150.G.8, and may approve or disapprove the application and the accompanying Preliminary Development Plan or require such changes therein or impose such reasonable conditions of approval as are in its judgment necessary to ensure conformity to said criteria and regulations. In so doing, the Board may, in its discretion, authorize submission of the Final Development Plan in stages corresponding to different units or elements of the development. It may do so only upon evidence assuring completion of the entire development in accordance with the Preliminary Development Plan and staged development schedule.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Incorrect references                      |  |            |                   |          |            |                                         |                |            |                            |  |  |                   |          |  |                                         |                |  |                                 |     |  |                                   |                       |            |                              |                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |  |
| 23.202.150.G.5.b                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <p>Revise the subsection to read:</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                           |  |            |                   |          |            |                                         |                |            |                            |  |  |                   |          |  |                                         |                |  |                                 |     |  |                                   |                       |            |                              |                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |  |

| (R-BMU District – Final Development Plan)                                             | (b) The public notice and hearing process for a Final Development Plan shall be the same as for Use Permits as defined in BMC Section <b>23.406.040</b> , except that notice shall be mailed or delivered to all businesses, residents and owners of property located within five hundred (500) feet of the subject property.                                                                                                                                                                                                                                                                                                                                             |                     |                               |              |                 |                 |                                                          |          |             |    |                               |          |             |    |                                 |          |         |                               |                                                                      |          |             |    |
|---------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|-------------------------------|--------------|-----------------|-----------------|----------------------------------------------------------|----------|-------------|----|-------------------------------|----------|-------------|----|---------------------------------|----------|---------|-------------------------------|----------------------------------------------------------------------|----------|-------------|----|
| 23.202.150.G.7 (R-BMU District – Final Development Plan)                              | Revise the subsection to read:<br><br><i>7. Appeal to Council.</i> The process for appeal to Council for a Master Development Permit, Preliminary Development Plan and/or Final Development Plan shall be the same as for Use Permits as defined in BMC Section <b>23.410</b> .                                                                                                                                                                                                                                                                                                                                                                                           | Incorrect reference |                               |              |                 |                 |                                                          |          |             |    |                               |          |             |    |                                 |          |         |                               |                                                                      |          |             |    |
| 23.204.020 Table 23.204-1 (Allowed Uses Table – Commercial Districts)                 | In the C-C, residential uses are permitted with a UP(PH)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Missing letter      |                               |              |                 |                 |                                                          |          |             |    |                               |          |             |    |                                 |          |         |                               |                                                                      |          |             |    |
|                                                                                       | Add reference for Emergency Shelters: “ <b>See 23.308 – Emergency Shelters</b> ”                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Missing reference   |                               |              |                 |                 |                                                          |          |             |    |                               |          |             |    |                                 |          |         |                               |                                                                      |          |             |    |
|                                                                                       | Revise table to indicate that users should see <b>23.302.070.E</b> for regulations regarding Food Service Establishments                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Incorrect reference |                               |              |                 |                 |                                                          |          |             |    |                               |          |             |    |                                 |          |         |                               |                                                                      |          |             |    |
|                                                                                       | Amend table to reflect that Short-Term Rentals are Not Permitted (NP) in the C-N district.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Correction          |                               |              |                 |                 |                                                          |          |             |    |                               |          |             |    |                                 |          |         |                               |                                                                      |          |             |    |
| 23.204.060.D.5 Table 23.204-12 (C-U District – Setback Standards)                     | Revise table to indicate that lots on <b>south north</b> side of University Avenue are subject to Solar Access standards.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Corrections         |                               |              |                 |                 |                                                          |          |             |    |                               |          |             |    |                                 |          |         |                               |                                                                      |          |             |    |
| 23.204.080.B Table 23.204-20 (C-E District – C-E Land Use Number and Size Limitation) | Revise table to read:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                     |                               |              |                 |                 |                                                          |          |             |    |                               |          |             |    |                                 |          |         |                               |                                                                      |          |             |    |
|                                                                                       | <table border="1"> <thead> <tr> <th>Use</th> <th>Number Limit</th> <th>Maximum Size</th> <th>Permit Required</th> </tr> </thead> <tbody> <tr> <td>Art Craft Shops, Gift/Novelty Shops, Jewelry/Watch Shops</td> <td>No limit</td> <td>1,500 sq ft</td> <td>ZC</td> </tr> <tr> <td>Bookstores, Periodical Stands</td> <td>No limit</td> <td>2,000 sq ft</td> <td>ZC</td> </tr> <tr> <td>Food Service Establishments [1]</td> <td>25 total</td> <td>No max.</td> <td><b>No permit required AUP</b></td> </tr> <tr> <td>Photocopy Stores, Printing, Fax, Magnetic Disk Reproduction Services</td> <td>No limit</td> <td>1,000 sq ft</td> <td>ZC</td> </tr> </tbody> </table> |                     | Use                           | Number Limit | Maximum Size    | Permit Required | Art Craft Shops, Gift/Novelty Shops, Jewelry/Watch Shops | No limit | 1,500 sq ft | ZC | Bookstores, Periodical Stands | No limit | 2,000 sq ft | ZC | Food Service Establishments [1] | 25 total | No max. | <b>No permit required AUP</b> | Photocopy Stores, Printing, Fax, Magnetic Disk Reproduction Services | No limit | 1,000 sq ft | ZC |
|                                                                                       | Use                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                     | Number Limit                  | Maximum Size | Permit Required |                 |                                                          |          |             |    |                               |          |             |    |                                 |          |         |                               |                                                                      |          |             |    |
|                                                                                       | Art Craft Shops, Gift/Novelty Shops, Jewelry/Watch Shops                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                     | No limit                      | 1,500 sq ft  | ZC              |                 |                                                          |          |             |    |                               |          |             |    |                                 |          |         |                               |                                                                      |          |             |    |
|                                                                                       | Bookstores, Periodical Stands                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | No limit            | 2,000 sq ft                   | ZC           |                 |                 |                                                          |          |             |    |                               |          |             |    |                                 |          |         |                               |                                                                      |          |             |    |
| Food Service Establishments [1]                                                       | 25 total                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | No max.             | <b>No permit required AUP</b> |              |                 |                 |                                                          |          |             |    |                               |          |             |    |                                 |          |         |                               |                                                                      |          |             |    |
| Photocopy Stores, Printing, Fax, Magnetic Disk Reproduction Services                  | No limit                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 1,000 sq ft         | ZC                            |              |                 |                 |                                                          |          |             |    |                               |          |             |    |                                 |          |         |                               |                                                                      |          |             |    |
|                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                     |                               |              |                 |                 |                                                          |          |             |    |                               |          |             |    |                                 |          |         |                               |                                                                      |          |             |    |
|                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                     |                               |              |                 |                 |                                                          |          |             |    |                               |          |             |    |                                 |          |         |                               |                                                                      |          |             |    |
|                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                     |                               |              |                 |                 |                                                          |          |             |    |                               |          |             |    |                                 |          |         |                               |                                                                      |          |             |    |
| 23.206.040.A (Art/Craft Studios in the M and MU-LI Districts)                         | Revise section to read:<br><br><i>A. Art/Craft Studios in the M and <b>MU-LI MM</b> Districts.</i> Art/craft studios are allowed in the M and <b>MU-LI MM</b> districts only as workspaces. Live/work is not permitted.                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                     |                               |              |                 |                 |                                                          |          |             |    |                               |          |             |    |                                 |          |         |                               |                                                                      |          |             |    |
| 23.406.050.F.2 (Variances – Findings for Approval)                                    | Revise subsection to read:<br><br><i>2. The ZAB shall deny a <b>Use Permit application Variance</b> if it determines that it is unable to make any of the required findings. (Ord. 7787-NS § 2 (Exh. A), 2021)</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Correction          |                               |              |                 |                 |                                                          |          |             |    |                               |          |             |    |                                 |          |         |                               |                                                                      |          |             |    |

**NEXT STEPS**

Staff recommends that the Planning Commission hold a public hearing, receive public testimony, and recommend to City Council adoption of the proposed Zoning Ordinance amendments. Adoption of the proposed Zoning Ordinance amendments would also constitute a closing of a City Council referral from January 26, 2016 (*Attachment 4*).

**ATTACHMENTS**

1. Ordinance – Zoning Ordinance Amendments
2. Consent Changes Matrix

Public Hearing on Zoning Ordinance Technical Edits & Corrections  
Page 7 of 7

3. Public Hearing Notice
4. January 26, 2016. Berkeley City Council Referral. *Customer Service Improvements to Land Use Permit Process.*



ORDINANCE NO. -N.S.

AMENDING TITLE 23 OF THE BERKELEY MUNICIPAL CODE TO CORRECT ERRORS AND MAKE NON-SUBSTANTIVE, TECHNICAL EDITS TO THE ZONING ORDINANCE

BE IT ORDAINED by the Council of the City of Berkeley as follows:

Section 1. That Berkeley Municipal Code Section 23.108.020 Table 23.204-8 is amended as follows:

A. *Districts.* Berkeley is divided into districts as shown in Table 23.108-1: Zoning Districts. Unique regulations apply within each district as established in Chapters 23.202--23.208 (Zoning Districts).

Table 23.108-1. ZONING DISTRICTS

| DISTRICT SYMBOL              | NAME OF DISTRICT                       |
|------------------------------|----------------------------------------|
| <b>Residential Districts</b> |                                        |
| R-1                          | Single-Family Residential              |
| R-1A                         | Limited Two-family Residential         |
| ES-R                         | Environmental Safety Residential       |
| R-2                          | Restricted Two-family Residential      |
| R-2A                         | Restricted Multiple-family Residential |
| R-3                          | Multiple-family Residential            |
| R-4                          | Multi-family Residential               |
| R-5                          | High Density Residential               |
| R-S                          | Residential Southside                  |

| <b>DISTRICT SYMBOL</b>         | <b>NAME OF DISTRICT</b>         |
|--------------------------------|---------------------------------|
| R-SMU                          | Residential Southside Mixed Use |
| R-BMU                          | Residential BART Mixed Use      |
| <b>Commercial Districts</b>    |                                 |
| C-C                            | Corridor Commercial             |
| C-U                            | University Avenue Commercial    |
| C-N                            | Neighborhood Commercial         |
| C-E                            | Elmwood Commercial              |
| C-NS                           | North Shattuck Commercial       |
| C-SA                           | South Area Commercial           |
| C-T                            | Telegraph Avenue Commercial     |
| C-SO                           | Solano Avenue Commercial        |
| C-DMU                          | Downtown Mixed-Use              |
| C-W                            | West Berkeley Commercial        |
| C-AC                           | Adeline Corridor Commercial     |
| <b>Manufacturing Districts</b> |                                 |
| M                              | Manufacturing                   |
| MM                             | Mixed Manufacturing             |
| MU-LI                          | Mixed Use-Light Industrial      |



| DISTRICT SYMBOL          | NAME OF DISTRICT      |
|--------------------------|-----------------------|
| MU-R                     | Mixed Use-Residential |
| <b>Special Districts</b> |                       |
| SP                       | Specific Plan         |
| U                        | Unclassified          |

B. Undesignated Areas. Any area not specifically designated as a district on the Zoning Map is subject to the Unclassified (U) district requirements.

C. Overlay Zones.

1. The Zoning Ordinance and Zoning Map include the overlay zones shown in
2. Table Error! No text of specified style in document.-1: Overlay Zones. Overlay zones impose additional regulations on properties beyond what is required by the underlying district.
3. As shown in
4. Table Error! No text of specified style in document.-1: Overlay Zones, provisions for overlay zones that apply to two or more districts are located in Chapter 23.210 (Error! Reference source not found.). Provisions for overlay zones that apply only in one district are located in the Zoning Ordinance chapter for that district.

**TABLE Error! NO TEXT OF SPECIFIED STYLE IN DOCUMENT.-1: OVERLAY ZONES**

| <u>OVERLAY ZONE SYMBOL</u>                                      | <u>NAME OF OVERLAY ZONE</u> | <u>LOCATION IN ZONING ORDINANCE</u>                                         |
|-----------------------------------------------------------------|-----------------------------|-----------------------------------------------------------------------------|
| <b><u>Overlay Zones that Apply in Two or More Districts</u></b> |                             |                                                                             |
| <u>H</u>                                                        | <u>Hillside</u>             | <b>Error! Reference source not found.Error! Reference source not found.</b> |

|                                                        |                      |                                                                                                                                           |
|--------------------------------------------------------|----------------------|-------------------------------------------------------------------------------------------------------------------------------------------|
| <u>C</u>                                               | <u>Civic Center</u>  | <b>Error! Reference source not found.</b><br><b>Error! Reference source not found.</b>                                                    |
| <b><u>Overlay Zones that Apply in One District</u></b> |                      |                                                                                                                                           |
| <u>D</u>                                               | <u>Dealership</u>    | <b>Error! Reference source not found.</b><br><b>B.5</b> <b>Error! Reference source not found.</b><br><b>(Automobile/Motorcycle Sales)</b> |
| <u>DA</u>                                              | <u>Downtown Arts</u> | <b>Error! Reference source not found.</b><br><b>Error! Reference source not found.</b><br><b>(Arts Overlay District)</b>                  |

5. If the overlay zone applies a standard to a property that conflicts with the underlying district, the overlay zone standard governs. If the overlay zone is silent on a standard in the underlying district, the underlying district standard applies.

D. Vacated Streets. Where a public street or alley is officially vacated or abandoned, the land area of the street or alley acquires the district classification of the property to which it reverts.

Section 2. That Berkeley Municipal Code Section 23.202.020 is amended to add the following:

C. Use-Specific Regulations. Uses subject to supplemental regulations are shown in **Error! Reference source not found.** with an asterisk (\*) following the permit requirement (e.g., UP\*). The Use-Specific Regulations column in **Error! Reference source not found.** identifies the location of these regulations in the Zoning Ordinance.

Section 3. That the title of Berkeley Municipal Code 23.202.140 is amended as follows:

23.202.140 R-SMU Residential Southside Mixed Use District

Section 4. That the Berkeley Municipal Code 23.202.150.B.1 is amended as follows:

1. *Dwelling Units per Acre*: The quotient resulting from the total number of dwelling units on a site divided by the Lot Area.

Section 5. That Berkeley Municipal Code 23.202.150.C.1 is amended as follows:

1. *General*. See Section 23.202.020 (Allowed Land Uses), which indicates identified allowed land uses and which are prohibited.

(a) The initial establishment of a land use in a new building will follow the R-BMU Master Development Plan process outlined in Section 23.202.150.~~D-G~~ below.

(b) The change of use of an existing building or portion of a building will require the permits indicated in Section 23.202.020 and Table 23.202-1 for the R-BMU District.

(c) Any use not listed in Table 23.202-1 for the R-BMU District can be approved through the Master Development Plan process outlined in Section 23.202.150.~~D-G~~ below for the initial establishment of a land use in a new building.

(d) Uses subject to supplemental regulations are shown in Table 23.202-1 with an asterisk (\*) following the permit requirement (e.g., ZC\*). The Use-Specific Regulations column in Table 23.~~204202~~-1 identifies the location of these regulations in the Zoning Ordinance.

Section 6. That Berkeley Municipal Code Section 23.304.150.F Table 23.202-28 is amended as follows:

|                                           |                | <b>Supplemental Standards</b> |
|-------------------------------------------|----------------|-------------------------------|
| Lot Area, Minimum                         | No Minimum     | 23.304.020                    |
| Private Usable Open Space, Minimum [1][2] |                | 23. <del>302304</del> .090    |
| Per Dwelling Unit                         | 40 sf/DU       | 23. <del>302304</del> .090    |
| Per Group Living Accommodation Resident   | 15 sf/resident | 23. <del>302304</del> .090    |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                               |            |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|------------|
| Public Open Space,<br>Minimum                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                               |            |
| Per Dwelling Unit                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 35 sf/DU                      |            |
| Per Group Living<br>Accommodation<br>Resident                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 18 sf/resident                |            |
| Floor Area Ratio (FAR),<br>Maximum                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 4.2                           |            |
| Main Building height,<br>Maximum [3]                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 80 feet and 7<br>stories      | 32.304.050 |
| Residential Density,<br>Minimum                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 75 dwelling units<br>per acre |            |
| <p><b>[1]</b> Private Usable Open Space may be provided as any combination of personal and common private space.</p> <p><b>[2]</b> 50% of the Private Usable Open Space requirement may be fulfilled through the provision of an equal amount of additional Public Open Space.</p> <p><b>[3]</b> Building Height Measurement: In the case of a roof with a parapet wall, building height shall be measured to the top of the roof and parapets may exceed the height limits by up to five feet by right.</p> |                               |            |

Section 7. That Berkeley Municipal Code Section 23.202.150.F.3.b.iv is amended as follows:

- iv. Adjacent publicly owned space may contribute to the minimum public space requirement for the project, if it is designed, integrated and maintained as part of the project and complies with all other requirements for public space design identified in this section 23.202.150(~~DE~~)3(b).

Section 8. That Berkeley Municipal Code Section 23.202.150.F.3.c is amended as follows:

- (c) *Rooftop Open Space.* Rooftops may be utilized as Private Usable Open Space or Public Open Space meeting the requirements of 23.202.150.~~AE~~.3 (Additional Open Space Requirements--Definitions). Rooftop space

designated Public Open Space must also meet the requirements of 23.202.150.AE.3.B (Public Space Design). No more than 25% of Public Open Space requirements can be met with Rooftop Open Space, and such Public Open Space must be independently accessible from the public circulation network.

Section 9. That Berkeley Municipal Code Section 23.202.150.G.4.c is amended as follows:

(c) The Board shall determine whether the proposal conforms to the permit criteria set forth in Section 23.202.150.DG.8, and may approve or disapprove the application and the accompanying Preliminary Development Plan or require such changes therein or impose such reasonable conditions of approval as are in its judgment necessary to ensure conformity to said criteria and regulations. In so doing, the Board may, in its discretion, authorize submission of the Final Development Plan in stages corresponding to different units or elements of the development. It may do so only upon evidence assuring completion of the entire development in accordance with the Preliminary Development Plan and staged development schedule.

Section 10. That Berkeley Municipal Code Section 23.202.150.G.5.b is amended as follows:

(b) The public notice and hearing process for a Final Development Plan shall be the same as for Use Permits as defined in BMC Section ~~23B.3223.406.040~~, except that notice shall be mailed or delivered to all businesses, residents and owners of property located within five hundred (500) feet of the subject property.

Section 11. That Berkeley Municipal Code Section 23.202.150.G.7 is amended as follows:

7. *Appeal to Council.* The process for appeal to Council for a Master Development Permit, Preliminary Development Plan and/or Final Development Plan shall be the same as for Use Permits as defined in BMC Section ~~23B.3223.410~~.

Section 12. That Berkeley Municipal Code Section 23.204.020 Table 23.204-1 is amended as follows:

Table 23.204-1 . Allowed Uses in Commercial Districts

| ZC = Zoning Certificate<br>AUP = Administrative Use Permit<br>UP(PH) = Use Permit<br>NP = Not Permitted<br>-- = Permitted with AUP, see<br>23.204.020(B)<br>[#] = Table Note Permit<br>Requirement<br>* Use-Specific Regulations Apply | COMMERCIAL DISTRICTS                 |         |        |        |        |         |        |        |        |                               |        | USE-SPECIFIC REGULATIONS          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|---------|--------|--------|--------|---------|--------|--------|--------|-------------------------------|--------|-----------------------------------|
|                                                                                                                                                                                                                                        | C-C                                  | C-U     | C-N    | C-E    | C-NS   | C-SA    | C-T    | C-SO   | C-DMU  | C-W                           | C-AC   |                                   |
| <b>Residential Uses</b>                                                                                                                                                                                                                |                                      |         |        |        |        |         |        |        |        |                               |        |                                   |
| Accessory Dwelling Unit                                                                                                                                                                                                                | See 23.306--Accessory Dwelling Units |         |        |        |        |         |        |        |        |                               |        |                                   |
| Dwellings                                                                                                                                                                                                                              |                                      |         |        |        |        |         |        |        |        |                               |        |                                   |
| Single-Family                                                                                                                                                                                                                          | UP(PH)                               | UP(PH)* | UP(PH) | UP(PH) | UP(PH) | UP(PH)  | UP(PH) | UP(PH) | UP(PH) | UP(PH)                        | UP(PH) | 23.204.060.B.3                    |
| Two-Family                                                                                                                                                                                                                             | UP(PH)                               | UP(PH)* | UP(PH) | UP(PH) | UP(PH) | UP(PH)  | UP(PH) | UP(PH) | UP(PH) | UP(PH)                        | UP(PH) | 23.204.060.B.3                    |
| Multi-Family                                                                                                                                                                                                                           | UP(PH)                               | UP(PH)* | UP(PH) | UP(PH) | UP(PH) | UP(PH)  | UP(PH) | UP(PH) | UP(PH) | UP(PH)                        | UP(PH) | 23.204.060.B.3                    |
| Group Living Accommodation                                                                                                                                                                                                             | UP(PH)                               | UP(PH)* | UP(PH) | UP(PH) | UP(PH) | UP(PH)  | UP(PH) | UP(PH) | UP(PH) | UP(PH)                        | UP(PH) | 23.204.060.B.3                    |
|                                                                                                                                                                                                                                        |                                      |         |        |        |        |         |        |        |        |                               |        |                                   |
| Hotel, Residential                                                                                                                                                                                                                     | UP(PH)                               | UP(PH)* | UP(PH) | UP(PH) | UP(PH) | UP(PH)  | UP(PH) | UP(PH) | UP(PH) | UP(PH)                        | UP(PH) | 23.204.060.B.3                    |
| Mixed-Use Residential                                                                                                                                                                                                                  | UP(PH)                               | UP(PH)* | UP(PH) | UP(PH) | UP(PH) | UP(PH)* | UP(PH) | UP(PH) | UP(PH) | See<br>Table<br>23.204-<br>41 | UP(PH) | 23.204.060.B.3;<br>23.204.100.B.4 |
| Senior Congregate Housing                                                                                                                                                                                                              | See 23.302.070.H                     |         |        |        |        |         |        |        |        |                               |        |                                   |
| <b>Public and Quasi-Public Uses</b>                                                                                                                                                                                                    |                                      |         |        |        |        |         |        |        |        |                               |        |                                   |
| Child Care Center                                                                                                                                                                                                                      | UP(PH)                               | UP(PH)  | UP(PH) | UP(PH) | UP(PH) | UP(PH)  | UP(PH) | UP(PH) | UP(PH) | UP(PH)                        | UP(PH) |                                   |
| Cemetery/Crematory/Mausoleum                                                                                                                                                                                                           | NP                                   | NP      | NP     | NP     | NP     | NP      | NP     | NP     | NP     | NP                            | NP     |                                   |
| Club/Lodge                                                                                                                                                                                                                             | UP(PH)                               | UP(PH)  | UP(PH) | UP(PH) | NP     | UP(PH)  | UP(PH) | NP     | UP(PH) | UP(PH)                        | UP(PH) |                                   |

| ZC = Zoning Certificate<br>AUP = Administrative Use Permit<br>UP(PH) = Use Permit<br>NP = Not Permitted<br>-- = Permitted with AUP, see<br>23.204.020(B)<br>[#] = Table Note Permit<br>Requirement<br>* Use-Specific Regulations Apply | COMMERCIAL DISTRICTS                                           |        |        |        |                                                 |        |        |        |        |        |        | USE-SPECIFIC REGULATIONS |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|--------|--------|--------|-------------------------------------------------|--------|--------|--------|--------|--------|--------|--------------------------|
|                                                                                                                                                                                                                                        | C-C                                                            | C-U    | C-N    | C-E    | C-NS                                            | C-SA   | C-T    | C-SO   | C-DMU  | C-W    | C-AC   |                          |
| Columbaria                                                                                                                                                                                                                             | See 23.302.070.C                                               |        |        |        |                                                 |        |        |        |        |        |        |                          |
| Community Care Facility                                                                                                                                                                                                                | AUP                                                            | AUP    | AUP    | AUP    | AUP                                             | AUP    | AUP    | AUP    | AUP    | ZC     | AUP    |                          |
| Community Center                                                                                                                                                                                                                       | UP(PH)                                                         | UP(PH) | UP(PH) | UP(PH) | UP(PH)                                          | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) |                          |
| Emergency Shelter                                                                                                                                                                                                                      | See <del>023.308</del> –<br><a href="#">Emergency Shelters</a> |        | –      | –      | See <a href="#">23.308 – Emergency Shelters</a> |        |        |        |        |        |        |                          |
| Family Day Care Home, Large                                                                                                                                                                                                            | ZC                                                             | ZC     | ZC     | ZC     | ZC                                              | ZC     | ZC     | ZC     | ZC     | ZC     | ZC     |                          |
| Family Day Care Home, Small                                                                                                                                                                                                            | ZC                                                             | ZC     | ZC     | ZC     | ZC                                              | ZC     | ZC     | ZC     | ZC     | ZC     | ZC     |                          |
| Hospital                                                                                                                                                                                                                               | UP(PH)                                                         | UP(PH) | NP     | NP     | NP                                              | NP     | NP     | NP     | UP(PH) | UP(PH) | NP     |                          |
| Library                                                                                                                                                                                                                                | UP(PH)                                                         | UP(PH) | UP(PH) | UP(PH) | UP(PH)                                          | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) |                          |
| Mortuaries and Crematories                                                                                                                                                                                                             | UP(PH)                                                         | UP(PH) | NP     | NP     | NP                                              | NP     | NP     | NP     | NP     | UP(PH) | NP     |                          |
| Municipal Animal Shelter                                                                                                                                                                                                               | –                                                              | –      | –      | –      | –                                               | –      | –      | –      | –      | –      | --     |                          |
| Nursing Home                                                                                                                                                                                                                           | UP(PH)                                                         | UP(PH) | UP(PH) | UP(PH) | UP(PH)                                          | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) |                          |
| Park/Playground                                                                                                                                                                                                                        | ZC                                                             | ZC     | ZC     | ZC     | ZC                                              | ZC     | ZC     | ZC     | ZC     | AUP    | ZC     |                          |
| Public Safety and Emergency Service                                                                                                                                                                                                    | UP(PH)                                                         | UP(PH) | UP(PH) | UP(PH) | UP(PH)                                          | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) |                          |
| Public Utility Substation/Tank                                                                                                                                                                                                         | UP(PH)                                                         | UP(PH) | UP(PH) | UP(PH) | UP(PH)                                          | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) |                          |
| Religious Assembly                                                                                                                                                                                                                     | UP(PH)                                                         | UP(PH) | UP(PH) | UP(PH) | UP(PH)                                          | UP(PH) | UP(PH) | UP(PH) | UP(PH) | AUP    | UP(PH) |                          |

| ZC = Zoning Certificate<br>AUP = Administrative Use Permit<br>UP(PH) = Use Permit<br>NP = Not Permitted<br>-- = Permitted with AUP, see<br>23.204.020(B)<br>[#] = Table Note Permit<br>Requirement<br>* Use-Specific Regulations Apply | COMMERCIAL DISTRICTS |         |         |         |         |         |         |         |         |         |         | USE-SPECIFIC REGULATIONS                                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|------------------------------------------------------------------------------|
|                                                                                                                                                                                                                                        | C-C                  | C-U     | C-N     | C-E     | C-NS    | C-SA    | C-T     | C-SO    | C-DMU   | C-W     | C-AC    |                                                                              |
| School                                                                                                                                                                                                                                 | UP(PH)               | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  |                                                                              |
| School, Vocational                                                                                                                                                                                                                     | AUP                  | AUP     | AUP     | AUP     | AUP     | AUP     | AUP     | AUP     | AUP     | UP(PH)  | AUP     |                                                                              |
| <b>Retail Uses</b>                                                                                                                                                                                                                     |                      |         |         |         |         |         |         |         |         |         |         |                                                                              |
| Alcoholic Beverage Retail Sale                                                                                                                                                                                                         | UP(PH)*              | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | NP      | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | 23.204.060.B.2;<br>23.310                                                    |
| Cannabis Retailer                                                                                                                                                                                                                      | ZC*                  | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | 23.320; 12.21;<br>and 12.22                                                  |
| Cannabis Retailer, Delivery Only                                                                                                                                                                                                       | ZC*                  | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | --      | 23.320; 12.21;<br>and 12.22                                                  |
| Firearm/Munitions Business                                                                                                                                                                                                             | UP(PH)*              | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | NP      | UP(PH)  | UP(PH)* | 23.302.070.D                                                                 |
| Industrial and Mining Products                                                                                                                                                                                                         | -                    | -       | -       | -       | -       | -       | -       | -       | -       | -       | --      |                                                                              |
| Pawn Shop/Auction House                                                                                                                                                                                                                | UP(PH)               | -       | NP      | NP      | NP      | NP      | NP      | NP      | UP(PH)  | UP(PH)  | NP      |                                                                              |
| Pet Store                                                                                                                                                                                                                              | UP(PH)               | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | ZC [3]  | UP(PH)  |                                                                              |
| Retail, General                                                                                                                                                                                                                        | ZC [1]               | ZC [1]  | ZC* [2] | ZC* [2] | ZC* [2] | ZC [1]  | ZC      | ZC* [2] | ZC      | ZC* [3] | ZC*     | 23.204.040.E<br>(for department stores)<br>23.204.040.F<br>(for drug stores) |
| Smoke Shop                                                                                                                                                                                                                             | UP(PH)*              | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | NP      | UP(PH)* | UP(PH)* | 23.302.070.I                                                                 |
| <b>Personal and Household Service Uses</b>                                                                                                                                                                                             |                      |         |         |         |         |         |         |         |         |         |         |                                                                              |



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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------|---------|---------|---------|---------|---------|---------|--------|---------|--------|------------------------------------------------------|
|                                                                                                                                                                                                                                        | C-C                  | C-U     | C-N     | C-E     | C-NS    | C-SA    | C-T     | C-SO    | C-DMU  | C-W     | C-AC   |                                                      |
| Personal and Household Services, General                                                                                                                                                                                               | ZC [1]               | ZC [1]  | ZC [2]  | ZC [2]  | ZC [2]  | ZC [1]  | ZC      | ZC [2]  | ZC     | ZC [5]  | ZC     |                                                      |
| Kennels and Pet Boarding                                                                                                                                                                                                               | NP                   | NP      | NP      | NP      | NP      | NP      | NP      | NP      | NP     | UP(PH)  | NP     |                                                      |
| Laundromats and Cleaners                                                                                                                                                                                                               | AUP                  | AUP     | UP(PH)  | UP(PH)  | UP(PH)  | AUP     | AUP     | UP(PH)  | UP(PH) | AUP [4] | AUP    |                                                      |
| Veterinary Clinic                                                                                                                                                                                                                      | UP(PH)               | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH) | UP(PH)  | UP(PH) |                                                      |
| Video Tape/Disk Rental                                                                                                                                                                                                                 | ZC [1]               | ZC [1]  | ZC [2]  | AUP     | ZC [2]  | -       | ZC      | ZC [2]  | ZC     | ZC [5]  | NP     |                                                      |
| <b>Office Uses</b>                                                                                                                                                                                                                     |                      |         |         |         |         |         |         |         |        |         |        |                                                      |
| Business Support Services                                                                                                                                                                                                              | ZC [1]               | ZC [1]  | ZC [2]  | ZC [2]  | ZC [2]  | ZC [1]  | ZC*     | ZC [2]  | ZC     | ZC [5]  | ZC [6] | 23.204.110.B.6                                       |
| Banks and Financial Services, Retail                                                                                                                                                                                                   | AUP                  | AUP     | UP(PH)  | UP(PH)  | UP(PH)  | ZC [1]  | AUP*    | UP(PH)  | ZC*    | AUP     | ZC     | 23.204.110.B.6;<br>23.204.130.B.3;<br>23.204.130.D.3 |
| Insurance Agents, Title Companies, Real Estate Agents, Travel Agents                                                                                                                                                                   | ZC [1]               | ZC [1]  | ZC* [2] | ZC* [2] | ZC* [2] | ZC [1]  | ZC*     | ZC* [2] | ZC*    | ZC [5]  | ZC [6] | 23.204.040.D;<br>23.204.110.B.6;<br>23.204.130.D.3   |
| Medical Practitioners                                                                                                                                                                                                                  | ZC [1]               | ZC [1]  | AUP     | NP      | UP(PH)  | ZC [1]  | AUP*    | UP(PH)  | ZC*    | ZC [5]  | ZC [6] | 23.204.040.D;<br>23.204.110.B.6;<br>23.204.130.D.3   |
| Non-Chartered Financial Institutions                                                                                                                                                                                                   | UP(PH)*              | UP(PH)* | NP      | NP      | NP      | UP(PH)* | UP(PH)* | NP      | NP     | UP(PH)* | UP(PH) | 23.302.070.F<br>23.204.110.B.6                       |

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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------|---------|--------|---------|---------|---------|--------|---------|---------|--------|----------------------------------------------------|
|                                                                                                                                                                                                                                        | C-C                  | C-U     | C-N     | C-E    | C-NS    | C-SA    | C-T     | C-SO   | C-DMU   | C-W     | C-AC   |                                                    |
| Office, Business and Professional                                                                                                                                                                                                      | ZC [1]               | ZC [1]  | AUP*    | AUP*   | AUP*    | ZC [1]  | AUP*    | AUP*   | ZC*     | ZC [5]  | ZC [6] | 23.204.040.B;<br>23.204.110.B.6;<br>23.204.130.D.3 |
| <b>Food and Alcohol Service, Lodging, Entertainment, and Assembly Uses</b>                                                                                                                                                             |                      |         |         |        |         |         |         |        |         |         |        |                                                    |
| Adult-oriented Business                                                                                                                                                                                                                | UP(PH)*              | UP(PH)* | NP      | NP     | NP      | NP      | NP      | NP     | UP(PH)* | UP(PH)* | NP     | 23.302.070.A                                       |
| Amusement Device Arcade                                                                                                                                                                                                                | UP(PH)*              | UP(PH)* | NP      | NP     | NP      | UP(PH)* | NP      | NP     | UP(PH)* | UP(PH)* | UP(PH) | 23.302.070.B                                       |
| Bar/Cocktail Lounge/Tavern                                                                                                                                                                                                             | UP(PH)*              | UP(PH)* | UP(PH)* | –      | NP      | UP(PH)* | UP(PH)* | NP     | UP(PH)* | UP(PH)* | UP(PH) | 23.204.100.B.3;<br>23.204.110.B.2;<br>23.310       |
| Commercial Recreation Center                                                                                                                                                                                                           | See 23.204.040.A     |         |         |        |         |         |         |        |         |         |        |                                                    |
| Dance/Exercise/Martial Arts/Music Studio                                                                                                                                                                                               | ZC [1]               | ZC [1]  | ZC [2]  | AUP    | AUP [4] | ZC [1]  | ZC      | AUP    | ZC      | ZC [7]  | ZC     |                                                    |
| Entertainment Establishment                                                                                                                                                                                                            | UP(PH)               | UP(PH)  | UP(PH)  | NP     | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH) | UP(PH)  | UP(PH)  | UP(PH) |                                                    |
| Food Service Establishment                                                                                                                                                                                                             | See 23.204.040.E     |         |         |        |         |         |         |        |         |         |        |                                                    |
| Group Class Instruction                                                                                                                                                                                                                | ZC [1]               | ZC [1]  | AUP     | AUP    | AUP*    | ZC [1]  | ZC*     | AUP    | ZC*     | ZC      | ZC     | 23.204.040.B                                       |
| Gym/Health Club                                                                                                                                                                                                                        | See 23.204.040.C     |         |         |        |         |         |         |        |         |         |        |                                                    |
| Hotels, Tourist                                                                                                                                                                                                                        | UP(PH)               | UP(PH)  | UP(PH)  | UP(PH) | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH) | UP(PH)  | UP(PH)  | UP(PH) |                                                    |
| Motels, Tourist                                                                                                                                                                                                                        | UP(PH)               | UP(PH)  | NP      | NP     | NP      | NP      | NP      | NP     | UP(PH)  | UP(PH)  | NP     |                                                    |
| Theater                                                                                                                                                                                                                                | UP(PH)               | UP(PH)  | UP(PH)  | UP(PH) | NP      | UP(PH)  | UP(PH)  | NP     | AUP     | UP(PH)  | UP(PH) |                                                    |

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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--------|--------|--------|--------|---------|-----|--------|--------|----------|--------|------------------------------------------------------|
|                                                                                                                                                                                                                                        | C-C                  | C-U    | C-N    | C-E    | C-NS   | C-SA    | C-T | C-SO   | C-DMU  | C-W      | C-AC   |                                                      |
| <b>Vehicle Service and Sales Uses</b>                                                                                                                                                                                                  |                      |        |        |        |        |         |     |        |        |          |        |                                                      |
| Alternative Fuel Station                                                                                                                                                                                                               | UP(PH)               | UP(PH) | UP(PH) | NP     | UP(PH) | UP(PH)  | NP* | UP(PH) | NP     | AUP*     | UP(PH) | 23.204.110.B.4;<br>23.204.140.B.3                    |
| Electric Vehicle Charging Station                                                                                                                                                                                                      | AUP                  | AUP    | AUP    | AUP    | AUP    | AUP     | AUP | AUP    | AUP    | AUP*     | AUP    |                                                      |
| Gasoline Fuel Stations                                                                                                                                                                                                                 | UP(PH)               | UP(PH) | UP(PH) | NP     | UP(PH) | UP(PH)  | NP* | UP(PH) | NP     | UP(PH)*  | UP(PH) | 23.204.140.B.3                                       |
| Large Vehicle Sales and Rental                                                                                                                                                                                                         | AUP                  | NP     | NP     | NP     | NP     | NP      | NP  | NP     | NP     | AUP* [8] | NP     | 23.204.140.B.3                                       |
| Small Vehicle Sales and Service                                                                                                                                                                                                        | AUP                  | NP     | NP     | NP     | NP     | UP(PH)* | NP  | NP     | UP(PH) | UP(PH)*  | NP     | 23.204.100.B.5;<br>23.204.140.B.3                    |
| Tire Sales and Service                                                                                                                                                                                                                 | UP(PH)               | NP     | NP     | NP     | NP     | NP      | NP  | NP     | NP     | UP(PH)*  | NP     | 23.204.140.B.3                                       |
| Vehicle Parts Store                                                                                                                                                                                                                    | ZC [1]               | NP     | ZC [2] | ZC [2] | ZC [2] | ZC [1]  | ZC  | ZC [2] | NP     | AUP* [8] | ZC     |                                                      |
| Vehicle Rentals                                                                                                                                                                                                                        | AUP                  | NP     | NP     | NP     | NP     | NP      | NP  | NP     | UP(PH) | AUP* [8] | NP     | 23.204.140.B.3                                       |
| Vehicle Repair and Service                                                                                                                                                                                                             | AUP                  | NP     | NP     | NP     | NP     | NP      | NP  | NP     | NP     | AUP* [8] | NP     |                                                      |
| Vehicle Sales, New                                                                                                                                                                                                                     | AUP                  | NP     | NP     | NP     | NP     | UP(PH)* | NP  | NP     | UP(PH) | AUP* [8] | NP     | 23.204.100.B.5<br>23.204.140.B.3                     |
| Vehicle Sales, Used                                                                                                                                                                                                                    | AUP                  | NP     | NP     | NP     | NP     | UP(PH)* | NP  | NP     | UP(PH) | UP(PH)*  | NP     | 23.204.100.B.5;<br>23.204.140.B.3;<br>23.204.140.D.4 |
| Vehicle Wash                                                                                                                                                                                                                           | UP(PH)               | NP     | NP     | NP     | NP     | NP      | NP  | NP     | NP     | UP(PH)*  | NP     | 23.204.140.B.3                                       |
| Vehicle Wrecking                                                                                                                                                                                                                       | NP                   | NP     | NP     | NP     | NP     | NP      | NP  | NP     | NP     | NP       | NP     |                                                      |

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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--------|--------|--------|--------|--------|--------|--------|--------|---------|--------|--------------------------|
|                                                                                                                                                                                                                                        | C-C                  | C-U    | C-N    | C-E    | C-NS   | C-SA   | C-T    | C-SO   | C-DMU  | C-W     | C-AC   |                          |
| <b>Industrial and Heavy Commercial Uses</b>                                                                                                                                                                                            |                      |        |        |        |        |        |        |        |        |         |        |                          |
| Bus/Cab/Truck/Public Utility Depot                                                                                                                                                                                                     | -                    | -      | -      | -      | -      | -      | -      | -      | -      | -       | -      | --                       |
| Commercial Excavation                                                                                                                                                                                                                  | UP(PH)               | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | -      | NP      | UP(PH) |                          |
| Contractors Yard                                                                                                                                                                                                                       | -                    | -      | -      | -      | -      | -      | -      | -      | -      | AUP     | --     |                          |
| Dry Cleaning and Laundry Plant                                                                                                                                                                                                         | UP(PH)               | UP(PH) | NP     | -      | UP(PH) | NP     | NP     | NP     | UP(PH) | NP      | NP     |                          |
| Laboratory                                                                                                                                                                                                                             |                      |        |        |        |        |        |        |        |        |         |        |                          |
| Commercial Physical or Biological                                                                                                                                                                                                      | AUP                  | AUP    | NP     | NP     | NP     | NP     | NP     | NP     | AUP    | NP      | NP     |                          |
| Cannabis Testing                                                                                                                                                                                                                       | AUP                  | AUP    | NP     | NP     | NP     | NP     | NP     | NP     | AUP    | AUP [9] | NP     |                          |
| <b>Manufacturing</b>                                                                                                                                                                                                                   |                      |        |        |        |        |        |        |        |        |         |        |                          |
| Construction Products                                                                                                                                                                                                                  | -                    | -      | -      | -      |        | -      | -      | -      | -      | UP(PH)  | --     |                          |
| Light Manufacturing                                                                                                                                                                                                                    | -                    | -      | -      | -      |        | -      | -      | -      | -      | AUP [8] | --     |                          |
| Pesticides/Herbicides/Fertilizers                                                                                                                                                                                                      | -                    | -      | -      | -      |        | -      | -      | -      | -      | UP(PH)  | --     |                          |
| Petroleum Refining and Products                                                                                                                                                                                                        | -                    | -      | -      | -      |        | -      | -      | -      | -      | UP(PH)  | --     |                          |
| Pharmaceuticals                                                                                                                                                                                                                        | -                    | -      | -      | -      |        | -      | -      | -      | -      | UP(PH)  | --     |                          |
| Primary Production Manufacturing                                                                                                                                                                                                       | -                    | -      | -      | -      | NP     | -      | -      | -      | -      | UP(PH)  | --     |                          |

| ZC = Zoning Certificate<br>AUP = Administrative Use Permit<br>UP(PH) = Use Permit<br>NP = Not Permitted<br>-- = Permitted with AUP, see<br>23.204.020(B)<br>[#] = Table Note Permit<br>Requirement<br>* Use-Specific Regulations Apply | COMMERCIAL DISTRICTS |        |        |        |        |        |        |        |         |         |        | USE-SPECIFIC REGULATIONS |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--------|--------|--------|--------|--------|--------|--------|---------|---------|--------|--------------------------|
|                                                                                                                                                                                                                                        | C-C                  | C-U    | C-N    | C-E    | C-NS   | C-SA   | C-T    | C-SO   | C-DMU   | C-W     | C-AC   |                          |
| Semiconductors                                                                                                                                                                                                                         | -                    | -      | -      | -      | NP     | -      | -      | -      | -       | UP(PH)  | --     |                          |
| Material Recovery Enterprise                                                                                                                                                                                                           | -                    | -      | -      | -      | -      | -      | -      | -      | -       | -       | --     |                          |
| Media Production                                                                                                                                                                                                                       | UP(PH)               | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH)* | AUP     | UP(PH) | 23.204.130.B.4           |
| Mini-storage                                                                                                                                                                                                                           | UP(PH)               | NP     | NP     | NP     | NP     | NP     | NP     | -      | UP(PH)  | NP      | NP     |                          |
| Recycled Materials Processing                                                                                                                                                                                                          | -                    | -      | -      | -      | -      | -      | -      | -      | -       | -       | --     |                          |
| Recycling Redemption Center                                                                                                                                                                                                            | AUP                  | AUP    | AUP    | AUP    | AUP    | AUP    | AUP    | AUP    | AUP     | AUP     | AUP    |                          |
| Repair Service, Non-Vehicle                                                                                                                                                                                                            | -                    | -      | -      | -      | -      | -      | -      | -      | -       | AUP     | --     |                          |
| Research and Development                                                                                                                                                                                                               | -                    | -      | -      | -      | -      | -      | -      | -      | -       | --      | --     |                          |
| Services to Buildings and Dwellings                                                                                                                                                                                                    | -                    | -      | -      | -      | -      | -      | -      | -      | -       | AUP     | --     |                          |
| Warehouse                                                                                                                                                                                                                              | UP(PH)               | NP     | NP     | NP     | NP     | NP     | NP     | -      | UP(PH)  | NP      | NP     |                          |
| Warehouse-Based Non-Store Retailer                                                                                                                                                                                                     | -                    | -      | -      | -      | -      | -      | -      | -      | -       | -       | --     |                          |
| Wholesale Trade                                                                                                                                                                                                                        | -                    | -      | -      | -      | --     | -      | -      | -      | -       | AUP [8] | --     |                          |
| <b>Incidental Uses</b>                                                                                                                                                                                                                 |                      |        |        |        |        |        |        |        |         |         |        |                          |
| Amusement Devices                                                                                                                                                                                                                      | AUP*                 | AUP*   | AUP*   | AUP*   | AUP*   | AUP*   | AUP*   | AUP*   | AUP*    | AUP*    | UP(PH) | 23.302.070.B             |
| Alcoholic Beverage Service                                                                                                                                                                                                             | See 23.310           |        |        |        |        |        |        |        |         |         |        |                          |
| Cafeteria, On-Site                                                                                                                                                                                                                     | UP(PH)               | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH)  | AUP     | UP(PH) |                          |

| ZC = Zoning Certificate<br>AUP = Administrative Use Permit<br>UP(PH) = Use Permit<br>NP = Not Permitted<br>-- = Permitted with AUP, see<br>23.204.020(B)<br>[#] = Table Note Permit<br>Requirement<br>* Use-Specific Regulations Apply | COMMERCIAL DISTRICTS |        |         |         |        |        |        |        |         |        |        | USE-SPECIFIC REGULATIONS |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--------|---------|---------|--------|--------|--------|--------|---------|--------|--------|--------------------------|
|                                                                                                                                                                                                                                        | C-C                  | C-U    | C-N     | C-E     | C-NS   | C-SA   | C-T    | C-SO   | C-DMU   | C-W    | C-AC   |                          |
| Columbaria                                                                                                                                                                                                                             | See 23.302.070.C     |        |         |         |        |        |        |        |         |        |        |                          |
| Food and Beverage for Immediate Consumption                                                                                                                                                                                            | ZC                   | ZC     | AUP     | UP(PH)  | UP(PH) | ZC     | AUP    | UP(PH) | ZC      | ZC     | ZC     |                          |
| Food Service Establishment                                                                                                                                                                                                             | See 23.302.070.E     |        |         |         |        |        |        |        |         |        |        |                          |
| Live Entertainment                                                                                                                                                                                                                     | See 23.302.020.D     |        |         |         |        |        |        |        |         |        |        |                          |
| Manufacturing                                                                                                                                                                                                                          | AUP                  | AUP    | UP(PH)  | UP(PH)  | NP     | UP(PH) | AUP    | AUP    | AUP     | AUP    | AUP    |                          |
| Retail Sale of Goods Manufactured On-Site                                                                                                                                                                                              | ZC [1]               | ZC [1] | ZC [2]  | ZC [2]  | ZC [2] | ZC [1] | ZC     | ZC [2] | ZC      | AUP    | ZC     |                          |
| Storage of Goods (>25% gross floor area)                                                                                                                                                                                               | AUP*                 | AUP*   | AUP*    | AUP*    | AUP*   | AUP*   | AUP*   | AUP*   | AUP*    | AUP*   | AUP    | 23.302.020.C             |
| Wholesale Activities                                                                                                                                                                                                                   | AUP*                 | AUP*   | UP(PH)* | UP(PH)* | NP     | AUP*   | AUP*   | AUP*   | AUP*    | AUP    | AUP    | 23.204.080.B.3           |
| <b>Other Miscellaneous Uses</b>                                                                                                                                                                                                        |                      |        |         |         |        |        |        |        |         |        |        |                          |
| Art/Craft Studio                                                                                                                                                                                                                       | AUP                  | AUP    | AUP     | AUP     | AUP    | AUP    | AUP    | AUP    | AUP     | AUP    | ZC [6] |                          |
| ATM, Exterior and Attached to Bank                                                                                                                                                                                                     | AUP                  | AUP    | AUP     | UP(PH)  | AUP    | AUP    | AUP    | AUP*   | AUP     | AUP    | AUP    | 23.204.120.B.2           |
| ATM, Interior or Exterior and Not With Bank                                                                                                                                                                                            | UP(PH)               | UP(PH) | UP(PH)  | NP      | UP(PH) | UP(PH) | UP(PH) | NP     | UP(PH)* | AUP    | UP(PH) | 23.204.130.B.2           |
| Circus/Carnival                                                                                                                                                                                                                        | UP(PH)               | UP(PH) | UP(PH)  | UP(PH)  | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH)  | UP(PH) | UP(PH) |                          |
| Drive-in Uses                                                                                                                                                                                                                          | UP(PH)               | NP     | NP      | NP      | UP(PH) | UP(PH) | NP     | UP(PH) | NP      | NP     | UP(PH) |                          |

| ZC = Zoning Certificate<br>AUP = Administrative Use Permit<br>UP(PH) = Use Permit<br>NP = Not Permitted<br>-- = Permitted with AUP, see<br>23.204.020(B)<br>[#] = Table Note Permit<br>Requirement<br>* Use-Specific Regulations Apply | COMMERCIAL DISTRICTS                          |      |      |      |            |      |      |      |            |         |      | USE-SPECIFIC REGULATIONS |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|------|------|------|------------|------|------|------|------------|---------|------|--------------------------|
|                                                                                                                                                                                                                                        | C-C                                           | C-U  | C-N  | C-E  | C-NS       | C-SA | C-T  | C-SO | C-DMU      | C-W     | C-AC |                          |
| Home Occupations                                                                                                                                                                                                                       | See 23.302.040                                |      |      |      |            |      |      |      |            |         |      |                          |
| Live/Work                                                                                                                                                                                                                              | See 23.312                                    |      |      |      |            |      |      |      |            |         |      |                          |
| Parking Lot/Structure                                                                                                                                                                                                                  | See 23.302.070.G                              |      |      |      |            |      |      |      |            |         |      |                          |
| Public Market, Open Air                                                                                                                                                                                                                | AUP                                           | AUP  | AUP  | AUP  | AUP        | AUP  | AUP  | AUP  | AUP        | UP(PH)  | AUP  |                          |
| Public Market, Enclosed                                                                                                                                                                                                                | AUP                                           | AUP  | AUP  | AUP  | AUP        | AUP  | AUP  | AUP  | AUP        | AUP [9] | AUP  |                          |
| Short-Term Rental                                                                                                                                                                                                                      | See 23.314                                    |      | NP   | NP   | See 23.314 |      |      | NP   | See 23.314 |         | NP   |                          |
| Urban Agriculture, Low-Impact                                                                                                                                                                                                          | ZC*                                           | ZC*  | ZC*  | ZC*  | ZC*        | ZC*  | ZC*  | ZC*  | ZC*        | ZC      | ZC   | 23.318                   |
| Urban Agriculture, High-Impact                                                                                                                                                                                                         | AUP*                                          | AUP* | AUP* | AUP* | AUP*       | AUP* | AUP* | AUP* | AUP*       | AUP     | AUP  | 23.318                   |
| Wireless Telecommunication Facility                                                                                                                                                                                                    | See 23.332--Wireless Communication Facilities |      |      |      |            |      |      |      |            |         |      |                          |

Notes:

- [1] Change of use of floor area over 3,000 square feet requires an AUP.
- [2] Change of use of floor area over 2,000 square feet requires an AUP.
- [3] Requires an AUP for uses 3,500 sq. ft. to 7,500 square feet. Requires a Use Permit for uses more than 7,500 sq. ft.
- [4] Requires a Use Permit if 5,000 sq. ft. or more.
- [5] Requires an AUP for uses 3,000 sq. ft. to 5,000 square feet. Requires a Use Permit for uses more than 5,000 sq. ft.
- [6] Requires an AUP for uses 2,500 sq. ft. or greater or 50 ft. wide or greater on Shattuck, between Ward and Russell; Adeline between Russell and the City boundary; on Ashby, east of Adeline; or on the north side of Ashby, west of Adeline.
- [7] Requires a Use Permit if 7,500 square feet or more.
- [8] Requires a Use Permit if either 5,000 sq. ft. or more of floor area or 10,000 square feet or more of lot area.
- [9] Requires a Use Permit if more than 10,000 sq. ft.

**Section 13.** That Berkeley Municipal Code Section 23.204.060.D.5 Table 23.204-12 is amended as follows:

Table 23.204-12. C-U SETBACK STANDARDS

| LOT LINE & PROJECT CONDITIONS                                                                           | REQUIRED SETBACK                                                                                      |
|---------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| <b>Front</b>                                                                                            |                                                                                                       |
| Ground-floor non-residential uses fronting University Avenue                                            | Average 2 ft.<br>2 ft. at all sidewalk pedestrian entries                                             |
| Ground-floor residential uses fronting University Avenue                                                | Average 2 ft.<br>Maximum 10 ft.[1]                                                                    |
| Fronting a street other than University Avenue and confronting a non-residential district               | No min.                                                                                               |
| <b>Rear</b>                                                                                             |                                                                                                       |
| Lots on south side of University Avenue abutting lot in residential district                            | Average 20 ft. [2] [3]                                                                                |
| Lots on <del>south</del> -north side of University Avenue                                               | See <a href="#">23.204.060.D.5</a> [WG1]--C-U University Commercial District (Solar Access)           |
| All other lots                                                                                          | 10 ft. or 10% of lot depth, whichever is greater                                                      |
| Interior Side                                                                                           | No minimum                                                                                            |
| Street Side                                                                                             | 2 ft. average                                                                                         |
| All setbacks for lots on South Side of University Avenue fronting a street other than University Avenue | As required by <a href="#">23.304.030.C.2</a> --Setbacks (Lots Adjacent to Residential Districts) [4] |

Notes:

- [1] A maximum setback of 10 feet is only permitted for landscaping that enhances the streetscape and provides privacy for residential units on the first floor.
- [2] Rear setback area must be greater than or equal to the width of the lot in feet multiplied by 20 feet.
- [3] See [23.304.030.C.2.b](#) for allowed reductions.
- [4] If a lot fronting a side street is consolidated into a single project with the adjacent University Avenue-fronting lot, the project must conform to the setback standards in this table.



27 Section 14. That Berkeley Municipal Code Section 23.204.080.B Table 23.204-20 is  
 28 amended as follows:  
 29

30 Table 23.204-20. C-E LAND USE NUMBER AND SIZE LIMITATIONS

| USE                                                                     | NUMBER LIMIT | MAXIMUM SIZE  | PERMIT REQUIRED           |
|-------------------------------------------------------------------------|--------------|---------------|---------------------------|
| Art/Craft Shops, Gift/Novelty Shops,<br>Jewelry/Watch Shops             | No limit     | 1,500 sq. ft. | ZC                        |
| Bookstores, Periodical Stands                                           | No limit     | 2,000 sq. ft. | ZC                        |
| Food Service Establishments [1]                                         | 25 total     | No max.       | No permit required<br>AUP |
| Photocopy Stores, Printing, Fax, Magnetic<br>Disk Reproduction Services | No limit     | 1,000 sq. ft. | ZC                        |

31 Notes:

32 [1] Excludes food service uses accessory to a food product store. Secondary food service uses  
 33 associated with all other principal uses are subject to limitations in Table 23.204-20.

34 [2] Change of use of over 3,000 square feet requires Use Permit.  
 35

36 Section 14. That Berkeley Municipal Code Section 23.204.100.D.2 is amended as  
 37 follows:  
 38

39 2. Modification for Mixed Use and Residential Projects. The ZAB may modify  
 40 development standards in Table 23.204-27, Table 23.204-28, and Table 23.204-  
 41 29, and Table 23.204-30 – excluding FAR – for a mixed-use or residential-only  
 42 project with a Use Permit, upon making one of the following findings:

43 (a) The project encourages utilization of public transit and existing off-  
 44 street parking facilities in the area of the proposed building;

45 (b) The modification allows consistency with the building setbacks  
 46 existing in the immediate area where a residential building setback would  
 47 not serve a useful purpose;

48 (c) The modification facilitates the construction of affordable housing as  
 49 defined by the U.S. Department of Housing and Urban Development  
 50 (HUD) Guidelines; or

51 (d) The modification provides consistency with the purposes of the district  
 52 as listed in Section 23.204.100.A (District Purpose).

53 Section 15. That Berkeley Municipal Code Section 23.206.040.A is amended as  
 54 follows:  
 55

56 A. *Art/Craft Studios in the M and ~~MU-LIMM~~ Districts.* Art/craft studios are  
57 allowed in the M and ~~MU-LIMM~~ districts only as workspaces. Live/work is not  
58 permitted.  
59

60 Section 16. That Berkeley Municipal Code Section 23.406.050.F.2 is amended as  
61 follows:  
62

63 2. The ZAB shall deny a ~~Use-Permit-application~~Variance if it determines that it is  
64 unable to make any of the required findings.  
65

66 Section 17: Copies of this Ordinance shall be posted for two days prior to adoption in the  
67 display case located near the walkway in front of the Maudelle Shirek Building, 2134  
68 Martin Luther King Jr. Way. Within 15 days of adoption, copies of this Ordinance shall be  
69 filed at each branch of the Berkeley Public Library and the title shall be published in a  
70 newspaper of general circulation.

## ORDINANCE NO. -N.S.

AMENDING TITLE 23 OF THE BERKELEY MUNICIPAL CODE TO CORRECT ERRORS AND MAKE NON-SUBSTANTIVE, TECHNICAL EDITS TO THE ZONING ORDINANCE

BE IT ORDAINED by the Council of the City of Berkeley as follows:

Section 1. That Berkeley Municipal Code Section 23.108.020 Table 23.204-8 is amended as follows:

A. *Districts.* Berkeley is divided into districts as shown in Table 23.108-1: Zoning Districts. Unique regulations apply within each district as established in Chapters 23.202--23.208 (Zoning Districts).

Table 23.108-1. ZONING DISTRICTS

| DISTRICT SYMBOL              | NAME OF DISTRICT                       |
|------------------------------|----------------------------------------|
| <b>Residential Districts</b> |                                        |
| R-1                          | Single-Family Residential              |
| R-1A                         | Limited Two-family Residential         |
| ES-R                         | Environmental Safety Residential       |
| R-2                          | Restricted Two-family Residential      |
| R-2A                         | Restricted Multiple-family Residential |
| R-3                          | Multiple-family Residential            |
| R-4                          | Multi-family Residential               |
| R-5                          | High Density Residential               |
| R-S                          | Residential Southside                  |

| <b>DISTRICT SYMBOL</b>         | <b>NAME OF DISTRICT</b>         |
|--------------------------------|---------------------------------|
| R-SMU                          | Residential Southside Mixed Use |
| R-BMU                          | Residential BART Mixed Use      |
| <b>Commercial Districts</b>    |                                 |
| C-C                            | Corridor Commercial             |
| C-U                            | University Avenue Commercial    |
| C-N                            | Neighborhood Commercial         |
| C-E                            | Elmwood Commercial              |
| C-NS                           | North Shattuck Commercial       |
| C-SA                           | South Area Commercial           |
| C-T                            | Telegraph Avenue Commercial     |
| C-SO                           | Solano Avenue Commercial        |
| C-DMU                          | Downtown Mixed-Use              |
| C-W                            | West Berkeley Commercial        |
| C-AC                           | Adeline Corridor Commercial     |
| <b>Manufacturing Districts</b> |                                 |
| M                              | Manufacturing                   |
| MM                             | Mixed Manufacturing             |
| MU-LI                          | Mixed Use-Light Industrial      |

| DISTRICT SYMBOL          | NAME OF DISTRICT      |
|--------------------------|-----------------------|
| MU-R                     | Mixed Use-Residential |
| <b>Special Districts</b> |                       |
| SP                       | Specific Plan         |
| U                        | Unclassified          |

B. Undesignated Areas. Any area not specifically designated as a district on the Zoning Map is subject to the Unclassified (U) district requirements.

C. Overlay Zones.

1. The Zoning Ordinance and Zoning Map include the overlay zones shown in
2. Table Error! No text of specified style in document.-1: Overlay Zones. Overlay zones impose additional regulations on properties beyond what is required by the underlying district.
3. As shown in
4. Table Error! No text of specified style in document.-1: Overlay Zones, provisions for overlay zones that apply to two or more districts are located in Chapter 23.210 (Error! Reference source not found.). Provisions for overlay zones that apply only in one district are located in the Zoning Ordinance chapter for that district.

**TABLE Error! NO TEXT OF SPECIFIED STYLE IN DOCUMENT.-1: OVERLAY ZONES**

| <u>OVERLAY ZONE SYMBOL</u>                                      | <u>NAME OF OVERLAY ZONE</u> | <u>LOCATION IN ZONING ORDINANCE</u>                                         |
|-----------------------------------------------------------------|-----------------------------|-----------------------------------------------------------------------------|
| <b><u>Overlay Zones that Apply in Two or More Districts</u></b> |                             |                                                                             |
| <u>H</u>                                                        | <u>Hillside</u>             | <b>Error! Reference source not found.Error! Reference source not found.</b> |

|                                                        |                      |                                                                                                                                           |
|--------------------------------------------------------|----------------------|-------------------------------------------------------------------------------------------------------------------------------------------|
| <u>C</u>                                               | <u>Civic Center</u>  | <b>Error! Reference source not found.</b><br><b>Error! Reference source not found.</b>                                                    |
| <b><u>Overlay Zones that Apply in One District</u></b> |                      |                                                                                                                                           |
| <u>D</u>                                               | <u>Dealership</u>    | <b>Error! Reference source not found.</b><br><b>B.5</b> <b>Error! Reference source not found.</b><br><b>(Automobile/Motorcycle Sales)</b> |
| <u>DA</u>                                              | <u>Downtown Arts</u> | <b>Error! Reference source not found.</b><br><b>Error! Reference source not found.</b><br><b>(Arts Overlay District)</b>                  |

5. If the overlay zone applies a standard to a property that conflicts with the underlying district, the overlay zone standard governs. If the overlay zone is silent on a standard in the underlying district, the underlying district standard applies.

D. Vacated Streets. Where a public street or alley is officially vacated or abandoned, the land area of the street or alley acquires the district classification of the property to which it reverts.

Section 2. That Berkeley Municipal Code Section 23.202.020 is amended to add the following:

C. Use-Specific Regulations. Uses subject to supplemental regulations are shown in **Error! Reference source not found.** with an asterisk (\*) following the permit requirement (e.g., UP\*). The Use-Specific Regulations column in **Error! Reference source not found.** identifies the location of these regulations in the Zoning Ordinance.

Section 3. That the title of Berkeley Municipal Code 23.202.140 is amended as follows:

23.202.140 R-SMU Residential Southside Mixed Use District

Section 4. That the Berkeley Municipal Code 23.202.150.B.1 is amended as follows:

1. *Dwelling Units per Acre*: The quotient resulting from the total number of dwelling units on a site divided by the Lot Area.

Section 5. That Berkeley Municipal Code 23.202.150.C.1 is amended as follows:

1. *General*. See Section 23.202.020 (Allowed Land Uses), which indicates identified allowed land uses and which are prohibited.

(a) The initial establishment of a land use in a new building will follow the R-BMU Master Development Plan process outlined in Section 23.202.150.~~D-G~~ below.

(b) The change of use of an existing building or portion of a building will require the permits indicated in Section 23.202.020 and Table 23.202-1 for the R-BMU District.

(c) Any use not listed in Table 23.202-1 for the R-BMU District can be approved through the Master Development Plan process outlined in Section 23.202.150.~~D-G~~ below for the initial establishment of a land use in a new building.

(d) Uses subject to supplemental regulations are shown in Table 23.202-1 with an asterisk (\*) following the permit requirement (e.g., ZC\*). The Use-Specific Regulations column in Table 23.~~204202~~-1 identifies the location of these regulations in the Zoning Ordinance.

Section 6. That Berkeley Municipal Code Section 23.304.150.F Table 23.202-28 is amended as follows:

|                                           |                | <b>Supplemental Standards</b> |
|-------------------------------------------|----------------|-------------------------------|
| Lot Area, Minimum                         | No Minimum     | 23.304.020                    |
| Private Usable Open Space, Minimum [1][2] |                | 23. <del>302304</del> .090    |
| Per Dwelling Unit                         | 40 sf/DU       | 23. <del>302304</del> .090    |
| Per Group Living Accommodation Resident   | 15 sf/resident | 23. <del>302304</del> .090    |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                            |            |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|------------|
| Public Open Space, Minimum                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                            |            |
| Per Dwelling Unit                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 35 sf/DU                   |            |
| Per Group Living Accommodation Resident                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 18 sf/resident             |            |
| Floor Area Ratio (FAR), Maximum                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 4.2                        |            |
| Main Building height, Maximum [3]                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 80 feet and 7 stories      | 32.304.050 |
| Residential Density, Minimum                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 75 dwelling units per acre |            |
| <p><b>[1]</b> Private Usable Open Space may be provided as any combination of personal and common private space.</p> <p><b>[2]</b> 50% of the Private Usable Open Space requirement may be fulfilled through the provision of an equal amount of additional Public Open Space.</p> <p><b>[3]</b> Building Height Measurement: In the case of a roof with a parapet wall, building height shall be measured to the top of the roof and parapets may exceed the height limits by up to five feet by right.</p> |                            |            |

Section 7. That Berkeley Municipal Code Section 23.202.150.F.3.b.iv is amended as follows:

iv. Adjacent publicly owned space may contribute to the minimum public space requirement for the project, if it is designed, integrated and maintained as part of the project and complies with all other requirements for public space design identified in this section 23.202.150(~~DE~~)3(b).

Section 8. That Berkeley Municipal Code Section 23.202.150.F.3.c is amended as follows:

(c) *Rooftop Open Space.* Rooftops may be utilized as Private Usable Open Space or Public Open Space meeting the requirements of 23.202.150.~~AE~~.3 (Additional Open Space Requirements--Definitions). Rooftop space



designated Public Open Space must also meet the requirements of 23.202.150.AE.3.B (Public Space Design). No more than 25% of Public Open Space requirements can be met with Rooftop Open Space, and such Public Open Space must be independently accessible from the public circulation network.

Section 9. That Berkeley Municipal Code Section 23.202.150.G.4.c is amended as follows:

(c) The Board shall determine whether the proposal conforms to the permit criteria set forth in Section 23.202.150.DG.8, and may approve or disapprove the application and the accompanying Preliminary Development Plan or require such changes therein or impose such reasonable conditions of approval as are in its judgment necessary to ensure conformity to said criteria and regulations. In so doing, the Board may, in its discretion, authorize submission of the Final Development Plan in stages corresponding to different units or elements of the development. It may do so only upon evidence assuring completion of the entire development in accordance with the Preliminary Development Plan and staged development schedule.

Section 10. That Berkeley Municipal Code Section 23.202.150.G.5.b is amended as follows:

(b) The public notice and hearing process for a Final Development Plan shall be the same as for Use Permits as defined in BMC Section ~~23B.3223.406.040~~, except that notice shall be mailed or delivered to all businesses, residents and owners of property located within five hundred (500) feet of the subject property.

Section 11. That Berkeley Municipal Code Section 23.202.150.G.7 is amended as follows:

7. *Appeal to Council.* The process for appeal to Council for a Master Development Permit, Preliminary Development Plan and/or Final Development Plan shall be the same as for Use Permits as defined in BMC Section ~~23B.3223.410~~.

Section 12. That Berkeley Municipal Code Section 23.204.020 Table 23.204-1 is amended as follows:

Table 23.204-1 . Allowed Uses in Commercial Districts

| ZC = Zoning Certificate<br>AUP = Administrative Use Permit<br>UP(PH) = Use Permit<br>NP = Not Permitted<br>-- = Permitted with AUP, see<br>23.204.020(B)<br>[#] = Table Note Permit<br>Requirement<br>* Use-Specific Regulations Apply | COMMERCIAL DISTRICTS                 |         |        |        |        |         |        |        |        |                               |        | USE-SPECIFIC REGULATIONS          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|---------|--------|--------|--------|---------|--------|--------|--------|-------------------------------|--------|-----------------------------------|
|                                                                                                                                                                                                                                        | C-C                                  | C-U     | C-N    | C-E    | C-NS   | C-SA    | C-T    | C-SO   | C-DMU  | C-W                           | C-AC   |                                   |
| <b>Residential Uses</b>                                                                                                                                                                                                                |                                      |         |        |        |        |         |        |        |        |                               |        |                                   |
| Accessory Dwelling Unit                                                                                                                                                                                                                | See 23.306--Accessory Dwelling Units |         |        |        |        |         |        |        |        |                               |        |                                   |
| Dwellings                                                                                                                                                                                                                              |                                      |         |        |        |        |         |        |        |        |                               |        |                                   |
| Single-Family                                                                                                                                                                                                                          | UP(PH)                               | UP(PH)* | UP(PH) | UP(PH) | UP(PH) | UP(PH)  | UP(PH) | UP(PH) | UP(PH) | UP(PH)                        | UP(PH) | 23.204.060.B.3                    |
| Two-Family                                                                                                                                                                                                                             | UP(PH)                               | UP(PH)* | UP(PH) | UP(PH) | UP(PH) | UP(PH)  | UP(PH) | UP(PH) | UP(PH) | UP(PH)                        | UP(PH) | 23.204.060.B.3                    |
| Multi-Family                                                                                                                                                                                                                           | UP(PH)                               | UP(PH)* | UP(PH) | UP(PH) | UP(PH) | UP(PH)  | UP(PH) | UP(PH) | UP(PH) | UP(PH)                        | UP(PH) | 23.204.060.B.3                    |
| Group Living Accommodation                                                                                                                                                                                                             | UP(PH)                               | UP(PH)* | UP(PH) | UP(PH) | UP(PH) | UP(PH)  | UP(PH) | UP(PH) | UP(PH) | UP(PH)                        | UP(PH) | 23.204.060.B.3                    |
|                                                                                                                                                                                                                                        |                                      |         |        |        |        |         |        |        |        |                               |        |                                   |
| Hotel, Residential                                                                                                                                                                                                                     | UP(PH)                               | UP(PH)* | UP(PH) | UP(PH) | UP(PH) | UP(PH)  | UP(PH) | UP(PH) | UP(PH) | UP(PH)                        | UP(PH) | 23.204.060.B.3                    |
| Mixed-Use Residential                                                                                                                                                                                                                  | UP(PH)                               | UP(PH)* | UP(PH) | UP(PH) | UP(PH) | UP(PH)* | UP(PH) | UP(PH) | UP(PH) | See<br>Table<br>23.204-<br>41 | UP(PH) | 23.204.060.B.3;<br>23.204.100.B.4 |
| Senior Congregate Housing                                                                                                                                                                                                              | See 23.302.070.H                     |         |        |        |        |         |        |        |        |                               |        |                                   |
| <b>Public and Quasi-Public Uses</b>                                                                                                                                                                                                    |                                      |         |        |        |        |         |        |        |        |                               |        |                                   |
| Child Care Center                                                                                                                                                                                                                      | UP(PH)                               | UP(PH)  | UP(PH) | UP(PH) | UP(PH) | UP(PH)  | UP(PH) | UP(PH) | UP(PH) | UP(PH)                        | UP(PH) |                                   |
| Cemetery/Crematory/Mausoleum                                                                                                                                                                                                           | NP                                   | NP      | NP     | NP     | NP     | NP      | NP     | NP     | NP     | NP                            | NP     |                                   |
| Club/Lodge                                                                                                                                                                                                                             | UP(PH)                               | UP(PH)  | UP(PH) | UP(PH) | NP     | UP(PH)  | UP(PH) | NP     | UP(PH) | UP(PH)                        | UP(PH) |                                   |

| ZC = Zoning Certificate<br>AUP = Administrative Use Permit<br>UP(PH) = Use Permit<br>NP = Not Permitted<br>-- = Permitted with AUP, see<br>23.204.020(B)<br>[#] = Table Note Permit<br>Requirement<br>* Use-Specific Regulations Apply | COMMERCIAL DISTRICTS                                           |        |        |        |                                                 |        |        |        |        |        |        | USE-SPECIFIC REGULATIONS |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|--------|--------|--------|-------------------------------------------------|--------|--------|--------|--------|--------|--------|--------------------------|
|                                                                                                                                                                                                                                        | C-C                                                            | C-U    | C-N    | C-E    | C-NS                                            | C-SA   | C-T    | C-SO   | C-DMU  | C-W    | C-AC   |                          |
| Columbaria                                                                                                                                                                                                                             | See 23.302.070.C                                               |        |        |        |                                                 |        |        |        |        |        |        |                          |
| Community Care Facility                                                                                                                                                                                                                | AUP                                                            | AUP    | AUP    | AUP    | AUP                                             | AUP    | AUP    | AUP    | AUP    | ZC     | AUP    |                          |
| Community Center                                                                                                                                                                                                                       | UP(PH)                                                         | UP(PH) | UP(PH) | UP(PH) | UP(PH)                                          | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) |                          |
| Emergency Shelter                                                                                                                                                                                                                      | See <del>023.308</del> —<br><a href="#">Emergency Shelters</a> |        | —      | —      | See <a href="#">23.308 – Emergency Shelters</a> |        |        |        |        |        |        |                          |
| Family Day Care Home, Large                                                                                                                                                                                                            | ZC                                                             | ZC     | ZC     | ZC     | ZC                                              | ZC     | ZC     | ZC     | ZC     | ZC     | ZC     |                          |
| Family Day Care Home, Small                                                                                                                                                                                                            | ZC                                                             | ZC     | ZC     | ZC     | ZC                                              | ZC     | ZC     | ZC     | ZC     | ZC     | ZC     |                          |
| Hospital                                                                                                                                                                                                                               | UP(PH)                                                         | UP(PH) | NP     | NP     | NP                                              | NP     | NP     | NP     | UP(PH) | UP(PH) | NP     |                          |
| Library                                                                                                                                                                                                                                | UP(PH)                                                         | UP(PH) | UP(PH) | UP(PH) | UP(PH)                                          | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) |                          |
| Mortuaries and Crematories                                                                                                                                                                                                             | UP(PH)                                                         | UP(PH) | NP     | NP     | NP                                              | NP     | NP     | NP     | NP     | UP(PH) | NP     |                          |
| Municipal Animal Shelter                                                                                                                                                                                                               | —                                                              | —      | —      | —      | —                                               | —      | —      | —      | —      | —      | --     |                          |
| Nursing Home                                                                                                                                                                                                                           | UP(PH)                                                         | UP(PH) | UP(PH) | UP(PH) | UP(PH)                                          | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) |                          |
| Park/Playground                                                                                                                                                                                                                        | ZC                                                             | ZC     | ZC     | ZC     | ZC                                              | ZC     | ZC     | ZC     | ZC     | AUP    | ZC     |                          |
| Public Safety and Emergency Service                                                                                                                                                                                                    | UP(PH)                                                         | UP(PH) | UP(PH) | UP(PH) | UP(PH)                                          | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) |                          |
| Public Utility Substation/Tank                                                                                                                                                                                                         | UP(PH)                                                         | UP(PH) | UP(PH) | UP(PH) | UP(PH)                                          | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) |                          |
| Religious Assembly                                                                                                                                                                                                                     | UP(PH)                                                         | UP(PH) | UP(PH) | UP(PH) | UP(PH)                                          | UP(PH) | UP(PH) | UP(PH) | UP(PH) | AUP    | UP(PH) |                          |

| ZC = Zoning Certificate<br>AUP = Administrative Use Permit<br>UP(PH) = Use Permit<br>NP = Not Permitted<br>-- = Permitted with AUP, see<br>23.204.020(B)<br>[#] = Table Note Permit<br>Requirement<br>* Use-Specific Regulations Apply | COMMERCIAL DISTRICTS |         |         |         |         |         |         |         |         |         |         | USE-SPECIFIC REGULATIONS                                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|------------------------------------------------------------------------------|
|                                                                                                                                                                                                                                        | C-C                  | C-U     | C-N     | C-E     | C-NS    | C-SA    | C-T     | C-SO    | C-DMU   | C-W     | C-AC    |                                                                              |
| School                                                                                                                                                                                                                                 | UP(PH)               | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  |                                                                              |
| School, Vocational                                                                                                                                                                                                                     | AUP                  | AUP     | AUP     | AUP     | AUP     | AUP     | AUP     | AUP     | AUP     | UP(PH)  | AUP     |                                                                              |
| <b>Retail Uses</b>                                                                                                                                                                                                                     |                      |         |         |         |         |         |         |         |         |         |         |                                                                              |
| Alcoholic Beverage Retail Sale                                                                                                                                                                                                         | UP(PH)*              | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | NP      | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | 23.204.060.B.2;<br>23.310                                                    |
| Cannabis Retailer                                                                                                                                                                                                                      | ZC*                  | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | 23.320; 12.21;<br>and 12.22                                                  |
| Cannabis Retailer, Delivery Only                                                                                                                                                                                                       | ZC*                  | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | ZC*     | --      | 23.320; 12.21;<br>and 12.22                                                  |
| Firearm/Munitions Business                                                                                                                                                                                                             | UP(PH)*              | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | NP      | UP(PH)  | UP(PH)* | 23.302.070.D                                                                 |
| Industrial and Mining Products                                                                                                                                                                                                         | -                    | -       | -       | -       | -       | -       | -       | -       | -       | -       | --      |                                                                              |
| Pawn Shop/Auction House                                                                                                                                                                                                                | UP(PH)               | -       | NP      | NP      | NP      | NP      | NP      | NP      | UP(PH)  | UP(PH)  | NP      |                                                                              |
| Pet Store                                                                                                                                                                                                                              | UP(PH)               | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | ZC [3]  | UP(PH)  |                                                                              |
| Retail, General                                                                                                                                                                                                                        | ZC [1]               | ZC [1]  | ZC* [2] | ZC* [2] | ZC* [2] | ZC [1]  | ZC      | ZC* [2] | ZC      | ZC* [3] | ZC*     | 23.204.040.E<br>(for department stores)<br>23.204.040.F<br>(for drug stores) |
| Smoke Shop                                                                                                                                                                                                                             | UP(PH)*              | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | UP(PH)* | NP      | UP(PH)* | UP(PH)* | 23.302.070.I                                                                 |
| <b>Personal and Household Service Uses</b>                                                                                                                                                                                             |                      |         |         |         |         |         |         |         |         |         |         |                                                                              |

| ZC = Zoning Certificate<br>AUP = Administrative Use Permit<br>UP(PH) = Use Permit<br>NP = Not Permitted<br>-- = Permitted with AUP, see<br>23.204.020(B)<br>[#] = Table Note Permit<br>Requirement<br>* Use-Specific Regulations Apply | COMMERCIAL DISTRICTS |         |         |         |         |         |         |         |        |         |        | USE-SPECIFIC REGULATIONS                             |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------|---------|---------|---------|---------|---------|---------|--------|---------|--------|------------------------------------------------------|
|                                                                                                                                                                                                                                        | C-C                  | C-U     | C-N     | C-E     | C-NS    | C-SA    | C-T     | C-SO    | C-DMU  | C-W     | C-AC   |                                                      |
| Personal and Household Services, General                                                                                                                                                                                               | ZC [1]               | ZC [1]  | ZC [2]  | ZC [2]  | ZC [2]  | ZC [1]  | ZC      | ZC [2]  | ZC     | ZC [5]  | ZC     |                                                      |
| Kennels and Pet Boarding                                                                                                                                                                                                               | NP                   | NP      | NP      | NP      | NP      | NP      | NP      | NP      | NP     | UP(PH)  | NP     |                                                      |
| Laundromats and Cleaners                                                                                                                                                                                                               | AUP                  | AUP     | UP(PH)  | UP(PH)  | UP(PH)  | AUP     | AUP     | UP(PH)  | UP(PH) | AUP [4] | AUP    |                                                      |
| Veterinary Clinic                                                                                                                                                                                                                      | UP(PH)               | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH) | UP(PH)  | UP(PH) |                                                      |
| Video Tape/Disk Rental                                                                                                                                                                                                                 | ZC [1]               | ZC [1]  | ZC [2]  | AUP     | ZC [2]  | -       | ZC      | ZC [2]  | ZC     | ZC [5]  | NP     |                                                      |
| <b>Office Uses</b>                                                                                                                                                                                                                     |                      |         |         |         |         |         |         |         |        |         |        |                                                      |
| Business Support Services                                                                                                                                                                                                              | ZC [1]               | ZC [1]  | ZC [2]  | ZC [2]  | ZC [2]  | ZC [1]  | ZC*     | ZC [2]  | ZC     | ZC [5]  | ZC [6] | 23.204.110.B.6                                       |
| Banks and Financial Services, Retail                                                                                                                                                                                                   | AUP                  | AUP     | UP(PH)  | UP(PH)  | UP(PH)  | ZC [1]  | AUP*    | UP(PH)  | ZC*    | AUP     | ZC     | 23.204.110.B.6;<br>23.204.130.B.3;<br>23.204.130.D.3 |
| Insurance Agents, Title Companies, Real Estate Agents, Travel Agents                                                                                                                                                                   | ZC [1]               | ZC [1]  | ZC* [2] | ZC* [2] | ZC* [2] | ZC [1]  | ZC*     | ZC* [2] | ZC*    | ZC [5]  | ZC [6] | 23.204.040.D;<br>23.204.110.B.6;<br>23.204.130.D.3   |
| Medical Practitioners                                                                                                                                                                                                                  | ZC [1]               | ZC [1]  | AUP     | NP      | UP(PH)  | ZC [1]  | AUP*    | UP(PH)  | ZC*    | ZC [5]  | ZC [6] | 23.204.040.D;<br>23.204.110.B.6;<br>23.204.130.D.3   |
| Non-Chartered Financial Institutions                                                                                                                                                                                                   | UP(PH)*              | UP(PH)* | NP      | NP      | NP      | UP(PH)* | UP(PH)* | NP      | NP     | UP(PH)* | UP(PH) | 23.302.070.F<br>23.204.110.B.6                       |

| ZC = Zoning Certificate<br>AUP = Administrative Use Permit<br>UP(PH) = Use Permit<br>NP = Not Permitted<br>-- = Permitted with AUP, see<br>23.204.020(B)<br>[#] = Table Note Permit<br>Requirement<br>* Use-Specific Regulations Apply | COMMERCIAL DISTRICTS |         |         |        |         |         |         |        |         |         |        | USE-SPECIFIC REGULATIONS                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------|---------|--------|---------|---------|---------|--------|---------|---------|--------|----------------------------------------------------|
|                                                                                                                                                                                                                                        | C-C                  | C-U     | C-N     | C-E    | C-NS    | C-SA    | C-T     | C-SO   | C-DMU   | C-W     | C-AC   |                                                    |
| Office, Business and Professional                                                                                                                                                                                                      | ZC [1]               | ZC [1]  | AUP*    | AUP*   | AUP*    | ZC [1]  | AUP*    | AUP*   | ZC*     | ZC [5]  | ZC [6] | 23.204.040.B;<br>23.204.110.B.6;<br>23.204.130.D.3 |
| <b>Food and Alcohol Service, Lodging, Entertainment, and Assembly Uses</b>                                                                                                                                                             |                      |         |         |        |         |         |         |        |         |         |        |                                                    |
| Adult-oriented Business                                                                                                                                                                                                                | UP(PH)*              | UP(PH)* | NP      | NP     | NP      | NP      | NP      | NP     | UP(PH)* | UP(PH)* | NP     | 23.302.070.A                                       |
| Amusement Device Arcade                                                                                                                                                                                                                | UP(PH)*              | UP(PH)* | NP      | NP     | NP      | UP(PH)* | NP      | NP     | UP(PH)* | UP(PH)* | UP(PH) | 23.302.070.B                                       |
| Bar/Cocktail Lounge/Tavern                                                                                                                                                                                                             | UP(PH)*              | UP(PH)* | UP(PH)* | –      | NP      | UP(PH)* | UP(PH)* | NP     | UP(PH)* | UP(PH)* | UP(PH) | 23.204.100.B.3;<br>23.204.110.B.2;<br>23.310       |
| Commercial Recreation Center                                                                                                                                                                                                           | See 23.204.040.A     |         |         |        |         |         |         |        |         |         |        |                                                    |
| Dance/Exercise/Martial Arts/Music Studio                                                                                                                                                                                               | ZC [1]               | ZC [1]  | ZC [2]  | AUP    | AUP [4] | ZC [1]  | ZC      | AUP    | ZC      | ZC [7]  | ZC     |                                                    |
| Entertainment Establishment                                                                                                                                                                                                            | UP(PH)               | UP(PH)  | UP(PH)  | NP     | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH) | UP(PH)  | UP(PH)  | UP(PH) |                                                    |
| Food Service Establishment                                                                                                                                                                                                             | See 23.204.040.E     |         |         |        |         |         |         |        |         |         |        |                                                    |
| Group Class Instruction                                                                                                                                                                                                                | ZC [1]               | ZC [1]  | AUP     | AUP    | AUP*    | ZC [1]  | ZC*     | AUP    | ZC*     | ZC      | ZC     | 23.204.040.B                                       |
| Gym/Health Club                                                                                                                                                                                                                        | See 23.204.040.C     |         |         |        |         |         |         |        |         |         |        |                                                    |
| Hotels, Tourist                                                                                                                                                                                                                        | UP(PH)               | UP(PH)  | UP(PH)  | UP(PH) | UP(PH)  | UP(PH)  | UP(PH)  | UP(PH) | UP(PH)  | UP(PH)  | UP(PH) |                                                    |
| Motels, Tourist                                                                                                                                                                                                                        | UP(PH)               | UP(PH)  | NP      | NP     | NP      | NP      | NP      | NP     | UP(PH)  | UP(PH)  | NP     |                                                    |
| Theater                                                                                                                                                                                                                                | UP(PH)               | UP(PH)  | UP(PH)  | UP(PH) | NP      | UP(PH)  | UP(PH)  | NP     | AUP     | UP(PH)  | UP(PH) |                                                    |

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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--------|--------|--------|--------|---------|-----|--------|--------|----------|--------|------------------------------------------------------|
|                                                                                                                                                                                                                                        | C-C                  | C-U    | C-N    | C-E    | C-NS   | C-SA    | C-T | C-SO   | C-DMU  | C-W      | C-AC   |                                                      |
| <b>Vehicle Service and Sales Uses</b>                                                                                                                                                                                                  |                      |        |        |        |        |         |     |        |        |          |        |                                                      |
| Alternative Fuel Station                                                                                                                                                                                                               | UP(PH)               | UP(PH) | UP(PH) | NP     | UP(PH) | UP(PH)  | NP* | UP(PH) | NP     | AUP*     | UP(PH) | 23.204.110.B.4;<br>23.204.140.B.3                    |
| Electric Vehicle Charging Station                                                                                                                                                                                                      | AUP                  | AUP    | AUP    | AUP    | AUP    | AUP     | AUP | AUP    | AUP    | AUP*     | AUP    |                                                      |
| Gasoline Fuel Stations                                                                                                                                                                                                                 | UP(PH)               | UP(PH) | UP(PH) | NP     | UP(PH) | UP(PH)  | NP* | UP(PH) | NP     | UP(PH)*  | UP(PH) | 23.204.140.B.3                                       |
| Large Vehicle Sales and Rental                                                                                                                                                                                                         | AUP                  | NP     | NP     | NP     | NP     | NP      | NP  | NP     | NP     | AUP* [8] | NP     | 23.204.140.B.3                                       |
| Small Vehicle Sales and Service                                                                                                                                                                                                        | AUP                  | NP     | NP     | NP     | NP     | UP(PH)* | NP  | NP     | UP(PH) | UP(PH)*  | NP     | 23.204.100.B.5;<br>23.204.140.B.3                    |
| Tire Sales and Service                                                                                                                                                                                                                 | UP(PH)               | NP     | NP     | NP     | NP     | NP      | NP  | NP     | NP     | UP(PH)*  | NP     | 23.204.140.B.3                                       |
| Vehicle Parts Store                                                                                                                                                                                                                    | ZC [1]               | NP     | ZC [2] | ZC [2] | ZC [2] | ZC [1]  | ZC  | ZC [2] | NP     | AUP* [8] | ZC     |                                                      |
| Vehicle Rentals                                                                                                                                                                                                                        | AUP                  | NP     | NP     | NP     | NP     | NP      | NP  | NP     | UP(PH) | AUP* [8] | NP     | 23.204.140.B.3                                       |
| Vehicle Repair and Service                                                                                                                                                                                                             | AUP                  | NP     | NP     | NP     | NP     | NP      | NP  | NP     | NP     | AUP* [8] | NP     |                                                      |
| Vehicle Sales, New                                                                                                                                                                                                                     | AUP                  | NP     | NP     | NP     | NP     | UP(PH)* | NP  | NP     | UP(PH) | AUP* [8] | NP     | 23.204.100.B.5<br>23.204.140.B.3                     |
| Vehicle Sales, Used                                                                                                                                                                                                                    | AUP                  | NP     | NP     | NP     | NP     | UP(PH)* | NP  | NP     | UP(PH) | UP(PH)*  | NP     | 23.204.100.B.5;<br>23.204.140.B.3;<br>23.204.140.D.4 |
| Vehicle Wash                                                                                                                                                                                                                           | UP(PH)               | NP     | NP     | NP     | NP     | NP      | NP  | NP     | NP     | UP(PH)*  | NP     | 23.204.140.B.3                                       |
| Vehicle Wrecking                                                                                                                                                                                                                       | NP                   | NP     | NP     | NP     | NP     | NP      | NP  | NP     | NP     | NP       | NP     |                                                      |

| ZC = Zoning Certificate<br>AUP = Administrative Use Permit<br>UP(PH) = Use Permit<br>NP = Not Permitted<br>-- = Permitted with AUP, see<br>23.204.020(B)<br>[#] = Table Note Permit<br>Requirement<br>* Use-Specific Regulations Apply | COMMERCIAL DISTRICTS |        |        |        |        |        |        |        |        |         |        | USE-SPECIFIC REGULATIONS |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--------|--------|--------|--------|--------|--------|--------|--------|---------|--------|--------------------------|
|                                                                                                                                                                                                                                        | C-C                  | C-U    | C-N    | C-E    | C-NS   | C-SA   | C-T    | C-SO   | C-DMU  | C-W     | C-AC   |                          |
| <b>Industrial and Heavy Commercial Uses</b>                                                                                                                                                                                            |                      |        |        |        |        |        |        |        |        |         |        |                          |
| Bus/Cab/Truck/Public Utility Depot                                                                                                                                                                                                     | -                    | -      | -      | -      | -      | -      | -      | -      | -      | -       | -      |                          |
| Commercial Excavation                                                                                                                                                                                                                  | UP(PH)               | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | -      | NP      | UP(PH) |                          |
| Contractors Yard                                                                                                                                                                                                                       | -                    | -      | -      | -      | -      | -      | -      | -      | -      | AUP     | --     |                          |
| Dry Cleaning and Laundry Plant                                                                                                                                                                                                         | UP(PH)               | UP(PH) | NP     | -      | UP(PH) | NP     | NP     | NP     | UP(PH) | NP      | NP     |                          |
| Laboratory                                                                                                                                                                                                                             |                      |        |        |        |        |        |        |        |        |         |        |                          |
| Commercial Physical or Biological                                                                                                                                                                                                      | AUP                  | AUP    | NP     | NP     | NP     | NP     | NP     | NP     | AUP    | NP      | NP     |                          |
| Cannabis Testing                                                                                                                                                                                                                       | AUP                  | AUP    | NP     | NP     | NP     | NP     | NP     | NP     | AUP    | AUP [9] | NP     |                          |
| <b>Manufacturing</b>                                                                                                                                                                                                                   |                      |        |        |        |        |        |        |        |        |         |        |                          |
| Construction Products                                                                                                                                                                                                                  | -                    | -      | -      | -      |        | -      | -      | -      | -      | UP(PH)  | --     |                          |
| Light Manufacturing                                                                                                                                                                                                                    | -                    | -      | -      | -      |        | -      | -      | -      | -      | AUP [8] | --     |                          |
| Pesticides/Herbicides/Fertilizers                                                                                                                                                                                                      | -                    | -      | -      | -      |        | -      | -      | -      | -      | UP(PH)  | --     |                          |
| Petroleum Refining and Products                                                                                                                                                                                                        | -                    | -      | -      | -      |        | -      | -      | -      | -      | UP(PH)  | --     |                          |
| Pharmaceuticals                                                                                                                                                                                                                        | -                    | -      | -      | -      |        | -      | -      | -      | -      | UP(PH)  | --     |                          |
| Primary Production Manufacturing                                                                                                                                                                                                       | -                    | -      | -      | -      | NP     | -      | -      | -      | -      | UP(PH)  | --     |                          |



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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--------|--------|--------|--------|--------|--------|--------|---------|---------|--------|--------------------------|
|                                                                                                                                                                                                                                        | C-C                  | C-U    | C-N    | C-E    | C-NS   | C-SA   | C-T    | C-SO   | C-DMU   | C-W     | C-AC   |                          |
| Semiconductors                                                                                                                                                                                                                         | -                    | -      | -      | -      | NP     | -      | -      | -      | -       | UP(PH)  | --     |                          |
| Material Recovery Enterprise                                                                                                                                                                                                           | -                    | -      | -      | -      | -      | -      | -      | -      | -       | -       | --     |                          |
| Media Production                                                                                                                                                                                                                       | UP(PH)               | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH)* | AUP     | UP(PH) | 23.204.130.B.4           |
| Mini-storage                                                                                                                                                                                                                           | UP(PH)               | NP     | NP     | NP     | NP     | NP     | NP     | -      | UP(PH)  | NP      | NP     |                          |
| Recycled Materials Processing                                                                                                                                                                                                          | -                    | -      | -      | -      | -      | -      | -      | -      | -       | -       | --     |                          |
| Recycling Redemption Center                                                                                                                                                                                                            | AUP                  | AUP    | AUP    | AUP    | AUP    | AUP    | AUP    | AUP    | AUP     | AUP     | AUP    |                          |
| Repair Service, Non-Vehicle                                                                                                                                                                                                            | -                    | -      | -      | -      | -      | -      | -      | -      | -       | AUP     | --     |                          |
| Research and Development                                                                                                                                                                                                               | -                    | -      | -      | -      | -      | -      | -      | -      | -       | --      | --     |                          |
| Services to Buildings and Dwellings                                                                                                                                                                                                    | -                    | -      | -      | -      | -      | -      | -      | -      | -       | AUP     | --     |                          |
| Warehouse                                                                                                                                                                                                                              | UP(PH)               | NP     | NP     | NP     | NP     | NP     | NP     | -      | UP(PH)  | NP      | NP     |                          |
| Warehouse-Based Non-Store Retailer                                                                                                                                                                                                     | -                    | -      | -      | -      | -      | -      | -      | -      | -       | -       | --     |                          |
| Wholesale Trade                                                                                                                                                                                                                        | -                    | -      | -      | -      | --     | -      | -      | -      | -       | AUP [8] | --     |                          |
| <b>Incidental Uses</b>                                                                                                                                                                                                                 |                      |        |        |        |        |        |        |        |         |         |        |                          |
| Amusement Devices                                                                                                                                                                                                                      | AUP*                 | AUP*   | AUP*   | AUP*   | AUP*   | AUP*   | AUP*   | AUP*   | AUP*    | AUP*    | UP(PH) | 23.302.070.B             |
| Alcoholic Beverage Service                                                                                                                                                                                                             | See 23.310           |        |        |        |        |        |        |        |         |         |        |                          |
| Cafeteria, On-Site                                                                                                                                                                                                                     | UP(PH)               | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH)  | AUP     | UP(PH) |                          |

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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--------|---------|---------|--------|--------|--------|--------|---------|--------|--------|--------------------------|
|                                                                                                                                                                                                                                        | C-C                  | C-U    | C-N     | C-E     | C-NS   | C-SA   | C-T    | C-SO   | C-DMU   | C-W    | C-AC   |                          |
| Columbaria                                                                                                                                                                                                                             | See 23.302.070.C     |        |         |         |        |        |        |        |         |        |        |                          |
| Food and Beverage for Immediate Consumption                                                                                                                                                                                            | ZC                   | ZC     | AUP     | UP(PH)  | UP(PH) | ZC     | AUP    | UP(PH) | ZC      | ZC     | ZC     |                          |
| Food Service Establishment                                                                                                                                                                                                             | See 23.302.070.E     |        |         |         |        |        |        |        |         |        |        |                          |
| Live Entertainment                                                                                                                                                                                                                     | See 23.302.020.D     |        |         |         |        |        |        |        |         |        |        |                          |
| Manufacturing                                                                                                                                                                                                                          | AUP                  | AUP    | UP(PH)  | UP(PH)  | NP     | UP(PH) | AUP    | AUP    | AUP     | AUP    | AUP    |                          |
| Retail Sale of Goods Manufactured On-Site                                                                                                                                                                                              | ZC [1]               | ZC [1] | ZC [2]  | ZC [2]  | ZC [2] | ZC [1] | ZC     | ZC [2] | ZC      | AUP    | ZC     |                          |
| Storage of Goods (>25% gross floor area)                                                                                                                                                                                               | AUP*                 | AUP*   | AUP*    | AUP*    | AUP*   | AUP*   | AUP*   | AUP*   | AUP*    | AUP*   | AUP    | 23.302.020.C             |
| Wholesale Activities                                                                                                                                                                                                                   | AUP*                 | AUP*   | UP(PH)* | UP(PH)* | NP     | AUP*   | AUP*   | AUP*   | AUP*    | AUP    | AUP    | 23.204.080.B.3           |
| <b>Other Miscellaneous Uses</b>                                                                                                                                                                                                        |                      |        |         |         |        |        |        |        |         |        |        |                          |
| Art/Craft Studio                                                                                                                                                                                                                       | AUP                  | AUP    | AUP     | AUP     | AUP    | AUP    | AUP    | AUP    | AUP     | AUP    | ZC [6] |                          |
| ATM, Exterior and Attached to Bank                                                                                                                                                                                                     | AUP                  | AUP    | AUP     | UP(PH)  | AUP    | AUP    | AUP    | AUP*   | AUP     | AUP    | AUP    | 23.204.120.B.2           |
| ATM, Interior or Exterior and Not With Bank                                                                                                                                                                                            | UP(PH)               | UP(PH) | UP(PH)  | NP      | UP(PH) | UP(PH) | UP(PH) | NP     | UP(PH)* | AUP    | UP(PH) | 23.204.130.B.2           |
| Circus/Carnival                                                                                                                                                                                                                        | UP(PH)               | UP(PH) | UP(PH)  | UP(PH)  | UP(PH) | UP(PH) | UP(PH) | UP(PH) | UP(PH)  | UP(PH) | UP(PH) |                          |
| Drive-in Uses                                                                                                                                                                                                                          | UP(PH)               | NP     | NP      | NP      | UP(PH) | UP(PH) | NP     | UP(PH) | NP      | NP     | UP(PH) |                          |

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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|------|------|------|------------|------|------|------|------------|---------|------|--------------------------|
|                                                                                                                                                                                                                                        | C-C                                           | C-U  | C-N  | C-E  | C-NS       | C-SA | C-T  | C-SO | C-DMU      | C-W     | C-AC |                          |
| Home Occupations                                                                                                                                                                                                                       | See 23.302.040                                |      |      |      |            |      |      |      |            |         |      |                          |
| Live/Work                                                                                                                                                                                                                              | See 23.312                                    |      |      |      |            |      |      |      |            |         |      |                          |
| Parking Lot/Structure                                                                                                                                                                                                                  | See 23.302.070.G                              |      |      |      |            |      |      |      |            |         |      |                          |
| Public Market, Open Air                                                                                                                                                                                                                | AUP                                           | AUP  | AUP  | AUP  | AUP        | AUP  | AUP  | AUP  | AUP        | UP(PH)  | AUP  |                          |
| Public Market, Enclosed                                                                                                                                                                                                                | AUP                                           | AUP  | AUP  | AUP  | AUP        | AUP  | AUP  | AUP  | AUP        | AUP [9] | AUP  |                          |
| Short-Term Rental                                                                                                                                                                                                                      | See 23.314                                    |      | NP   | NP   | See 23.314 |      |      | NP   | See 23.314 |         | NP   |                          |
| Urban Agriculture, Low-Impact                                                                                                                                                                                                          | ZC*                                           | ZC*  | ZC*  | ZC*  | ZC*        | ZC*  | ZC*  | ZC*  | ZC*        | ZC      | ZC   | 23.318                   |
| Urban Agriculture, High-Impact                                                                                                                                                                                                         | AUP*                                          | AUP* | AUP* | AUP* | AUP*       | AUP* | AUP* | AUP* | AUP*       | AUP     | AUP  | 23.318                   |
| Wireless Telecommunication Facility                                                                                                                                                                                                    | See 23.332--Wireless Communication Facilities |      |      |      |            |      |      |      |            |         |      |                          |

Notes:

- [1] Change of use of floor area over 3,000 square feet requires an AUP.
- [2] Change of use of floor area over 2,000 square feet requires an AUP.
- [3] Requires an AUP for uses 3,500 sq. ft. to 7,500 square feet. Requires a Use Permit for uses more than 7,500 sq. ft.
- [4] Requires a Use Permit if 5,000 sq. ft. or more.
- [5] Requires an AUP for uses 3,000 sq. ft. to 5,000 square feet. Requires a Use Permit for uses more than 5,000 sq. ft.
- [6] Requires an AUP for uses 2,500 sq. ft. or greater or 50 ft. wide or greater on Shattuck, between Ward and Russell; Adeline between Russell and the City boundary; on Ashby, east of Adeline; or on the north side of Ashby, west of Adeline.
- [7] Requires a Use Permit if 7,500 square feet or more.
- [8] Requires a Use Permit if either 5,000 sq. ft. or more of floor area or 10,000 square feet or more of lot area.
- [9] Requires a Use Permit if more than 10,000 sq. ft.

**Section 13.** That Berkeley Municipal Code Section 23.204.060.D.5 Table 23.204-12 is amended as follows:

Table 23.204-12. C-U SETBACK STANDARDS

| LOT LINE & PROJECT CONDITIONS                                                                           | REQUIRED SETBACK                                                                                      |
|---------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| <b>Front</b>                                                                                            |                                                                                                       |
| Ground-floor non-residential uses fronting University Avenue                                            | Average 2 ft.<br>2 ft. at all sidewalk pedestrian entries                                             |
| Ground-floor residential uses fronting University Avenue                                                | Average 2 ft.<br>Maximum 10 ft.[1]                                                                    |
| Fronting a street other than University Avenue and confronting a non-residential district               | No min.                                                                                               |
| <b>Rear</b>                                                                                             |                                                                                                       |
| Lots on south side of University Avenue abutting lot in residential district                            | Average 20 ft. [2] [3]                                                                                |
| Lots on <del>south</del> -north side of University Avenue                                               | See <a href="#">23.204.060.D.5</a> [WG1]--C-U University Commercial District (Solar Access)           |
| All other lots                                                                                          | 10 ft. or 10% of lot depth, whichever is greater                                                      |
| Interior Side                                                                                           | No minimum                                                                                            |
| Street Side                                                                                             | 2 ft. average                                                                                         |
| All setbacks for lots on South Side of University Avenue fronting a street other than University Avenue | As required by <a href="#">23.304.030.C.2</a> --Setbacks (Lots Adjacent to Residential Districts) [4] |

Notes:

- [1] A maximum setback of 10 feet is only permitted for landscaping that enhances the streetscape and provides privacy for residential units on the first floor.
- [2] Rear setback area must be greater than or equal to the width of the lot in feet multiplied by 20 feet.
- [3] See [23.304.030.C.2.b](#) for allowed reductions.
- [4] If a lot fronting a side street is consolidated into a single project with the adjacent University Avenue-fronting lot, the project must conform to the setback standards in this table.

27 Section 14. That Berkeley Municipal Code Section 23.204.080.B Table 23.204-20 is  
 28 amended as follows:  
 29

30 Table 23.204-20. C-E LAND USE NUMBER AND SIZE LIMITATIONS

| USE                                                                     | NUMBER LIMIT | MAXIMUM SIZE  | PERMIT REQUIRED           |
|-------------------------------------------------------------------------|--------------|---------------|---------------------------|
| Art/Craft Shops, Gift/Novelty Shops,<br>Jewelry/Watch Shops             | No limit     | 1,500 sq. ft. | ZC                        |
| Bookstores, Periodical Stands                                           | No limit     | 2,000 sq. ft. | ZC                        |
| Food Service Establishments [1]                                         | 25 total     | No max.       | No permit required<br>AUP |
| Photocopy Stores, Printing, Fax, Magnetic<br>Disk Reproduction Services | No limit     | 1,000 sq. ft. | ZC                        |

31 Notes:

- 32 [1] Excludes food service uses accessory to a food product store. Secondary food service uses  
 33 associated with all other principal uses are subject to limitations in Table 23.204-20.  
 34 [2] Change of use of over 3,000 square feet requires Use Permit.  
 35

36 Section 14. That Berkeley Municipal Code Section 23.204.100.D.2 is amended as  
 37 follows:  
 38

39 2. Modification for Mixed Use and Residential Projects. The ZAB may modify  
 40 development standards in Table 23.204-27, Table 23.204-28, and Table 23.204-  
 41 29, and Table 23.204-30 – excluding FAR – for a mixed-use or residential-only  
 42 project with a Use Permit, upon making one of the following findings:

- 43 (a) The project encourages utilization of public transit and existing off-  
 44 street parking facilities in the area of the proposed building;
- 45 (b) The modification allows consistency with the building setbacks  
 46 existing in the immediate area where a residential building setback would  
 47 not serve a useful purpose;
- 48 (c) The modification facilitates the construction of affordable housing as  
 49 defined by the U.S. Department of Housing and Urban Development  
 50 (HUD) Guidelines; or
- 51 (d) The modification provides consistency with the purposes of the district  
 52 as listed in Section 23.204.100.A (District Purpose).

53 Section 15. That Berkeley Municipal Code Section 23.206.040.A is amended as  
 54 follows:  
 55

56 A. *Art/Craft Studios in the M and ~~MU-LIMM~~ Districts.* Art/craft studios are  
57 allowed in the M and ~~MU-LIMM~~ districts only as workspaces. Live/work is not  
58 permitted.  
59

60 Section 16. That Berkeley Municipal Code Section 23.406.050.F.2 is amended as  
61 follows:  
62

63 2. The ZAB shall deny a ~~Use-Permit-application~~Variance if it determines that it is  
64 unable to make any of the required findings.  
65

66 Section 17: Copies of this Ordinance shall be posted for two days prior to adoption in the  
67 display case located near the walkway in front of the Maudelle Shirek Building, 2134  
68 Martin Luther King Jr. Way. Within 15 days of adoption, copies of this Ordinance shall be  
69 filed at each branch of the Berkeley Public Library and the title shall be published in a  
70 newspaper of general circulation.

**BASELINE ZONING ORDINANCE CONSENT CHANGES MATRIX**

| <b>Topic</b>                               | <b>Description</b>                                                                                                                                              | <b>BZO Location</b> | <b>Existing Location</b> | <b>Rationale for Change</b>                                                                                                        |
|--------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|--------------------------|------------------------------------------------------------------------------------------------------------------------------------|
| <b>23.102 – Introductory Provisions</b>    |                                                                                                                                                                 |                     |                          |                                                                                                                                    |
| Effective Date                             | Statement of when the Ordinance becomes effective                                                                                                               | 23.102.020          | NEW                      | Provide effective date                                                                                                             |
| Authority                                  | States that if state law referenced in Zoning Ordinance is amended, the Zoning Ordinance is deemed amended to reference the amended state law                   | 23.102.030          | NEW                      | Added for clarity                                                                                                                  |
| Laws of Other Agencies                     | Removes statement that uses and structures must comply with regulations and laws of other governmental agencies.                                                | N/A                 | 23B.56.040               | It is unnecessary to state that uses and structures must comply with the law. Removed for clarity                                  |
| Approvals Required                         | Describes approvals required for land uses and development                                                                                                      | 23.102.050 D        | NEW                      | Expands on existing Section 23A.12.010 to reflect current practice                                                                 |
| Conflict with State or Federal Regulations | Explains how to handle conflicts with State and Fed law                                                                                                         | 23.102.070          | NEW                      | Consistent with the Supremacy Clause of the United States Constitution and Article XI, Section 5(a) of the California Constitution |
| Conflicts with Other City Regulations      | New language: “Where the Zoning Ordinance conflicts with other ordinances, resolutions, or regulations of the City of Berkeley, the more restrictive controls.” | 23.102.070.B        | NEW                      | Clarity needed on how to handle conflicting requirements. The Zoning Ordinance does not supersede other City regulations.          |

| Topic                                             | Description                                                                                                                                                                                                                                                                                                                                                                                                                                                | BZO Location | Existing Location        | Rationale for Change                                                                     |
|---------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--------------------------|------------------------------------------------------------------------------------------|
| Conflicts with Private Agreements                 | Adds statement that the City is not responsible for monitoring or enforcing private agreements.                                                                                                                                                                                                                                                                                                                                                            | 23.102.070.C | NEW                      | Clarifies City role in neighbor disputes involving private agreements                    |
| Pending Applications                              | Clarifies status of applications submitted during transition from ZO to BZO                                                                                                                                                                                                                                                                                                                                                                                | 23.102.080 C | NEW                      | Necessary to inform status of applications submitted during transition to BZO            |
| Nonconformities                                   | Defines what is considered nonconforming at the time of BZO adoption                                                                                                                                                                                                                                                                                                                                                                                       | 23.102.080 E | NEW                      | Adds up-front reference to nonconformity chapter alongside other transitional provisions |
| <b>23.104 – Interpreting the Zoning Ordinance</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                            |              |                          |                                                                                          |
| Purpose                                           | States purpose of chapter                                                                                                                                                                                                                                                                                                                                                                                                                                  | 23.104.010   | NEW                      | BZO standard includes purpose statement for each chapter                                 |
| Authority                                         | Clarifies existing Zoning Officer authority                                                                                                                                                                                                                                                                                                                                                                                                                | 23.104.020   | NEW<br>see<br>23B.12.020 | More accurately state ZO's authority                                                     |
| Rules of Interpretation                           | New rules of interpretation relating to: meaning and intent; harmonious construction; lists and examples; references to other regulations, publications, and documents; technical and non-technical terms; terms not defined; public officials and agencies; tenses and plurals. New harmonious construction language replaces existing language: "In case of conflict between any of the provisions of this Ordinance, the most restrictive shall apply." | 23.104.030   | 23A.080.010              | Provides for consistent application of rules                                             |



| Topic                                   | Description                                                                                                                                                                | BZO Location   | Existing Location | Rationale for Change                                                                                                             |
|-----------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------------------|----------------------------------------------------------------------------------------------------------------------------------|
| Zoning Map                              | Clarifies intention to follow city limits                                                                                                                                  | 23.104.050 A 3 | NEW               | Greater clarity to resolve uncertainty in zoning district boundaries                                                             |
| <b>23.106 Rules and Measurement</b>     |                                                                                                                                                                            |                |                   |                                                                                                                                  |
| Chapter Purpose                         | States chapter purpose                                                                                                                                                     | 23.106.010     | NEW               | BZO standard includes purpose statement for each chapter                                                                         |
| Building Separation                     | Defines method of building separation measurement (outer wall to outer wall)                                                                                               | 23.106.080 A   | NEW               | Codifies existing practice and increases clarity                                                                                 |
| <b>23.108 –Zoning Districts and Map</b> |                                                                                                                                                                            |                |                   |                                                                                                                                  |
| Chapter Purpose                         | States chapter purpose                                                                                                                                                     | 23.108.010     | NEW               | BZO standard includes purpose statement for each chapter                                                                         |
| C-C and C-U Districts                   | C-1 zone split into two zones: Corridor Commercial (C-C) and University Avenue Commercial (C-U) district. C-U includes University Avenue Strategic Plan Overlay standards. | 23.108.020.A   | 23A.16.020.A      | Simplifies and clarifies C-1 rules inside and outside of University Avenue Strategic Plan area                                   |
| Purpose of Overlay Zones                | Explains purpose of overlay zones                                                                                                                                          | 23.108.020.C.1 | NEW               | Provide definition; explains that Overlay Zone regulations are in addition to regulations of underlying zone (not a replacement) |

| Topic                                   | Description                                                                                                                                                                                                                                                                                                                                                                                                                              | BZO Location   | Existing Location                                                        | Rationale for Change                                                                                                                                |
|-----------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|--------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| Applicability of Overlay Zone Standards | <p><u>Existing language</u>: “the height, coverage, parking and usable open space shall comply with the provisions of the underlying district.”</p> <p><u>BZO language</u>: “If the overlay zone applies a standard to a property that conflicts with the underlying district, the overlay zone standard governs. If the overlay zone is silent on a standard in the underlying district, the underlying district standard applies.”</p> | 23.108.020.C.3 | 23A.16.030.C                                                             | Corrects statement inconsistent with existing use of overlay zones                                                                                  |
| <b>23.202 – Residential Districts</b>   |                                                                                                                                                                                                                                                                                                                                                                                                                                          |                |                                                                          |                                                                                                                                                     |
| Allowed Land Uses                       | In Residential Districts, unlisted uses are prohibited                                                                                                                                                                                                                                                                                                                                                                                   | 23.202.020.B   | NEW                                                                      | Codifies existing practice, making explicit that if a use is not listed in the Allowed Uses Table for Residential Districts, the use is prohibited. |
| Open Space for ADUs in R-1 District     | Removes requirement for ADUs to include usable open space. All standards for ADUs will be addressed in updated ADU chapter.                                                                                                                                                                                                                                                                                                              | Table 23.202-2 | 23D.16.070.F                                                             | Codifies existing practice consistent with <a href="#">Gov’t Code Section 65852.2</a>                                                               |
| <b>23.206 – Manufacturing Districts</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                          |                |                                                                          |                                                                                                                                                     |
| Industrial Performance Standards        | Removes statements allowing City Manager to establish industrial performance standards.                                                                                                                                                                                                                                                                                                                                                  | 23.206.040.F   | 23E.64.070.E<br>23E.72.070.E<br>23E.76.070.E<br>23E.80.D<br>23E.84.070.H | Language is unnecessary and implies authorization is required for other similar requirements.                                                       |
|                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                          |                |                                                                          |                                                                                                                                                     |

| Topic                                                                   | Description                                                                                                                                                                                                  | BZO Location   | Existing Location             | Rationale for Change                                                                                                         |
|-------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------------------------------|------------------------------------------------------------------------------------------------------------------------------|
| <b>23.302 – Supplemental Use Regulations</b>                            |                                                                                                                                                                                                              |                |                               |                                                                                                                              |
| Warehouse Storage for Retail Use                                        | Allows on-site storage of goods as an accessory use to a primary retail use in all districts where retail is permitted                                                                                       | 23.302.070.J   | NEW                           | Codifies existing practice of allowing retail establishments to store their goods on-site if retail is permitted.            |
| <b>23.304 – General Development Standards</b>                           |                                                                                                                                                                                                              |                |                               |                                                                                                                              |
| Setback Projections – Disabled Access                                   | Allows projections into setbacks to accommodate the disabled with a reasonable accommodations request.                                                                                                       | 23.304.030.B.4 | 23D.04.030.A2                 | Confirm with The Americans with Disabilities Act, and the California Fair Employment and Housing Act                         |
| Building Height Projections – Public Buildings in Residential Districts | Deletes “the height limit for schools, buildings for religious assembly use, hospitals and other public buildings shall not exceed the height limit permitted for that district. This is true for all uses.” | 23.304.050.A   | 23D.04.020.A;<br>23E.04.020.A | Removal of extraneous language.<br><br>Calling out these uses implies other uses may exceed height limit, which is not true. |
| Adeline Corridor Plan                                                   | States that projects in the Adeline Plan Area are subject to mitigation measures in the Adeline Plan FEIR                                                                                                    | 23.304.140.D   | NEW                           | Adds Adeline Corridor Plan to list of existing plans                                                                         |

| Topic                                                        | Description                                                                                                                                                                                                 | BZO Location   | Existing Location | Rationale for Change                                     |
|--------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------------------|----------------------------------------------------------|
| <b>23.310 – Alcohol Beverage Sales and Service</b>           |                                                                                                                                                                                                             |                |                   |                                                          |
| Chapter Purpose                                              | States purpose of chapter                                                                                                                                                                                   | 23.310.010     | NEW               | BZO standard includes purpose statement for each chapter |
| <b>23.320 – Cannabis Uses</b>                                |                                                                                                                                                                                                             |                |                   |                                                          |
| Chapter Purpose                                              | States purpose of chapter                                                                                                                                                                                   | 23.320.010     | NEW               | BZO standard includes purpose statement for each chapter |
| <b>23.324 – Nonconforming Uses, Structures and Buildings</b> |                                                                                                                                                                                                             |                |                   |                                                          |
| Chapter Purpose                                              | States purpose of chapter                                                                                                                                                                                   | 23.324.010     | NEW               | BZO standard includes purpose statement for each chapter |
| <b>23.326 – Demolition and Dwelling Unit Control</b>         |                                                                                                                                                                                                             |                |                   |                                                          |
| Chapter Purpose                                              | States purpose of chapter                                                                                                                                                                                   | 23.326.010     | NEW               | BZO standard includes purpose statement for each chapter |
| <b>23.328 – Inclusionary Housing</b>                         |                                                                                                                                                                                                             |                |                   |                                                          |
| Required Inclusionary Units in Avenues Plan Area             | Deletes “Except as provided in this chapter” from 23C.12.080E, which conflicts with 23C.12.080B: “Within this area, the provisions of this section superseded any inconsistent provisions of this chapter.” | 23.328.070.D.1 | 23C.12.080.E      | Maintain internal consistency                            |
| <b>23.402 – Administrative Responsibility</b>                |                                                                                                                                                                                                             |                |                   |                                                          |
| Chapter Purpose                                              | States purpose of chapter                                                                                                                                                                                   | 23.402.010     | NEW               | BZO standard includes purpose statement for each chapter |

| Topic                                      | Description                                                                                                                    | BZO Location   | Existing Location | Rationale for Change                                                                  |
|--------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|----------------|-------------------|---------------------------------------------------------------------------------------|
| Review and Decision-Making Authority       | Describes purpose of summary table                                                                                             | 23.402.020.A   | NEW               | Description of table                                                                  |
| Review and Decision-Making Authority       | Defines authority roles (Recommend, Decision, Appeal)                                                                          | 23.402.020.B   | NEW               | Explains notation meaning                                                             |
| Planning and Development Department        | Defines duties of Planning and Development Department                                                                          | 23.402.030     | NEW               | Codifies existing role and summarizes responsibilities                                |
| Landmarks Preservation Commission          | Refers reader to BMC Chapter 3.24 for roles and responsibilities of Landmarks Preservation Commission                          | 23.402.050.B   | NEW               | Provides clarity on LPC role                                                          |
| ZAB Responsibilities and Powers            | Provides that City Council may assign additional responsibilities to ZAB                                                       | 23.402.070.C.2 | NEW               | Codifies existing Council authority                                                   |
| City Council                               | Provides that City Council has authority to take actions related to the Zoning Ordinance consistent with existing law          | 23.402.090.C   | NEW               | Codifies existing Council authority                                                   |
| <b>23.404 – Common Permit Requirements</b> |                                                                                                                                |                |                   |                                                                                       |
| Purpose and Applicability                  | States purpose of chapter; clarifies that the chapter applies to all discretionary permits, not just use permits and variances | 23.404.010     | NEW               | BZO standard includes purpose statement for each chapter. Clarifies existing practice |
| Multiple Permit Applications               | Clarifies how applications are handled when they require more than one discretionary permit                                    | 23.402.020.F   | NEW               | Codifies existing practice                                                            |
| Review Timeline                            | Adds statement that City will abide by Permit Streamlining Act                                                                 | 23.404.030.A.3 | NEW               | Codifies existing practice. Recognizes                                                |

| Topic                                | Description                                                                                                                               | BZO Location     | Existing Location | Rationale for Change                                                                                                   |
|--------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|------------------|-------------------|------------------------------------------------------------------------------------------------------------------------|
|                                      |                                                                                                                                           |                  |                   | compliance with state law is required                                                                                  |
| Project Evaluation and Staff Reports | Describes role of staff in reviewing, analyzing and presenting project applications                                                       | 23.404.030.D     | NEW               | Codifies existing practice                                                                                             |
| CEQA                                 | Add statement that City will review projects for CEQA compliance                                                                          | 23.404.030.E     | NEW               | Codifies existing practice. Recognizes that compliance with state law is required                                      |
| Timing of Notice                     | Permits PC or CC to extend notice periods for applications of major significance                                                          | 23.404.040.C.3   | NEW               | Best practice in compliance with <a href="#">Gov't Code Section 65091</a>                                              |
| Zoning Ordinance Amendment Noticing  | Adds notice requirements for Zoning Ordinance Amendments                                                                                  | 23.404.040.C.4   | NEW               | Adds notice requirement for Zoning Ordinance Amendments. New requirement here is the same as for discretionary permits |
| Additional Notice                    | Adds "The Zoning Officer, Planning Commission or City Council may require additional public notice as determined necessary or desirable." | 23.404.040.C.7   | NEW               | Codifies existing practice                                                                                             |
| Public Notice for Design Review      | States that there is no requirement to mail or post notices in advance of a Design Review Committee meeting                               | 23.404.040.D.2.b | NEW               | Codifies existing practice                                                                                             |
| Public Hearings                      | Clarifies that hearings will be conducted consistent with procedures developed by the review authority                                    | 23.404.050.A     | NEW               | Codifies existing practice and recognizes that review authorities are empowered to create their own procedures.        |

| Topic                                       | Description                                                                                                                                                                                                                                    | BZO Location         | Existing Location  | Rationale for Change                                                                              |
|---------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--------------------|---------------------------------------------------------------------------------------------------|
| Time and Place of Hearings                  | Clarifies that meetings will be held at time and place for which notice was given unless there is not a quorum                                                                                                                                 | 23.404.050.B         | NEW                | Codifies legal requirement consistent with <a href="#">Gov't Code Section 65091</a>               |
| CEQA Action                                 | Adds that action on a permit's CEQA determination must be taken before a permit is approved                                                                                                                                                    | 23.404.050.G         | NEW                | Codifies CEQA Guidelines Sections <a href="#">15074</a> and <a href="#">15090</a>                 |
| Exceptions to Protect Constitutional Rights | Allows the City Council as well as ZAB to make exceptions to protect constitutional rights and clarifies that the exception can be made when acting on any permit and is not tied to a Variance                                                | 23.404.050.I         | 23B.44.050         | Best practice. Council needs this ability in addition to ZAB to protect City from legal challenge |
| Payment for Service                         | Adds that applicant shall pay for mediation or conflict resolution services                                                                                                                                                                    | 23.040.050.J.7       | NEW                | Codifies existing practice                                                                        |
| Effective Dates                             | Adds effective dates of Council actions on Zoning Ordinance amendments and legislative matters, and permits, appeals and non-legislative matters.<br><br>Adds effective dates of actions by the Zoning Officer, Design Review Committee or ZAB | 23.404.060.A         | NEW                | Codifies current practice and legal requirements consistent with Gov't Code Section 65853-65857   |
| Expiration of Permit                        | Adds that if a permit is not exercised after one year, it will not lapse if the applicant has made a substantial good faith effort to obtain a building permit and begin construction.                                                         | 23.404.060.C.2.<br>b | 23B.56.100.C<br>&D | Best practice                                                                                     |
| Expiration of Permit                        | Defines a lapsed permit as "void and of no further force and effect," and that a new permit application must be submitted to establish a use or structure.                                                                                     | 23.404.060.C.3       | NEW                | Provides explicit definition of what a lapsed permit means and makes explicit the                 |

| Topic                                        | Description                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | BZO Location   | Existing Location | Rationale for Change                                                                                                                                                |
|----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |                   | requirement to reapply.                                                                                                                                             |
| Permit Revocation - City Council Hearing     | Removes requirement for the City Council hearing must occur within 30 days after the ZAB issued its recommendation.                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 23.404.080.D.2 | 23B.60.050.B      | CC hearing within 30 days of ZAB decision is frequently infeasible. Council can hold hearing "at its discretion."                                                   |
| <b>23.406 – Specific Permit Requirements</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |                   |                                                                                                                                                                     |
| Variations - Eligibility                     | <p><u>Existing Language:</u> "The Board may grant Variations to vary or modify the strict application of any of the regulations or provisions of this Ordinance with reference to the use of property, the height of buildings, the yard setbacks of buildings, the percentage of lot coverage, the lot area requirements, or the parking space requirements of this Ordinance."</p> <p><u>BZO Language:</u> "The ZAB may grant a Variance to allow for deviation from any provision in the Zoning Ordinance related allowed land uses, use-related standards, and development standards."</p> | 23.406.050.B.1 | 23B.44.010        | ZAB should have authority to grant a variance to any use or development-related standard, not just uses, heights, yard setbacks, lot coverage, lot area, or parking |
| Variations – Not Allowed                     | Adds: "A Variance may not be granted to allow deviation from a requirement of the General Plan."                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 23.406.050.C   | N/A               | Codifies state law consistent with <a href="#">Gov't Code Section 65906</a> .                                                                                       |
| Design Review – Changes to Approved Projects | Describes features of minor changes to approved projects that may be approved administratively: "A change that does not involve a feature of the project that was: 1) a specific consideration by the review authority in granting the approval; 2) a condition of approval; or 3) a basis for a finding in the project CEQA determination.                                                                                                                                                                                                                                                    | 23.406.070.N   | N/A               | Codifies current practice                                                                                                                                           |
| Reasonable Accommodations – Review Procedure | <u>Existing Language:</u> "If an application under this chapter is filed without any accompanying application for another approval, permit or entitlement under this title or Title 21, it shall be heard and acted upon at the same time and in the                                                                                                                                                                                                                                                                                                                                           | 23.406.090.E.1 | 23B.52.040.B      | The Americans with Disabilities Act, and the California Fair                                                                                                        |



| Topic                                                     | Description                                                                                                                                                                                                                                                                                                                                                                                                                                          | BZO Location | Existing Location | Rationale for Change                                                                                                                                                            |
|-----------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                           | <p>same manner, and be subject to the same procedures, as the application that would normally be required to modify the provision which is the application seeks to modify, as determined by the Zoning Officer.”</p> <p><u>BZO Language</u>: “For a Reasonable Accommodation application submitted independently from any other planning permit application, the Zoning Officer shall take action within 45 days of receiving the application.”</p> |              |                   | <p>Employment and Housing Act</p> <p>Existing language requires the application to be reviewed in the same manner as a Variance. This conflicts with state and federal law.</p> |
| <b>23.410 – Appeals</b>                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                   |                                                                                                                                                                                 |
| Appeals – Remanded Matters                                | Removes option for prior review authority to reconsider application without a public hearing.                                                                                                                                                                                                                                                                                                                                                        | 23.410.040.G | 23B.32.060.D      | Remanded matters require public hearing                                                                                                                                         |
| <b>23.412 – Zoning Ordinance Amendments</b>               |                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                   |                                                                                                                                                                                 |
| Zoning Ordinance Amendments – Initiation                  | Deletes language to allow for amendments initiated without a public hearing.                                                                                                                                                                                                                                                                                                                                                                         | 23.412.020   | 23A.20.020.C      | Existing language conflicts with <a href="#">Gov’t Code Section 65853-65857</a>                                                                                                 |
| Zoning Ordinance Amendments – Planning Commission Hearing | Removes requirement to hold Planning Commission hearing within 30 days of initiation.                                                                                                                                                                                                                                                                                                                                                                | 23.412.040.A | 23A.20.030.A      | CC hearing within 30 days of PC decision is frequently infeasible. Council can hold hearing consistent with Public Notice section.                                              |
| Zoning Ordinance Amendments – Effect of Planning          | Deletes language that uses or structures not yet established must conform to Planning Commission recommendation before Council approval, when amendments become effective only after Council adoption.                                                                                                                                                                                                                                               | 23.412.040.C | 23A.20.050.B      | New regulations can only take effect after Council adoption.                                                                                                                    |

| Topic                                              | Description                                                                                                                                                                          | BZO Location | Existing Location | Rationale for Change                                                                                                                               |
|----------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|
| Commission Recommendation                          |                                                                                                                                                                                      |              |                   |                                                                                                                                                    |
| Zoning Ordinance Amendments – City Council Hearing | Removes language requiring the Planning Commission recommendation to be forwarded to the Council within 30 days and consideration by Council within 60 days for Commission decision. | 23.412.050.A | 23A.20.040        | CC hearing within 60 days of PC decision is frequently -infeasible. Council can hold hearing consistent with Public Hearings and Decision section. |
| Zoning Ordinance Amendments – City Council Action  | Removes option for Council to act on amendment without a public hearing.                                                                                                             | 23.412.050.A | 23A.20.060.A &B   | Conflicts with <a href="#">Gov't Code Section 65853-65857</a>                                                                                      |
| Zoning Ordinance Amendments – Effective Date       | Removes language about “more restrictive” amendments going into effective immediately upon adoption of ordinance.                                                                    | 23.412.050.C | 23A.20.070        | Conflicts with <a href="#">Gov't Code Section 65853-65857</a>                                                                                      |
| Zoning Ordinance Amendments – Findings             | Adds findings for Zoning Ordinance amendments                                                                                                                                        | 23.412.060   | N/A               | Best Practice.                                                                                                                                     |
| <b>23.502 – Glossary</b>                           |                                                                                                                                                                                      |              |                   |                                                                                                                                                    |
| Defined Terms                                      | Adds definitions to undefined terms in existing Zoning Ordinance                                                                                                                     | 23.502       | 23F.04            | Best practice.                                                                                                                                     |



# PLANNING COMMISSION

## Notice of Public Hearing

### Wednesday, October 19, 2022

#### Zoning Ordinance Amendments that Address Technical Edits and Corrections to the Berkeley Municipal Code Sections 23.108.020 (Zoning Districts); 23.202.020 (Allowed Land Uses); 23.202.140 (R-SMU District); 23.202.150 (R-BMU District); 23.204.020 (Allowed Uses); 23.204.060 (C-U District); 23.204.080 (C-E District); 23.204.100 (C-SA District); 23.206.040 (Use-Specific Regulations), 23.326.070 (Demolitions of Non-Residential Buildings); and 23.406.050 (Variances)

The Planning Commission of the City of Berkeley will hold a public hearing on the above matter, pursuant to Zoning Ordinance Section 23.412, on **Wednesday, October 19, 2022 at 7:00 p.m.** **The hearing will be conducted via Zoom** – see the Agenda for meeting details. The agenda will be posted on the Planning Commission website (<https://www.cityofberkeley.info/PC>) no later than 5pm on Friday, October 14, 2022.

**PUBLIC ADVISORY:** This meeting will be conducted exclusively through videoconference and teleconference. Pursuant to Government Code Section 54953(e) and the state declared emergency, this meeting of the Planning Commission will be conducted exclusively through teleconference and Zoom videoconference. The COVID-19 state of emergency continues to directly impact the ability of the members to meet safely in person and presents imminent risks to the health of attendees. Therefore, no physical meeting location will be available

**PROJECT DESCRIPTION:** On October 12, 2021, the City Council passed Ordinance No. 7,787-NS, which repealed the then-existing Title 23 of the Berkeley Municipal Code and zoning maps (“the old Zoning Ordinance”) and adopted a new Title 23 of the Berkeley Municipal Code and zoning maps (“the new Zoning Ordinance”). The new Zoning Ordinance became effective December 1, 2021.

As part of City Council’s approval action, staff was directed to regularly return to City Council with any required amendments to the new Zoning Ordinance to aid in clarity, fix mistakes in transcription, or correct unintentional errors discovered as part of the transition from the old to the new Zoning Ordinance. The public hearing will consider a set of amendments to the new Zoning Ordinance that address these errors. No substantive changes to planning policy are included in this set of amendments.

#### **PUBLIC COMMENT & FURTHER INFORMATION**

All persons are welcome to attend the virtual hearing and will be given an opportunity to address the Commission. Comments may be made verbally at the public hearing and/or in writing before the

Zoning Ordinance Amendments  
Page 2 of 2NOTICE OF PUBLIC HEARING  
September 30 & October 7, 2022

hearing. Written comments must be directed to:

Zoe Covello  
Planning Commission Clerk  
Email: [zcovello@CityofBerkeley.info](mailto:zcovello@CityofBerkeley.info)

City of Berkeley, Land Use Planning Division  
1947 Center Street, 2<sup>nd</sup> Floor  
Berkeley, CA 94704

Correspondence received by **12 pm on Monday, October 10th, 2022**, will be included as a Communication in the agenda packet. Correspondence received after this deadline will be conveyed to the Commission and the public in the following manner:

- Correspondence received by **12pm on Tuesday, October 18<sup>th</sup>, 2022** will be included in a Supplemental Packet, which will be posted to the online agenda as a Late Communication one day before the public hearing.
- Correspondence received by 5pm one day before this public hearing, will be included in a second Supplemental Packet, which will be posted to the online agenda as a Late Communication by 5pm on the day of the public hearing.
- Correspondence received after 5pm one day before this public hearing will be saved as part of the public record.

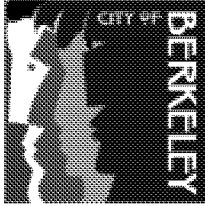
Note: It will not be possible to submit written comments at the meeting.

### **COMMUNICATION ACCESS**

To request a meeting agenda in large print, Braille, or on audiocassette, or to request a sign language interpreter for the meeting, call (510) 981-7410 (voice) or 981-6903 (TDD). Notice of at least five (5) business days will ensure availability. All materials will be made available via the Planning Commission agenda page online at <https://www.cityofberkeley.info/PC/>.

### **FURTHER INFORMATION**

Questions should be directed to Justin Horner, at (510) 981-7476 or [jhorner@cityofberkeley.info](mailto:jhorner@cityofberkeley.info). Current and past agendas are available on the City of Berkeley website at: <https://www.cityofberkeley.info/PC/>



Office of the City Manager

ACTION CALENDAR  
January 26, 2016

To: Honorable Mayor and Members of the City Council  
From: *DWR* Dee Williams-Ridley, Interim City Manager  
Submitted by: Eric Angstadt, Director, Planning & Development  
Subject: Customer Service Improvements to Land Use Permit Process

RECOMMENDATION

Direct staff to make structural improvements to the Zoning Ordinance, communication improvements to better explain complex technical and procedural elements to the public, and organizational improvements to the Land Use Planning Division; and authorize the issuance of a request for proposals (RFP) for the selection of consultants to make structural improvements to the Zoning Ordinance and develop graphic communication elements in an amount not to exceed \$300,000.

SUMMARY

This staff report describes the impact of the City of Berkeley's Zoning Ordinance and practices on land use applications, including the staffing and processing time required to conform to existing City regulations, and makes recommendations for future revisions with the goal of streamlining the process and better configuring City resources for the benefit of the public.

FISCAL IMPACTS OF RECOMMENDATION

If authorized, the hiring of a consultant to make structural improvements to the Zoning Ordinance and develop graphic communication elements would be a one-time cost of \$300,000 which would come from the Permit Service Center fund balance.

Budget Code:

833-8502-463.30-38..... \$300,000

In the event that future contract awards exceed the existing budget for Planning contracts in the current fiscal year, a request for additional appropriations will be submitted as part of a subsequent amendment to the Annual Appropriations Ordinance.

## CURRENT SITUATION AND ITS EFFECTS

### LAND USE PERMIT PROCESS

The Berkeley Zoning Ordinance is extremely complex and requires some type of discretionary review for most land use related activities, whether new construction, expansion or alteration of existing buildings, or establishment or change of land use. The complexity lies in the various requirements that trigger discretionary review being located in discrete sections of the Ordinance that are frequently not identified by applicants, and only discovered once staff has conducted a detailed review of the application.

This general complexity makes it difficult for staff to apply land use regulations consistently over time, which is especially true given the number of new personnel. As a result of vacancies and the addition of new positions, over 50% of the planners in the Land Use Division have a tenure of less than two years. It is also difficult to effectively educate the public regarding the many unique aspects of the Ordinance that result in more extensive submittal requirements and longer approval procedures than comparable cities.

Berkeley is a unique city. However, the Zoning Ordinance takes a "one size fits all" approach in regard to the prescribed processes for making discretionary decisions. There is also no differentiation between the operational impacts associated with a use from the environmental impacts associated with design. As a result, the establishment of a new use or change of an existing use must be processed the same way as the construction of a new building. Despite the numerous and complicated provisions in the Ordinance that trigger discretionary review, there are only two processes, Use Permit and Administrative Use Permit, to address the entire range of land use activities. The current structure of the Ordinance does not allow for any deviation from these two processes if the associated triggers are met.

The impact of having only two processes is that the level of review is often disproportionate to the potential land use impacts, and substantial time is added to the application review and approval process, with lead time required for public noticing and statutory timelines for appeals. Highly discretionary processes are also labor intensive, with staff required to prepare mailings, post properties, review and analyze applications, and document the analysis supporting the decision or recommendation. All of this translates into higher fees and longer timelines for applicants.

### COMMUNICATION

There is an ongoing effort to update the entire City of Berkeley website; however, there is an urgency to update web-based information for the Land Use Planning Division due to the need to provide more self-service options for the general public. The existing web pages for the Land Use Planning Division are excessively text-based and poorly organized. In addition, the lack of clarity in the Zoning Ordinance makes it very difficult

**Page 6 of 11**

Customer Service Improvements to Land Use Permit Process

ACTION CALENDAR  
January 26, 2016

for the general public to look up information on their own, and this generates an extremely high volume of inquiries in all forms, whether in person, by telephone, or via email.

**STAFFING**

The current organization of the Land Use Planning Division is very flat and lacks positions at the paraprofessional level (such as a Planning Technician) and project manager level (Senior Planner). In addition, customer service duties, including staffing the Zoning Counter, answering phone calls, and responding to email inquiries, are distributed among all staff from the Land Use Planning Manager to Office Specialist II. While it is beneficial for all staff to be cross-trained in all aspects of the Division, requiring that all staff participate in every function is not efficient and results in delayed and sometimes inconsistent responses to customers, and disrupts the review of land use applications.

**BACKGROUND****LAND USE PERMIT PROCESS**

The following table compares the number of discretionary permits and associated appeals during 2015 in the City of Berkeley with those in other local cities. Permits are grouped into minor (similar to an Administrative Use Permit) and major (similar to a Use Permit) categories. Other than Piedmont and Oakland, which are significantly different in size, no other municipalities approached Berkeley in the number of discretionary permits and associated appeals.

| <b>Land Use Application Comparison for 2015</b> |                                                                                                                               |                                    |
|-------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| <b>City</b>                                     | <b>Result</b>                                                                                                                 | <b>Population*</b>                 |
| Berkeley                                        | 75 Major (UPs)/4 appeals<br>161 Minor (AUPs)/3 appeals<br><br>Historically –<br>62.5 UPs/5 appeals<br>160.75 AUPs/8.5 appeals | 118,853<br>0.002<br>permits/capita |
| Albany                                          | 13 Major/2 appeals (both withdrawn)<br>1 Minor<br>Historically – 1 to 2 appeals/year<br>Fee: \$577                            | 19,488<br>0.0007<br>permits/capita |
| Dublin                                          | 3 Major<br>3 Minor<br>No appeals<br>Fee: \$200 general public, time and materials for applicant                               | 54,695<br>0.0001<br>permits/capita |
| Fremont                                         | 11 Major/1 Appeal                                                                                                             | 228,758                            |

|                                             |                                                                                                                                                                                                            |                                     |
|---------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
|                                             | 29 Minor<br>Fee: Full cost recovery by appellant (typically \$5,900)                                                                                                                                       | 0.0002<br>permits/capita            |
| Oakland                                     | 89 Major (variance, design review, conditional use permit issued by Planning Commission)/5 appeals<br>275 Minor (variance, design review, conditional use permit issued by Zoning Administrator)/4 appeals | 413,775<br>0.0009<br>permits/capita |
| Piedmont                                    | 400 Applications (all Single-Family)/3 Appeals<br>Historically – 1 to 2 appeals/yr<br>Fee: \$630                                                                                                           | 11,236<br>0.004<br>permits/capita   |
| *American Community Survey estimate, 7/1/14 |                                                                                                                                                                                                            |                                     |

Additional analysis of land use decisions shows that of the last four Fiscal Years (FY), FY2012 through FY2015, there were 274 Use Permits (UPs) acted upon. Of those, 25 were appealed of which two were withdrawn resulting in an appeal rate of 8.3%. For those appeals that went to hearing, the staff recommendation was affirmed 84% of the time by ZAB and 89% by City Council. Looking at the total number of UPs processed over the last four fiscal years, the City Council disagreed with the staff recommendation only twice (0.73%).

The UP project types most frequently appealed were new dwellings in the R-1H, R-2A and R-3 districts (25%), and new mixed use buildings in the C-DMU Buffer, C-DMU Core, and R-SMU districts (13%). The zoning districts with the most appealed UPs were R-1H (17%), followed by the R-3 district (13%). The most frequent appeal claims were: Failure to make required findings (13%), Failure to comply with procedural requirements (13%), Loss of sunlight and/or views (12%) and Traffic (10%).

Similar analysis was conducted for Administrative Use Permits (AUPs). In the last four fiscal years, 532 AUPs were processed. Of those, 33 appeals were filed; however, eight were withdrawn, resulting in an appeal rate of 4.7%. Of the remaining 25 appeals that went to hearing, ZAB upheld the staff recommendation 95% of the time. Eight ZAB decisions were appealed to City Council, and in those cases the staff recommendation was upheld 100% of the time. When analyzing all of the 532 AUPs processed over the last four fiscal years, the staff recommendation was overturned only once (0.2%).

The AUP project type most frequently appealed was major residential addition (33%). The zoning districts with the most appealed AUPs were R-1H (33%), followed by R-2 (24%). The most frequent appeal claims were: Shadow impacts and/or loss of sunlight/views (27%), Parking (15%), and Noise (12%).

Cross-referencing the zoning district with type of project and basis for appeal demonstrates that the majority of appeals are related to the design of new residences or major residential additions in the R-1H zoning district. The R-1 zone is a single-family zoning district which requires a minimum lot size of 5,000 square feet. As such, the use



**Page 8 of 11**

Customer Service Improvements to Land Use Permit Process

ACTION CALENDAR  
January 26, 2016

of property for single-family residential purposes is not in question. Rather, the question is one of the design of new or modified homes, and whether the purposes of the district are met by a proposed design. This would suggest that a design review process based on design guidelines developed specifically for single-family homes is the more appropriate mechanism to assure that the purposes of the district are met.

**COMMUNICATION**

Graphically enhanced FAQ sheets and user guides are commonly used to help educate the general public regarding complex and/or technical subject areas, such as land use regulation. Many zoning related topics, such as how to measure building height, are often difficult to describe with text alone.

Complex land use topics are more easily understood when presented in a combination of text and graphics. Processes can be better understood when described in an annotated flow chart. Most zoning definitions can also benefit from figures and diagrams to more clearly convey complex and technical issues.

**STAFFING**

The Land Use Planning Division is currently comprised of 17 planners, four administrative staff, and six interns. The planners are distributed among the follow job classifications: 1 Land Use Planning Manager, 5 Principal Planners, 1 Senior Planner, 6 Associate Planners, and 4 Assistant Planners. With the exception of the Land Use Planning Manager and Principal Planners, all planners participate in the staffing of the Zoning Counter and respond to emails and phone calls from the general public. All planners with the exception of the Land Use Planning Manager and two Principal Planners in the Policy and Special Projects Team also serve as project planners.

Similar to the "one size fits all" approach which describes the existing land use processes, the historic practice of requiring planners to be a master of all disciplines does not allow the development of special skills. Land use regulation is a rapidly evolving field that is very sensitive to changes in technology. In addition, federal and state regulations are constantly changing and can dictate how local jurisdiction may or must regulate certain uses. The continuing education required to stay abreast of the full range of such changes is often beyond the ability of any one individual. The organization of the Land Use Planning Division should be modified in acknowledgement of these requirements.

**ENVIRONMENTAL SUSTAINABILITY**

There are no identifiable environmental effects or opportunities associated with the subject of this report.

**Page 9 of 11**

Customer Service Improvements to Land Use Permit Process

ACTION CALENDAR  
January 26, 2016RATIONALE FOR RECOMMENDATION**LAND USE PERMIT PROCESS**

The analyses of land use application data support the proposal to make changes to existing processes, such as introducing a minor use permit and staff-level single-family residential design review. Such structural modifications to the Zoning Ordinance would more closely align the regulation of land use with historic trends, and result in a level of discretionary review more commensurate with the documented concerns of the community. Right-sizing processes would also save the public time and money.

**COMMUNICATION**

Providing illustrations in addition to text assures more consistent interpretation of complicated regulations. Processes also benefit from graphics, such as flow charts, that highlight the various actors, decision-making bodies, and timing of critical decision points. These graphic communication tools can be developed in advance of the city-wide website update, and then used in conjunction with that project.

**STAFFING**

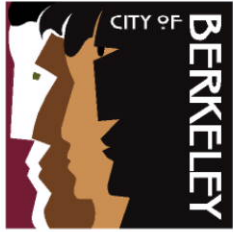
The requirements and expectations for responding to customer inquiries and managing projects are often in conflict, and staff struggle to achieve an appropriate balance. Reorganizing the Division by adding Senior Planner positions devoted to project management and creating a Planning Technician job classification that would be primarily responsible for responding to customer inquiries would significantly reduce the current conflicts. Planners would have more time to focus on increasingly complex land use applications, and the general public would receive more timely responses to their questions. Staff specialized in communications and whose focus is customer service would be more effective at explaining the proposed structural changes to the Zoning Ordinance, how they are applied, and how the public is involved.

ALTERNATIVE ACTIONS CONSIDERED

The Council may affirm, modify or decline to provide direction to staff.

CONTACT PERSON

Eric Angstadt, Director, Planning and Development, 981-7410



Office of the City Manager

ACTION CALENDAR  
January 26, 2016

To: Honorable Mayor and Members of the City Council  
From: *DWR* Dee Williams-Ridley, Interim City Manager  
Submitted by: Eric Angstadt, Director, Planning & Development  
Subject: Customer Service Improvements to Land Use Permit Process

RECOMMENDATION

Direct staff to make structural improvements to the Zoning Ordinance, communication improvements to better explain complex technical and procedural elements to the public, and organizational improvements to the Land Use Planning Division; and authorize the issuance of a request for proposals (RFP) for the selection of consultants to make structural improvements to the Zoning Ordinance and develop graphic communication elements in an amount not to exceed \$300,000.

SUMMARY

This staff report describes the impact of the City of Berkeley's Zoning Ordinance and practices on land use applications, including the staffing and processing time required to conform to existing City regulations, and makes recommendations for future revisions with the goal of streamlining the process and better configuring City resources for the benefit of the public.

FISCAL IMPACTS OF RECOMMENDATION

If authorized, the hiring of a consultant to make structural improvements to the Zoning Ordinance and develop graphic communication elements would be a one-time cost of \$300,000 which would come from the Permit Service Center fund balance.

Budget Code:  
833-8502-463.30-38..... \$300,000

In the event that future contract awards exceed the existing budget for Planning contracts in the current fiscal year, a request for additional appropriations will be submitted as part of a subsequent amendment to the Annual Appropriations Ordinance.

## CURRENT SITUATION AND ITS EFFECTS

### LAND USE PERMIT PROCESS

The Berkeley Zoning Ordinance is extremely complex and requires some type of discretionary review for most land use related activities, whether new construction, expansion or alteration of existing buildings, or establishment or change of land use. The complexity lies in the various requirements that trigger discretionary review being located in discrete sections of the Ordinance that are frequently not identified by applicants, and only discovered once staff has conducted a detailed review of the application.

This general complexity makes it difficult for staff to apply land use regulations consistently over time, which is especially true given the number of new personnel. As a result of vacancies and the addition of new positions, over 50% of the planners in the Land Use Division have a tenure of less than two years. It is also difficult to effectively educate the public regarding the many unique aspects of the Ordinance that result in more extensive submittal requirements and longer approval procedures than comparable cities.

Berkeley is a unique city. However, the Zoning Ordinance takes a “one size fits all” approach in regard to the prescribed processes for making discretionary decisions. There is also no differentiation between the operational impacts associated with a use from the environmental impacts associated with design. As a result, the establishment of a new use or change of an existing use must be processed the same way as the construction of a new building. Despite the numerous and complicated provisions in the Ordinance that trigger discretionary review, there are only two processes, Use Permit and Administrative Use Permit, to address the entire range of land use activities. The current structure of the Ordinance does not allow for any deviation from these two processes if the associated triggers are met.

The impact of having only two processes is that the level of review is often disproportionate to the potential land use impacts, and substantial time is added to the application review and approval process, with lead time required for public noticing and statutory timelines for appeals. Highly discretionary processes are also labor intensive, with staff required to prepare mailings, post properties, review and analyze applications, and document the analysis supporting the decision or recommendation. All of this translates into higher fees and longer timelines for applicants.

### COMMUNICATION

There is an ongoing effort to update the entire City of Berkeley website; however, there is an urgency to update web-based information for the Land Use Planning Division due to the need to provide more self-service options for the general public. The existing web pages for the Land Use Planning Division are excessively text-based and poorly organized. In addition, the lack of clarity in the Zoning Ordinance makes it very difficult



for the general public to look up information on their own, and this generates an extremely high volume of inquiries in all forms, whether in person, by telephone, or via email.

### STAFFING

The current organization of the Land Use Planning Division is very flat and lacks positions at the paraprofessional level (such as a Planning Technician) and project manager level (Senior Planner). In addition, customer service duties, including staffing the Zoning Counter, answering phone calls, and responding to email inquiries, are distributed among all staff from the Land Use Planning Manager to Office Specialist II. While it is beneficial for all staff to be cross-trained in all aspects of the Division, requiring that all staff participate in every function is not efficient and results in delayed and sometimes inconsistent responses to customers, and disrupts the review of land use applications.

### BACKGROUND

#### LAND USE PERMIT PROCESS

The following table compares the number of discretionary permits and associated appeals during 2015 in the City of Berkeley with those in other local cities. Permits are grouped into minor (similar to an Administrative Use Permit) and major (similar to a Use Permit) categories. Other than Piedmont and Oakland, which are significantly different in size, no other municipalities approached Berkeley in the number of discretionary permits and associated appeals.

| <b>Land Use Application Comparison for 2015</b> |                                                                                                                               |                                    |
|-------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| <b>City</b>                                     | <b>Result</b>                                                                                                                 | <b>Population*</b>                 |
| Berkeley                                        | 75 Major (UPs)/4 appeals<br>161 Minor (AUPs)/3 appeals<br><br>Historically –<br>62.5 UPs/5 appeals<br>160.75 AUPs/8.5 appeals | 118,853<br>0.002<br>permits/capita |
| Albany                                          | 13 Major/2 appeals (both withdrawn)<br>1 Minor<br>Historically – 1 to 2 appeals/year<br>Fee: \$577                            | 19,488<br>0.0007<br>permits/capita |
| Dublin                                          | 3 Major<br>3 Minor<br>No appeals<br>Fee: \$200 general public, time and materials for applicant                               | 54,695<br>0.0001<br>permits/capita |
| Fremont                                         | 11 Major/1 Appeal                                                                                                             | 228,758                            |

|                                             |                                                                                                                                                                                                            |                                     |
|---------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
|                                             | 29 Minor<br>Fee: Full cost recovery by appellant (typically \$5,900)                                                                                                                                       | 0.0002<br>permits/capita            |
| Oakland                                     | 89 Major (variance, design review, conditional use permit issued by Planning Commission)/5 appeals<br>275 Minor (variance, design review, conditional use permit issued by Zoning Administrator)/4 appeals | 413,775<br>0.0009<br>permits/capita |
| Piedmont                                    | 400 Applications (all Single-Family)/3 Appeals<br>Historically – 1 to 2 appeals/yr<br>Fee: \$630                                                                                                           | 11,236<br>0.004<br>permits/capita   |
| *American Community Survey estimate, 7/1/14 |                                                                                                                                                                                                            |                                     |

Additional analysis of land use decisions shows that of the last four Fiscal Years (FY), FY2012 through FY2015, there were 274 Use Permits (UPs) acted upon. Of those, 25 were appealed of which two were withdrawn resulting in an appeal rate of 8.3%. For those appeals that went to hearing, the staff recommendation was affirmed 84% of the time by ZAB and 89% by City Council. Looking at the total number of UPs processed over the last four fiscal years, the City Council disagreed with the staff recommendation only twice (0.73%).

The UP project types most frequently appealed were new dwellings in the R-1H, R-2A and R-3 districts (25%), and new mixed use buildings in the C-DMU Buffer, C-DMU Core, and R-SMU districts (13%). The zoning districts with the most appealed UPs were R-1H (17%), followed by the R-3 district (13%). The most frequent appeal claims were: Failure to make required findings (13%), Failure to comply with procedural requirements (13%), Loss of sunlight and/or views (12%) and Traffic (10%).

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Cross-referencing the zoning district with type of project and basis for appeal demonstrates that the majority of appeals are related to the design of new residences or major residential additions in the R-1H zoning district. The R-1 zone is a single-family zoning district which requires a minimum lot size of 5,000 square feet. As such, the use



of property for single-family residential purposes is not in question. Rather, the question is one of the design of new or modified homes, and whether the purposes of the district are met by a proposed design. This would suggest that a design review process based on design guidelines developed specifically for single-family homes is the more appropriate mechanism to assure that the purposes of the district are met.

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#### ENVIRONMENTAL SUSTAINABILITY

There are no identifiable environmental effects or opportunities associated with the subject of this report.

## RATIONALE FOR RECOMMENDATION

### LAND USE PERMIT PROCESS

The analyses of land use application data support the proposal to make changes to existing processes, such as introducing a minor use permit and staff-level single-family residential design review. Such structural modifications to the Zoning Ordinance would more closely align the regulation of land use with historic trends, and result in a level of discretionary review more commensurate with the documented concerns of the community. Right-sizing processes would also save the public time and money.

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### ALTERNATIVE ACTIONS CONSIDERED

The Council may affirm, modify or decline to provide direction to staff.

### CONTACT PERSON

Eric Angstadt, Director, Planning and Development, 981-7410



**NOTICE OF PUBLIC HEARING – BERKELEY CITY COUNCIL**

**Zoning Ordinance Amendments that Address Technical Edits and Corrections to the Berkeley Municipal Code Sections 23.108.020 (Zoning Districts); 23.202.020 (Allowed Land Uses); 23.202.140 (R-SMU District); 23.202.150 (R-BMU District); 23.204.020 (Allowed Uses); 23.204.060 (C-U District); 23.204.080 (C-E District); 23.204.100 (C-SA District); 23.206.040 (Use-Specific Regulations), 23.326.070 (Demolitions of Non-Residential Buildings); 23.406.050 (Variances); and 23.502.020 (Glossary)**

**The public may participate in this hearing by remote video or in-person.**

The Department of Planning and Development is proposing amendments to the Zoning Ordinance. The hearing will be held on December 13, 2022 at 6:00 p.m. On October 12, 2021, the City Council passed Ordinance No. 7,787-NS, which repealed the then-existing Title 23 of the Berkeley Municipal Code and zoning maps (“the old Zoning Ordinance”) and adopted a new Title 23 of the Berkeley Municipal Code and zoning maps (“the new Zoning Ordinance”). The new Zoning Ordinance became effective December 1, 2021.

As part of City Council’s approval action, staff was directed to regularly return to City Council with any required amendments to the new Zoning Ordinance to aid in clarity, fix mistakes in transcription, or correct unintentional errors discovered as part of the transition from the old to the new Zoning Ordinance. The public hearing will consider a set of amendments to the new Zoning Ordinance that address these errors. No substantive changes to planning policy are included in this set of amendments. The Planning Commission unanimously recommended adoption of the proposed amendments.

The proposed amendments are exempt from the California Environmental Quality Act (CEQA) under CEQA Guidelines Sec.15061(b)(3). The proposed amendments are only text changes to clarify and correct the Berkeley Municipal Code and, therefore, there is no possibility of a significant effect on the environment.

The hearing will be held on **Tuesday, December 13, 2022 at 6:00 PM.** at the Berkeley Unified School District Board Room located at 1231 Addison Street, Berkeley CA 94702.

A copy of the agenda material for this hearing will be available on the City’s website at [www.CityofBerkeley.info](http://www.CityofBerkeley.info) as of **December 1, 2022. Once posted, the agenda for this meeting will include a link for public participation using Zoom video technology, as well as any health and safety requirements for in-person attendance.**

For further information, please contact Justin Horner, Associate Planner, at 510-981-7476.

Written comments should be mailed directly to the City Clerk, 2180 Milvia Street, Berkeley, CA 94704, or emailed to [council@cityofberkeley.info](mailto:council@cityofberkeley.info) in order to ensure delivery to all Councilmembers and inclusion in the agenda packet.

Communications to the Berkeley City Council are public record and will become part of the City's electronic records, which are accessible through the City's website. **Please note: e-mail addresses, names, addresses, and other contact information are not required, but if included in any communication to the City Council, will become part of the public record.** If you do not want your e-mail address or any other contact information to be made public, you may deliver communications via U.S. Postal Service. If you do not want your contact information included in the public record, please do not include that information in your communication. Please contact the City Clerk at 981-6900 or [clerk@cityofberkeley.info](mailto:clerk@cityofberkeley.info) for further information.

**Published:** December 2, 2022 – The Berkeley Voice  
Per California Government Code Sections 65856(a) and 65090.

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I hereby certify that the Notice for this Public Hearing of the Berkeley City Council was posted at the display case located near the walkway in front of the Maudelle Shirek Building, 2134 Martin Luther King Jr. Way, as well as on the City's website, on December 1, 2022.

Mark Numainville, City Clerk



Office of the City Manager

ACTION CALENDAR
December 13, 2022

To: Honorable Mayor and Members of the City Council
 From: Dee Williams-Ridley, City Manager
 Submitted by: Sharon Friedrichsen, Budget Manager
 Subject: FY 2022 Preliminary Year-End Status

INTRODUCTION

This budget update presents the preliminary Fiscal Year 2022 (FY 2022) Year-End financial status. The FY 2022 Year-End budget summary covers the period starting July 1, 2021, through June 30, 2022 (FY 2022) and is based on unaudited estimated actuals. The information is considered preliminary and subject to change as the citywide financial statements and annual comprehensive financial report are being finalized.

CURRENT SITUATION AND ITS EFFECTS**FY 2022 Year-End Summary**General Fund

On June 29, 2021, the City Council adopted the FY 2022 budget (Adopted Budget).¹ The FY 2022 adopted General Fund revenues totaled \$236.1 million. The unaudited estimated actual FY 2022 year-end General Fund revenues generated \$284.5 million.

The FY 2022 Adopted Budget included General Fund expenditures totaling \$234.8 million. During the fiscal year, two Adjustments to the Appropriation Ordinance occurred totaling \$32 million, which increased the total FY 2022 General Fund expenditure budget to \$266.7 million². As part of the FY 2022 year-end process, encumbrances, or planned expenditures for services and goods that did not materialize by June 30, 2022, are carried forward to the next fiscal year. This process results in two outcomes: (1) the FY 2022 year-end expenditure budget is adjusted to \$254.9 and (2) the FY 2023 Adopted Budget increases by \$12.2 million. However, due to underspending, the FY 2022 year-end unaudited General Fund expenditures totaled \$249.3 million.

¹ <https://berkeleyca.gov/sites/default/files/documents/2021-06-29%20Item%2029%20FY%202022%20Budget%20Adoption.pdf> (Items 29 & 30)

² <https://berkeleyca.gov/sites/default/files/2022-04/2022-05-10%20Item%2007%20Amendment%20%20FY%202022%20Annual.pdf>

Revenues

At FY 2022 year-end, unaudited actual General Fund revenues generated \$284.5 million, or \$48.4 million more than the adopted budget of \$236.1 million.

During FY 2022, General Fund revenue and transfers increased by \$52,499,805 or 22.6% from FY 2021, from \$232,028,200 to \$284,528,005, despite Transfers of \$11.4 million from the City's reserve funds (\$6.9 million from the Stabilization Reserve Fund and \$4.5 million from the Catastrophic Reserve Fund in FY 2021) to mitigate the negative impacts of the COVID-19 pandemic in FY 2021. This increase was primarily due to the following:

- 1) A recovery of some business-related revenues from huge drops related to the pandemic: Sales Taxes (+3,135,973); Transient Occupancy Tax (TOT) (+3,434,566); Business License Taxes (+2,594,642); and Parking Fines (+1,194,428);
- 2) Extraordinary increases in Property Transfer Tax revenue (+21,431,795) and Measure P Tax revenue (+9,671,737);
- 3) Receipt of American Rescue Plan transfer of \$22,969,355; and,
- 4) Expected growth from other property-related tax revenue: Secured Property Taxes (+3,441,406); and, Vehicle in Lieu Tax revenue (+625,550).

Attachment 1 includes a detailed chart on General Fund Revenues and Transfers in FY 2022 compared to FY 2021 to accompany the narrative below.

Secured Property Tax (+\$3,441,406 more than FY 2021 Actual)

During FY 2022, Secured Property Tax revenues totaled \$71,607,561, which was \$3,441,406 or 5.05% more than the \$68,166,155 received for FY 2021. This was consistent with the County's Certification of Assessed Valuation growth of 4.48%. The difference between the growth reflected on the County's Certification of Assessed Valuation and the actual amount received is typically the difference in the amount of uncollected tax at the end of the two years (receivable). The FY 2022 total of \$71,607,561 was \$225,561 more than the adopted budget amount of \$71,382,000.

Unsecured Property Tax (+\$23,922 more than FY 2021 Actual)

During FY 2022, Unsecured Property Tax revenues totaled \$3,472,334, which was \$23,922 or .69% more than the \$3,448,412 received in FY 2021. The County's Certification of Assessed Valuation reflected growth of 1.96% for FY 2022. The difference between the growth reflected on the County's Certification of Assessed Valuation and the actual amount received is typically the difference in the amount of uncollected tax at the end of the two years (receivable). The FY 2022 total of \$3,472,334 was \$847,334 more than the adopted budget amount of \$2,625,000.

Property Transfer Tax (+\$21,431,795 more than FY 2021 Actual)

Property Transfer Taxes totaling \$42,901,750 was received during FY 2022, which was \$21,431,795 or 99.8% more than the \$21,469,955 received in FY 2021.

The increase was a result of an 88.6% increase in the property sales amount in FY 2022 versus those in FY 2021, which resulted from an increase of 14% in the number of property sales transactions, from 1,108 in FY 2021 to 1,263 in FY 2022. In addition, this included 25 property sales transactions with a value of \$10 million or more (average of \$26.9 million) in FY 2022 versus 10 such transactions in FY 2021 (average of \$33.8 million). Another factor is that \$3,384,375 of that \$21,431,795 increase resulted from the late payment of the May 2021 Property Transfer Taxes by the County, which should have been received in FY 2021. The amount of \$42,901,750 received in FY 2022 was \$21,901,750 more than the adopted budget amount of \$21,000,000.

Measure P Tax (+\$9,671,737 more than FY 2021 Actual)

Measure P taxes (a tax which took effect on December 21, 2018) of \$20,591,313 was collected during FY 2022, which was \$9,671,737 or 88.6% more than the \$10,919,576 collected during FY 2021. The increase was a result of (1) a 88.6% increase in the property sales amount of \$2.06 billion in FY 2022 versus \$1.09 billion in FY 2021; (2) a 44.0% increase in the number of property sales transactions with a value of \$1.5 million or more, from 399 in FY 2021 to 575 in FY 2022; and (3) 25 property sales transactions with a value of \$10 million or more (average of \$26.9 million) in FY 2022 versus 10 such transactions in FY 2021 (average of \$33.8 million), accounting for an increase of \$8,353,228 in FY 2022 related to these transactions. The amount of \$20,591,313 received in FY 2022 was \$12,091,313 more than the adopted budget of \$8,500,000.

Sales Tax (+\$3,135,973 more than FY 2021 Actual)

During FY 2022, Sales Tax revenue totaled \$18,928,278, which was \$3,135,973 or 19.9% more than the \$15,792,305 received in FY 2021. The amount of \$18,928,278 received in FY 2022 put Sales Tax revenue above the pre-pandemic level and was \$641,063 more than the adopted budget amount of \$18,287,215. The increase in FY 2022 was primarily due to increases in the following categories:

- Restaurants (+1,060,405);
- Service Stations (+378,555);
- Apparel Stores (+148,380);
- Auto Sales-New (+292,911);
- Building materials-retail (+127,379);
- Building materials-wholesale (+260,485);
- Furniture/Appliances (+179,442);
- Miscellaneous Retail (+308,844); and,
- County Pool (+327,493).

Utility Users Taxes (+\$857,866 more than FY 2021 Actual)

Utility Users Tax (UUT) revenue for FY 2022 totaled \$14,750,065, which was \$857,865 or 6.18% more than the \$13,892,200 received in FY 2021. The increase in FY 2022 was primarily attributable to decreases in Telephone (-\$100,183), Cellular (-\$160,037) and Cable (-\$136,800), which were more than offset by increases in Gas (+\$164,499) and Electric (+\$616,825), as shown on the chart on the next page.

UUT revenue in FY 2022 was above pre-pandemic levels and was \$1,750,065 or 13.5% more than the adopted budget amount of \$13,000,000.

FY 2022 UUT Actual Revenues and FY 2021 Actual Revenues

	FY2022	FY 2021	Dollar Change	Percent Change
Telephone	\$ 1,178,972	\$ 1,279,924	\$ -100,952	-7.89%
Cable	1,051,052	993,986	57,065	5.74%
Cellular	1,677,723	1,690,798	- 13,075	-.77%
Electric	7,432,925	7,115,383	317,541	4.46%
Gas	3,409,394	2,812,107	597,287	21.24%
Total	\$ 14,750,065	\$13,892,199	\$ 857,866	6.18%

Transient Occupancy Tax (+\$3,434,566 more than FY 2021 Actual)

Transient Occupancy Tax (TOT) revenue for FY 2022 totaled \$5,727,046, which was \$3,434,566 or 149.8% more than the \$2,292,480 received in FY 2021. The increase in FY 2022 was primarily attributable to an increase of 124.9% at the five largest hotels in Berkeley and the addition of another large hotel mid-year FY 2022. The increases (including the new hotel in the fourth quarter) were 142.8% in the first quarter, 157.1% in the second quarter, 151.0% in the third quarter and 203.9% in the fourth quarter. The range of increases at the five largest individual hotels was 9.1% to 362.5%, with an average increase of 168.7%. TOT revenue in FY 2022 was \$3,554,046 or 263.6% more than the adopted budget amount of \$2,173,000.

Business License Taxes (+\$2,594,642 more than FY 2021 Actual)

Business license Taxes (BLT) revenue for FY 2022 totaled \$20,403,974, which was \$2,594,642 or 14.6% more than the \$17,809,332 received in FY 2021. This increase primarily resulted from the increase of \$1,427,361 in Rental of Real Property, from \$7,383,968 in FY 2021 to \$8,811,329; and the increase of \$979,925 in the Professional/Semi Professional category, from \$5,165,139 in FY 2021 to \$6,145,064 in FY 2022. BLT revenue in FY 2022 was \$1,905,828 or 10.3% more than the adopted budget amount of \$18,498,146.

U1 Business License Taxes (+\$95,132 more than FY 2021 Actual)

During FY 2022, U1 Business License Tax revenue totaled \$4,913,872 which was \$95,132 more than the \$4,818,740 received in FY 2021. The \$4,913,872 collected in FY 2021 was \$206,478 less than the adopted budget amount of \$5,120,350.

Vehicle In Lieu Taxes (+\$625,550 more than FY 2021 Actual)

Vehicle in Lieu Taxes (VLF) for FY 2022 totaled \$15,006,003, which was \$625,550 or 4.35% more than the \$14,380,453 received in FY 2021. This increase is consistent with the County's Certification of Assessed Valuation, which reflects growth of 4.48%. Changes in VLF revenues are based on the growth in assessed values. The amount of \$15,006,003 received in FY 2022 was \$46,166 or .3% more than the adopted budget amount of \$14,959,837.

Parking Fines (+\$1,194,428 more than FY 2021 Actual)

Parking Fines revenue for FY 2022 totaled \$4,765,819, which was \$1,194,428 or 33.4% more than the \$3,571,391 received in FY 2021. The primary reasons for the increase were (1) a significant increase in ticket writing: During FY 2022, ticket writing increased by 16,133 or 14.9% from 108,352 in FY 2021 to 124,485 in FY 2022; and (2) a decrease in outstanding citations receivable. The Ticket Aging Report showed a decline in the unpaid citations receivable balance from \$2,749,950 at FY 2021 year end to \$2,265,646 at June 30, 2022. The amount of \$4,765,819 received in FY 2022 was \$1,039,369 or 27.8% more than the adopted budget amount of \$3,726,450.

Interest Income (+\$776,400 more than FY 2021 Actual)

Interest income for FY 2022, totaled \$6,694,122, which was \$776,400 or 13.1% more than the total of \$5,917,722 received in FY 2021. This increase was primarily attributable to (1) A 15.9% increase in the average book value of investments from \$512,070,969 in FY 2021 to \$593,670,627 in FY 2022; and (2) A slight increase in the average net interest rate earned by the City. This increase of \$776,400 occurred despite the Fed's actions to keep short-term rates near zero up until Mid-March 2022. Up to that point in time, the net interest rate earned by the City had declined from a monthly average of 1.08% in FY 2021 to .99% in FY 2022.

Starting in mid-March 2022, the Federal Reserve then raised the Federal Funds rate three times before the end of FY 2022, in order to deal with the very high inflation (.25% on March 17, 2022; .50% on May 5, 2022; and .75% on June 16, 2022, for a total of 1.50%). After the Federal Reserve made these moves, the City's average net interest rate earned increased to 1.06% by year end, versus 1.01% for FY 2021. The amount of \$6,694,122 received in FY 2022 was \$2,231,802 or 50.0% more than the adopted budget amount of \$4,462,320.

Ambulance Fees (+\$752,526 more than FY 2021 Actual)

For FY 2022, Ambulance Fee revenue totaled \$3,833,730, which was \$752,526 or 24.4% more than the \$3,081,204 received in FY 2021. This increase was primarily due to a recovery from the impact of the COVID-19 pandemic, which resulted in more transports in FY 2022 than there were in FY 2021. The total of \$3,833,730 collected was \$679,728 more than the FY 2022 adopted budget amount of \$3,154,002.

Other Revenues (-\$2,808,669 less than FY 2021 Actual)

Other Revenues consists of licenses and permits; grants; preferential parking fees; general government charges for services; public safety charges for services; health charges for services; culture and recreation charges for services; rents and royalties; and other miscellaneous revenues that are not considered major. Other Revenues for FY 2022 totaled \$7,546,099 which was \$2,808,669 or 27.1% less than the \$10,354,768 received in FY 2021. This decrease resulted primarily from the FY 2021 receipt of (1) \$1,500,000 from the COVID Relief Program; (2) \$704,000 from the East Bay Community Foundation for the Berkeley Relief Fund, to finance grant payments to assist businesses and nonprofit organizations impacted by the COVID-19 pandemic; and, (3) \$465,000 in operating grants received in FY 2021.

The amount of \$7,538,980 received in FY 2022 was \$816,122 or 12.1% more than the adopted budget amount of \$6,729,977.

Indirect Cost Reimbursements (-\$270,319 less than FY 2021 Actual)

Indirect Cost Reimbursements (IDC) for FY 2022 totaled \$5,074,695, which was \$270,319 or 5.06% less than the \$5,345,014 received in FY 2021. This decrease was primarily accounted for by a decline in the indirect cost rates calculated for FY 2022 (a range of 17-18%) compared to the rates calculated in FY 2021 (a range of 19.18%-20.44%). The amount of \$5,074,695 received in FY 2022 was \$415,305 or 7.6% less than the adopted budget amount of \$5,490,000.

Transfers (+\$6,174,161 more than FY 2021 Actual)

Transfers from other funds for FY 2022 totaled \$27,354,923, which was \$6,174,161 or 29.1% more than the \$21,180,762 (including transfers from the Reserve Funds) received in FY 2021. This was primarily attributable to the Transfer of \$22,969,355 from the American Rescue Plan Fund in FY 2022 compared to transfers from the Reserve Funds of \$11,400,000 in FY 2021.

Expenditures

Unaudited actual FY 2022 General Fund expenditures total \$249.3 million, or \$20.2 million more than the initial adopted budget of \$234.8 million and \$5.7 million less than the adjusted budget of \$255 million. The FY 2022 General Fund budget contained \$8.7 million in budget deferrals to help balance the \$27.2 million deficit the City faced as a result of the pandemic. The majority of deferrals, totaling \$8.5 million, consisted of personnel deferrals. During the year, departments were allowed to hire General Fund vacancies on a case by case basis after a detailed review by the City Manager. However, the salary savings achieved during the fiscal year did not fully offset total personnel deferrals largely due to overtime costs incurred in the Police and Fire Departments primarily related to the pandemic. In the end, the General Fund personnel budget finished under budget by only \$271,549. Non-personnel savings totaled approximately \$5.4 million, primarily due to delays in projects. (Funding for several ongoing projects is requested to carry into FY 2023 as part of a separate agenda item related to the FY 2023 AAO#1.) The chart below summarizes unaudited expenditures compared to the budget by department.

Department	FY 2022 Adopted	FY 2022 Adjusted	Year-End Actuals	Balance (Adjusted- Actual)	Percent Expended
Mayor & Council	3,096,559	3,861,710	3,334,707	527,003	86%
Auditor	2,705,379	2,823,432	2,627,179	196,253	93%
Police Accountability	1,114,235	1,153,125	808,594	344,531	70%
City Manager	10,912,354	13,709,023	12,034,753	1,674,270	88%
City Attorney	3,434,164	2,782,943	2,648,007	134,936	95%
City Clerk	2,396,737	2,641,057	2,235,191	405,866	85%
Finance	7,041,962	7,549,640	6,827,435	722,205	90%
Human Resources	2,407,724	2,780,494	2,052,892	727,602	74%
Information Technology	1,526,760	2,813,978	1,446,932	1,367,046	51%
Health, Housing & Community Services	23,455,690	36,062,989	32,619,368	3,443,621	90%
Parks, Recreation and Waterfront	7,675,564	9,676,531	8,755,061	921,470	90%
Planning	2,325,367	2,844,995	2,629,757	215,238	92%
Public Works	4,742,625	10,666,639	6,859,823	3,806,816	64%
Police	73,228,172	75,821,558	77,916,629	(2,095,071)	103%
Fire	37,023,939	39,532,664	43,406,931	(3,874,267)	110%
Non-Departmental	51,669,260	40,261,139	43,112,577	(2,851,438)	107%
Total	234,756,491	254,981,917	249,315,837	5,666,080	98%

Significant General Fund Variances

- City Manager's Office (+\$1,674,270) due to salary savings from vacant positions (\$704,533) and under spending of non-personnel funds (\$969,737).
- Finance (+\$722,205) due to salary savings from vacant positions (\$658,600).
- Human Resources (+\$727,605) due to salary savings from vacant positions (\$530,955).
- Information Technology (+\$1,367,046) due to project funds not being fully spent in FY 2022 as the department had significant staffing vacancies.
- Health, Housing and Community Services (+\$3,443,521) due to staffing vacancies during the year close to \$2 million in FY 2022. The remainder was due to unspent non-personnel funds. Some of the non-personnel funds for critical priority projects are being carried over to FY 2023 as part of AAO#1.
- Parks, Recreation & Waterfront (+\$921,470) due to salary savings from vacant positions (\$542,208) and the remainder was unspent non-personnel funds.
- Public Works (+\$3,806,816) primarily due to non-personnel and capital project funds not being completely spent in FY 2022. A significant amount of these funds will be carried over to FY 2023 as part of the AAO#1 for the following projects:
 - Cameras in Public Right of Way (+\$1,293,889)
 - EV Charging Stations (\$300,000)
 - Measure T1 Phase 2 Pathway Repairs/Improvements (\$99,897)
 - Council Budget Referral to the City Manager to improve Pedestrian Safety where Sidewalks are not provided (\$100,000)

- Equitable Clean Streets (+\$327,293)
- Clean & Livable Commons Initiative (+\$180,754)
- Dwight & California Intersection Improvements (+\$84,370)
- Budget Referral – Bike & Pedestrian Safety – Oxford Street (+\$75,000)
- Budget Referral – Bike & Pedestrian Safety Improvement Reservation (+\$100,000)
- FY 2022 Tier 1 Request – Dwight Triangle (+\$100,000)
- Budget Referral Traffic Calming Pedestrian Access – Cragmont (\$150,000)
- Police (-\$2,095,071) began FY 2022 with a General Fund salary savings deferral target of \$6,699,464, which was deducted at the beginning of the fiscal year to help balance the FY 2022 General Fund budget. During the year, salary savings from vacant Sworn Police Office positions generated \$5,065,634. However, overtime expenses were almost \$2 million over budget despite the addition of \$3.5 million to the overtime budget as part of the FY 2022 Adopted Budget due to maintaining essential public safety service during the pandemic and with vacancies. The overall General Fund personnel budget exceeded the budgeted amount almost \$2.5 million. Non-personnel savings of approximately \$361,000 reduced the overage to final amount of \$2,095,071.
- Fire (-\$3,874,267) was primarily due to the personnel budget being over by almost \$3.8 million which were attributed to a few factors. First, the salaries and PERS costs of Sworn Fire staff were over budget by almost \$2.9 million. The budgeted FY 2022 cost of living increases included as part of the new labor contract were not enough to keep up with the total cost of increases in salary, step, and numerous additional pays. Second, the payroll adjustments process to correct payroll issues that began in FY 2021, but were started in FY 2022. These adjustments were due to programming glitches in the new payroll portion of the financial system and has been corrected. Lastly, the Overtime by Uniform Fire was over budget by almost \$1.4 million in FY 2022. The significant overtime costs were due to Fire personnel who were forced to worked 275% more overtime because of increased vacancies due to retirements, resignations, and COVID-related leaves. Although the hiring freeze was lifted April 2021, most positions were not backfilled due to an almost twelve month Firefighter recruitment process. Savings in other personnel and non-personnel line items reduced to total overage down to \$3.9 million.
- Non-Departmental (-\$2,851,438) includes savings for community agencies as a result of budgeting the allocation for Sugar Sweetened Beverage agencies at \$1.9 million, but only allocating \$1.2 million. In addition, various Council Budget Referrals were approved in FY 2022, and, due to timing, will carry into FY 202 as part of AAO#1:
 - Phase 2 of Civic Center District Visioning - \$200,000
 - Consultant for Implementation of Fair and Impartial Policing Recommendations - \$50,000
 - Durant Parklet and Telegraph Plaza Improvements - \$60,000
 - Berkeley Ceasefire - \$200,000

- ❑ George Florence Park/10th Street Traffic Calming - \$220,000
- ❑ Improve Pedestrian Safety where Sidewalks are Not Provided - \$100,000
- ❑ Pilot Existing Building Electrification Installation Incentives and Just Transition Program - \$1,500,000

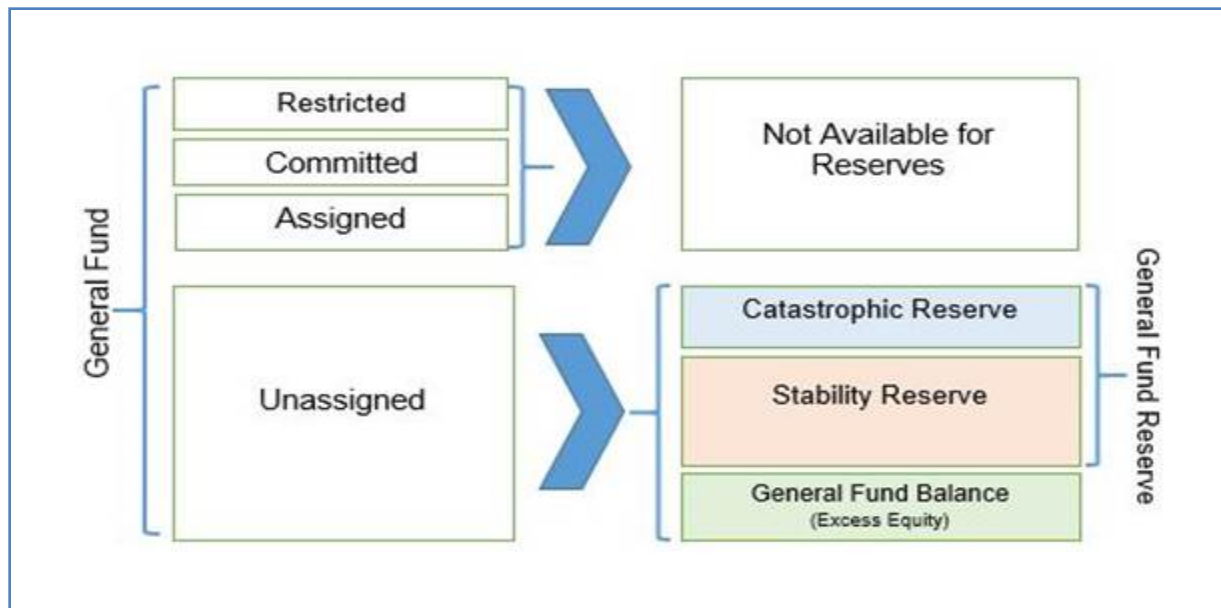
The savings was offset at the end of the year by an almost \$7 million transfer from the General Fund to other funds to cover negative cash balances that are considered a General Fund liability. This is an annual adjustment done as part of the year-end closing process and the amount being transferred is not something that can be anticipated until the year end closing process is completed by Finance.

Excess Equity

As part of a strategy that commenced in FY 2018 to help achieve the City's intermediate and long-term General Fund Reserves goals, 50% of Excess Equity above the first \$1 million is allocated to General Fund Reserves. The chart below illustrates the FY 2022, \$1.52 million reserve calculation as well as the \$2.52 million calculation for the unassigned excess equity. An illustration of the excess equity in relation to the General Fund and reserves is also included on the next page for reference.

GENERAL FUND EXCESS EQUITY CALCULATION (EXCLUDES MEASURE P)			
FY 2022 Beginning Balance		\$	19,806,333
FY 2022 Revenues		\$	263,936,692
FY 2022 Expenditures		\$	(236,342,638)
Available Balance		\$	47,400,387
Less:			
FY 2022 G. F. Encumbrances Restricted (AAO #1)		\$	(8,980,951)
FY 2022 G.F. Carryover (AAO #1)		\$	(6,263,403)
FY 2023 Other Adjustments (AAO #1)		\$	(773,412)
		\$	(16,017,766)
Available Balance After AAO #1 Items		\$	31,382,621
Excess Property Transfer Tax to Balance FY 23 & 24 Operating Budget		\$	(17,268,170)
Excess Property Transfer Tax to Replenish Reserves		\$	(1,500,000)
Excess Property Transfer Tax Available for Capital		\$	(8,569,573)
		\$	(27,337,743)
Available Balance After Pre-Funding of Excess Property Transfer Tax		\$	4,044,878
Allocation to Reserves		\$	1,522,439
Excess Equity Balance		\$	2,522,439

* FY 2022 revenue and expenditure amounts differ from the totals referenced earlier due the removal of Measure P related dollars. Measure P has been deducted from the beginning balance, FY 2022 revenue and expenditures and encumbrances, carryovers and adjustments.



This diagram illustrates the relation between excess equity as well as other restricted, committed, and assigned General Fund monies.

- The restricted fund balance category includes amounts that can be spent only for the specific purposes stipulated by constitution, external resource providers, or through enabling legislation.
- The committed fund balance classification includes amounts that can be used only for the specific purposes determined by a formal action of the government's highest level of decision-making authority.
- Amounts in the assigned fund balance classification are intended to be used by the government for specific purposes but do not meet the criteria to be classified as restricted or committed.
- Unassigned fund balance is the residual classification for the government's general fund and includes all spendable amounts not contained in the other classifications

General Fund Reserve

The General Fund Reserve is distinctly separate from the General Fund Balance (Excess Equity). On January 24, 2017, the City Council established Resolution No. 67,821 – N.S., a policy for the General Fund Reserves. The General Fund reserves are comprised of two elements: (1) a Stability Reserve and (2) a Catastrophic Reserve:

- The Stability Reserve was established to mitigate the loss of service delivery and financial risks associated with unexpected revenue shortfalls during a single fiscal year or during a prolonged recessionary period. The purpose of the Stability Reserve is to provide fiscal stability in response to unexpected downturns or revenue shortfalls. Fifty-five percent of the General Fund Reserve is allocated to the Stability Reserve.

- The Catastrophic Reserve was established to sustain the General Fund operations in the case of a public emergency such as a natural disaster or other catastrophic event. The Catastrophic Reserve may be used to respond to extreme onetime events, such as earthquakes, fires, floods, civil unrest, and terrorist attacks. The policy was revised to include public health emergencies and pandemics. Forty-five percent of the General Fund Reserve is allocated to the Catastrophic Reserve.

When the City Council adopted the General Fund Reserve Policy the target level established for the Reserve was set at a minimum of 13.8% of Adopted General Fund Revenues with an Intermediate Goal of a minimum of 16.7% by the end of Fiscal Year 2020, if financially feasible. In addition, the Council adopted a Long-Term Goal of 30% of General Fund revenues, to be achieved within no more than 10 years. The Council demonstrated their commitment to these policy goals by assigning 50% of the General Fund Excess Equity above the first \$1 million to the Stability and Catastrophic Reserves (Reserves). Additional Excess Equity may be allocated to Reserves by a majority vote of the Council.

During the FY 2023 & FY 2024 Biennial Budget process, the Council allocated a pre-funding amount of \$1.5 million in FY 2022 Excess Property Transfer Tax revenues to the reserves plus \$1.5 million from projected FY 2023 & FY 2024 Excess Property Transfer Tax revenues. This funding is in addition to the budgeted baseline amount of \$2.5 million each fiscal year to the reserves. The chart directly below illustrates the current status of the reserve funds and shows a reserve percentage of resulting in an actual Reserves level of 13.62%³.

General Fund Reserves	Stability Reserve	Catastrophic Reserve	Reserve Percentage
Beginning Cash Balance -	\$ 19.45	\$ 10.28	
FY 2023 Allocation to Reserves	\$ 3.03	\$ 2.48	
Allocation Percentage	55%	45%	
Ending Cash Balance - Reserves	\$ 22.48	\$ 12.76	13.62%

Measure U1 and Measure P

In November 2016 voters approved the passage of Measure U1 to support affordable housing. In November 2018 voters approved the passage of Measure P that increased funding for general municipal purposes such as navigation centers, mental health support, rehousing and other services for the homeless, including homeless seniors and youth. Although these are general fund revenues, the City keeps these revenue streams separate.

³ Catastrophic Reserve Fund Balance includes \$3.3 million loan to Camps Fund - Tuolumne Camp Project. Reserve Percentage based on the FY 2023 Adopted General Fund Revenues of \$258.7 million.

In FY 2021, a separate Measure U1 fund was established for expenditures using these funds with revenues occurring through a transfer of the U1 revenues from the General Fund to the U1 fund. The charts below summarize FY 2022 revenues and expenditures for these measures in the General Fund.

Measure U1	
FY 2022 Beginning U1 Balance	\$ 973,695
FY 2022 Actual Measure U1 Revenues	\$ 4,913,872
FY 2021 Measure U1 Expenditure Transfer	\$ (5,887,567)
FY 2021 Ending Measure U1 Balance	\$ -

Measure P	
FY 2022 Beginning Measure P Balance	\$ 17,032,464
FY 2022 Measure P Revenues	\$ 20,591,313
FY 2022 Measure P Expenditures	\$(13,179,677)
FY 2022 Encumbrances Restricted (AAO #1)	\$ (3,181,552)
FY 2022 Carryover (AAO #1)	\$ (88,566)
FY 2023 Other Adjustments (AAO #1)	\$ (1,660,885)
FY 2022 Ending Measure P Balance	\$ 19,513,097

Unfunded Liabilities- Section 115 Trust

Council held a Worksession on April 4, 2017 on the Projections of Future Liabilities - Options to Address Unfunded Liabilities Tied to Employee Benefits. The City's outside actuary provided options for Council's consideration to help reduce the City's unfunded liabilities tied to post-employee benefits including the following recommendations:

- Investing for the long-term to generate more earning to meet long-term funding targets,
- Increase annual contribution by approximately \$4.5 million per year and fully pre-fund the plans, and
- Establish an irrevocable supplemental trust for CalPERS to stabilize the increasing employer contribution rates.

On June 26, 2018, Council authorized the City Manager to establish an IRS Section 115 Pension Trust Fund (Trust) to be used to help pre-fund pension obligations. On May 14, 2019, Council authorized the City Manager to execute a contract with Keenan Financial Services to establish, maintain, and invest the pension Section 115 Trust. The Section 115 Trust currently has a balance of \$14,762,850.42 as of June 30, 2022.

All Funds

On an All Funds basis, the City is projected to finish FY 2022, \$134 million (17%) under the adjusted budget of \$793.1 million. These fund balances are largely due to uncompleted projects and personnel cost savings. The chart below summarizes unaudited expenditures compared to the budget by department.

Department	FY 2022 Adopted	FY 2022 Adjusted	Year-End Actuals (Adjusted-Actual)	Balance	Percent Expend
Mayor & Council	3,096,559	3,869,210	3,334,707	534,503	86%
Auditor	2,805,883	2,923,936	2,691,657	232,279	92%
Rent Board	6,825,535	6,891,959	5,803,127	1,088,832	84%
Police Accountability	1,114,235	1,153,125	808,594	344,531	70%
City Manager	13,852,717	21,985,234	18,417,011	3,568,223	84%
Library	25,566,341	25,111,400	18,476,577	6,634,823	74%
City Attorney	7,278,096	6,763,728	6,200,455	563,273	92%
City Clerk	2,901,739	3,146,059	2,402,277	743,782	76%
Finance	9,431,102	9,866,420	8,738,588	1,127,832	89%
Human Resources	4,438,053	4,810,823	3,574,288	1,236,535	74%
Information Technology	20,423,888	23,528,496	16,446,316	7,082,180	70%
Health, Housing & Community	84,514,926	115,301,717	91,780,016	23,521,701	80%
Parks, Recreation and Waterfront	52,979,556	78,811,600	63,541,966	15,269,634	81%
Planning	25,252,729	27,006,519	22,433,636	4,572,883	83%
Public Works	147,438,656	201,229,890	140,757,036	60,472,854	70%
Police	77,807,443	82,301,504	82,753,749	(452,245)	101%
Fire	60,351,430	62,807,578	58,014,192	4,793,386	92%
Non-Departmental	127,522,399	115,622,410	113,158,492	2,463,918	98%
Total	673,601,287	793,131,608	659,332,684	133,798,924	83%

Significant All Funds Variances

- Library (+\$6,634,823) due in large part to salary savings from vacant positions and supply chain issues delayed completion of purchases for circulation materials, facilities maintenance and Central Library renovation projects for FY2022.
- Information Technology (+\$7,082,180) was due to FUND\$ Replacement Funds and the IT Cost Allocation Fund not being fully spent in FY 2022.
- Health, Housing & Community Services (+\$23,521,701):
 - Of this amount, \$9.2 million in state grant funds designated for specific public and mental health activities, including \$6.6 million in Mental Health Services Act funds (Funds 156, 158, 315, and 316). These funds were unspent due to vacancies throughout the Mental Health and Public Health Divisions, including both existing difficult-to-fill positions and new positions budgeted for the full year but not filled until later in the fiscal year.
 - The next largest cluster of funds are the \$5.9 million in federal, state, and local funds designated for affordable housing and homeless activities (Funds 116, 128, 302, 310, 311, 333, and 347). Projects have been identified for virtually all of these funds.

- The relatively larger sums combined with lengthy and irregular timing inherent with affordable housing developments mean that expending these funds does not align with the fiscal year timing.
- Other funds include approximately \$2.2 million in COVID relief funds (Funds 312 and 336) which support the City's evolving pandemic response and have been carried over and added in FY 2023.
 - Parks Recreation and Waterfront (+\$15,269,634) had unspent funds due to personnel savings and unexpended project funds in the Playground Camp Fund, Parks Tax Fund, Measure T1 Fund, and the Marina Fund. Only certain unspent project funds will be carried over to FY 2023.
 - Public Works (+\$60,472,854) were largely due to the following:
 - State Transportation Tax (+\$4.2 million): \$0.6 million in salary savings and \$3.3 million in continuing projects for completion in FY 2023
 - Measure B – Local Streets & Roads (+\$2.5 million): \$0.6 million in salary savings and \$1.3 million in continuing projects for completion in FY 2023
 - Measure BB – Local Streets & Roads (+6.9 million): \$5.9 million in continuing projects for completion in FY 2023
 - Capital Improvement Fund (+\$7.3 million): \$0.7 million in salary savings and \$6.1 million in project fund carryover for transportation, street, facilities project funds in FY 2023
 - Measure T1 (+\$5.0 million): \$4.5 million in continuing projects in FY 2023
 - Sanitary Sewer (+\$9.4 million): \$1.5 million in salary savings and \$7.3 million in continuing projects in FY 2023
 - Equipment Maintenance (+\$1 million): \$0.8 million in salary savings
 - Building Maintenance (+\$1 million): \$0.7 million in salary savings

Next Steps

Staff will present second-quarter revenue and expenditure projections as part of the FY 2023 Mid-Year Update in February/March 2023.

ENVIRONMENTAL SUSTAINABILITY

Actions included in the budget will be developed and implemented in a manner that is consistent with the City's environmental sustainability goals and requirements.

CONTACT PERSON

Sharon Friedrichsen, Budget Manager, City Manager's Office, 981-7000
Rama Murty, Senior Management Analyst, City Manager's Office, 981-7000
Henry Oyekanmi, Finance Director, Department of Finance, 981-7300

ATTACHMENT

Attachment 1: General Fund Revenues and Transfers in FY 2022 compared to FY 2021

General Fund Revenue and Transfer in FY2022 VS FY 2021 Comparison

Revenue Categories	FY 2022				FY 2021				Comparison FY22 vs FY 21	
	Adopted	Actual	Variance	% Received	Adopted	Actual	Variance	% Received	Amount	%
	(a)	(b)	c=(b) - (a)	(d) = (b)/(a)	(e)	(f)	g=(f) - (e)	(h) = (f)/(g)	(i) = (b) - (f)	(j) = (i)/(f)
Secured Property	\$71,382,000	\$71,607,561	\$225,561	100.32%	\$61,165,454	\$68,166,155	\$7,000,701	111.45%	3,441,406	5.05%
Redemptions -Regular	831,441	759,808	(71,633)	91.38%	534,512	757,854	223,342	141.78%	1,954	0.26%
Supplemental Taxes	2,000,000	2,317,723	317,723	115.89%	1,260,000	2,249,517	989,517	178.53%	68,206	3.03%
Unsecured Property Taxes	2,625,000	3,472,334	847,334	132.28%	2,250,000	3,448,412	1,198,412	153.26%	23,922	0.69%
Property Transfer Tax	21,000,000	42,901,750	21,901,750	204.29%	16,500,000	21,469,955	4,969,955	130.12%	21,431,795	99.82%
Property Transfer Tax-Measure P (New December 21, 2018)	8,500,000	20,591,313	12,091,313	242.25%	4,747,414	10,919,576	6,172,162	230.01%	9,671,737	88.57%
Sales Taxes	18,287,215	18,928,278	641,063	103.51%	15,786,200	15,792,305	6,105	100.04%	3,135,973	19.86%
Soda Taxes	990,210	1,025,800	35,590	103.59%	970,794	953,069	-17,725	98.17%	72,731	7.63%
Utility Users Taxes	13,000,000	14,750,065	1,750,065	113.46%	12,750,000	13,892,200	1,142,200	108.96%	857,865	6.18%
Transient Occupancy Taxes	2,173,000	5,727,046	3,554,046	263.55%	5,070,000	2,292,480	-2,777,520	45.22%	3,434,566	149.82%
Short-term Rentals	630,000	1,295,798	665,798	205.68%	676,260	694,197	17,937	676,260	601,601	86.66%
Business License Tax	18,498,146	20,403,974	1,905,828	110.30%	12,984,192	17,809,332	4,825,140	137.16%	2,594,642	14.57%
Recreational Cannabis	1,643,739	1,250,792	(392,947)	76.09%	1,300,000	1,712,641	412,641	131.74%	(461,849)	-26.97%
U1 Revenues	5,120,350	4,913,872	(206,478)	95.97%	2,700,000	4,818,740	2,118,740	178.47%	95,132	1.97%
Other Taxes	1,761,714	2,430,191	668,477	137.94%	922,048	1,362,227	440,179	147.74%	1,067,964	78.40%
Vehicle In-Lieu Taxes	14,959,837	15,006,003	46,166	100.31%	12,421,597	14,380,453	1,958,856	115.77%	625,550	4.35%
Parking Fines-Regular Collections	3,726,450	4,765,819	1,039,369	127.89%	5,049,000	3,571,391	-1,477,609	70.73%	1,194,428	33.44%
Parking Fines-Booting Collections			0				0	#DIV/0!	-	#DIV/0!
Moving Violations	132,600	156,253	23,653	117.84%	190,000	131,756	-58,244	69.35%	24,497	18.59%
Ambulance Fees	3,154,002	3,833,730	679,728	121.55%	5,103,208	3,081,204	-2,022,004	60.38%	752,526	24.42%
Interest Income	4,462,320	6,694,122	2,231,802	150.01%	2,851,200	5,917,722	3,066,522	207.55%	776,400	13.12%
Franchise Fees	1,613,283	1,720,056	106,773	106.62%	1,551,696	1,726,470	174,774	111.26%	(6,414)	-0.37%
Other Revenue	6,729,977	7,546,099	816,122	112.13%	6,246,348	10,354,768	4,108,420	165.77%	(2,808,669)	-27.12%
IDC Reimbursement	5,490,000	5,074,695	(415,305)	92.44%	5,490,000	5,345,014	-144,986	97.36%	(270,319)	-5.06%
Transfers	27,354,923	27,354,923	0	100.00%	17,274,293	21,180,762	3,906,469	122.61%	6,174,161	29.15%
			-				0		-	
Total Revenue:	\$236,066,207	\$284,528,005	\$48,461,798	120.53%	\$195,794,216	\$232,028,200	\$36,233,984	118.51%	\$52,499,805	22.63%

Notes: (1) This statement is presented on a budgetary basis (i.e., cash).

(2) Current vendor no longer breaks out Regular and Booting Parking Fines Collections.



Office of the City Manager

ACTION CALENDAR
December 13, 2022

To: Honorable Mayor and Members of the City Council
 From: Dee Williams-Ridley, City Manager
 Submitted by: Sharon Friedrichsen, Budget Manager
 Subject: Amendment: FY 2023 Annual Appropriations Ordinance

RECOMMENDATION

Adopt first reading of an Ordinance amending the FY 2023 Annual Appropriations Ordinance No. 7,828–N.S. for fiscal year 2023 based upon recommended re-appropriation of committed FY 2022 funding and other adjustments authorized since July 1, 2022, in the amount of \$176,583,851 (gross) and \$170,322,312 (net).

FISCAL IMPACTS OF RECOMMENDATION

On June 28, 2022 the City Council adopted the FY 2023 Budget, authorizing gross appropriations of \$754,176,624 and net appropriations of \$625,939,999 (net of dual appropriations).

This first amendment to the Annual Appropriations Ordinance totals \$176,583,851 (gross) and \$170,322,312 (net), increasing the gross appropriations to \$930,760,475 and net appropriations to \$789,430,801 and represents the re-authorization of funding previously committed in FY 2022 and some new expenditures including new grant fund appropriations. The recommendations in this report also include funding for a number of capital projects. Funding is recommended for the following:

1. Encumbered contract obligations from FY 2022 totaling \$110,628,784;
2. Re-appropriating committed, unencumbered FY 2022 funding for all funds in the amount of \$42,653,758; and
3. Changes to fund appropriations primarily due to receipt of new grants and use of available fund balances adjustments in the amount of \$23,301,309.

The changes to the General Fund totals \$20,948,768 which includes encumbrances of \$12,162,503, unencumbered carryover requests of \$6,351,969, and adjustments of \$2,434,297. The Capital Improvement Fund increases by \$9,839,894 and includes encumbrances of \$3,234,486, unencumbered carryover requests of \$6,520,561, and adjustments of \$84,847.

BACKGROUND

The Annual Appropriations Ordinance (AAO) establishes the expenditure limits by fund for FY 2023. Throughout the year, the City takes actions that amend the adopted budget. These may include, but are not limited to, the acceptance of new grants, revisions to existing grants, adjustments to adopted expenditure authority due to emergency needs, and transfers in accordance with Council's fiscal policies.

The adopted budget is also amended annually to reflect the re-appropriation of prior year funds for contractual commitments (i.e. encumbrances) as well as unencumbered carryover of unexpended funds previously authorized for continuation of capital projects, and for one-time, non-recurring purposes. These budget modifications are periodically presented to the Council in the form of an Ordinance amending the Annual Appropriations Ordinance, which formally requires a two-thirds vote of the City Council.

When Council adopts an appropriations ordinance (budget), it is based on projected revenues and expenditures. If fund balances do not support the requested level of expenditures, no carryover is recommended.

The proposed changes, presented in their entirety in Exhibit A, are summarized as follows:

	Encumbered Recommended	Unencumbered Recommended	Other Adjustments	Total
General Fund (011)	\$ 12,162,503	\$ 6,351,969	\$ 2,434,297	\$ 20,948,768
Capital Improvement Fund (501)	\$ 3,234,486	\$ 6,520,561	\$ 84,847	\$ 9,839,894
All Other Funds	\$ 95,231,795	\$ 29,781,228	\$ 20,782,166	\$ 145,795,189
Total	\$ 110,628,784	\$ 42,653,758	\$ 23,301,309	\$ 176,583,851

Carryover Process

Departments were asked to submit information regarding the reasons for the unencumbered carryover requests to assist staff in determining which funds should be carried into FY 2023. In prior years, funds have been approved for carryover from one year to the next based on funding availability.

This report recommends approximately \$42.65 million in unencumbered carryover for Council review and approval, representing funding for priority projects and programs.

Types of Carryover

FY 2022 Encumbrance Rollovers, totaling \$110,628,784 reflect contractual obligations entered into in fiscal year 2022 which had not been paid as of June 30, 2022. Funding for these "encumbered" commitments is brought forward into the current fiscal year to provide for payment of these obligations. The General Fund represents around 11% of the total encumbered rollovers. The FY 2023 Adjusted Budget currently includes the

carry forward of FY 2022 encumbrances, since the City is obligated to pay for these commitments.

FY 2022 Unencumbered Carryover totals \$42,653,468 and reflects the carryover of funding appropriated by the City Council for specific purposes that had not been encumbered by year-end. The carryover for the General Fund represents around 15% of the total recommended unencumbered carryover amount and is for priority projects. Capital Improvement Fund carryovers are for continuing projects and makes up 15% of the unencumbered carryover. The remaining 70% represents carryover items in non-discretionary funds.

FY 2023 Other Adjustments total \$23,301,309 and reflect actions taken by the City Council with the adoption of the FY 2023 budget as well as adjustments required or approved since the budget adoption. Many of these adjustments are within non-discretionary funds and reflect the appropriation of grant funding and the use of available fund balance.

Below is a summary of the FY 2022 Unencumbered Carryover and the FY 2023 Adjustments for the City's General Fund and Other Funds.

General Fund

The General Fund includes \$6,351,969 of recommended unencumbered carryover and \$2,434,297 of recommended other adjustments including the following allocations:

Carryover

- \$59,259 in the City Manager's Office for the continuation of Office of Economic Developments programs such as Civic Arts Grant and Arts Festival
- \$549,465 in Health, Housing & Community Services carryover items include funds for the North Berkeley Senior Center Renovation (\$36,646), Environmental Health On-call services (\$60,782), African American Holistic Center (\$52,037), Health Equity & Innovation District Consultant (\$250,000), and Office of Director, Environmental Health, and Public Health program management (\$150,000)
- \$80,529 for Council carryover amount approved through Resolution No. 70,054-N.S.
- \$1,960,000 in Non-Departmental to pay for Phase 2 of Civic Center District Visioning, Durant Parklet and Telegraph Plaza Improvements, Berkeley Ceasefire, Pilot Existing Building Electrification Installation Incentives and Just Transition Program
- \$371,507 in Parks, Recreation & Waterfront include funding to complete the West Campus Plaster/Filter project, Solano-Peralta Park Improvements, continue the African American Holistic Resource, Willard Park Ambassador, Berkeley Project Day, F-150 Hybrid Pickup, and Measure P for janitorial services
- \$3,331,209 in Public Works include some of the following items:
 - Cameras in Public Right of Way (\$1,293,889)
 - Old City Hall & Veterans Building Leak repair (\$68,030)

- Electric Vehicle (EV) Charging Station project (\$300,000))
- T1 PH2 Pathway Repairs/Improvements (\$99,897)
- Improve Pedestrian Safety where Sidewalks are not provided (\$100,000)
- Vision 2050 Implementation (\$55,686)
- Equitable Clean Streets (\$327,293)
- Dwight and California Intersection Improvement (\$84,370)
- Bike and Pedestrian Safety Budget referrals (\$425,000),
- Encampment Cleanup Program with Measure P (\$83,000)
- Clean and Livable Commons Initiative (\$180,754)
- George Florence Park Traffic Calming (\$220,000)
- East Bay Municipal Utility District (EBMUD) Low Income Rebate (\$40,674)
- PSB Cooling Redundancy Old City Hall & Veterans Building Leak Repair (\$30,398)

Other Adjustments

- \$173,750 in the City Manager's Office for the Municipal Resource Group contract (\$67,675), Program Manager II position for newly established Special Projects Unit (\$142,150), and Aquatic Park Public Art Project – Tile Wall (\$35,000)
- \$1,660,885 in Health, Housing, & Community Services for Measure P Project Homekey balance
- \$82,017 for Mayor and Council Annual Salary increase per Measure JJ
- \$100,000 in Non-Departmental for the Harriet Tubman Terrace Tenant Support
- \$207,750 in the Police Department for Recruitment and Retention
- \$209,894 in Public Works for the following items:
 - \$109,894 for Fire Safety and Prevention to create a connection to the Upper Columbia Pathways
 - \$100,000 for Claremont/Russell and Claremont/Eton projects

Other Funds

Other City funds totals (including capital improvement project funds) \$36,323,599 of recommended unencumbered carryover and \$20,793,287 of recommended other adjustments. Most of the recommendations consist of funding for capital projects and programming of new grants. Some of the carryover and adjustments in other City funds are:

Carryover

- \$600,000 in Climate Equity Action Fund for the Pilot Climate Equity Action program
- \$1,784,275 in Playground Camp Fund for the Berkeley Tuolumne Camp project, Tuolumne Master Plan, Echo Lake Camp ADA, and the Cazadero Camp project
- \$2,678,890 in State Transportation Tax Fund for Public Works street, sidewalk, and traffic calming projects
- \$16,578 in Rental Housing Safety Program for cubicle reconfiguration
- \$322,739 in Measure B – Local Streets and Roads Fund to finish Public Works Engineering and Transportation projects

- ❑ \$14,473 in Measure B – Bike and Pedestrian Fund for the Transportation Impact Studies
- ❑ \$366,918 in Measure F – Alameda County VRF Streets and Road Fund for Public Works Sidewalk and Transportation projects
- ❑ \$4,524,099 in Measure BB – Local Streets & Roads Funds for Public Works street, sidewalk, sewer, and transportation projects
- ❑ \$684,439 in Measure BB – Bike and Pedestrian Fund for Public Works Transportation projects
- ❑ \$1,201,306 in Parks Tax Fund for various Parks, Recreation & Waterfront Department capital projects currently under way
- ❑ \$91,800 in Street Light Assessment Fund for the DC Electric On-call contract and Street Light Assessment District annual report
- ❑ \$954,872 in Cultural Trust Fund for public art projects
- ❑ \$150,000 in Private Party Sidewalks Fund for Sidewalk programs
- ❑ \$99,367 in Public Art Fund for various Civic Arts projects
- ❑ \$2,500,000 in Operating Grants – State Fund for Local Housing Trust fund
- ❑ \$508,325 in Capital Grants – State Fund for Public Works Transportation projects
- ❑ \$383,145 in Capital Grants – Local fund for Public Works Transportation projects
- ❑ \$23,818 in Health (General) Fund for health services
- ❑ \$187,297 in CSBG Fund for the WeHope for the Dignity on Wheels program
- ❑ \$787,887 in One Time Grant: No Capital Expenditure Fund for grants in Health, Housing & Community Services, Mayor and Council, Parks, Recreation & Waterfront, and Police
- ❑ \$120,221 in MTC Grant Fund for the Bicycle Plan Update and goBerkeley
- ❑ \$114,916 in FEMA Grant Fund for Assistance to Firefighters Grant program
- ❑ \$345,427 in Bio-Terrorism Grant Fund for Workforce Development grant
- ❑ \$1,500,199 in ARPA Recovery Fund for the City Manager’s Office and Health, Housing & Community Services (Specialized Care Unit and Community Crisis Response)
- ❑ \$6,520,561 in Capital Improvement Program Fund for Office of Economic Development, Parks, Recreation & Waterfront and Public Works projects
- ❑ \$4,614,928 in Measure T1 Funds for City Manager’s Office, Parks, Recreation & Waterfront Department, and Public Works Department projects currently under way
- ❑ \$303,545 in Measure O Affordable Housing Fund for the Berkeley Way Observer project
- ❑ \$1,961,379 in Marina Operations Fund for various Parks, Recreation, and Waterfront capital and maintenance projects
- ❑ \$989,119 in Sanitary Sewer Fund for Public Works sewer projects
- ❑ \$480,718 in Clean Storm Water Fund for Public Works storm drain projects
- ❑ \$155,323 in Permit Service Center Fund for Staff Augmentation Plan Check support in Public Works
- ❑ \$50,000 in Unified Program (CUPA) Fund for EnvisionConnect Replacement
- ❑ \$350,306 in Parking Meter Fund for the 125-127 University Avenue Parking Lot project and for the goBerkeley project

- ❑ \$145,000 in Building Maintenance Fund for various facilities management contracts
- ❑ \$343,439 in Public Liability Fund for legal contracts
- ❑ \$328,592 in IT Cost Allocation Plan funds for Information Technology projects and operating cost currently under way

Other Adjustments

- ❑ \$55,000 in Fund Raising Activities Fund for donations to the Meals on Wheels program
- ❑ \$313,996 in Playground Camps Fund for Aquatic classes and Lux Bus payment
- ❑ \$500,000 in State Prop 172 Fund for Police operations to pay for contracts and related expenses
- ❑ \$311,274 in State Transportation Tax Fund for the Retaining Wall & Storm Drain Repair project and a new position (Associate Management Analyst)
- ❑ \$855,511 in Measure BB – Local Streets and Road Fund for various Public Works capital and maintenance projects and partial funding of a new Associate Management Analyst
- ❑ \$553,455 in Measure BB - Bike and Pedestrian Fund for various Public Works Transportation projects and partial funding for a new Transportation Manager
- ❑ \$36,400 in Parks Tax Fund for Parks Minor Maintenance and memorial benches
- ❑ \$435,905 in Street Light Assessment Fund for LED conversion debt payment, MLK Jr Way Vision Zero, and parting funding for a new Senior Management Analyst
- ❑ \$365,470 in Business Economic Development Fund for Office of Economic Development Loan programs
- ❑ \$1,338,441 in UC Settlement Fund for the Firefighter Academy, Counseling Services, and SBCA Compressors
- ❑ \$500,000 in Private Party Sidewalks Fund for the Sidewalk Repair program
- ❑ \$200,000 in Citizens Options for Public Safety Fund for Police operations to pay for contracts and related expenses
- ❑ \$912,213 in Operating Grants – State for Future of Public Health Grant funding
- ❑ \$1,202,766 in Capital Grants – State funds for various Public Works Transportation projects
- ❑ \$1,824,000 in Capital Grants – Local funds for the Telegraph Study and Preliminary Engineering project and I-80 Gilman Interchange Phase 2 project
- ❑ \$180,000 in Office of Traffic Safety Grant Fund to appropriate grant for Police Department
- ❑ \$117,529 in Health (General) Fund for several rounds of the Immunization COVID-19 grant program and other Health programs
- ❑ \$24,300 in Targeted Case Management/Linkages Fund for Health, Housing & Community Services for the Aging program
- ❑ \$1,576,142 in Health (Short Doyle) Fund for FY 2023 Medi-Cal budget
- ❑ \$72,449 in Alcoholic Beverage Control Grant Fund for Police operations
- ❑ \$26,903 in Senior Nutrition (Title III) Fund for Meals on Wheels

- ❑ \$100,000 in C.F.P. Title X Fund for Title X Family Planning services
- ❑ \$40,950 in Senior Supportive Social Services Fund for Aging Information and Assistance
- ❑ \$15,806 in CA Integrated Waste Mgmt. Fund for Used Oil Grant
- ❑ \$5,001,834 in One Time Grant: No Capital Expenditure Fund for grants in Health, Housing & Community Services, Non-Departmental, Parks, Recreation & Waterfront, Planning, and Police
- ❑ \$287,250 in FEMA Grant Fund for MLK Jr. Youth Services Center
- ❑ \$850,000 in Alameda Waste Mgmt. Fund for the Zanker C&D Recycling
- ❑ \$252,400 in Bio-Terrorism Grant Fund for Public Health Preparedness Workforce Development
- ❑ \$84,847 in Capital Improvement Program Fund for Transportation projects and partial funding for a new Transportation Manager
- ❑ \$926,720 in Measure M – Streets and Watershed Improvements Fund for Strawberry Creek Culvert project
- ❑ \$415,818 in Measure T1 – Infrastructure & Facilities Fund for Parks, Recreation, and Waterfront and Public Works projects currently underway
- ❑ \$30,105 in Zero Waste Fund for partial funding for a Senior Management Analyst and an Associate Management Analyst
- ❑ \$62,700 in Marina Fund for Hs Lordships Renovations and Operations and Memorial benches
- ❑ \$180,680 in Sanitary Sewer Operation Fund for the Sanitary Sewer Master Plan and partial funding for a new Senior Management Analyst
- ❑ \$20,680 in Clean Storm Water Fund for partial funding for a new Senior Management Analyst
- ❑ \$482,981 in Permit Service Center Fund for new positions in Planning (Principal Planner, Two Associate Planners, one Permanent, one 3-year temporary, Center Street Garage Parking cost, and a new Senior Engineering Inspector in Public Works
- ❑ \$17,000 in Off-Street Parking Fund for CSG Lease Agreement project
- ❑ \$122,999 in Parking Meter Fund for the 125-127 University Avenue Facility Improvement and partial funding of a new Transportation Manager
- ❑ \$21,274 in Equipment Replacement Fund for partial funding of new Associate Management Analyst
- ❑ \$15,510 in Equipment Maintenance Fund for partial funding of a new Senior Management Analyst
- ❑ \$8,510 in Building Maintenance Fund for partial funding of an Associate Management Analyst
- ❑ \$85,819 in Public Liability Fund for legal contracts
- ❑ \$970,000 in IT Cost Allocation Fund for Customer Relationship Management System and IT Move to 1947 Center Street
- ❑ \$494,694 in various Berkeley Business Improvement Districts (BID) Funds to continue supporting BIDs.

This report has been discussed with the Budget & Finance Policy Committee at their November 10, 2022 and December 8, 2022 meetings.

Any changes made by the Council as part of the adoption of the FY 2022 Year-End/FY 2023 1st Quarter Report will need to be incorporated into the numbers presented in this report to reflect these additional appropriations.

ENVIRONMENTAL SUSTAINABILITY AND CLIMATE IMPACTS

There are no identifiable environmental effects or opportunities associated with the act of adopting the budget/appropriations ordinance/amendments. Actions included in the budget will be developed and implemented in a manner that is consistent with the City's environmental sustainability goals and requirements.

RATIONALE FOR RECOMMENDATION

The recommendation allows the City to amend the FY 2023 Adopted Budget, re-appropriating funds from FY 2022 to FY 2023 for contractual commitments that need to be paid and revising the budget to reflect approved carryover requests in both discretionary and non-discretionary funds.

The recommendations in this report deal with the unencumbered carryover in the funds listed above and the other adjustments in all funds. Staff has conducted a detailed analysis of the individual carryover requests submitted by departments and is presenting carryover recommendations for projects that are either currently under contract, represent council priorities, and/or are considered critical.

CONTACT PERSON

Sharon Friedrichsen, Budget Manager, City Manager's Office, 981-7000
Maricar Dupaya, Senior Management Analyst, City Manager's Office, 981-7000

Attachments:

1: Ordinance

Exhibit A: Annual Appropriation Ordinance Summary of Appropriations by Fund
2: FY 2022 Recommended Carryover and FY 2023 Recommended Adjustments (AAO#1)

ORDINANCE NO. -N.S.

AMENDING THE ANNUAL APPROPRIATIONS ORDINANCE NO. 7,828–N.S. FOR FISCAL YEAR 2023

BE IT ORDAINED by the Council of the City of Berkeley as follows:

Section 1. That the Annual Appropriations Ordinance based on the budget for FY 2023 submitted by the City Manager and passed by the City Council be amended as follows and as summarized in Exhibit A:

A. General Fund (Funds 001-099)	309,998,720
B. Special Funds (Funds 100-199)	157,166,324
C. Grant Funds (Funds 300-399)	108,999,308
D. Capital Projects Funds (Funds 500-550)	91,665,749
E. Debt Service Fund (Funds 551-599)	9,804,404
F. Enterprise Funds (Funds 600-669)	178,118,684
G. Internal Service Funds (Funds 146, 670-699)	59,656,349
H. Successor Agency (Funds 760-769)	145,166
I. Agency Funds (Funds 771-799)	7,966,427
J. Other Funds (Funds 800-899)	7,239,344
<u>K. Total</u>	
Total General Fund	309,998,720
Add: Total Other Than General Fund	620,761,755
Gross Revenue Appropriated	930,760,475
Less: Dual Appropriations	-81,673,325
Less: Revolving/Internal Service Funds	-59,656,349
Net Revenue Appropriated	789,430,801

Section 2. The City Manager is hereby permitted, without further authority from the City Council, to make the following transfers by giving written notice to the Director of Finance:

- a. From the General Fund to the General Fund – Stability Reserve Fund; Catastrophic Reserve Fund; Paramedic Tax Fund; Health State Aid Realignment; Fair Election Fund; Capital Improvement Fund; Phone System Replacement; Equipment Replacement Fund; Public Liability Fund; Catastrophic Loss Fund; Police Employee Retiree Health Assistance Plan; Safety Members Pension Fund; and Sick Leave Entitlement Fund.
- b. To the General Fund from the General Fund – Stability Reserves Fund; Catastrophic Reserves Fund; Community Development Block Grant Fund; Street Lighting Assessment District Fund; Zero Waste Fund; Marina Operations and Maintenance Fund; Sanitary Sewer Operation Fund; Clean Storm Water Fund; Permit Service Center Fund; Parking Meter Fund; Unified Program (CUPA); IT Cost Allocation Fund; and Health State Aid Realignment Fund.
- c. To the First Source Fund from the Parks Tax Fund; Capital Improvement Fund; and the Marina Fund.
- d. From Gilman Sports Field Fund to Gilman Field Reserve Fund
- e. From Measure FF Fund to Paramedic Tax Fund.
- f. From the American Rescue Plan Fund to the General Fund; Sports Field Fund; Playground Camp Fund; Marina Fund; Off-Street Parking Fund; and Parking Meter Fund.
- g. From Capital Improvement Fund to PERS Savings Fund; Berkeley Repertory Theater Fund; and 2010 COP (Animal Shelter) Fund.
- h. To the Public Art Fund from the Parks Tax Fund; Capital Improvement Fund; and the Marina Fund.
- i. To CFD#1 District Fire Protection Bond (Measure Q) from Special Tax Bonds CFD#1 ML-ROOS.
- j. To Private Sewer Lateral Fund from Sanitary Sewer Operation Fund.
- k. To Catastrophic Loss Fund from Permit Service Center Fund.
- l. To Catastrophic Loss Fund from Unified Program (CUPA) Fund.
- m. To the Building Purchases and Management Fund from General Fund; Health (General) Fund; Rental Housing Safety Program Fund; Measure B Local Streets & Road Fund; Employee Training Fund; Zero Waste Fund; Sanitary Sewer Operation Fund; Clean Storm Water Fund; Permit Service Center Fund; Off Street Parking Fund; Parking Meter Fund; Unified Program (CUPA) Fund; Building Purchases & Management Fund; Building Maintenance Fund; Central Services Fund; and Health State Aide Realignment Trust Fund.

- n. To Equipment Replacement Fund from General Fund; Mental Health Services Act Fund; Health (Short/Doyle) Fund; Vector Control Fund; Paramedic Tax Fund; Playground Camp Fund; State Transportation Tax Fund; Rental Housing Safety Program Fund; Parks Tax Fund; Street Light Assessment District Fund; Zero Waste Fund; Marina Operations/Maintenance Fund; Sanitary Sewer Operation Fund; Clean Storm Water Fund; Permit Service Center Fund; Parking Meter Fund; Equipment Maintenance Fund; Building Maintenance Fund; and Central Services Fund.
- o. To the Equipment Maintenance Fund from General Fund; Health (General) Fund; Mental Health Services Act Fund; Health (Short/Doyle) Fund; Vector Control Fund; Paramedic Tax Fund; Library - Discretionary Fund; Playground Camp Fund; State Transportation Tax Fund; Rental Housing Safety Program Fund; Rent Stabilization Board Fund; Parks Tax Fund; Street Light Assessment District Fund; FEMA Fund; Zero Waste Fund; Marina Operations/Maintenance Fund; Sanitary Sewer Operation Fund; Clean Storm Water Fund; Permit Service Center Fund; Off Street Parking Fund; Parking Meter Fund; Equipment Maintenance Fund; Building Maintenance Fund; and Central Services Fund.
- p. To the Building Maintenance Fund from the General Fund; Health (General) Fund; Health (Short/Doyle) Fund; Measure B Local Street & Road Fund; Parks Tax Fund; Street Light Assessment District Fund; Zero Waste Fund; Sanitary Sewer Operation Fund; Clean Storm Water Fund; Off Street Parking Fund; Parking Meter Fund; Equipment Maintenance Fund; Building Maintenance Fund; and Mental Health State Aid Realignment Fund.
- q. To the Central Services Fund from the General Fund; First Source Fund; Health (Short/Doyle) Fund; Library-Discretionary Fund; Playground Camp Fund; Rent Stabilization Board Fund; Zero Waste Fund; Marina Operations/Maintenance Fund; Sanitary Sewer Operation; Building Purchases & Management Fund; Building Maintenance Fund; Central Services Fund; and Mental Health State Aid Realignment Fund.
- r. To Information Technology Cost Allocation Plan Fund from General Fund; Target Case Management/Linkages Fund; Health (Short/Doyle); Library Fund; Playground Camp Fund; State Transportation Tax Fund; CDBG Fund; Rental Housing Safety Program; Rent Stabilization Board Fund; Parks Tax Fund; Street Light Assessment District Fund; Zero Waste Fund; Marina Operations/Maintenance Fund; Sanitary Sewer Operation; Clean Storm Water Fund; Permit Service Center Fund; Off Street Parking Fund; Parking Meter Fund; Unified Program (CUPA) Fund; Equipment Maintenance Fund; Building Maintenance Fund; Information Technology Cost Allocation Plan Fund; Health State Aid Realignment Trust Fund; and Mental Health State Aid Realignment Fund.
- s. To the Workers' Compensation Self-Insurance Fund from General Fund; Special Tax for Severely Disabled Measure E Fund; First Source Fund; HUD Fund; ESGP Fund; Health (General) Fund; Target Case Management/Linkages Fund; Mental

Health Service Act Fund; Health (Short/Doyle) Fund; EPSDT Expansion Proposal Fund; Senior Nutrition (Title III) Fund; C.F.P. Title X Fund; Fund Raising Activities Fund; Berkeley Unified School District Grant; Vector Control Fund; Paramedic Tax Fund; Alameda County Grants Fund; Senior Supportive Social Services Fund; Family Care Support Program Fund; Domestic Violence Prevention – Vital Statistics Fund; Affordable Housing Mitigation; Inclusionary Housing Program; Library – Discretionary Fund; Playground Camp Fund; Community Action Program Fund; State Proposition 172 Public Safety Fund; State Transportation Tax Fund; CDBG Fund; Rental Housing Safety Program; Measure B Local State & Road Fund; Measure B Bike & Pedestrian Fund; Measure B – Paratransit Fund; Measure F Alameda County Vehicle Registration Fee Streets & Roads Fund; Measure BB – Paratransit Fund; Fair Election Fund; Measure U1 Fund; One-Time Grant: No Cap Expense Fund; Rent Stabilization Board Fund; Parks Tax Fund; Measure GG – Fire Prep Tax Fund; Street Lighting Assessment District Fund; Employee Training Fund; Private Percent – Art Fund; Measure T1 – Infrastructure & Facilities Fund; FUND\$ Replacement Fund; Capital Improvement Fund; FEMA Fund; CFD #1 District Fire Protect Bond Fund; Special Tax Bonds CFD#1 ML-ROOS Fund; Shelter+Care HUD Fund; Shelter+Care County Fund; Zero Waste Fund; Marina Operations/Maintenance Fund; Sanitary Sewer Operation Fund; Clean Storm Water Fund; Private Sewer Lateral Fund; Permit Service Center Fund; Off-Street Parking Fund; Parking Meter Fund; Unified Program (CUPA) Fund; Building Purchases & Management Fund; Equipment Replacement Fund; Equipment Maintenance Fund; Building Maintenance Fund; Central Services Fund; Workers' Compensation Fund; Public Liability Fund; Information Technology Cost Allocation Plan Fund; Health State Aid Realignment Trust Fund; Tobacco Control Trust Fund; Mental Health State Aid Realignment Fund; Alameda Abandoned Vehicle Abatement Authority; and Bio-Terrorism Grant Fund.

- t. To the Sick Leave and Vacation Leave Accrual Fund from General Fund; Special Tax for Severely Disabled Measure E Fund; First Source Fund; HUD Fund; ESGP Fund; Health (General) Fund; Target Case Management/Linkages Fund; Mental Health Service Act Fund; Health (Short/Doyle) Fund; EPSDT Expansion Proposal Fund; Senior Nutrition (Title III) Fund; C.F.P. Title X Fund; Fund Raising Activities Fund; Berkeley Unified School District Grant; Vector Control Fund; Paramedic Tax Fund; Alameda County Grants Fund; Senior Supportive Social Services Fund; Family Care Support Program Fund; Domestic Violence Prevention – Vital Statistics Fund; Affordable Housing Mitigation; Inclusionary Housing Program; Library – Discretionary Fund; Playground Camp Fund; Community Action Program Fund; State Proposition 172 Public Safety Fund; State Transportation Tax Fund; CDBG Fund; Rental Housing Safety Program; Measure B Local State & Road Fund; Measure B Bike & Pedestrian Fund; Measure B – Paratransit Fund; Measure F Alameda County Vehicle Registration Fee Streets & Roads Fund; Measure BB – Paratransit Fund; Fair Election Fund; Measure U1 Fund; One-Time Grant: No Cap Expense Fund; Rent Stabilization Board Fund; Parks Tax Fund; Measure GG – Fire Prep Tax Fund; Street Lighting Assessment District Fund; Employee Training Fund; Private Percent – Art Fund; Measure T1 – Infrastructure & Facilities Fund; FUND\$ Replacement Fund; Capital Improvement Fund; FEMA Fund; CFD #1 District Fire Protect Bond Fund; Special Tax Bonds CFD#1 ML-ROOS Fund; Shelter+Care HUD Fund; Shelter+Care County Fund; Zero Waste Fund; Marina

Operations/Maintenance Fund; Sanitary Sewer Operation Fund; Clean Storm Water Fund; Private Sewer Lateral Fund; Permit Service Center Fund; Off-Street Parking Fund; Parking Meter Fund; Unified Program (CUPA) Fund; Building Purchases & Management Fund; Equipment Replacement Fund; Equipment Maintenance Fund; Building Maintenance Fund; Central Services Fund; Workers' Compensation Fund; Public Liability Fund; Information Technology Cost Allocation Plan Fund; Health State Aid Realignment Trust Fund; Tobacco Control Trust Fund; Mental Health State Aid Realignment Fund; Alameda Abandoned Vehicle Abatement Authority; and Bio-Terrorism Grant Fund.

- u. To the Payroll Deduction Trust Fund from General Fund; Special Tax for Severely Disabled Measure E Fund; First Source Fund; HUD Fund; ESGP Fund; Health (General) Fund; Target Case Management/Linkages Fund; Mental Health Service Act Fund; Health (Short/Doyle) Fund; EPSDT Expansion Proposal Fund; Senior Nutrition (Title III) Fund; C.F.P. Title X Fund; Fund Raising Activities Fund; Berkeley Unified School District Grant; Vector Control Fund; Paramedic Tax Fund; Alameda County Grants Fund; Senior Supportive Social Services Fund; Family Care Support Program Fund; Domestic Violence Prevention – Vital Statistics Fund; Affordable Housing Mitigation; Inclusionary Housing Program; Library – Discretionary Fund; Playground Camp Fund; Community Action Program Fund; State Proposition 172 Public Safety Fund; State Transportation Tax Fund; CDBG Fund; Rental Housing Safety Program; Measure B Local State & Road Fund; Measure B Bike & Pedestrian Fund; Measure B – Paratransit Fund; Measure F Alameda County Vehicle Registration Fee Streets & Roads Fund; Measure BB – Paratransit Fund; Fair Election Fund; Measure U1 Fund; One-Time Grant: No Cap Expense Fund; Rent Stabilization Board Fund; Parks Tax Fund; Measure GG – Fire Prep Tax Fund; Street Lighting Assessment District Fund; Employee Training Fund; Private Percent – Art Fund; Measure T1 – Infrastructure & Facilities Fund; FUND\$ Replacement Fund; Capital Improvement Fund; FEMA Fund; CFD #1 District Fire Protect Bond Fund; Special Tax Bonds CFD#1 ML-ROOS Fund; Shelter+Care HUD Fund; Shelter+Care County Fund; Zero Waste Fund; Marina Operations/Maintenance Fund; Sanitary Sewer Operation Fund; Clean Storm Water Fund; Private Sewer Lateral Fund; Permit Service Center Fund; Off-Street Parking Fund; Parking Meter Fund; Unified Program (CUPA) Fund; Building Purchases & Management Fund; Equipment Replacement Fund; Equipment Maintenance Fund; Building Maintenance Fund; Central Services Fund; Workers' Compensation Fund; Public Liability Fund; Information Technology Cost Allocation Plan Fund; Health State Aid Realignment Trust Fund; Tobacco Control Trust Fund; Mental Health State Aid Realignment Fund; Alameda Abandoned Vehicle Abatement Authority; and Bio-Terrorism Grant Fund.

Section 3. Copies of this Ordinance shall be posted for two days prior to adoption in the display case located near the walkway in front of the Maudelle Shirek Building, 2134 Martin Luther King Jr. Way. Within 15 days of adoption, copies of this Ordinance shall be filed at each branch of the Berkeley Public Library and the title shall be published in a newspaper of general circulation.

Attachment for Annual Appropriations Ordinance - Fiscal Year 2023**REVOLVING FUNDS/INTERNAL SERVICE FUNDS**

Appropriations are identified with revolving and internal service funds. Such funds derive revenue by virtue of payment from other fund sources as benefits are received by such funds, and the total is reflected in the "Less Revolving Funds and Internal Service Funds" in item I. The funds are:

Revolving/Internal Service Funds

Employee Training Fund	949,429
Equipment Replacement Fund	11,947,462
Equipment Maintenance Fund	10,211,653
Building Maintenance Fund	5,045,988
Central Services Fund	413,953
Workers' Compensation Fund	6,488,740
Public Liability Fund	4,458,560
Information Technology Fund	20,140,564
Subtotal Revolving/Internal Service Funds	<u>\$ 59,656,349</u>

Dual Appropriations

Transfers to the General Fund

Indirect Cost Reimbursement

CDBG Fund	176,194
Street Light Assessment District Fund	155,018
Zero Waste Fund	2,727,548
Marina Enterprise Fund	456,077
Sanitary Sewer Fund	1,352,519
Clean Storm Water Fund	302,661
Permit Service Center Fund	1,979,790
Unified Program (CUPA) Fund	88,337
Subtotal Transfers to General Fund:	<u>\$ 7,238,144</u>

Transfer to Safety Members Pension Fund from General Fund	551,804
Transfer to Measure U1 Fund from General Fund	4,900,000
Transfer to Stability Reserve Fund from General Fund	3,025,000
Transfer to Catastrophic Reserve Fund from General Fund	2,475,000
Transfer to PERS Savings Fund from General Fund	2,000,000
Transfer to Health State Aid Realignment from General Fund	1,953,018
Transfer to Fair Election Fund from General Fund	505,002
Transfer to Capital Improvement Fund (CIP) from General Fund	19,000,905
Transfer to Phone System Replacement - VOIP from General Fund	449,408
Transfer to Equipment Replacement Fund from General Fund	1,081,699
Transfer to Public Liability Fund from General Fund	3,895,888
Transfer to Catastrophic Loss Fund from General Fund	5,025,184
Transfer to IT Cost Allocation Fund from General Fund	71,335
Transfer to Police Employee Retiree Health Assistance Plan from General Fund	400,136
Transfer to Sick Leave Entitlement Fund from General Fund	201,501
Transfer to Employee Training from GF-Payroll Deduction Trust	750,000
Transfer to General Fund from Health State Aid Realignment Fund	2,643,280
Transfer to Paramedic Tax Fund from Measure FF - Public Safety Fund	757,925
Transfer to General Fund from Amercian Rescue Plan Fund	12,271,612
Transfer to Paramedic Tax Fund from American Rescue Plan Fund	2,614,331
Transfer to Marina Fund from American Rescue Plan Fund	1,150,000
Transfer to Off-Street Parking Fund from American Rescue Plan Fund	200,000
Transfer to Parking Meter Fund from American Rescue Plan Fund	2,700,000
Transfer from CIP Fund to PERS Savings Fund	151,632
Transfer to Berkeley Repertory Theater Debt Service Fund from CIP Fund	499,802
Transfer from CIP Fund to 2010 COP (Animal Shelter) Fund	402,613
Transfer to Private Sewer Lateral Fund from Sewer Fund	90,501
Transfer to Catastrophic Loss Fund from Permit Service Center Fund	50,555
Transfer to Catastrophic Loss Fund from Unified Program (CUPA) Fund	5,082
Transfer to General Fund from Parking Meter Fund	1,742,288
Transfer to General Fund from IT Cost Allocation Fund	438,968
Transfer from Special Tax Bonds CFD#1 ML-ROOS to CFD#1 District Fire Protect Bond (Measure Q)	2,048,940
Transfer to GF - Payroll Deduction Trust Fund from Sick Leave Entitlement Fund	273,854
Transfer to First Source Fund from Parks Tax Fund	6,675
Transfer to First Source Fund from Capital Improvement Fund	29,943
Transfer to First Source Fund from Marina Fund	2,625
Transfer to Public Art Fund from Parks Tax Fund	11,681
Transfer to Public Art Fund from Capital Improvement Fund	52,400
Transfer to Public Art Fund from Marina Fund	4,594
Subtotal Transfers to Other Funds:	74,435,181
Sub-Total Dual Appropriations	\$ 81,673,325
Grand Total Dual Appropriations	\$ 141,329,674

SUMMARY OF APPROPRIATIONS BY FUND

ERMA Fund # Fund	FY 2023 Adopted	1st AAO				FY 2022 Revised #1
		Encumbered Rollovers	Unencum. Carryovers	Other Adjustments	Total Amend.	
11 General Fund Discretionary	280,671,294	12,162,503	6,351,969	2,434,297	20,948,768	301,620,062
16 Measure U1 - Housing	6,184,542	1,594,116	-	-	1,594,116	7,778,658
17 Climate Equity Action	-	-	600,000	-	600,000	600,000
101 Library - Tax	24,538,247	568,733	-	-	568,733	25,106,980
103 Library - Grants	66,330	525	-	-	525	66,854
104 Library - Friends & Gift	150,000	208	-	-	208	150,208
105 Library - Foundation	200,000	-	-	-	-	200,000
106 Asset Forefeiture	201,000	-	-	-	-	201,000
107 Special Tax Measure E	1,590,735	-	-	-	-	1,590,735
108 First Source Fund	48,500	-	-	-	-	48,500
110 Sec 108 Loan Gty Asst.	587,612	-	-	-	-	587,612
111 Fund Raising Activities	55,115	958	-	55,000	55,958	111,073
113 Gilman Sports Field	280,063	48,857	-	-	48,857	328,920
115 Animal Shelter	52,480	10,525	-	-	10,525	63,005
116 Paramedic Tax	5,218,195	3,595	-	-	3,595	5,221,790
117 CA Energy	-	44,249	-	-	44,249	44,249
119 Domestic Violence Prev - Vit Stat	26,102	-	-	-	-	26,102
120 Affordable Housing Mitigation	2,805,896	4,368,720	-	-	4,368,720	7,174,616
121 Affordable Child Care	13,275	6,637	-	-	6,637	19,912
122 Inclusionary Housing Program	587,147	34	-	-	34	587,181
123 Condo Conversion	121,339	-	-	-	-	121,339
125 Playground Camp	3,596,951	4,229,569	1,784,275	313,996	6,327,840	9,924,791
126 State-Prop 172 Pub.Safety	434,773	263,790	-	500,000	763,790	1,198,563
127 State Transportation Tax	6,562,677	126,442	2,678,890	311,274	3,116,605	9,679,283
128 CDBG	4,882,923	2,210,842	-	-	2,210,842	7,093,765
129 Rental Housing Safety Program	1,902,671	71,597	16,578	-	88,175	1,990,846
130 Measure B - Local St & Road	769,249	399,485	322,739	5,000	727,224	1,496,473
131 Measure B - Bike and Pedestrian	129,471	45,869	14,473	-	60,342	189,813
132 Measure B - Paratransit	36,797	17,606	-	-	17,606	54,403
133 Measure F Alameda County VRF St & Rd	1,353,067	4,966	366,918	-	371,884	1,724,951
134 Measure BB - Local St & Road	12,737,784	1,421,718	4,524,099	855,511	6,801,328	19,539,112
135 Measure BB - Bike & Pedestrian	758,193	238,075	684,439	553,455	1,475,969	2,234,162
136 Measure BB - Paratransit	934,031	19,317	-	-	19,317	953,349
137 Onetime FD	-	19,080	-	-	19,080	19,080
138 Parks Tax	16,247,510	1,489,000	1,201,596	36,400	2,726,996	18,974,506
140 Measure GG - Fire Prep Tax	5,276,233	233,527	-	-	233,527	5,509,760
142 Streetlight Assesment District	3,312,730	391,043	91,800	435,905	918,748	4,231,478
143 Berkeley Bus Ec Dev	156,387	64,557	-	365,470	430,027	586,414
145 Bayer	-	952	-	-	952	952
146 Employee Training	834,947	114,482	-	-	114,482	949,429
147 UC Settlement	4,563,664	540,765	-	1,338,441	1,879,206	6,442,870
148 Cultural Trust	92,663	25,440	954,872	-	980,312	1,072,975
149 Private Party Sidewalks	100,000	-	150,000	500,000	650,000	750,000
150 Public Art Fund	104,775	6,000	99,367	-	105,367	210,142
152 Vital & Health Statistics Trust Fund	74,903	-	-	-	-	74,903
156 Hlth State Aid Realign Trust	3,961,045	-	-	-	-	3,961,045
157 Tobacco Cont.Trust	379,256	-	-	-	-	379,256
158 Mental Health State Aid Realign	4,061,702	640,401	-	-	640,401	4,702,104
159 Citizens Option Public Safety Trust	262,093	63,100	-	200,000	263,100	525,193
161 Alameda Cty Abandoned Vehicle Abatement	133,993	3,263	-	-	3,263	137,256
164 Measure FF	8,160,000	3,187,938	-	-	3,187,938	11,347,938
165 Fair Elections	510,868	-	-	-	-	510,868
302 Operating Grants - State	64,437	3,534,400	2,500,000	912,213	6,946,613	7,011,050
305 Capital Grants - Federal	1,364,500	698,882	-	-	698,882	2,063,382
306 Capital Grants - State	8,723,370	192,584	508,325	1,202,766	1,903,675	10,627,045
307 Capital Grants - Local	837,000	138,718	383,145	1,824,000	2,345,863	3,182,863
309 OTS DUI Enforcement Education Prg.	137,060	-	-	180,000	180,000	317,060
310 HUD/Home	806,549	5,000	-	-	5,000	811,549
311 ESGP	271,587	345,846	-	-	345,846	617,433
312 Health (General)	3,370,574	6,632	23,818	117,529	147,978	3,518,552
313 Target Case Management Linkages	936,341	50,525	-	24,300	74,825	1,011,166
314 Alameda County Tay Tip	35,812	-	-	-	-	35,812
315 Mental Health Service Act	12,441,437	2,174,487	-	(1,035,428)	1,139,059	13,580,495
316 Health (Short/Doyle)	5,080,644	418,178	-	1,576,142	1,994,320	7,074,965
317 EPSDT Expansion Proposal	500,241	-	-	-	-	500,241
318 Alcoholic Bev Ctr OTS/UC	55,639	17	-	72,449	72,466	128,105
319 Youth Lunch	68,451	211,013	-	-	211,013	279,464
320 Sr. Nutrition Title III	119,884	-	-	26,903	26,903	146,787
321 CFP Title X	39,527	790	-	100,000	100,790	140,317
324 BUSD Grant	392,232	-	-	-	-	392,232
325 Vector Control	276,025	9,792	-	-	9,792	285,817
326 Alameda County Grants	788,215	725	-	2,406	3,131	791,346
327 Senior Supportive Social Services	83,453	-	-	40,950	40,950	124,403
328 Family Care Support Program	86,662	-	-	4,703	4,703	91,365

SUMMARY OF APPROPRIATIONS BY FUND

ERMA Fund # Fund	FY 2023 Adopted	1st AAO				FY 2022 Revised #1
		Encumbered Rollovers	Unencum. Carryovers	Other Adjustments	Total Amend.	
329 CA Integrated Waste Management	5,244	461	-	15,806	16,267	21,511
331 Housing Mitigation	1,126,763	479,120	-	-	479,120	1,605,883
333 CALHOME	363,100	-	-	-	-	363,100
334 Community Action	293,817	88,972	187,297	-	276,269	570,086
336 One-Time Grant: No Cap Exp	5,132,743	8,267,841	787,887	5,001,834	14,057,562	19,190,305
338 Bay Area Air Quality Management	117,000	-	-	-	-	117,000
339 MTC	393,029	299,298	120,221	-	419,519	812,548
340 FEMA	954,621	1,272	114,916	287,250	403,438	1,358,059
341 Alameda Cty Waste Mgt.	285,000	27,565	-	850,000	877,565	1,162,565
343 State Dept Conserv/Recygl	28,000	-	-	-	-	28,000
344 CALTRANS Grant	131,908	57,852	700	-	58,552	190,460
346 Safe Routes	-	9,757	-	-	9,757	9,757
347 Shelter+Care HUD	6,348,109	469	-	-	469	6,348,578
348 Shelter+Care County	886,153	-	-	-	-	886,153
349 JAG Grant	55,650	-	-	-	-	55,650
350 Bioterrorism Grant	327,550	5,564	345,427	252,400	603,391	930,941
351 UASI	-	1,345	-	-	1,345	1,345
354 ARPA - Local Fiscal Recovery Fund	20,023,436	993,283	1,599,199	-	2,592,482	22,615,918
501 Capital Improvement Fund	24,012,302	3,234,486	6,520,561	84,847	9,839,894	33,852,196
502 Phone System Replacement	449,408	29,386	-	-	29,386	478,794
503 FUNDS\$ Replacement	3,221,742	1,640,454	-	-	1,640,454	4,862,196
504 PEG-Public, Education & Government	100,000	-	-	-	-	100,000
506 Meas M - Streets and Watershed Improvements	-	-	-	926,720	926,720	926,720
511 Measure T1 - Infra & Facil.	17,858,315	4,427,301	4,612,828	415,818	9,455,947	27,314,262
512 Measure O	6,445,567	17,382,469	303,545	-	17,686,014	24,131,581
552 09 Measure FF Debt Service	1,343,638	-	-	-	-	1,343,638
553 2015 GORBS	2,051,966	-	-	-	-	2,051,966
554 2012 Lease Revenue Bonds BJPFA	502,238	-	-	-	-	502,238
555 2015 GORBS - 2002 G.O. Refunding Bonds	379,561	-	-	-	-	379,561
556 2015 GORBS (2007, Series A)	142,865	-	-	-	-	142,865
557 2015 GORBS (2008 Measure I)	481,286	-	-	-	-	481,286
558 2010 COP (Animal Shelter)	406,991	-	-	-	-	406,991
559 Measure M GO Street & Water Imps	740,738	-	-	-	-	740,738
560 Infrastructure & Facilities Measure T1	1,731,181	-	-	-	-	1,731,181
561 Measure O - Housing Bonds	2,023,940	-	-	-	-	2,023,940
601 Zero Waste	56,177,214	4,325,867	-	30,105	4,355,972	60,533,186
607 Dept. of Boat and Waterways	-	49,000	-	-	49,000	49,000
608 Marina Operation	8,499,369	1,443,141	1,961,379	62,700	3,467,220	11,966,589
611 Sewer	35,226,521	13,821,731	989,119	180,680	14,991,530	50,218,051
612 Private Sewer Lateral FD	172,628	-	-	-	-	172,628
616 Clean Storm Water	6,123,689	782,484	480,718	20,680	1,283,882	7,407,571
621 Permit Service Center	21,981,180	1,432,970	155,323	482,981	2,071,274	24,052,454
622 Unified Program (CUPA)	877,919	1,495	50,000	-	51,495	929,413
627 Off Street Parking	6,790,627	626,166	-	30,920	657,086	7,447,713
631 Parking Meter	10,557,178	470,446	350,306	109,079	929,831	11,487,009
636 Building Purchases and Management	3,832,733	22,337	-	-	22,337	3,855,070
671 Equipment Replacement	6,676,989	5,249,198	-	21,274	5,270,473	11,947,462
672 Equipment Maintenance	9,573,258	622,885	-	15,510	638,395	10,211,653
673 Building Maintenance Fund	4,798,308	94,169	145,000	8,510	247,679	5,045,988
674 Central Services	391,386	22,567	-	-	22,567	413,953
676 Workers Compensation	6,440,039	48,701	-	-	48,701	6,488,740
678 Public Liability	3,797,298	232,003	343,439	85,819	661,261	4,458,560
680 Information Technology	17,498,246	1,343,727	328,592	970,000	2,642,319	20,140,564
722 RETMED IBE	-	1,445	-	-	1,445	1,445
723 RETMED LC1	-	14,704	-	-	14,704	14,704
724 RETMED Z1	-	1,467	-	-	1,467	1,467
725 RETMED Z26	-	6,053	-	-	6,053	6,053
726 RETMED 535	-	21,015	-	-	21,015	21,015
727 RETMED 790	-	19,839	-	-	19,839	19,839
731 POL EE RET	-	6,967	-	-	6,967	6,967
736 FIRE MEDIC	-	16,557	-	-	16,557	16,557
762 Successor Agency - Savo DSF	57,120	-	-	-	-	57,120
776 Thousand Oaks Underground	98,448	-	-	-	-	98,448
777 Measure H - School Tax	500,000	2	-	-	2	500,002
778 Measure Q - CFD#1 Dis. Fire Protect Bond	1,362,705	37,292	-	-	37,292	1,399,997
779 Spl Tax Bds. CFD#1 ML-ROOS	2,824,802	-	-	-	-	2,824,802
781 Berkeley Tourism BID	416,667	-	-	216,037	216,037	632,704
782 Elmwood Business Improvement District	30,000	1	-	33,518	33,519	63,519
783 Solano Ave BID	25,000	-	-	10,082	10,082	35,082
784 Telegraph Avenue Bus. Imp. District	583,315	-	-	-	-	583,315
785 North Shattuck BID	210,363	-	-	-	-	210,363
786 Downtown Berkeley Prop & Improv. District	1,383,139	-	-	235,057	235,057	1,618,196
801 Rent Board	6,697,755	541,589	-	-	541,589	7,239,344
GROSS EXPENDITURE:	754,176,624	110,628,784	42,653,758	23,301,309	176,583,851	930,760,475

SUMMARY OF APPROPRIATIONS BY FUND

ERMA Fund # Fund	FY 2023 Adopted	1st AAO			FY 2022 Revised #1
		Encumbered Rollovers	Unencum. Carryovers	Other Adjustments	
Dual Appropriations	(79,688,975)	-	-	(1,984,350)	(81,673,325)
Revolving & Internal Service Funds	(50,010,472)	(6,317,301)	(1,443,311)	(131,113)	(59,656,349)
NET EXPENDITURE:	624,477,177	104,311,483	41,210,447	21,185,846	789,430,801

FY 2022 RECOMMENDED CARRYOVER AND FY 2023 RECOMMENDED ADJUSTMENT (AAO#1)

Attachment 2

Item #	Fund #	Fund Name	Department	Recommended Carryover	Recommended Adjustment	Project Number	Description/Project name	Mandated by Law	Authorized by Council	City Manager Request	Comments/Justification
1	011	General Fund	City Manager's Office		\$35,000		Aquatic Park Public Art Project - Tile Wall			X	This is a "new appropriation" request. Original funds were not carried forward from FY21 to FY22. Original funding allocated at the end of FY21 by Parks Waterfront and Recreation Department for tile wall at Aquatic Park.
2	011	General Fund	City Manager's Office		\$67,675		Municipal Resource Group Contract		X		Funds for contract with Municipal Resource Group for professional services needed to respond to the impacts within the City as a result of the Great Resignation. Approved by Council on 9/13/22 through Resolution 70,500-N.S.
3	011	General Fund	City Manager's Office		\$71,075		Project Manager II			X	Position will be part of the newly established Special Projects Unit, focusing on compliance, annual reporting, innovation, and infrastructure management
4	011	General Fund	City Manager's Office	\$17,574			Civic Arts Grants			X	Reserved for Civic Arts grants panelist fees
5	011	General Fund	City Manager's Office	\$41,685			Festival Grant Budget			X	Carryover funds (from Mayor's Office) to increase Festival Grant Budget allocation. Approved by Council on 06/28/2022 through Resolution No. 70,442-N.S.
6	011	General Fund	HHCS	\$36,646		HHAGFR2301	Aging GF NBSC Renovation			X	Carryover of funds to pay for moving costs from WBSC to NBSC and any additional move-in and renovation-related expenses.
7	011	General Fund	HHCS	\$60,782		HHEGFF2301	EH General Fund Field Staff			X	Carryover of funds for the HHCS portion of the contract amendment with Wood Environment & Infrastructure for on-call environmental services
8	011	General Fund	HHCS	\$52,037		HHOGFH2301	OD GF African American Holistic Center			X	Carryover of funds for the African American Holistic Center
9	011	General Fund	HHCS		\$1,660,885		Meas P Project Homekey Balance			X	Appropriate Measure P Project Homekey balance.
10	011	General Fund	HHCS	\$150,000			HCS General Fund Carryover			X	Fund Balance Carryover-Request due to long lead times on computer equipment, moving/relocation costs, and furniture. Council requested consultant contracts which were delayed.
11	011	General Fund	HHCS	\$250,000			Health Equity & Innovation District Consultant			X	Carryover of funds for the Health Equity & Innovation District consultant
12	011	General Fund	Mayor & Council		\$82,017		Mayor and Council Annual Salary per Measure JJ		X		Appropriate FY 2023 funds for Measure JJ for the Mayor and Councilmember Salaries and Benefit increases approved by voters on November 3, 2020.
13	011	General Fund	Mayor & Council	\$80,529			FY22 Council Carryover		X		FY22 Council Carryover Amount. Approved by Council through Resolution No. 70,054-N.S.
14	011	General Fund	Non-Departmental	\$60,000			Durant Parklet and Telegraph Plaza Improvements			X	Carryover of funds for Durant Parklet and Telegraph Plaza Improvements. Funds approved as Mayor & Council Addition for FY 2022 AAO #1
15	011	General Fund	Non-Departmental	\$200,000			Phase 2 of Civic Center District Visioning			X	Carryover of funds for Phase 2 of Civic Center District Visioning. FY 2022 Council Referral approved with FY 2022 Adopted Budget

FY 2022 RECOMMENDED CARRYOVER AND FY 2023 RECOMMENDED ADJUSTMENT (AAO#1)

Attachment 2

Item #	Fund #	Fund Name	Department	Recommended Carryover	Recommended Adjustment	Project Number	Description/Project name	Mandated by Law	Authorized by Council	City Manager Request	Comments/Justification
16	011	General Fund	Non-Departmental	\$200,000			Berkeley Ceasefire		X		Carryover of funds for Berkeley Ceasefire. Funds approved as Mayor & Council Addition for FY 2022 AAO #1
17	011	General Fund	Non-Departmental	\$1,500,000			Pilot Existing Building Electrification Installation Incentives and Just Transition Program		X		Carryover of funds for Pilot Existing Building Electrification Installation Incentives and Just Transition Program. Funds approved as Mayor & Council Addition for FY 2022 AAO #2
18	011	General Fund	Non-Departmental		\$100,000		Harriet Tubman Terrace Tenant Support		X		Budget referral of up to \$100,000 to fund a tenant advocate position for Harriet Tubman Terrace (11/3/2022)
19	011	General Fund	Parks, Recreation & Waterfront	\$10,275		PRWPK22005	West Campus Plaster/Filters project			X	Carryover to complete West Campus Plaster/Filters project.
20	011	General Fund	Parks, Recreation & Waterfront	\$83,059		PRWPK22012	Willard Park Ambassador			X	Carryover funds to continue additional monitoring at Willard Park
21	011	General Fund	Parks, Recreation & Waterfront	\$80,000		PRWPK22018	Solano-Peralta Park Improvements			X	Carryover to complete Solano-Peralta Park Improvements.
22	011	General Fund	Parks, Recreation & Waterfront	\$100,926		PRWT122002	African American Holistic Resource			X	Carryover project funding for the continuation of the African American Holistic Resource project
23	011	General Fund	Parks, Recreation & Waterfront	\$5,566			Measure P			X	Carryover Measure P for additional janitorial services in the marina restrooms.
24	011	General Fund	Parks, Recreation & Waterfront	\$32,000			Berkeley Project Day			X	Carryover for FY22 Berkeley Project Day.
25	011	General Fund	Parks, Recreation & Waterfront	\$59,681			F-150 Hybrid Pickup #3017.			X	Carryover to restore funds for PO#22103630 for the F-150 Hybrid Pick-Up #3017.
26	011	General Fund	Police		\$207,750		Recruitment and Retention			X	Recruitment and Retention
27	011	General Fund	Public Works	\$68,030		PWENBM2104	OCH & VETS BLDG LEAK REPAIR			X	To continue on-going project
28	011	General Fund	Public Works	\$30,398		PWENCB2102 PWENBM2104	PSB Cooling Redundancy OCH & Vets Bldg. Leak Repair			X	To continue on-going project
29	011	General Fund	Public Works	\$300,000		PWENEN2001	EV Charging Station			X	To continue on-going project
30	011	General Fund	Public Works	\$5,830		PWENSR1542	Sewer Laterals & CCTV			X	Carryover for the Sewer Laterals & CCTV project
31	011	General Fund	Public Works	\$119,981		PWFME2202	Cameras in Public Right of Way			X	Carryover of project funding to continue the Cameras in Public Right of Way project
32	011	General Fund	Public Works	\$1,173,908		PWFME2202	Cameras in Public Right of Way			X	Carryover of project funding to continue the Cameras in Public Right of Way project
33	011	General Fund	Public Works	\$327,293		PWSUCC2201	Equitable Clean Streets			X	Continuation of Equitable Clean Streets Program.
34	011	General Fund	Public Works	\$11,719		PWT1CB1901	NBSC Seismic Retrofit - T1			X	Carryover for the North Berkeley Senior Center - T1 project
35	011	General Fund	Public Works	\$99,897		PWT1SW2202	T1 PH2 Pathway Repairs/Improvements			X	Carryover of funds for the outstanding invoices of T1 PH2 Pathway Repairs/Improvements project.
36	011	General Fund	Public Works	\$4,669		PWTRPL2101	BerkDOT			X	Carryover of funds for the BerkDOT project

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Item #	Fund #	Fund Name	Department	Recommended Carryover	Recommended Adjustment	Project Number	Description/Project name	Mandated by Law	Authorized by Council	City Manager Request	Comments/Justification
37	011	General Fund	Public Works	\$84,370		PWTRTC1902	Dwight and California Intersection Improvements			X	Carryover of funds for the Traffic Calming at Intersection of Dwight and California project.
38	011	General Fund	Public Works		\$100,000	PWTRTC2301	Claremont/Russell & Claremont/Eton		X		To reinstate the funding for One-time \$50,000 and staff time allocation RFFB Light at Eton Avenue and Claremont Boulevard (Council Referral 12.05.17) & One-time \$50,000 allocation for hawk light at Claremont Boulevard and Russell Street (Council Referral 05.16.17)
39	011	General Fund	Public Works		\$109,894		Fire Safety & Prevention		X		Appropriate remainder of FY 2019 Fire Prevention & Safety funds approved by Council in the FY 2019 AAO #1 on 11/27/18
40	011	General Fund	Public Works	\$40,674			EBMUD Low Income Rebate			X	Carryover of EBMUD Low Income Rebate funds
41	011	General Fund	Public Works	\$55,686			Vision 2050 Implementation 2022			X	Tier 1 Request Vision 2050 Plan from Div. 624 Prof Svcs for inv
42	011	General Fund	Public Works	\$75,000			Budget Ref- B&P Safety Oxford Street			X	Projects did not start in FY22, request to carryover to FY23.
43	011	General Fund	Public Works	\$83,000			Encampment Cleanup Program			X	Measure P encampment cleanup program
44	011	General Fund	Public Works	\$100,000			Budget Referral to the CM to improve Pedestrian Safety where Sidewalks are not provided.			X	Mid-year Annual Appropriations budget-CC Wengraf. Consent Agenda 11.30.21
45	011	General Fund	Public Works	\$100,000			Budget Ref- B&P Safety Imp Reserve			X	Projects did not start in FY22, request to carryover to FY23.
46	011	General Fund	Public Works	\$100,000			FY 2022 Tier 1 Request Dwight Triangle			X	Projects did not start in FY22, request to carryover to FY23.
47	011	General Fund	Public Works	\$150,000			Budget Ref TC Ped Access Cragmont			X	Projects did not start in FY22, request to carryover to FY23.
48	011	General Fund	Public Works	\$180,754			Clean and Livable Commons Initiative			X	improved lighting in illegal dumping districts
49	011	General Fund	Public Works	\$220,000			George Florence Park Traffic Calming			X	George Florence Park Traffic Calming (Tenth St between University Ave and Allston Way). Council Referral 03.09.21 CM Taplin & Mayor Arreguin.
	011 Total			\$6,351,969	\$2,434,297						
50	017	Climate Equity Action	Planning	\$600,000			Pilot Climate Equity Action program		X		Establish a Pilot Climate Equity Action Fund to Assist Low-Income Residents with Transition to Zero-Carbon Transportation and Buildings
	017 Total			\$600,000	\$0						
51	111	Fund Raising Activities	HHCS		\$5,000	HHADMO2301	Aging Donations C2 Meals on Wheels			X	Appropriate funds for supplies and equipment for Meals on Wheels program
52	111	Fund Raising Activities	HHCS		\$50,000	HHADMO2301	AG DONATIONS C2 MOW			X	Appropriate Aging Services donations for the Meals on Wheels program
	111 Total			\$0	\$55,000						

FY 2022 RECOMMENDED CARRYOVER AND FY 2023 RECOMMENDED ADJUSTMENT (AAO#1)

Attachment 2

Item #	Fund #	Fund Name	Department	Recommended Carryover	Recommended Adjustment	Project Number	Description/Project name	Mandated by Law	Authorized by Council	City Manager Request	Comments/Justification
53	125	Playground Camp	Parks, Recreation & Waterfront	\$707,940		PRWCP08001 PRWEM16004 PRWRC18002	Tuolumne Master Plan Cazadero Camp Landslide Echo Lake Camp ADA Improvement			X	Carryover project budgets for Camps projects (Tuolumne Master Plan, Cazadero Camp Landslide, and Echo Lake Camp ADA Improvement)
54	125	Playground Camp	Parks, Recreation & Waterfront	\$5,200		PRWCP19001	Berkeley Tuolumne Camp Construction Management			X	Carryover of funds for Conifer Communications Equipment installation.
55	125	Playground Camp	Parks, Recreation & Waterfront	\$852,397		PRWCP19001	BTC Construction			X	Carryover to complete BTC Construction project
56	125	Playground Camp	Parks, Recreation & Waterfront	\$140,738		PRWCP22001	Berkeley Tuolumne Camp Start Up Costs			X	Carryover funds for the Berkeley Tuolumne Camp Start Up Costs project
57	125	Playground Camp	Parks, Recreation & Waterfront	\$78,000		PRWEM16004	Cazadero Camp Landslide			X	Carryover for Murray Building contingency.
58	125	Playground Camp	Parks, Recreation & Waterfront		\$18,635		Lux Bus Costs			X	FY 2023 funds for Lux Bus
59	125	Playground Camp	Parks, Recreation & Waterfront		\$295,361		Aquatic Classes			X	Appropriate new funding for fee based aquatic classes
	125 Total			\$1,784,275	\$313,996						
60	126	State Prop 172	Police		\$500,000		Non-personnel expenses			X	New Allocation from fund balance. Police contracts, services, and purchases
	126 Total			\$0	\$500,000						
61	127	State Transportation Tax	Public Works		\$290,000	PWENRW2301	Retaining Wall & Storm Drain Repair			X	
62	127	State Transportation Tax	Public Works	\$634,863		PWENST2101	Street Rehab FY21			X	To continue and complete the project, currently in the construction phase.
63	127	State Transportation Tax	Public Works	\$1,724,043		PWENST2201	FY 2022 Street Rehab			X	Carryover of funds for the FY 2022 Street Rehab Project
64	127	State Transportation Tax	Public Works	\$43,010		PWENST2301	FY 2023 Street Rehab			X	Carryover funds for the FY 2023 Street Rehab project
65	127	State Transportation Tax	Public Works	\$100,000		PWENSW2001	FY 2020 Sidewalk Repair Program			X	Carryover for the FY 2020 Sidewalk Repair Program
66	127	State Transportation Tax	Public Works	\$138,269		PWENSW2002	SIDEWALK SHAVING - FY 2020			X	To continue sidewalk shaving services
67	127	State Transportation Tax	Public Works	\$2,004		PWTRPK1401	goBerkeley expenditures			X	Carryover funds for the goBerkeley program.
68	127	State Transportation Tax	Public Works	\$36,701		PWTRTC1405	Traffic Calming Dev Rep & Mtc			X	On-going project
69	127	State Transportation Tax	Public Works		\$21,274		Personnel New Position - Associate Management Analyst			X	Associate Management Analyst (new) Note: Amount is the 6-month prorated cost of fully loaded cost
	127 Total			\$2,678,890	\$311,274						
70	129	Rental Housing Safety Program	Planning	\$16,578			Rental Housing Safety Program			X	Carryover of funds for the Rental Housing Safety Program cubicle reconfiguration
	129 Total			\$16,578	\$0						

FY 2022 RECOMMENDED CARRYOVER AND FY 2023 RECOMMENDED ADJUSTMENT (AAO#1)

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Item #	Fund #	Fund Name	Department	Recommended Carryover	Recommended Adjustment	Project Number	Description/Project name	Mandated by Law	Authorized by Council	City Manager Request	Comments/Justification
71	130	Meas B - Local Streets and Rds	Public Works	\$127,608		PWENST2101	Street Rehab FY21			X	To continue and complete the project, currently in the construction phase.
72	130	Meas B - Local Streets and Rds	Public Works	\$30,000		PWTRBP1707	9th Street Pathway Phase II			X	Carryover of funds for 9th Street Pathway Phase II project.
73	130	Meas B - Local Streets and Rds	Public Works	\$110,000	\$5,000	PWTRCS2204	Telegraph Study & PE			X	130-54-622-668-0000-000-431-612310
74	130	Meas B - Local Streets and Rds	Public Works	\$55,131		PWTRTM1301	Roadway Thermo Markings			X	On-going project
	130 Total			\$322,739	\$5,000						
75	131	Meas B - Bike and Pedestrian	Public Works	\$14,473		PWTRCS2002	Transportation Impact Studies			X	Carryover funds to continue ongoing studies
	131 Total			\$14,473	\$0						
76	133	Measure F - Alameda County VRF Streets & Roads	Public Works	\$155,000		PWENST2201	FY 2022 Street Rehab			X	Carryover of funds for the FY 2022 Street Rehab Project
77	133	Measure F - Alameda County VRF Streets & Roads	Public Works	\$43,245		PWENSW2001	FY 2020 Sidewalk Repair Program			X	Carryover for the FY 2020 Sidewalk Repair Program
78	133	Measure F - Alameda County VRF Streets & Roads	Public Works	\$42,548		PWENSW2002	SIDEWALK SHAVING - FY 2020			X	To continue sidewalk shaving services
79	133	Measure F - Alameda County VRF Streets & Roads	Public Works	\$82,252		PWT1SW2201	T1 Phase 2 Sidewalk Maintenance & Safety Replacement			X	Carryover of funds for the T1 Phase 2 Sidewalk Maintenance & Safety Replacement Project
80	133	Measure F - Alameda County VRF Streets & Roads	Public Works	\$43,873			On-Call Transportation Planning Authorization		X		Appropriate funds for On-Call Transportation Planning Authorization contract with Kittelson & Associates. Approved by Council through Res#67,587-N.S. dated 06/28/2016.
	133 Total			\$366,918	\$0						
81	134	Measure BB - Local Streets & Roads	Public Works	\$106,522		PWENRW2001	Retaining Wall - 1322 Glendale Ave			X	Carryover and appropriation of new funds for the Retaining Wall - 1322 Glendale Avenue project
82	134	Measure BB - Local Streets & Roads	Public Works	\$443,780	\$600,000	PWENST2101	Street Rehab FY 2021			X	Carryover and appropriation of new funds for the Street Rehab FY 2021 project
83	134	Measure BB - Local Streets & Roads	Public Works	\$2,001,355		PWENST2201	FY 2022 Street Rehab			X	Carryover of funds for the FY 2022 Street Rehab Project
84	134	Measure BB - Local Streets & Roads	Public Works	\$58,493		PWENST2202	Wildcat Canyon Emergency Repairs			X	To complete emergency repairs needed at Wildcat Canyon
85	134	Measure BB - Local Streets & Roads	Public Works	\$106,200		PWENST2302	Wildcat Canyon Road Repairs			X	Carryover of funds for the Wildcat Canyon Road Repairs project.
86	134	Measure BB - Local Streets & Roads	Public Works	\$38,209		PWENST2303	Hopkins Corridor Improvement			X	Carryover funds for the Hopkins Corridor Improvement Project
87	134	Measure BB - Local Streets & Roads	Public Works	\$446,800		PWENSW2001	FY 2020 Sidewalk Repair Program			X	Carryover for the FY 2020 Sidewalk Repair Program
88	134	Measure BB - Local Streets & Roads	Public Works	\$157,688		PWENSW2002	SIDEWALK SHAVING - FY 2020			X	To continue sidewalk shaving services

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Item #	Fund #	Fund Name	Department	Recommended Carryover	Recommended Adjustment	Project Number	Description/Project name	Mandated by Law	Authorized by Council	City Manager Request	Comments/Justification
89	134	Measure BB - Local Streets & Roads	Public Works	\$200,000		PWENSW2202	La Loma Sewer Replacement			X	Carryover funds for the La Loma Sewer Replacement Project
90	134	Measure BB - Local Streets & Roads	Public Works	\$50,000		PWTRBP1802	Milvia Bikeway			X	To continue project design and construction
91	134	Measure BB - Local Streets & Roads	Public Works	\$239,034		PWTRBP2203	Parker Addison Bikeway			X	To continue and continue and complete project, current in the planning phase
92	134	Measure BB - Local Streets & Roads	Public Works		\$247,001	PWTRBP2206	West Berkeley Vision Zero			X	to appropriate initial project amount
93	134	Measure BB - Local Streets & Roads	Public Works	\$14,473		PWTRCS2002	Transportation Impact Studies			X	On-going studies
94	134	Measure BB - Local Streets & Roads	Public Works	\$146,520		PWTRCS2203	University West Bus Stops			X	to continue design
95	134	Measure BB - Local Streets & Roads	Public Works	\$75,000		PWTRCS2301	Adeline @Ashby BART			X	
96	134	Measure BB - Local Streets & Roads	Public Works	\$165,000		PWTRCT2101	Adeline Imprv MLK-OAK			X	
97	134	Measure BB - Local Streets & Roads	Public Works	\$50,000		PWTRTC1301	Traffic Calming			X	Carryover funding for the Traffic Calming program
98	134	Measure BB - Local Streets & Roads	Public Works	\$69,050		PWTRTC1902	Dwight at California Intersection Improvements			X	Carryover for Dwight at California Intersection Improvements project
99	134	Measure BB - Local Streets & Roads	Public Works		(\$1,644,000)	PWTRTM2301	I-80 Gilman Interchange Improvement - Phase 2		X		Reverse Journal #1839 that appropriated funds for I-80 Gilman Interchange Improvement (Phase 2) project. Approved by Council through Res#69,732-N.S. dated 02/23/2021.
100	134	Measure BB - Local Streets & Roads	Public Works		\$1,644,000	PWTRTM2301	I-80 Gilman Interchange Improvement - Phase 2		X		Appropriate funds for I-80 Gilman Interchange Improvement (Phase 2) project. Approved by Council through Res#69,732-N.S. dated 02/23/2021.
101	134	Measure BB - Local Streets & Roads	Public Works		\$8,510		Personnel New Position - Associate Management Analyst			X	Associate Management Analyst (new) Note: Amount is the 6-month prorated cost of fully loaded cost
102	134	Measure BB - Local Streets & Roads	Public Works	\$155,975						X	
	134 Total			\$4,524,099	\$855,511						
103	135	Measure BB - Bike & Pedestrian	Public Works	\$383,569		PWTRBP1802	Milvia Bikeway			X	To continue project construction
104	135	Measure BB - Bike & Pedestrian	Public Works	\$134,770		PWTRBP2201	MLK Jr Way Vision Zero			X	Carryover funds for the MLK Jr. Vision Zero project
105	135	Measure BB - Bike & Pedestrian	Public Works	\$98,100	\$106,566	PWTRBP2202	HSIP SacPed Xing Safety Enhancements			X	to appropriate initial project amount
106	135	Measure BB - Bike & Pedestrian	Public Works	\$68,000		PWTRBP2204	Dwight at California Intersection Improvements			X	Carryover funds for the Dwight at California Intersection Improvements project
107	135	Measure BB - Bike & Pedestrian	Public Works		\$23,969	PWTRBP2205	Woolsey-Fulton Bicycle Blvd			X	To continue project design & construction
108	135	Measure BB - Bike & Pedestrian	Public Works		\$149,500	PWTRBP2205	Woolsey-Fulton Bicycle Blvd			X	To continue project design & construction
109	135	Measure BB - Bike & Pedestrian	Public Works		\$159,500	PWTRBP2206	West Berkeley Vision Zero			X	

FY 2022 RECOMMENDED CARRYOVER AND FY 2023 RECOMMENDED ADJUSTMENT (AAO#1)

Item #	Fund #	Fund Name	Department	Recommended Carryover	Recommended Adjustment	Project Number	Description/Project name	Mandated by Law	Authorized by Council	City Manager Request	Comments/Justification
110	135	Measure BB - Bike & Pedestrian	Public Works		\$100,000	PWTRCS2002	Transportation Impact Studies			X	FY23 Adopted Budget, not entered in CBE process.
111	135	Measure BB - Bike & Pedestrian	Public Works		\$13,920		Personnel New Position - Transportation Manager			X	Transportation Manager (new) Note: Amount is the 6-month prorated cost of fully loaded cost
	135	Total		\$684,439	\$553,455						
112	138	Parks Tax	Parks, Recreation & Waterfront	\$7,967		PRWPK14002	John Hinkel Park			X	Carryover for John Hinkel Park.
113	138	Parks Tax	Parks, Recreation & Waterfront	\$3,535		PRWPK15002	James Kenney Play Area			X	Carryover for James Kenney Play Area.
114	138	Parks Tax	Parks, Recreation & Waterfront	\$45,110		PRWPK19003	King School Park Renovation			X	Carryover for the King School Park Renovation project
115	138	Parks Tax	Parks, Recreation & Waterfront	\$127,030		PRWPK19004	John Hinkel Amphitheater Area			X	Carryover funds for the John Hinkel Amphitheater Area project
116	138	Parks Tax	Parks, Recreation & Waterfront	\$159,668		PRWPK20003	Ohlone Park Improvements			X	Carryover funds for Ohlone Park Improvements project
117	138	Parks Tax	Parks, Recreation & Waterfront	\$55,080		PRWPK21005	Harrison Skate Park Fencing/Improvements			X	Carryover for Harrison Skate Park Fencing Improvements.
118	138	Parks Tax	Parks, Recreation & Waterfront	\$42,264		PRWPK22002	John Hinkel Scout Hut			X	Carryover for John Hinkel Scout Hut
119	138	Parks Tax	Parks, Recreation & Waterfront	\$75,000		PRWPK22003	Tom Bates Sports Complex Design - Soccer Fields and Pickleball			X	Carryover for Tom Bates Sports Complex Design - Soccer Fields and Pickleball
120	138	Parks Tax	Parks, Recreation & Waterfront	\$96,251		PRWPK22004	FY 2022 Parks Minor Maintenance			X	Carryover funds for the FY 2022 Parks Minor Maintenance project.
121	138	Parks Tax	Parks, Recreation & Waterfront	\$4,186		PRWPK22010	FY 2022 Strategic Plan - Tree Planting			X	Carryover funds for FY 2022 Strategic Plan - Tree Planting project and California Constructores contract
122	138	Parks Tax	Parks, Recreation & Waterfront		\$33,000	PRWPK23002	FY23 Parks Minor Maintenance			X	Adjustment to add funds for John Hinkel retaining wall.
123	138	Parks Tax	Parks, Recreation & Waterfront	\$460,339		PRWPP15002	Aquatic Park South Pathways & RC Parking			X	Carryover to complete Aquatic Park South Pathways & RC Parking project.
124	138	Parks Tax	Parks, Recreation & Waterfront	\$12,135		PRWT119004	Grove Park Phase 2			X	Carryover project funding for Grove Park Phase 2 project
125	138	Parks Tax	Parks, Recreation & Waterfront	\$28,548		PRWT119009	San Pablo Play And Tennis			X	Carryover for San Pablo Play And Tennis
126	138	Parks Tax	Parks, Recreation & Waterfront	\$45,051		PRWT119012	Rose Grdn Pthways, Tennis Crt, Perg			X	Carryover for Rose Grdn Pthways, Tennis Crt, Perg
127	138	Parks Tax	Parks, Recreation & Waterfront	\$24,432		PRWT122009	Aquatic Park Tide Tubes Phase 1B			X	Carryover funds for the Aquatic Park Tide Tubes Phase 1B Project.
128	138	Parks Tax	Parks, Recreation & Waterfront		\$3,400		Memorial Benches		X		Funds for memorial benches approved by Council on 9/13/22
129	138	Parks Tax	Parks, Recreation & Waterfront	\$15,000			James Kenney Mural			X	Carryover funds for James Kenney Mural
	138	Total		\$1,201,596	\$36,400						

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Item #	Fund #	Fund Name	Department	Recommended Carryover	Recommended Adjustment	Project Number	Description/Project name	Mandated by Law	Authorized by Council	City Manager Request	Comments/Justification
130	142	Street Light Assessment	Non-Departmental		\$185,225		State of California Debt Service Payment			X	Appropriate funds for the FY 2022 loan payment to the California Energy Commission for conversion of city streetlights to LED technology
131	142	Street Light Assessment	Public Works	\$41,800		PWENEL2202	ASSMT DISTRICT ANNUAL ON-CALL SVCS			X	For Street Lt Assessment District annual report
132	142	Street Light Assessment	Public Works		\$230,000	PWTRBP2201	MLK Jr Way Vision Zero Quick Build			X	Appropriate additional funding for the MLK Jr Way Vision Zero Quick Build
133	142	Street Light Assessment	Public Works		\$20,680		Personnel New Position - Senior Management Analyst			X	Senior Management Analyst (new) Note: Amount is the 6-month prorated cost of fully loaded cost
134	142	Street Light Assessment	Public Works	\$50,000			DC Electric Contract		X		Funds for on-call contract with DC Electric. Approved by Council on 7/26/22 via Resolution 70,484-N.S./R13
	142 Total			\$91,800	\$435,905						
135	143	Business Economic Development	City Manager's Office		\$365,470		Berkeley EDA COVID-19 Resiliency Loan Program			X	Remaining funds for the Berkeley EDA COVID-19 Resiliency Loan Program Sub-grant to Working Solutions
	143 Total			\$0	\$365,470						
136	147	UC Settlement	Fire		\$1,338,441		UC Settlement			X	Appropriate UC Settlement Fund for the Firefighter Academy, Counseling Services and SBCA Compressors.
	147 Total			\$0	\$1,338,441						
137	148	Cultural Trust	City Manager's Office	\$35,000			Contracts and Invoices			X	Carryover for Civic Arts contracts and invoices in FY 2023
138	148	Cultural Trust	City Manager's Office	\$317,500			Contracts and Invoices for Various Civic Arts Projects			X	Carryover for Public Art contracts and invoices in FY 2023
139	148	Cultural Trust	City Manager's Office	\$602,372			Various public art projects			X	These funds - generated from fees paid by private developers in lieu of implementing on-site public art per the Public Art on Private Development policy - are used to finance public art projects throughout the City. There are a number of pending Public Art projects to utilize this funding. This funding should be carried over from year to year, similar to the historic practice with the Public Art Fund.
	148 Total			\$954,872	\$0						
140	149	Private Party Sidewalks	Public Works	\$100,000		PWENSW2001	FY 2020 Sidewalk Repair Program			X	Carryover for the FY 2020 Sidewalk Repair Program
141	149	Private Party Sidewalks	Public Works		\$500,000	PWT1SW2201	T1 PH 2 Sidewalk Mtc & Safety Rep			X	Carryover funds for the T1 Phase 2 Sidewalk Maintenance & Safety Replacement project
142	149	Private Party Sidewalks	Public Works	\$50,000		PWT1SW2201	T1 Phase 2 Sidewalk Maintenance & Safety Replacement			X	Carryover of funds for the T1 Phase 2 Sidewalk Maintenance & Safety Replacement Project
	149 Total			\$150,000	\$500,000						
143	150	Public Art	City Manager's Office	\$17,500			Contracts and Invoices for Various Civic Arts Projects			X	Carryover for Civic Arts contracts and invoices in FY 2023

FY 2022 RECOMMENDED CARRYOVER AND FY 2023 RECOMMENDED ADJUSTMENT (AAO#1)

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Item #	Fund #	Fund Name	Department	Recommended Carryover	Recommended Adjustment	Project Number	Description/Project name	Mandated by Law	Authorized by Council	City Manager Request	Comments/Justification
144	150	Public Art	City Manager's Office	\$81,867						X	
	150 Total			\$99,367	\$0						
155	159	Citizens Options for Public Safety	Police		\$200,000		Police contracts and purchases			X	New Allocation from fund balance. Police contracts and purchases
	159 Total			\$0	\$200,000						
156	302	Operating Grants - State	HHCS		\$912,213	HHOFPH2301	Future of Public Health Grant			X	Appropriate FY 2023 funds for Future of Public Health Grant
157	302	Operating Grants - State	HHCS	\$2,500,000			Local Housing Trust Fund (LHTF) balance			X	Carryover balance of loan RESO#69,694 LHTF CT#42100085.
	302 Total			\$2,500,000	\$912,213						
158	306	Capital Grants - State	Public Works		\$485,926	PWTRBP1802	Milvia Bikeway			X	To continue project construction
159	306	Capital Grants - State	Public Works	\$431,474		PWTRBP2201	MLK Jr Way Vision Zero			X	Carryover funds for the MLK Jr. Vision Zero project
160	306	Capital Grants - State	Public Works	\$4,715		PWTRBP2203	Parker Addison Bikeway			X	to continue and complete the design and construction
161	306	Capital Grants - State	Public Works		\$54,059	PWTRBP2205	Woolsey-Fulton Bicycle Blvd			X	New Project Request
162	306	Capital Grants - State	Public Works		\$192,941	PWTRBP2205	Woolsey-Fulton Bicycle Blvd			X	New Project Request
163	306	Capital Grants - State	Public Works	\$72,136	\$422,480	PWTRCS2203	University West Bus Stops			X	To continue project construction
164	306	Capital Grants - State	Public Works		\$47,360		Gillman Phase II			X	New Project Request
	306 Total			\$508,325	\$1,202,766						
165	307	Capital Grants - Local	Public Works	\$59,145		PWTRBP1802	Milvia Bikeway			X	To continue project construction
166	307	Capital Grants - Local	Public Works	\$214,000		PWTRBP2204	Dwight at California Intersection Improvements			X	Carryover funds for the Dwight at California Intersection Improvements project
167	307	Capital Grants - Local	Public Works		\$180,000	PWTRCS2204	Telegraph Study & PE			X	
168	307	Capital Grants - Local	Public Works	\$110,000		PWTRCS2204	Telegraph Study & PE			X	
169	307	Capital Grants - Local	Public Works		\$1,644,000	PWTRTM2301	I-80 Gilman Interchange Phase 2		X		Appropriate funds for I-80 Gilman Interchange Improvement (Phase 2) project. Approved by Council through Res#69,732-N.S. dated 02/23/2021.
	307 Total			\$383,145	\$1,824,000						
170	309	Office of Traffic Safety Grant	Police		\$180,000		Office of Traffic Safety Grant		X		New Office of Traffic Safety Grant for Federal Fiscal Year (10/1/2021- 9/30/2022). Approved by Council on 9/13/22 through Resolution #70,513-N.S.

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Item #	Fund #	Fund Name	Department	Recommended Carryover	Recommended Adjustment	Project Number	Description/Project name	Mandated by Law	Authorized by Council	City Manager Request	Comments/Justification
	309 Total			\$0	\$180,000						
171	312	Health (General)	HHCS		\$3,561	HHOSTD2301	STD Management			X	Appropriate funds for STD Management Grant for STD prevention and control activities.
172	312	Health (General)	HHCS		\$4,101	HHOTBR2301	TB Real-Time Allotment Grant			X	Appropriate funds for the Real-Time Allotment Grant for TB control efforts; Funding period: 07/01/2022 through 06/30/2023
173	312	Health (General)	HHCS		\$1,583	HHOTBR2302	TB Real-Time Allotment Amendment			X	Appropriate FY23 TB Programmatic Budget Increase
174	312	Health (General)	HHCS		\$11,807	HHPFCM2301	Foster Care Match			X	Appropriate funds for Foster Care match
175	312	Health (General)	HHCS		\$96,477	HHPWIC2302	FY 2023 Breastfeeding Counseling Program Grant Budget			X	Establish FY 2023 Breastfeeding Peer Counseling Program grant budget
176	312	Health (General)	HHCS	\$23,818			Immunization COVID-19 Grant			X	Carryover grant funds to continue the Immunization for COVID-19 project
	312 Total			\$23,818	\$117,529						
177	313	Targeted Case Management/Linkages	HHCS		\$24,300	HHATCM2301	AG TCM			X	Appropriate Aging Targeted Case Management grant funds for FY 2023
	313 Total			\$0	\$24,300						
178	315	MHSA Fund	HHCS		\$146	HHPMHS2302	Public Health MHSA High School Prevention Program			X	Revise grant budget to match approved amount
179	315	MHSA Fund	HHCS		(\$1,035,574)		Adjust fringe benefit budget			X	Adjust MHSA fund fringe benefit account codes with no linked personnel. Decrease FY 2023 MHSA fund budget.
	315 Total			\$0	(\$1,035,428)						
180	316	Health (Short'Doyle)	HHCS		\$1,576,142		FY 2023 Medi-Cal Budget			X	Revise FY 2023 Medi-Cal grant budget to add enough funds to cover all planned expenses
	316 Total			\$0	\$1,576,142						
181	318	Alcoholic Beverage Control Grant	Police		\$72,449		ABC Grant		X		New ABC Grant 7/1/21-6/30-22. Approved by Council on 11/3/22
	318 Total			\$0	\$72,449						
182	320	Senior Nutrition (Title III)	HHCS		\$26,903	HHAMOW2301	Aging Meals on Wheels			X	Revise grant budget to match approved amount
	320 Total			\$0	\$26,903						
183	321	C.F.P. Title X	HHCS		\$90,000	HHPTIX2301	Title X BSHSC			X	Appropriate funds for the Title X Family Planning Program Award
184	321	C.F.P. Title X	HHCS		\$10,000	HHPTIX2306	Essential Access Grant			X	Appropriate funds for the Person-Centered Contraceptive Counseling (PCCC) Pilot Project - Essential Access grant.

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Item #	Fund #	Fund Name	Department	Recommended Carryover	Recommended Adjustment	Project Number	Description/Project name	Mandated by Law	Authorized by Council	City Manager Request	Comments/Justification
	321			\$0	\$100,000						
	Total			\$0	\$100,000						
185	326	Alameda County Grants	HHCS		\$2,406	HHPBAC2301	Alameda County - BHS Health Clinics			X	Revise grant budget to match approved amount
	326			\$0	\$2,406						
	Total			\$0	\$2,406						
186	327	Senior Supportive Social Services	HHCS		\$40,950	HHAINA2301	AG Information and Assistance			X	Revise grant budget to match approved amount
	327			\$0	\$40,950						
	Total			\$0	\$40,950						
187	328	Family Care	HHCS		\$4,703	HHACAR2301	AG Family Caregiver			X	Appropriate balance of grant funding for the AG Family Caregiver program
	328			\$0	\$4,703						
	Total			\$0	\$4,703						
188	329	CA Integrated Waste Mgmt.	Public Works		\$15,806		FY 2023 Used Oil Grant			X	Appropriate grant funding for the used oil grant
	329			\$0	\$15,806						
	Total			\$0	\$15,806						
189	334	CSBG	HHCS	\$187,297			WeHOPE for the Dignity on Wheels Program			X	Carryover unspent fund for the CSBG-Cares WeHOPE Grant for the Dignity on Wheels Program. Approved by Council through Res#69,550-N.S. dated 09/15/2020
	334			\$187,297	\$0						
	Total			\$187,297	\$0						
190	336	One Time Grant: No Cap	HHCS		\$10,000	HHAKEG2101	Kitchen Electrification Grant		X		Appropriate fund for the East Bay Community Energy - Kitchen Electrification grant. Approved by Council per Res# 69,742-N.S. dated 03/09/2021
191	336	One Time Grant: No Cap	HHCS		\$690,500	HHOCCM2201	Crisis Care Mobile Unit			X	Appropriate grant funding for Crisis Care Mobile Unit contract statement of work
192	336	One Time Grant: No Cap	HHCS		\$52,943	HHOEDF2102	ELC Enhancing Detection Expansion			X	Appropriate funding for WBSC DOC/COVID-19 Response Construction
193	336	One Time Grant: No Cap	HHCS		\$182,651		ELC Enhancing Detection Expansion			X	Appropriate funds from the California Department of Public Health for COVID-19 ELC Enhancing Detection Expansion Funding for a contract amendment with Direct Urgent Care Inc./Carbon Health for COVID-19 Vaccination and Testing Services
194	336	One Time Grant: No Cap	HHCS		\$232,868		Disease Intervention Specialist - STD			X	FY 2023 allocation for the PCHD Disease Intervention Specialist Workforce Development Supplemental Grant
195	336	One Time Grant: No Cap	HHCS	\$35,103	\$668,670		Mental Health Student Services Act Grant			X	Carryover FY 2022 unspent funds and appropriate FY 2023 funds for the Mental Health Student Services Act grant
196	336	One Time Grant: No Cap	HHCS		\$2,469,944		Project Homekey Escrow Funds			X	Funds from the State of California for the Project Homekey escrow purchase costs
197	336	One Time Grant: No Cap	HHCS	\$4,537			Mental Health TeleHealth Grant			X	Carryover grant funds from the Center at Sierra Health Foundation for the purchase of internet technology equipment, telehealth software licenses, and personal protective equipment

FY 2022 RECOMMENDED CARRYOVER AND FY 2023 RECOMMENDED ADJUSTMENT (AAO#1)

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Item #	Fund #	Fund Name	Department	Recommended Carryover	Recommended Adjustment	Project Number	Description/Project name	Mandated by Law	Authorized by Council	City Manager Request	Comments/Justification
198	336	One Time Grant: No Cap	HHCS	\$11,209			Telehealth Grant			X	Carryover grant funds from the Center at Sierra Health Foundation for the purchase of internet technology equipment, telehealth software licenses, and personal protective equipment
199	336	One Time Grant: No Cap	HHCS	\$17,645			Kitchen Electrification Grant			X	Carryover of funds for the Kitchen Electrification grant.
200	336	One Time Grant: No Cap	HHCS	\$20,000			Mental Health Adult Triage Grant			X	Carryover FY 2022 funds for the Mental Health Adult Triage grant.
201	336	One Time Grant: No Cap	HHCS	\$21,228			Prop 64 Program Budget			X	Carryforward of unspent grant funds for FY23 Prop 64 program budget
202	336	One Time Grant: No Cap	HHCS	\$33,953			Children's Triage Grant			X	FY22 Children's Triage Funds Carryforward to FY23
203	336	One Time Grant: No Cap	HHCS	\$116,902			Adult Triage Grant			X	FY22 Adult Triage Funds Carryforward to FY23
204	336	One Time Grant: No Cap	Mayor & Council	\$7,500			Grant for Paid Internships		X		Carryover of fund or the Chancellor's Community Partnership Fund Grant for Paid Internships. Approved by Council on 09/15/2020 through Resolution No. 69,562-N.S.
205	336	One-Time Grant	Non-Departmental		\$75,000		San Francisco Foundation grant to support the Equitable Black Berkeley Initiative		X		Appropriate grant fund from the San Francisco Foundation to renew the existing ideation facilitator contract supporting the Equitable Black Berkeley Initiative
206	336	One Time Grant: No Cap	Parks, Recreation & Waterfront		\$73,918	PRWPK20005	Urban Greening Grant			X	Appropriate new project funding for the Urban Greening Grant project
207	336	One Time Grant: No Cap	Parks, Recreation & Waterfront	\$89,642		PRWPK20005	Urban Greening Grant			X	Carryover project funding for the Urban Greening Grant project
208	336	One Time Grant: No Cap	Parks, Recreation & Waterfront	\$117,885		PRWPK21012	Santa Fe Right of Way			X	Carryover of funds for the Santa Fe Right-Of-Way project
209	336	One Time Grant: No Cap	Parks, Recreation & Waterfront		\$221,950	PRWPK23005	EEMP 2021 Trees Make Life Better			X	Appropriate fund for the Trees Make Life Better project
210	336	One Time Grant: No Cap	Planning		\$20,000		FY 2020 Stopwaste Grant-Utility Upgrade			X	Appropriate grant fund that was deposited in FY 2020 but was not expensed for utility bill management software analysis
211	336	One-Time Grant	Police		\$112,337		Cannabis Grant		X		This is the new one-year Cannabis grant from CHP (7/1/21-6/30/22). We will have to establish all of the codes in ERMA. It will be in Investigations Division but under Traffic (812). Council Res #70,483-N.S.
212	336	One-Time Grant	Police		\$191,053		Tobacco Grant		X		Appropriate funds for Department Of Justice Tobacco Grant Awarded 4/1/21-6/30/25. Approved by Council on 4/12/22 through Resolution #70,295-N.S.
213	336	One-Time Grant	Police	\$312,284			Sexual Assault Grant		X		This was a 3-year Sexual Assault grant that was extended for another 3-year term to 6/30/2025. We need all of the codes from the FY21 budget request to be extended or rolled over to FY22. We have invoices pending. Council Res #69,523-N.S.
	336	Total		\$787,887	\$5,001,834						

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Item #	Fund #	Fund Name	Department	Recommended Carryover	Recommended Adjustment	Project Number	Description/Project name	Mandated by Law	Authorized by Council	City Manager Request	Comments/Justification
214	339	MTC	Public Works	\$96,221		PWTRBP2207	Bicycle Plan Update			X	Appropriate balance of grant money received to-date for FY23 purchases
215	339	MTC	Public Works	\$24,000		PWTRPK1401	goBerkeley expenditures			X	Carryover funds for the goBerkeley program.
	339 Total			\$120,221	\$0						
216	340	FEMA	Fire	\$114,916		FDFAFG20	Assistance Firefighter's Grant Program			X	Carryover of funds for FEMA Assistance Firefighter's Grant Program for the Regional Fire Service Leadership Development Academy (LDA) trainings and supplies
217	340	FEMA	Parks, Recreation & Waterfront		\$287,250	PRWT122001	MLK Jr. Youth Services Center			X	Appropriate new grant funding for the MLK Jr. Youth Services Center program
	340 Total			\$114,916	\$287,250						
218	341	Alameda Waste Mgmt	Public Works		\$850,000		Measure D Stop Waste			X	Appropriate Measure D Stop Waste allocation for Zanker C&D Recycling
	341 Total			\$0	\$850,000						
219	344	CALTRANS Grant	Public Works	\$700		PWTRBP1707	9th Street Pathway Phase II			X	Carryover funds for consultant work on the 9th Street Pathway Phase II project
	344 Total			\$700	\$0						
220	350	Bioterrorism Grant	HHCS		\$252,400	HHOWFD2301	Workforce Development Grant			X	Appropriate new funding for Workforce Development Grant Funds.
221	350	Bioterrorism Grant	HHCS	\$90,000		HHOWFD2301	Workforce Development Grant			X	Carryover of Workforce Development Grant Funds from FY 2022.
222	350	Bioterrorism Grant	HHCS	\$255,427		HHOWFD2301	Workforce Development Grant			X	Carryover of Workforce Development Grant Funds from FY 2022.
	350 Total			\$345,427	\$252,400						
223	354	ARPA Recovery	City Manager's Office	\$8,579			Arts Recovery			X	ARPA Funds Reserved to Administer Arts Recovery Funding
224	354	ARPA Recovery	City Manager's Office	\$126,575			Arts Recovery			X	ARPA Funds Reserved for Arts Recovery
225	354	ARPA Recovery	HHCS	\$1,464,045			ARPA Funding			X	ARPA Carryforward of unspent funds
	354 Total			\$1,599,199	\$0						
226	501	Capital Improvement Fund	City Manager's Office	\$53,350			Civic Arts Projects			X	Carryover funds for Civic Arts projects in FY 2023.
227	501	Capital Improvement Fund	Parks, Recreation & Waterfront	\$150,000		PRWPK22007	Glendale Laloma Play and ADA			X	Carryover funds for the Glendale LaLoma Play and ADA Project.
228	501	Capital Improvement Fund	Parks, Recreation & Waterfront	\$150,000		PRWPK22008	Cedar Rose (2-5 and 5-12 play structure)			X	Carryover for the Cedar Rose (2-5 and 5-12 play structure).
229	501	Capital Improvement Fund	Parks, Recreation & Waterfront	\$30,000		PRWPK22014	West Campus Fencing			X	Carryover for West Campus Fencing.
230	501	Capital Improvement Fund	Parks, Recreation & Waterfront	\$33,486			Capital Personnel			X	Carryover to fund CIP personnel.

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Item #	Fund #	Fund Name	Department	Recommended Carryover	Recommended Adjustment	Project Number	Description/Project name	Mandated by Law	Authorized by Council	City Manager Request	Comments/Justification
231	501	Capital Improvement Fund	Public Works	\$361,952		PWEMBM2002	Fire Station #3 Upgrade			X	Carryover of Fire Station #3 Upgrades project funds
232	501	Capital Improvement Fund	Public Works	\$186,324		PWENBM2005	CY Lift Pits - Building G			X	Carryover funds for the CY Lift Pits - Building G project
233	501	Capital Improvement Fund	Public Works	\$126,968		PWENBM2203	PSB BICYCLE BUNKER ROOF REPAIR			X	To continue this project - in design phase
234	501	Capital Improvement Fund	Public Works	\$42,294		PWENBM2206	MHSC ROOF REPAIR			X	To continue this project - in design phase
235	501	Capital Improvement Fund	Public Works	\$19,228		PWENBM2207	1947 Center St Bottle Fill Stations			X	To complete the project
236	501	Capital Improvement Fund	Public Works	\$185,030		PWENBM2208	Carpet Replacement - Civic Center Building Phase 2			X	Carryover of funds for the Carpet Replacement - Civic Center Building Phase 2 project to complete it.
237	501	Capital Improvement Fund	Public Works	\$21,854		PWENBM2209	Civic Center Door Card Readers			X	Carryover of funds for the Civic Center Door Card Readers project
238	501	Capital Improvement Fund	Public Works	\$366,628		PWENCB2105	STAIR Center ADA			X	To continue this project - in design phase
239	501	Capital Improvement Fund	Public Works	\$341,624		PWENEN2001	EV Charging Stations			X	Carryover for the EV Charging Stations project
240	501	Capital Improvement Fund	Public Works	\$446,624		PWENPL2201	Corp Yard Comprehensive Plan			X	Carryover funds for the Corp Yard Comprehensive Plan project
241	501	Capital Improvement Fund	Public Works	\$34,034		PWENRW2001	Retaining Wall - 1322 Glendale Ave			X	Carryover and appropriation of new funds for the Retaining Wall - 1322 Glendale Avenue project
242	501	Capital Improvement Fund	Public Works	\$225,037		PWENSR1542	Sewer Laterals & CCTV			X	Carryover for the Sewer Laterals & CCTV project
243	501	Capital Improvement Fund	Public Works	\$469,501		PWENST2101	Street Rehab FY 2021			X	Carryover and appropriation of new funds for the Street Rehab FY 2021 project
244	501	Capital Improvement Fund	Public Works	\$1,090,429		PWENST2201	FY 2022 Street Rehab			X	Carryover of funds for the FY 2022 Street Rehab Project
245	501	Capital Improvement Fund	Public Works	\$148,919		PWENST2202	Wildcat Canyon Emergency Repairs			X	To complete emergency repairs needed at Wildcat Canyon
246	501	Capital Improvement Fund	Public Works	\$83,421		PWENSW2001	FY20 Sidewalk Repair Program			X	To continue and complete the project, currently in the construction phase
247	501	Capital Improvement Fund	Public Works	\$367,317		PWENSW2002	SIDEWALK SHAVING - FY 2020			X	To continue sidewalk shaving services
248	501	Capital Improvement Fund	Public Works	\$91,637		PWENUD0906	UUD GRIZZLY PEAK #48			X	To continue this on-going project.
249	501	Capital Improvement Fund	Public Works	\$46,800		PWT1SW2202	T1 PH2 Pathway Repairs/Improvements			X	Carryover of funds for the outstanding invoices of T1 PH2 Pathway Repairs/Improvements project.
250	501	Capital Improvement Fund	Public Works		\$21,366	PWTRCS1406	Shattuck Reconfiguration			X	Appropriate funds to pay for the Shattuck Reconfiguration Planter Project
251	501	Capital Improvement Fund	Public Works		\$28,682	PWTRCS2204	Telegraph Study & PE			X	To continue this on-going project.
252	501	Capital Improvement Fund	Public Works	\$5,952		PWTRTC1301	Traffic Calming			X	Carryover funding for the Traffic Calming program
253	501	Capital Improvement Fund	Public Works	\$22,342		PWTRTC2101	Healthy Streets			X	To continue this on-going project.

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Item #	Fund #	Fund Name	Department	Recommended Carryover	Recommended Adjustment	Project Number	Description/Project name	Mandated by Law	Authorized by Council	City Manager Request	Comments/Justification
254	501	Capital Improvement Fund	Public Works		\$34,799		Personnel New Position - Transportation Manager			X	Transportation Manager (new) Note: Amount is the 6-month prorated cost of fully loaded cost
255	501	Capital Improvement Fund	Public Works	\$78,193			Sidewalk Program			X	For sidewalk program needs
256	501	Capital Improvement Fund	Public Works	\$434,148			Facilities Capital Improvement CIP & Maintenance			X	Carryover of funds for Facilities Capital Improvement CIP and Maintenance
257	501	Capital Improvement Fund	Public Works	\$907,468			ADA Transition Plan Implementation			X	To begin implementation of projects identified in the updated ADA Transition Plan.
	501 Total			\$6,520,561	\$84,847						
258	506	Meas M - Streets and Watershed Improvements	Public Works		\$926,720	PWENSD2305	Strawberry Creek Culvert Repairs			X	To appropriate the Measure M available balance for the Strawberry Creek Culvert project
	506 Total			\$0	\$926,720						
259	511	Measure T1	City Manager's Office	\$13,940			T1 Phase 1 Public Art Projects			X	Public art projects at North Berkeley Senior Center and San Pablo Park are nearly complete. The balance is for identification signage and final documentation for these projects.
260	511	Measure T1	Parks, Recreation & Waterfront	\$500,000		PRWPK20003	Ohlone Park Improvements			X	Carryover funds for the Ohlone Park Improvements project
261	511	Measure T1	Parks, Recreation & Waterfront	\$27,508		PRWPK21008	Civic Center Fountain Garden			X	Carryover funds for the Civic Center Fountain Garden project
262	511	Measure T1	Parks, Recreation & Waterfront	\$527		PRWT119004	Grove Park Phase 2			X	Carryover project funding for Grove Park Phase 2 project
263	511	Measure T1	Parks, Recreation & Waterfront	\$183,995		PRWT119004	Grove Park Phase 2			X	Carryover project funding for Grove Park Phase 2 project
264	511	Measure T1	Parks, Recreation & Waterfront	\$88,374		PRWT119006	University Avenue, Marina, Spinnaker Street			X	Carryover of funds for the University Avenue, Marina, Spinnaker Street project
265	511	Measure T1	Parks, Recreation & Waterfront	\$16,756		PRWT122001	MLK Jr. Youth Services Center			X	Carryover funds for the MLK Jr. Youth Services Center project
266	511	Measure T1	Parks, Recreation & Waterfront	\$225,331		PRWT122002	African American Holistic Resource			X	Carryover project funding for the continuation of the African American Holistic Resource project
267	511	Measure T1	Parks, Recreation & Waterfront	\$400,000		PRWT122003	CAZADERO DINING HALL & ADA IMPRVMTS			X	Carryover project funding for the Cazadero Dining Hall & ADA Improvements project
268	511	Measure T1	Parks, Recreation & Waterfront	\$70,189		PRWT122004	Willard Clubhouse Restroom Replacement			X	Carryover for the Willard Clubhouse Restroom Replacement project.
269	511	Measure T1	Parks, Recreation & Waterfront	\$50,000	\$309,748	PRWT122005	Tom Bates Restroom/Community Space			X	Carryover and new appropriation for the Tom Bates Restroom/Community Space project
270	511	Measure T1	Parks, Recreation & Waterfront	\$100,000		PRWT122006	Harrison Park Restrooms Renovation			X	Carryover funds for the Harrison Park Restrooms Renovation project
271	511	Measure T1	Parks, Recreation & Waterfront		\$44,000	PRWT122007	Ohlone Park - Restroom and Lighting			X	Appropriate fund for Ohlone Park - Restroom and Lighting project
272	511	Measure T1	Parks, Recreation & Waterfront	\$481,760		PRWT122009	Aquatic Park Tide Tubes Phase 1B			X	Carryover for Aquatic Park Tide Tubes Phase 1B Project

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Item #	Fund #	Fund Name	Department	Recommended Carryover	Recommended Adjustment	Project Number	Description/Project name	Mandated by Law	Authorized by Council	City Manager Request	Comments/Justification
273	511	Measure T1	Parks, Recreation & Waterfront	\$10,001		PRWT122011	King Pool Tile And Plaster Replacement			X	Carryover for King Pool tile and plaster replacement project.
274	511	Measure T1	Parks, Recreation & Waterfront	\$923		PRWT122013	D and E Dock Replacement			X	Carryover for permit fees.
275	511	Measure T1	Parks, Recreation & Waterfront	\$37,500		PRWT122014	K Dock Restroom Renovation			X	Carryover for K Dock Restroom Renovation
276	511	Measure T1	Parks, Recreation & Waterfront	\$25,000		PRWT122015	Cesar Chavez Park - New Restroom (On Spinnaker)			X	Carryover funding for the Cesar Chavez Park - New Restroom project
277	511	Measure T1	Public Works	\$10,000		PWENSD2103	Storm Drain Improvement FY 2021			X	Carryover funds for the Storm Drain Improvement FY 2021 project
278	511	Measure T1	Public Works	\$73,727		PWT1CB1901	NBSC Seismic Retrofit - T1			X	Carryover for the North Berkeley Senior Center - T1 project
279	511	Measure T1	Public Works	\$78,256		PWT1CB2201	South Berkeley Senior Center			X	Carryover of funds for The South Berkeley Senior Center project
280	511	Measure T1	Public Works	\$312,538		PWT1CB2202	Restrooms in the ROW			X	Carryover of funds for the Restrooms in the ROW project
281	511	Measure T1	Public Works	\$223,927		PWT1CB2203	1947 Center Street Improvements			X	Carryover of funds for 1947 Center Street Improvements project for HVAC/Electrical, Control Upgrade.
282	511	Measure T1	Public Works		\$62,070	PWT1CB2204	Fire Station #2 Improvements			X	Appropriate funds for the Fire Station #2 Improvements ongoing project.
283	511	Measure T1	Public Works	\$15,530		PWT1CB2204	Fire Station #2 Improvements			X	Carryover funds for the Fire Station #2 Improvement project.
284	511	Measure T1	Public Works	\$156,400		PWT1CB2205	Fire Station #6 Improvements			X	Carryover project budget for the Fire Station #6 Improvements project
285	511	Measure T1	Public Works	\$71,416		PWT1CB2207	Oxford and Telegraph Channing Garage and Restrooms			X	Carryover of funds for Oxford and Telegraph Channing Garage and Restrooms project.
286	511	Measure T1	Public Works	\$100,000		PWT1CB2208	EMERG POWER SUPPLY SOLAR BATTERIES			X	Carryover project budget for the Emergency Power Supply Solar Batteries project
287	511	Measure T1	Public Works	\$74,530		PWT1CB2209	Corp Yard Building B			X	Carryover of funds for the Corp Yard Building B project to complete the design phase of Corp Yard Building H Project
288	511	Measure T1	Public Works	\$13,901		PWT1CB2211	Corp Yard Building H			X	
289	511	Measure T1	Public Works	\$50,899		PWT1CB2211	CY Storage Room - Roof Repair Bldg. H			X	Carryover funds for the CY Storage Room - Roof Repair Bldg. H project
290	511	Measure T1	Public Works	\$150,000		PWT1ST2202	T1 Phase 2 Bollards			X	Carryover of funds for the T1 Phase 2 Bollards project
291	511	Measure T1	Public Works	\$300,000		PWT1ST2209	T1 Phase 2 Streets			X	Carryover of funds for the T1 Phase 2 Streets project
292	511	Measure T1	Public Works	\$350,000		PWT1SW2201	T1 Phase 2 Sidewalk Maintenance & Safety Replacement			X	Carryover of funds for the T1 Phase 2 Sidewalk Maintenance & Safety Replacement Project
293	511	Measure T1	Public Works	\$350,000		PWT1SW2201	T1 PH 2 Sidewalk Mtc & Safety Rep			X	Carryover for the Measure T1 Phase 2 Sidewalk Maintenance and Safety Repair project
294	511	Measure T1	Public Works	\$50,000		PWT1SW2202	T1 Phase 2 Pathways Repair			X	Carryover for the T1 Phase 2 Pathways Repair project
	511 Total			\$4,612,928	\$415,818						

FY 2022 RECOMMENDED CARRYOVER AND FY 2023 RECOMMENDED ADJUSTMENT (AAO#1)

Attachment 2

Item #	Fund #	Fund Name	Department	Recommended Carryover	Recommended Adjustment	Project Number	Description/Project name	Mandated by Law	Authorized by Council	City Manager Request	Comments/Justification
295	512	Measure O - Affordable Housing	Public Works	\$303,545		PWENBM2110	Berkeley Way Observer			X	Project not started yet
	512 Total			\$303,545	\$0						
296	601	Zero Waste	Public Works		\$4,255		Personnel New Position - Associate Management Analyst			X	Associate Management Analyst (new) Note: Amount is the 6-month prorated cost of fully loaded cost
297	601	Zero Waste	Public Works		\$25,850		Personnel New Position - Senior Management Analyst			X	Senior Management Analyst (new) Note: Amount is the 6-month prorated cost of fully loaded cost
	601 Total			\$0	\$30,105						
298	608	Marina Fund	Parks, Recreation & Waterfront		\$52,500	PRW19004	Hs Lordships Renovations & Operations			X	FY 2023 funds for 199 Seawall operating costs
299	608	Marina Fund	Parks, Recreation & Waterfront	\$34,509		PRWPP15001	Bay Trail Extension III			X	Carryover to complete Bay Trail Extension III.
300	608	Marina Fund	Parks, Recreation & Waterfront	\$360		PRWT119006	University Avenue, Marina, Spinnaker Street			X	Carryover of funds to pay an invoice to Enthalpy Analytical received after FY 2022 requisition deadline
301	608	Marina Fund	Parks, Recreation & Waterfront	\$952,416		PRWT119006	University Avenue, Marina, Spinnaker Street			X	Carryover of funds for the University Avenue, Marina, Spinnaker Street project
302	608	Marina Fund	Parks, Recreation & Waterfront	\$48,489		PRWWF17003	S. Cove Accessible Ramp			X	Carryover to complete S. Cove Accessible Ramp project.
303	608	Marina Fund	Parks, Recreation & Waterfront	\$35		PRWWF19001	Waterfront Master Plan			X	Carryover to complete Waterfront Master Plan
304	608	Marina Fund	Parks, Recreation & Waterfront	\$5,176		PRWWF19002	Sea Level Rise Study			X	Carryover to complete Sea Level Rise Study
305	608	Marina Fund	Parks, Recreation & Waterfront	\$5,658		PRWWF19005	Small Dock Replacement			X	Carryover for construction contingency.
306	608	Marina Fund	Parks, Recreation & Waterfront	\$132,173		PRWWF20005	O&K Dock Electrical			X	Carryover to complete O& K Dock Electrical project.
307	608	Marina Fund	Parks, Recreation & Waterfront	\$4,132		PRWWF20012	Waterfront Bike Lockers			X	Carryover to complete Waterfront Bike Lockers project.
308	608	Marina Fund	Parks, Recreation & Waterfront	\$10,000		PRWWF21002	Waterfront Dredging			X	Carryover of funds for the Waterfront Dredging project
309	608	Marina Fund	Parks, Recreation & Waterfront	\$15,570		PRWWF21003	FY 2022 Marina Minor Maintenance			X	Carryover of funds for the FY 2022 Marina Minor Maintenance project
310	608	Marina Fund	Parks, Recreation & Waterfront	\$8,400		PRWWF21006 & PRWWF22005	Department of Boating & Waterways Save Grants			X	Carryover City matching funds for the Department of Boating & Waterways Save 2020 Grant and Save 2021 Grant
311	608	Marina Fund	Parks, Recreation & Waterfront	\$100,000		PRWWF21007	Waterfront Key Fob System			X	Carryover funds for the Waterfront Key Fob System project.
312	608	Marina Fund	Parks, Recreation & Waterfront	\$5,459		PRWWF22001	Finger Docks / Other Dock Improvements			X	Carryover to complete Finger Dock and Other Dock Improvement projects.
313	608	Marina Fund	Parks, Recreation & Waterfront	\$300,000		PRWWF22002	Waterfront Dredging			X	Carryover funds for the Waterfront Dredging project
314	608	Marina Fund	Parks, Recreation & Waterfront	\$14,000		PRWWF22006	D & E Bathroom Fence			X	Carryover of funds for the D & E Bathroom Fence Project

FY 2022 RECOMMENDED CARRYOVER AND FY 2023 RECOMMENDED ADJUSTMENT (AAO#1)

Attachment 2

Item #	Fund #	Fund Name	Department	Recommended Carryover	Recommended Adjustment	Project Number	Description/Project name	Mandated by Law	Authorized by Council	City Manager Request	Comments/Justification
315	608	Marina Fund	Parks, Recreation & Waterfront	\$300,000		PRWWF22008	Finger Dock Phase 4			X	Carryover funds for the Finger Dock Phase 4 project
316	608	Marina Fund	Parks, Recreation & Waterfront	\$8,900		PRWWF22009	Hana Japan Fire Suppression			X	Carryover for Hana Japan Fire Suppression repair and security.
317	608	Marina Fund	Parks, Recreation & Waterfront	\$102		PRWWF22010	DBW BSEE Grant			X	Carryover of COB match funds for DBW BSEE Grant.
318	608	Marina Fund	Parks, Recreation & Waterfront	\$16,000		PRWWF22011	Owl Fence Project			X	Carryover of funds for the Owl Fence project
319	608	Marina Fund	Parks, Recreation & Waterfront		\$10,200		Memorial Benches		X		Funds for memorial benches approved by Council on 9/13/22
	608 Total			\$1,961,379	\$62,700						
320	611	Sanitary Sewer Operation	Public Works	\$212,891	\$160,000	PWENSR1908	Sanitary Sewer Master Plan			X	Carryover sewer funding and a new appropriation for the continuation of the Sanitary Sewer Master Plan
321	611	Sanitary Sewer Operation	Public Works	\$307,049		PWENSR2002	Sanitary Sewer Rehabilitation Project			X	Carryover of funds for Change Order #1 Progress payment.
322	611	Sanitary Sewer Operation	Public Works	\$469,179		PWENSR2201	SS Rehab Shattuck (Vine-Parker)			X	Carryover sewer funding for the continuation of the Sanitary Sewer Rehab Shattuck (Vine-Parker) project
323	611	Sanitary Sewer Operation	Public Works		\$20,680		Personnel New Position - Senior Management Analyst			X	Senior Management Analyst (new) Note: Amount is the 6-month prorated cost of fully loaded cost
	611 Total			\$989,119	\$180,680						
324	616	Clean Storm Water	Public Works	\$20,000		PWENEL2202	ASSMT DISTRICT ANNUAL ON-CALL SVCS			X	For annual reporting requirement
325	616	Clean Storm Water	Public Works	\$154,518		PWENSD2103	Storm Drain Improvement FY 2021			X	Carryover funds for the Storm Drain Improvement FY 2021 project
326	616	Clean Storm Water	Public Works	\$200,000		PWENSD2201	Stormwater Master Plan			X	Carryover funds for the Stormwater Master Plan project
327	616	Clean Storm Water	Public Works	\$106,200		PWENST2302	Wildcat Canyon Road Repairs			X	
328	616	Clean Storm Water	Public Works		\$20,680		Personnel New Position - Senior Management Analyst			X	Senior Management Analyst (new) Note: Amount is the 6-month prorated cost of fully loaded cost
	616 Total			\$480,718	\$20,680						
329	621	Permit Service Center	Planning		\$23,106		Associate Planner (Permanent)			X	NOTE: amts budgeted will be 1/2 vs. 1, since hire will likely occur around 6 months into the FY, so only 6 months budgeted vs. 12 m.-- Original budget ask: 75% (GF) 011-53-584-622-0000-000-441-511110- (\$138,633.10); 25% (PSC) 621-53-584-622-0000-000-471-511110- (\$46,211.03)

FY 2022 RECOMMENDED CARRYOVER AND FY 2023 RECOMMENDED ADJUSTMENT (AAO#1)

Attachment 2

Item #	Fund #	Fund Name	Department	Recommended Carryover	Recommended Adjustment	Project Number	Description/Project name	Mandated by Law	Authorized by Council	City Manager Request	Comments/Justification
330	621	Permit Service Center	Planning		\$34,241		Center Street Garage Parking			X	FY 2023 funds for Center Street Garage parking costs.
331	621	Permit Service Center	Planning		\$135,791		Principal Planner (Projects)			X	NOTE: amts budgeted will be 3/4 vs. 4/4, since hire will occur 3 months into the FY, so only 9 months budgeted vs. 12 m.-- Original budget ask: 25% (GF) 011-53-584-622-0000-000-441-511110- (\$60,351.20); 75% (PSC) 621-53-584-622-0000-000-471-511110- (\$181,053.61)
332	621	Permit Service Center	Planning		\$184,844		Associate Planner (3-yr. temp.)			X	Full amount listed here, since 3-yr. will begin upon hire, not tied to FY necessarily, esp. since all PSC Funds being used to fund this 3-yr. temp. position.
333	621	Permit Service Center	Public Works		\$105,000		Personnel New Position - Senior Engineering Inspector			X	Senior Engineering Inspector (new) - 6 month prorated fully loaded cost. This inspector will lead utilities and development related inspection on behalf of Engineering.
334	621	Permit Service Center	Public Works	\$155,323			Staff augmentation Plan Checks			X	Salary savings sub-div for staff augmentation Plan Checks from Sal Sav to Pavement Engineer
	621 Total			\$155,323	\$482,981						
335	622	Unified Program (CUPA)	Planning	\$50,000			EnvisionConnect Replacement			X	Carryover funds for EnvisionConnect Replacement
	622 Total			\$50,000	\$0						
336	627	Off-Street Parking	Public Works		\$13,920		Personnel New Position - Transportation Manager			X	Transportation Manager (new) Note: Amount is the 6-month prorated cost of fully loaded cost
337	627	Off-Street Parking	Public Works		\$17,000	PWTRPPK2301	CSG Lease Agreement			X	Appropriate funds for funds for the Center Street Garage staff time for a pour project that had a timing element to be completed on July 2, 2022.
	627 Total			\$0	\$30,920						
338	631	Parking Meter Fund	Public Works		\$67,320	PWENCB1906	125-127 University Avenue Facility Improvement			X	Appropriate funds for the 125-127 University Avenue Facility Improvement Project
339	631	Parking Meter Fund	Public Works	\$78,914		PWENCB1907	125-127 University Avenue Parking Lot Improvement			X	Carryover funding for the continuation of the 125-127 University Avenue Parking Lot Improvement project
340	631	Parking Meter Fund	Public Works	\$271,392		PWTRPK1401	goBerkeley expenditures			X	Carryover funds for the goBerkeley program.
341	631	Parking Meter Fund	Public Works		\$41,759		Personnel New Position - Transportation Manager			X	Transportation Manager (new) Note: Amount is the 6-month prorated cost of fully loaded cost
	631 Total			\$350,306	\$109,079						

FY 2022 RECOMMENDED CARRYOVER AND FY 2023 RECOMMENDED ADJUSTMENT (AAO#1)

Attachment 2

Item #	Fund #	Fund Name	Department	Recommended Carryover	Recommended Adjustment	Project Number	Description/Project name	Mandated by Law	Authorized by Council	City Manager Request	Comments/Justification
342	671	Equipment Replacement	Public Works		\$21,274		Personnel New Position - Associate Management Analyst			X	Associate Management Analyst (new) Note: Amount is the 6-month prorated cost of fully loaded cost
	671 Total			\$0	\$21,274						
343	672	Equipment Maintenance	Public Works		\$15,510		Personnel New Position - Senior Management Analyst			X	Senior Management Analyst (new) Note: Amount is the 6-month prorated cost of fully loaded cost
	672 Total			\$0	\$15,510						
344	673	Building Maintenance	Public Works		\$8,510		Personnel New Position - Associate Management Analyst			X	Associate Management Analyst (new) Note: Amount is the 6-month prorated cost of fully loaded cost
345	673	Building Maintenance	Public Works	\$45,000			TK Elevators Contract			X	Funds for contract with TK Elevators for elevator repairs at Telegraph/Channing Garage
346	673	Building Maintenance	Public Works	\$50,000			Silva Business Consulting Contract			X	To fund Silva Business Consulting contract
347	673	Building Maintenance	Public Works	\$50,000			University Ave Properties Management			X	Management of 3 commercial properties at University Avenue
	673 Total			\$145,000	\$8,510						
348	678	Public Liability	City Attorney		\$85,819		PL Fund Savings			X	Appropriate funds for encumbered BCJPIA May and June 2022 invoices totaling \$658,309.21 paid with FY23 funds.
349	678	Public Liability	City Attorney	\$343,439			PL Fund Savings			X	Carryover of funds for encumbered BCJPIA May and June 2022 invoices totaling \$658,309.21 paid with FY23 funds.
	678 Total			\$343,439	\$85,819						
350	680	IT Cost Allocation	Information Technology		\$200,000		Customer Relationship Management System - Professional Services			X	Customer Relationship Management System (CRM) to replacement legacy CRM system to support 311 and citywide customer service. Current CRM system is out of date and unsupported by the vendor and not well integrated with other City business systems, including billing, work order and payment systems.
351	680	IT Cost Allocation	Information Technology		\$770,000		IT Move to 1947 Center Street			X	
352	680	IT Cost Allocation	Information Technology	\$65,592			Temporary Staffing for PC-R Support			X	Appropriate fund to hire temporary staff for remaining 5 months in FY23; Temporary Staffing for PC-R Support
353	680	IT Cost Allocation	Information Technology	\$113,000			Carryover Fund Balance - Customer Relationship Management System - Software maintenance			X	Customer Relationship Management System (CRM) to replacement legacy CRM system to support 311 and citywide customer service. Current CRM system is out of date and unsupported by the vendor and not well integrated with other City business systems, including billing, work order and payment systems.

FY 2022 RECOMMENDED CARRYOVER AND FY 2023 RECOMMENDED ADJUSTMENT (AAO#1)

Attachment 2

Item #	Fund #	Fund Name	Department	Recommended Carryover	Recommended Adjustment	Project Number	Description/Project name	Mandated by Law	Authorized by Council	City Manager Request	Comments/Justification
354	680	IT Cost Allocation	Information Technology	\$150,000			Carryover Fund Balance - Professional Services Protiviti Government Services/Robert Half International			X	Carryover Fund Balance - professional consultants with technical expertise and skillset to assist with operation support to complete pending critical projects; needed due to challenge replacing key staff vacancies
	680 Total			\$328,592	\$970,000						
355	781	Berkeley Tourism BID	City Manager's Office		\$216,037		Berkeley Tourism BID			X	This funding belongs to the Berkeley Tourism BID and the City is obligated to disperse it.
	781 Total			\$0	\$216,037						
356	782	Elmwood BID	City Manager's Office		\$33,518		Elmwood BID			X	This funding belongs to the Elmwood BID and the City is obligated to disperse it.
	782 Total			\$0	\$33,518						
357	783	Solano Avenue BID	City Manager's Office		\$10,082		Solano Avenue BID			X	This funding belongs to the Solano BID and the City is obligated to disperse it.
	783 Total			\$0	\$10,082						
358	786	Dwnt Berk Prop & Imp	City Manager's Office		\$235,057		Downtown Berkeley PBID			X	This funding belongs to the Downtown Berkeley PBID and the City is obligated to disperse it.
	786 Total			\$0	\$235,057						
	Grand Total			\$42,653,858	\$23,301,309						



Office of the City Manager

ACTION CALENDAR
December 13, 2022

To: Honorable Mayor and Members of the City Council

From: Dee William-Ridley, City Manager

Submitted by: Sharon Friedrichsen, Budget Manager

Subject: Status Report - Berkeley's Financial Condition (FY 2012 – FY 2021):
Pension Liabilities and Infrastructure Need Attention

INTRODUCTION

On May 24, 2022, the City Auditor submitted a Financial Condition audit report¹ to City Council with recommendations to build on the City's financial strengths in order to: (1) help address the City's unfunded capital and deferred maintenance needs and pension liabilities; (2) help the City prepare for unforeseen economic challenges by assessing the risk of the reserves, and ensuring that enterprise funds can balance and avoid recurring shortfalls and (3) to update the City's debt policy to help strengthen the City's ability to assess its general obligation debt capacity.

The purpose of this information item is to update City Council on the status of implementation of the audit report's recommendations. This is the first status report regarding this audit.

CURRENT SITUATION AND ITS EFFECTS

The City Auditor's report included five recommendations. As of the writing of this report, two recommendations have been partly implemented and three recommendations have been started. Please see Attachment 1 for a detailed table of audit report recommendations and implementation progress. The next status report to Council is expected to be presented on June 6, 2023.

BACKGROUND

The audit provides a high-level overview of the City's financial condition over 10 fiscal years. By broadening the scope of financial reporting to incorporate long-term financial trends, financial condition analysis can introduce long-term considerations into the

¹ Audit-Berkeley's Financial Condition (FY 2012 - FY 2021): Pension Liabilities and Infrastructure Need Attention: <https://berkeleyca.gov/sites/default/files/documents/2022-05-24%20Item%2018%20Berkeley%E2%80%99s%20Financial%20Condition.pdf>

budgeting process, clarify the City's fiscal strengths and weaknesses, and help highlight financial risks that the City needs to address including its unfunded capital and pension liabilities.

ENVIRONMENTAL SUSTAINABILITY AND CLIMATE IMPACT

There are no identifiable environmental effects or opportunities associated with the subject of this report.

POSSIBLE FUTURE ACTION

The City Manager's Office will continue to work on implementing the various recommendations, including conducting a risk assessment of the General Fund reserve and developing recommendations regarding fund balance for the various enterprise funds. The Finance Department will continue to assess the debt capacity threshold and update the debt management policy. In addition, the City Manager's Office will continue to assess Council fiscal policies and make recommendations regarding long-term funding strategies to address the City's pension and capital infrastructure liabilities.

FISCAL IMPACTS OF POSSIBLE FUTURE ACTIONS

The audit recommendations are intended to build on the City's financial strengths and help mitigate risks associated with the City's unfunded liabilities.

CONTACT PERSON

Sharon Friedrichsen, Budget Manager, 510.981.7000

Attachments:

1. Audit Findings, Recommendations, and Status Updates

Audit Title: Berkeley's Financial Condition (FY 2012 - FY 2021): Pension Liabilities and Infrastructure Need Attention				
Finding	Recommendation	Issue Date	Department	Status of Audit Recommendations, Corrective Plan, and Progress Summary
The COVID-19 pandemic slowed the City's progress toward its 2027 reserve funding goal.	1.1 To better prepare the City for unforeseen economic challenges, we recommend that the City Manager complete the risk assessment required by the City's reserve policy as scheduled and propose to the City Council a plan to replenish the Stability and Catastrophic Reserves based on the results of the assessment. This may include revising the funding goal for 2027 to align with the City's financial reality and projected risk level.	5/5/2022	City Manager	<u>Started:</u> City staff are in the process of consulting with the Government Finance Officers Association (GFOA) for technical assistance with the risk assessment.
The COVID-19 pandemic slowed the City's progress toward its 2027 reserve funding goal.	1.2 To ensure the City's enterprise funds can balance and avoid recurring annual shortfalls, we recommend the City Manager assess the appropriate fund balance for each of the City's enterprise funds, report findings to the City Council and explore financial policy options to manage enterprise fund balances.	5/5/2022	City Manager	<u>Started:</u> City staff have started to conduct research and are forming a working group to discuss current approaches utilized by departments and best practices as the first step in developing fund balance policies.
The City's limit for general obligation bond debt is set at 15 percent of total assessed property value.	2.1 To strengthen the City's debt management, we recommend that the Finance Department update the Debt Management Policy. The Finance Department may consider revising its current general obligation bond threshold of 15 percent of assessed property value or building upon the City's existing general obligation bond debt limit by considering additional debt capacity factors such as debt per capita, debt to personal income, and/or debt service payments as a proportion of General Fund revenues.	5/5/2022	Finance	<u>Started:</u> the Finance Department is working on updating the debt management policy.
The City has taken steps to increase pension funding.	3.1 To maximize the benefit of the Section 115 Trust, we recommend that the City Manager present a plan for adoption by the City Council to assure sufficient contributions to the Trust. This may include taking the steps proposed by the Budget and Finance Committee to increase contributions to the Trust. It may also include a strategy to ensure that the City is able to meet its yearly contribution goals, such as allocating contributions at the beginning of the budget cycle.	5/5/2022	City Manager	<u>Partly Implemented:</u> The City budgeted funds for the Section 115 Trust and adopted fiscal policies to fund the Section 115 Trust as part of the FY 2023/24 biennial budget process. Staff will be working with an actuary to review the target goal and will continue to explore additional funding options for Council's consideration to increase contributions to the Trust.

<p>The City reported \$1.2 billion in unfunded capital and deferred maintenance needs in FY 2021.</p>	<p>4.1</p>	<p>To address rising costs for unmet capital needs, we recommend that the City Manager collaborate with the Department of Public Works to implement a funding plan aimed at 1) reducing the City's unfunded capital and deferred maintenance needs, and 2) ensuring regular maintenance of city assets to prevent excessive deferred maintenance costs in the future. This may include prioritizing capital assets that generate the highest deferred maintenance costs.</p>	<p>5/5/2022</p>	<p>City Manager</p>	<p><u>Partly Implemented</u>: The City has updated its fiscal policies to increase funding for unfunded capital and deferred maintenance needs.</p>
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ACTION CALENDAR
December 13, 2022

To: Honorable Mayor and Members of the City Council
 From: Councilmember Taplin and Councilmember Harrison
 Subject: Resolution Supporting Trip Reduction Alternative for BUSD Berkeley High School Tennis and Parking Structure Project

RECOMMENDATION

Adopt a Resolution in support of a Trip Reduction Alternative to be included in the scope of the Environmental Impact Report for the Berkeley High School Tennis and Parking Structure Project at 2000 Bancroft Way, and send a copy of Resolution to the Berkeley Unified School District (BUSD) Board of Directors.

FINANCIAL IMPLICATIONS

None.

BACKGROUND

On September 7, 2022, the Berkeley Unified School District (BUSD) Board of Directors voted to remove plans for a new operations facility at 2000 Bancroft Way, at the intersection of Milvia Street. This would leave only a new parking garage and tennis course in this project, with a proposed \$27 million expenditure of funds from Measure G, the 2020 BUSD facilities bond measure. Due to a number of CEQA challenges, while the operations facility “was originally the most economical option, it is the opinion of the [BUSD] staff and the District’s consultants that this is no longer the best course of action to take.”¹

However, mitigation of community impacts from a new parking garage would still be substantial, for benefits that remain uncertain. For example, the new Center Street Garage offers 720 parking spaces, but has been unable to provide sufficient revenue to fully cover revenue bond debt servicing and operational costs without additional subsidy. In Fiscal Year 2021, the City of Berkeley allocated \$1,910,250 from the General Fund and \$1,915,050 from the Rate Stabilization Fund to balance the Off-Street Parking Fund. Daytime vacancy rates remain in the double digits for parking garages in downtown Berkeley. This suggests that parking is currently over-supplied in the downtown area at current prices.

Increasing the supply of parking risks increasing Vehicle Miles Traveled (VMT), undermining both the City and District’s stated goals on promoting emissions reductions to mitigate climate change. According to research by UCLA parking scholar Donald Shoup, motorists searching for underpriced or free parking can increase the average

¹ BUSD Board of Directors Meeting. September 7, 2022.

VMT of a local trip by as much as 0.5 miles per trip, or 5 additional miles per day per curb space.²

The BUSD Sustainability Plan, approved in 2019, states: “Single family car trips shall be reduced to less than 20% by 2025, with 80% of students who live within a 2-mile radius getting to school via Active Transportation (walking and bicycling).”³ The BUSD Climate Literacy Resolution No. 22-018, passed in 2021, states that “transportation is the number one source of climate emissions in the City of Berkeley.” Because the proposed parking garage site on Milvia Street would be at the intersection of two protected bike lanes—the completed Milvia Bikeway and planned lanes on Bancroft—while adjacent intersections at Durant and Shattuck are identified as high-risk intersections in Berkeley’s Vision Zero Action Plan.⁴ The intersection of Bancroft and Shattuck was the site of a recent tragic fatality earlier this year.⁵ Concentrating parking at this site could increase the risk of collisions for vulnerable road users, particularly cyclists and pedestrians, at a time when it is the stated policy of the City and District to encourage these modes of transportation.

In addition to the Build Alternative, the Environmental Impact Report could include a Trip Reduction Alternative, as outlined in a comment letter by the advocacy group Walk Bike Berkeley.⁶

Consistent with existing City and District policies aiming to reduce Vehicle Miles Traveled, a Trip Reduction Alternative may include three basic elements:

- Transportation Demand Management (TDM)
- Leasing of existing garage space
- Workforce housing

All of these policies can be used in tandem to mitigate transportation challenges for BUSD staff by shortening commutes with transit-oriented housing; filling up vacant parking spaces in adjacent garages; and providing commute allowances, pre-tax transit benefits, and other sustainable transportation incentives as part of a TDM program.

ENVIRONMENTAL SUSTAINABILITY AND CLIMATE IMPACTS

In its 2018 Progress Report, the California Air Resources Board stated: “Even if the share of new car sales that are [electric] grows nearly 10-fold from today, California

² Shoup, D. C. (2006). Cruising for parking. *Transport policy*, 13(6), 479-486.

³ <https://www.berkeleyschools.net/wp-content/uploads/2019/10/BUSD-Sustainability-Plan.pdf>

⁴ <https://berkeleyca.gov/sites/default/files/2022-02/Berkeley-Vision-Zero-Action-Plan.pdf>

⁵ Raguso, E. (2022, Oct. 20). Man struck by dump truck driver dies after Berkeley crash. *The Berkeley Scanner*. Retrieved from <https://www.berkeleyscanner.com/2022/10/20/traffic-safety/truck-driver-strikes-person-wheelchair-berkeley/>

⁶ https://drive.google.com/file/d/18wp_g5Y6K-g2jnfSnvZqGFn_NO-i-Rfn/view

would still need to reduce [Vehicle Miles Traveled] per capita [by] 25 percent to achieve the necessary [emissions] reductions for 2030.”⁷

Because of its proximity to jobs and public transit, climate scholars at UC Berkeley have identified infill housing as Berkeley’s most impactful local policy lever for reducing greenhouse gas emissions.⁸ Workforce housing could thus reduce emissions while also reducing demand for parking at BUSD facilities.

CONTACT PERSON

Councilmember Taplin Council District 2 510-981-7120

Attachments:

1: Resolution

⁷ California Air Resources Board. (2018). 2018 Progress Report: California’s Sustainable Communities and Climate Protection Act. CARB. Retrieved from https://ww2.arb.ca.gov/sites/default/files/2018-11/Final2018Report_SB150_112618_02_Report.pdf

⁸ Wheeler, S. M., Jones, C. M., & Kammen, D. M. (2018). Carbon footprint planning: quantifying local and state mitigation opportunities for 700 California cities. *Urban Planning*, 3(2), 35-51.

RESOLUTION NO. ##,###-N.S.

RESOLUTION SUPPORTING TRIP REDUCTION ALTERNATIVE FOR BERKELEY
HIGH SCHOOL PARKING GARAGE AND TENNIS COURT PROJECT

WHEREAS, transportation accounts for the majority of greenhouse gas emissions in the City of Berkeley; and

WHEREAS, the Berkeley Unified School District's Sustainability Plan calls for reducing the share of school commutes by single-occupancy motor vehicles to less than 20% by 2025; and

WHEREAS, the intersections of Bancroft, Durant, and Shattuck are identified as high-risk intersections for traffic collisions in the City of Berkeley's Vision Zero Action Plan; and

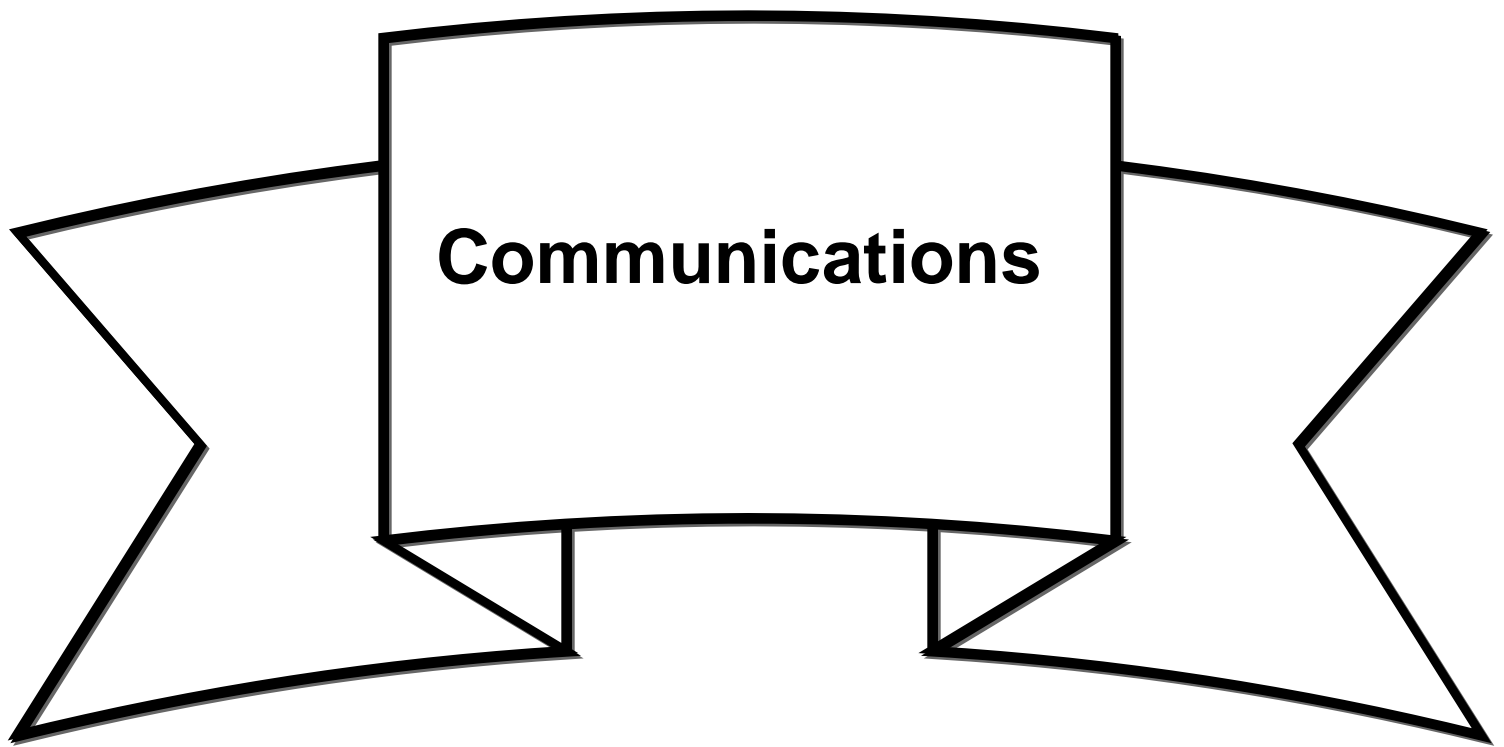
WHEREAS, the Center Street Garage still has substantial weekday vacancies, and has necessitated over \$3.8 million in City expenditures to cover debt servicing and operational costs, suggesting a glut of parking supply in the downtown area; and

WHEREAS, the City of Berkeley is committed to eliminating traffic fatalities and greenhouse gas emissions by enabling car-free and car-light commuting, reducing Vehicle Miles Traveled, promoting safe streets and walkable, transit-accessible urban design; and

WHEREAS, the City of Berkeley greatly values the essential public service of Berkeley Unified School District educators, staff, and administrators in educating the future leaders of Berkeley; and

NOW THEREFORE, BE IT RESOLVED that the Council of the City of Berkeley supports the study of a Trip Reduction Alternative within the scope of the Environmental Impact Review for the Berkeley High School Parking Garage and Tennis Courts Project, including the study of a Transportation Demand Management (TDM) program, garage leasing, and workforce housing development;

BE IT FURTHER RESOLVED that the City of Berkeley welcomes a continued partnership with the Berkeley Unified School District in promoting environmental justice and providing the best possible working conditions for BUSD staff.



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2180 Milvia Street
Berkeley, CA 94704
(510) 981-6900

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