



# AGENDA ITEM 8

## Information

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## Overview of Community Advocacy Agreements and Additional Allocations at the Commission

### Item Goals

- Provide a comprehensive review of the Commission's Advocacy agreements and additional funding allocations, and identify fiscal topics for the 2026 Budget and Fiscal Advisory Committee meetings.

### Overview

#### Community Advocacy Agreements

- The Commission's community advocacy agreements ensure BHSA priority populations have authentic, community-led representation in shaping behavioral health systems. These agreements support community advocacy, training, and outreach across 11 populations, including Transition-Aged Youth, Veterans, LGBTQIA+, Immigrant and Refugee communities, K-12 Students, and others.

#### Full Service Partnership (FSP)

- The Commission's Full Service Partnership funds support evaluation of FSP outcomes as required by SB 465. Funding is used for contracts and staffing to analyze data, report findings, and develop best practices for comprehensive mental health programs.

#### Proposition 1 Implementation

- Proposition 1 Implementation funds support the Commission's expanded responsibilities under the Behavioral Health Services Act, including communications, legal support, community engagement, and staff training.



# Overview of Community Advocacy Agreements at the Commission

**Riann Kopchak**, Assistant Deputy Director of *Legislation and External Affairs*

December 16, 2025

# Community Advocacy Goals

## Overarching Goal

Ensure Behavioral Health Services Act (BHSA) priority populations have authentic, community-led representation that shapes behavioral health systems through sustainable leadership and ownership.

### Community Advocacy

Support the population to identify their priorities, build strategies, and engage directly with decision makers.

### Training and Education

Build knowledge of behavioral health systems; foster confidence, networks, and abilities to organize; educate peers; and participate in local and state decision-making.

### Outreach and Engagement

Engage and build trust with the widest possible reach of vulnerable individuals; expand participation, foster connection, and reach new voices.

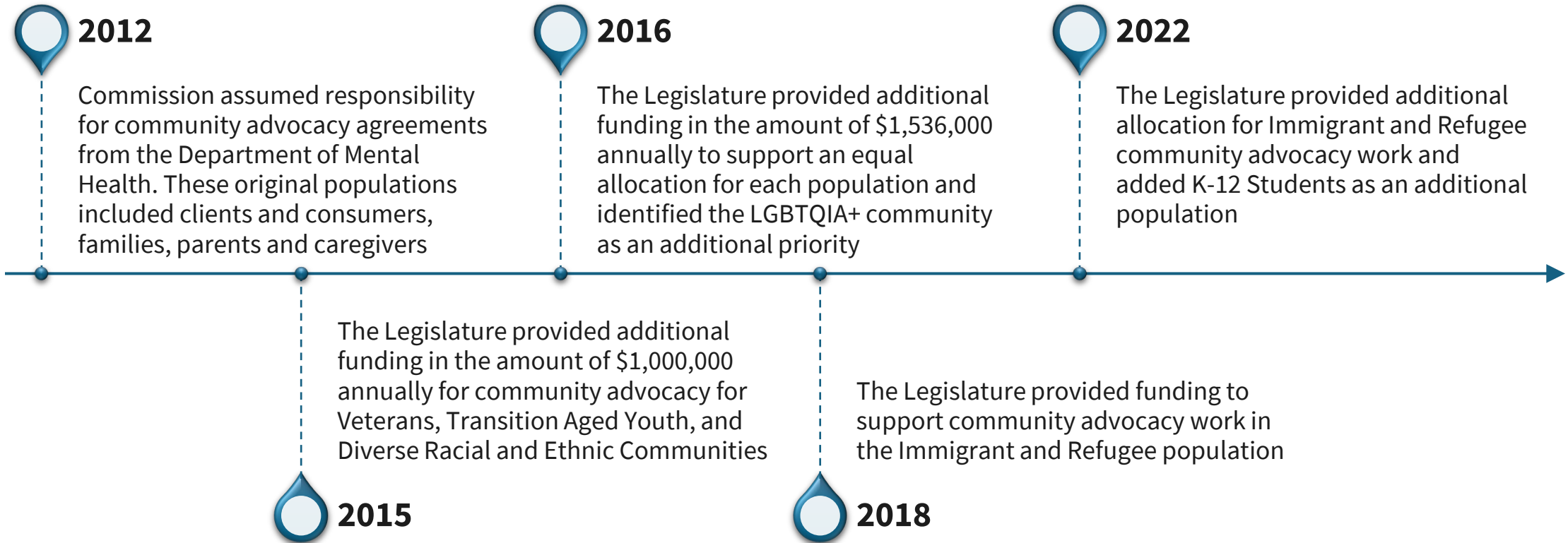
# History of Community Advocacy at CBH

**The Commission's Community Advocacy Agreements originated from the Mental Health Services Act, which prioritized:**

- Transparent and collaborative processes to determine the mental health needs, priorities, and services for consumers and their families
- Promoting community advocate engagement with the goal of informing local and state level policies
- Focus on providing support in advocacy, training and education, and outreach and engagement



# Community Advocacy Populations Timeline



# Current Community Advocacy Agreements

Population	Contractor/Grantee	Contract Terms*
California Youth Empowerment Network	Transition Aged Youth	April 2023-April 30, 2026
Asian Americans for Community Involvement; Boat People SOS; Center for Empowering Refugees and Immigrants; El Sol Neighborhood Education Center; Health Education Council; International Rescue Committee; Refugee Enrichment and Development Association	Immigrant and Refugees (Local)	June 2025-June 30, 2028
California Pan Ethnic Health Network	Immigrant and Refugees (Statewide)	December 2025-November 2028 (Proposed)
Youth Leadership Institute	K-12 Students	June 2025-December 31, 2028
Jakara Movement	K-12 Students (Convenings)	June 2024-May 15, 2026
California Veterans Services Association	Veterans	March 2024-May 31, 2027
Mental Health America California	LGBTQIA+	March 2024-May 31, 2027
National Institute Mental Illness	Families	March 2024-May 31, 2027
United Parents	Parents and Caregivers	March 2024-May 31, 2027
Cal Voices	Consumers	March 2024-May 31, 2027
California Pan Ethnic Health Network	Diverse Racial and Ethnic Groups	March 2024-May 31, 2027

\*Total Award for each three-year term agreement is \$2,010,000, with the exception of Jakara Movement, which is a two-year term agreement for \$970,000.



# Behavioral Health Services Act (BHSA) and the Priority Populations

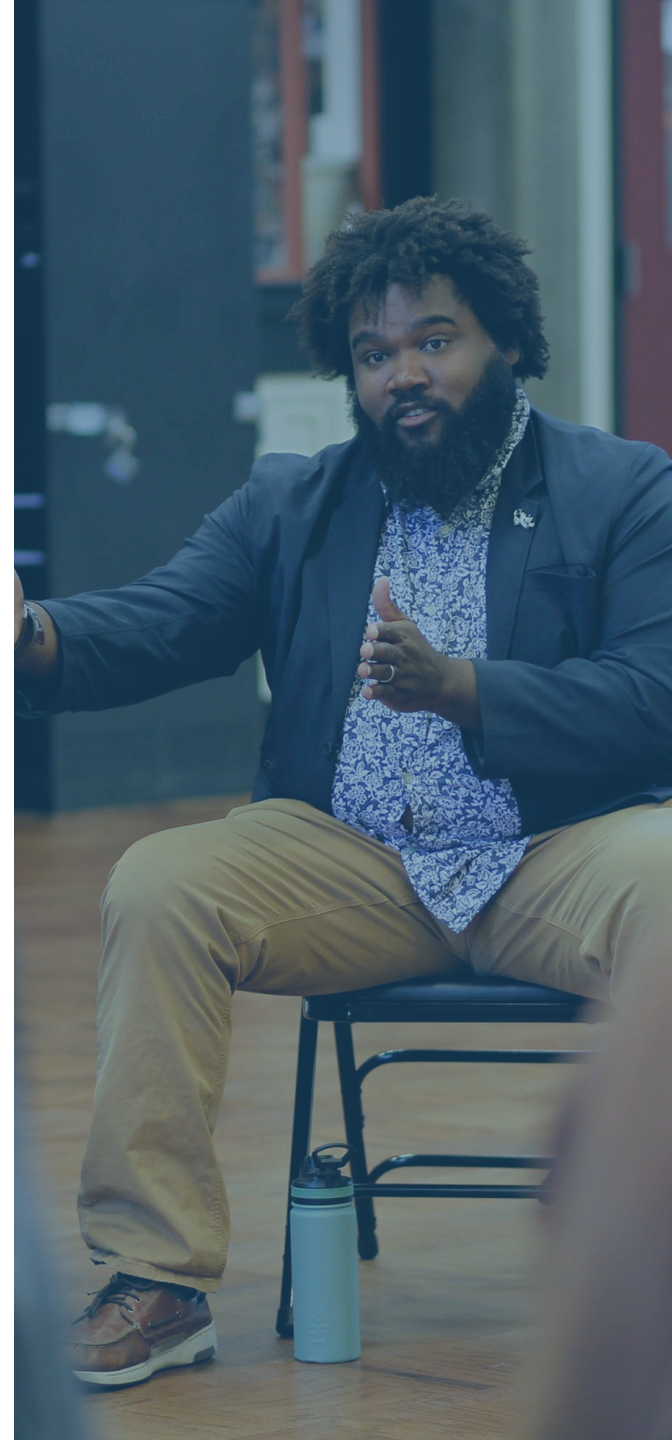
- ▶ Agreements to include BHSA Priority Populations
- ▶ Amendments for in-progress contractors

Those with a serious mental illness (SMI), substance use disorder (SUD), and/or co-occurring SUD/SMI, and

- serious emotional disturbances (SED) for children and youth
- chronically homeless or at risk of homelessness
- involved in or at risk of entering the criminal justice system
- re-entering the community from prison or jail in the child welfare system
- at risk of conservatorship
- at risk of institutionalization.

# Next Steps

- Immigrant and Refugees Statewide Grantee RFP was awarded 11/20/25
- Winter 2025 - TAY RFP
- 2026 - RFPs for
  - Families
  - Parents and Caregivers
  - LGBTQIA+
  - Consumers
  - Veterans
  - Diverse Racial and Ethnic Groups







# Additional Allocations

**Lauren Quintero**, *Acting Deputy Director of Administration and Performance Management*  
December 16, 2025

# Full Service Partnership

## \$400,000 Annual Allocation

- SB 465 (2021) mandates evaluation of Full Service Partnership (FSP) outcomes.
  - Full Service Partnership (FSP) means the collaborative relationship between a County and the consumer, and when appropriate the consumer's family, to provide the full spectrum of a county's Community Services and Supports. FSPs represent comprehensive and intensive mental health programs for adults with severe and persistent mental illness. FSPs utilize a “whatever it takes” field-based approach using innovative interventions to help adults reach their recovery goals.
  - The Commission is responsible for reporting on FSP effectiveness and outcomes.
- In January 2022, the Commission submitted a Budget Change Proposal (BCP) to implement SB 465.
- Approved as part of the Fiscal Year 2022–23 Budget, the BCP secured \$400,000 in ongoing annual funding to support both internal and external staffing for data analysis, reporting, and community engagement related to Full Service Partnerships (FSPs).

# Full Service Partnership

## Expenditures to Date

- Third Sector Capital Partners – Contract 22MHSOAC050 - \$405,000
  - Evaluate the effectiveness of Full Service Partnerships and make recommendations on strengthening program outcomes.
- Third Sector Capital Partners – Contract 23MHSOAC057 - \$250,000
  - Develop a best-practice toolkit for FSP programs across California
- Healthy Brains Global Initiative (HGBI) - Contract 23MHSAOC052 - \$150,000
  - Complete a pilot study to develop performance packs, produce quarterly performance summaries, and contribute findings to a final report with project-wide recommendations.
- University of California, San Francisco – Contract 21MHSOAC023 A.2 - \$400,000
  - Support the Commission’s evaluation of Child FSPs through data analysis, system linkages, and community engagement, using the Data Warehouse to develop indicators on utilization, accountability, and outcomes for child-serving programs.

# Proposition 1 Implementation

## \$100,000 Annual Allocation for Three Years

- March 2024: Voters passed Proposition 1, enacting the Behavioral Health Services Act (BHSA).
- Key Changes Under Prop 1
  - Expanded focus to include substance use disorders.
  - Increased fiscal accountability and guaranteed funding for workforce and housing.
  - Renamed the Commission to the Behavioral Health Services Oversight and Accountability Commission.
  - Expanded the Commission from 16 to 27 members.
  - Broadened the Commission's administrative, reporting, and consulting responsibilities.

# Proposition 1 Implementation Support

## Resource Request

- Commission submitted a BCP in spring 2025 to support the Commission's expanded responsibilities under the Behavioral Health Services Act (BHSA) following the passage of Proposition 1.
- Requested Resources:\$100,000 annually for 3 years (starting FY 2024–25) for communications and outreach to engage the public, policymakers, and community partners; legal and legislative support to manage increased workload from BHSA mandates; and staff training on contracts, legal research, and compliance.
- The funding aims to strengthen public awareness and reduce stigma, enhance accountability and transparency, and support effective implementation of the new BHSA requirements.

## Expenditures to Date

- FY 2024-25 Program 11 – Contract 23MHSOAC021 A.2 - \$100,000
  - Deliver a refreshed brand strategy for the Commission to align with the transition to the Behavioral Health Services Oversight and Accountability Commission under Proposition 1.
- FY 2025-26 Program 11 – Contract 23MHSOAC021 A.3 - \$95,000
  - Support the creation of the BHSA Community Planning Process (CPP) Stakeholder Toolkit.



# Next Steps

- Is there any additional fiscal-related information or topics you would like the BFA Committee to discuss during Calendar Year 2026 meetings?
- What benchmarks or performance indicators should we monitor to evaluate whether budget allocations are achieving their intended outcomes?
- Are there specific funding areas or programs you would like the Committee to review more closely this year?
- Are there any emerging priorities we should proactively address in upcoming meetings?
- Any other/additional input?

# Thank you.



**Questions?  
Ideas?  
Feedback?**

Please email  
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