

# Executive Director's Report

*Reporting Period: May 2025 through January 2026*

The work highlighted in this report has been undertaken by the Commission for Behavioral Health (CBH), led by the Executive Director and made possible through the dedicated support and generous expertise of CBH Commissioners, CBH staff, CBH grantees/contractors, and public stakeholders. This reporting period covers the period from May 2025 through January 2026.<sup>1</sup> During this time frame, the Commission continued to focus on its Behavioral Health Services Act (BHSA) mandates, strengthening internal team infrastructure and operations, and promoting cross-agency collaboration.

## Accomplishments

Highlights of CBH accomplishments during the reporting period are as follows:

### Commissioner Strategic Priorities & Committee Implementation

- Initiated a CBH Strategic Plan update to align with new BHSA mandates, engaging an external contractor, Leading Resources, Inc., and identifying key priority areas for Commissioner consideration. This work involves the establishment of a time-limited Strategic Plan Advisory Committee. The project time frame is anticipated to occur from January to August 2026.
- Successfully launched the new Commission committees, implementing a bi-monthly meeting cadence to enhance governance, engage stakeholders, and promote transparency.
- Restored the \$20 million Mental Health Wellness Act funds from proposed cuts in the 2025 May Revision.

### Commission Projects

- Led comprehensive stakeholder engagement efforts to prepare for the Innovation Partnership Fund grants, including three virtual listening sessions and three CBH committee meetings, culminating in the Commission's adoption of the Innovation Partnership Fund Framework by the Commission in November 2025 and the

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<sup>1</sup> Future Executive Director reports will focus on shorter, bi-monthly time periods between Commission meetings.

development of a Request for Proposal outline, which will be presented to the Commission for a vote in January 2026.

- Created a BHSA Community Partner Stakeholder Engagement Toolkit with Program 11 to help community partners engage stakeholders in the BHSA community planning processes, which the Commission will distribute statewide.
- Initiated competitive procurement processes for the Immigrants & Refugees Advocacy grant (I-R-004), Transition Age Youth Advocacy grant (RFP-TAY-005), Full Service Partnership Performance Management Technical Assistance Provider contract ((FSP-PMTAP-001), and 0-5 Maternal Behavioral Health Initiative Technical Assistance contract (0-5/MBH-002).

## Improving CBH Staff Team Operational Excellence

- Launched the CBH Employee Wellness in the Workplace Workgroup (WWW), organized by CBH’s Human Resources team and comprised of CBH team members, to cultivate a workplace culture centered on emotional safety, inclusivity, and overall wellbeing. The WWW adopted a charter and project plan, which included the recent administration of a Commission Staff Engagement and Wellbeing survey. CBH WWW team leads will meet monthly with the Executive Director to provide relevant updates and discuss improvement strategies, including those set forth in the Commission's [“Working Well: Supporting Mental Health at Work”](#) report.
- Developed and disseminated a clear employee grievance escalation process for team members, approved by CalHR and Labor Relations.
- Held monthly CBH All Team Meetings to celebrate accomplishments, disseminate information, and highlight current CBH work efforts.
- Since May 2025, the vacancy rate for CBH’s permanent positions has remained consistent as it was 7% (4 vacant positions) and is currently 9% (5 vacant positions).<sup>2</sup>
- Selected and will deploy Cornerstone, a new learning management system, to electronically compile and track CBH-relevant trainings, ensuring staff have optimal resources for daily work and professional development.
- Implemented leadership training, provided by Leading Resources, Inc., for the Executive Director and full CBH Management Team, while concurrently working to

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<sup>2</sup> CBH has several limited term positions, most of which have recently been established to support the Commission’s research mandates and efforts to strengthen the Commission’s grants/contracts development and monitoring infrastructure. Given the recency of these efforts, the vacancy rate for these positions is currently 57%, with recruitments to fill these positions being underway and ongoing.

identify and operationalize improvements to streamline CBH workflows and business processes.

- Nearly all staff (96%) completed required 2025 training by December 31, 2025, meeting State compliance standards.<sup>3</sup>
- Mandated all CBH managers in August 2025 to complete “Violence Prevention in the Workplace” instructor-led training within three months in response to concerns raised by CBH team members. Ninety-eight percent completed this training; the remainder will complete the training in February 2026 due to limited class availability.
- Recruited dedicated leadership for the CBH grants and contracts development and monitoring team. While recruitment to support these activities is underway, the leadership team is actively developing a project plan that will be used to drive operational improvements in this area.
- Engaged the California Department of Technology (CDT) to address CBH Information Technology infrastructure challenges to ensure alignment with CBH’s business and operational needs.
- Launched a pilot of CDT’s Artificial Intelligence (AI) platform, Poppy, with CBH staff to identify opportunities for integration and operational improvement.

## CBH Budget Activities and Financial Health

- The Commission is on track with spending within current allocations and is projected to expend all allocated funds within the fiscal year.
- Actively monitoring Fiscal Year 2026-27 budget negotiations on an ongoing basis. The [Grants and Contracts Expenditure List](#) has been moved online, updated monthly, and is available to the public.
- A new CBH [Projects Financial Overview](#) Tableau dashboard has been made publicly available, providing visualizations of active CBH contracts and grants.

## Commissioner, System Partner, and Stakeholder Collaboration and Engagement:

- Met regularly (at least monthly) with the CBH Chair and Co-Chair, held initial meet-and-greet meetings with Commissioners upon onboarding and have quarterly meetings with all Commissioners to communicate CBH strategic priorities and identify opportunities for continuous improvement.

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<sup>3</sup> Excludes staff who are employed by CBH, but not currently working (e.g., Retired Annuitants) and, thus, unavailable to complete the trainings.

- Fostered regular, collaborative engagement with key system partners, including the California Health and Human Services Agency (CalHHS), Department of Health Care Services (DHCS), Department of Health Care Access and Information, and the California Department of Public Health (CDPH).
- Maintained regular engagement with a broad base of system partners, including the California Behavioral Health Planning Council (CBHPC), California Behavioral Health Directors Association (CBHDA), California Association of Addiction Recovery Professionals, Racial and Ethnic Mental Health Community Organizations (REMHC), California Association of Local Behavioral Health Boards and Commissions (CalBHB/C), California National Alliance on Mental Illness (NAMI), the California Commission on Asian and Pacific Islander American Affairs (CAPIAA), the California Commission on Aging (CCOA), the California Department of Rehabilitation (DOR), and the California Labor and Workforce Development Board (CLWDB). Efforts to expand this list continue to engage with additional system partners and stakeholders to foster collaboration and gather diverse perspectives.
- Organized and compiled feedback from Commissioners and CBH staff on the CDPH Population-Based Prevention Phase 1 and Phase 2 guidance.
- Participated as a member on the DHCS Behavioral Health Transformation (BHT) Implementation Stakeholder Workgroup and the DHCS BHT Quality and Equity Advisory Committee.
- Participated as a member on the CalHHS Behavioral Health Task Force and the CalHHS Care Act Working Group.
- Presented at the (1) California Mental Health Advocacy; (2) Community and California Behavioral Health Association; (3) Breaking Barriers; and (4) OneMind conferences/convenings to share the Commission's initiatives and expertise on relevant behavioral health efforts.
- Attended the annual (1) Department of Health Care Services' Substance Use Disorder Conference; (2) the annual NAMI conference; (3) the September 2025 Corporation for Supportive Housing's/CBHDA Housing Symposium; (4) the annual Words 2 Deeds conference; and (5) the January 2026 Invest for Progress convening to stay informed on key multi-sector developments in behavioral health and to continuously foster collaborative networks.
- Participated in one of the CBH Peer Respite site visits to observe and understand innovative crisis support and recovery models.
- Joined the California Hospital Association on a tour of two innovative psychiatric inpatient hospitals to gain insights into advanced care delivery.

- Attended the November CalYouth Tour, Shining a Light on Youth Homelessness, to further understand and address the needs of unhoused youth.

## Upcoming Priorities (Next 60 Days)

Strategic focus for the next 60 days will concentrate on the following:

- Track Fiscal Year 2026-27 State budget conversations.
- Monitor 2026 legislation and legislative priorities.
- Lead CBH's 2026 Strategic Plan Update and internal team operational improvements.

## Risks, Challenges, & Mitigation Strategies

### California's Budget Shortfall

- Continued budget uncertainty, exacerbated by a projected statewide deficit of approximately \$20 billion, poses a significant risk to the CBH operational budget and programs. This challenge impacts the broader public behavioral health system, of which CBH is a component.
- Mitigation strategies include proactively engaging with the Legislature and Administration to advocate for continued support of CBH's important behavioral health projects. CBH is also maintaining fiscal conservatism across operations and implementing cost-control measures, wherever possible, to preserve essential functions while anticipating potential funding changes.

### CBH's Executive Team Vacancies

- Two key executive leadership positions remain vacant: 1) the Chief Deputy of Administration & Operations and 2) the Deputy Director for Research, Evaluation & Programs. Recruitment for these critical roles has been challenging.
- Mitigation strategies include actively exploring options for expanding recruitment outreach to a variety of professional networks to attract qualified candidates.

*Thank you for your continued leadership, partnership, and engagement.  
I appreciate the guidance and support of the Commission as we work collectively to strengthen  
California's behavioral health system and advance equitable, person-centered care for all  
communities.*