

INNOVATION PROJECT STAFF ANALYSIS: Early Psychosis – Learning Healthcare Network (LHCN) EXTENSION Kern County

Commission Approval History

Original Commission Approval Date: 5/26/2022

Original Commission Approval Funding Amount: \$1,632,257

Original Approved Duration of Innovation Project: 4 years

Project Start Date: 5/26/2022

Current Request

Additional Innovation Funding Requested: \$4,900,000

Request for Additional Time: 1 year

BHSOAC Consideration of Project: 3/26/2026

Review History

Approved by County Board of Supervisors: 2/8/2022

Public Comment Period: 1/12/2026 - 2/12/2026

Behavioral Health Board Hearing: 1/26/2026

County Final Submission Date: 12/17/2025

Original Project Background

The Early Psychosis Learning Healthcare Network (LHCN) is a multi-county collaborative initially approved by the Commission on December 17, 2018. Original participating counties include Los Angeles, Orange, San Diego, Solano, Napa, Sonoma, and Stanislaus Counties. The collaborative develops an infrastructure to gather real-time data from clients and their family members in existing early psychosis settings, which operates using the Coordinated Specialty Care (CSC) model. The project also provides technical assistance and training to early psychosis providers. In May of 2022, the Commission for Behavioral Health (CBH/Commission) approved Kern County Behavioral Health and Recovery Services (County/BHRS) to use Innovation funds to join the LHCN, which has given them the opportunity to implement the CSC model and learn from their fellow counties ways to improve care for individuals experiencing early psychosis.

Extension Request

Kern County BHRS is requesting an extension of time and funding for the Early Psychosis Learning Healthcare Network (LHCN) to maintain and expand key program elements without changing the scope of the program. Previously, this Innovation project received support from an EPI-Plus Grant and Federal Financial Participation/Medi-Cal reimbursement; however, due to an unanticipated early loss of the grant funding, Innovation dollars were used at a higher rate than initially expected. The additional time and funding would be necessary to help maintain full and effective operations throughout the remainder of the project.

The requested time does not exceed the five (5) year time limitation of Innovation projects, and any unused Innovation dollars by the end of FY 25-26 will be transitioned to BHSA funding. This extension request seizes the opportunity to continue the Kern County's work as part of the LHCN, while also reducing the risk of lapses in continuity of care.

BHSA Alignment and Sustainability

The original Innovation project aligns with the Behavioral Health Services Act (BHSA) by advancing evidence-based practices and CSCs for First Episode Psychosis (FEP), which become requirements beginning July 2026. The LHCN model also addresses some of the overarching goals of the BHSA by reaching and serving high-need priority populations through early intervention and a focus on outcomes and accountability.

Upon successful completion of the Innovation project, LHCN activities will be sustained through Early Intervention dollars, as part of the BHSA Behavioral Health Services and Supports funding category.

Community Planning Process

Kern County held community stakeholder forums on January 14, 2026, and January 21, 2026, in English and Spanish. The required 30-day public comment period for this Innovation project extension proposal occurred between January 12, 2026, and February 12, 2026, and the plan was heard at the local behavioral health board hearing on January 26, 2026. Members of the public and local stakeholders were provided with the opportunity to give feedback on this Innovation project extension proposal. At the time of this analysis, no comments were received.

Budget

Kern County is requesting authorization to spend up to \$4,900,000 of MHSAs Innovation funding for one (1) additional year of this project. One hundred percent (100%) of the project will be supported by Innovation funding. The breakdown by fiscal year and expenditure category is as follows:

Category	FY 25-26	FY 26-27	Total
Personnel	\$1,419,176.37	\$1,624,613	\$3,043,789.37
Operations	\$383,994.51	\$538,014	\$922,008.51
Non-Recurring	\$0	\$0	\$0
Contracts & Consultants	\$200,000	\$200,000	\$400,000
Other	\$164,509.12	\$369,693	\$534,202.12
Total	\$2,167,680	\$2,732,320	\$4,900,000

In summary, sixty-two percent (62%) of total added expenditures allocated for personnel costs aim to expand staffing and support the transition of several team members to full-time status. The county will also be adding three (3) new positions: One (1) Behavioral Health Therapist II to increase clinical capacity and reduce caseload burden; one (1) Office Services Specialist to support referral tracking, documentation, and administrative needs; and one (1) Behavioral Health Recovery Specialist III to assist with engagement and provide field support. The county indicates that these positions are vital to meeting program requirements and maintaining service continuity.

Nineteen percent (19%) of the requested Innovation funds are reserved for additional operational costs to cover essential program supplies, technology, materials, and data management tools. Additionally, eight percent (8%) of the requested funds are allocated for contractor and consultant costs, which will support technical assistance, evaluation activities, and specialized training and continuing education in the Coordinated Specialty Care model. The remaining eleven percent (11%) of added funding will go toward marketing and community outreach to increase referrals and awareness of services.

Conclusion

Kern County’s extension proposal for the Early Psychosis – Learning Healthcare Network project appears to meet the minimum requirements listed under MHSA Innovation regulations and aligns with the goals of the BHSA.