



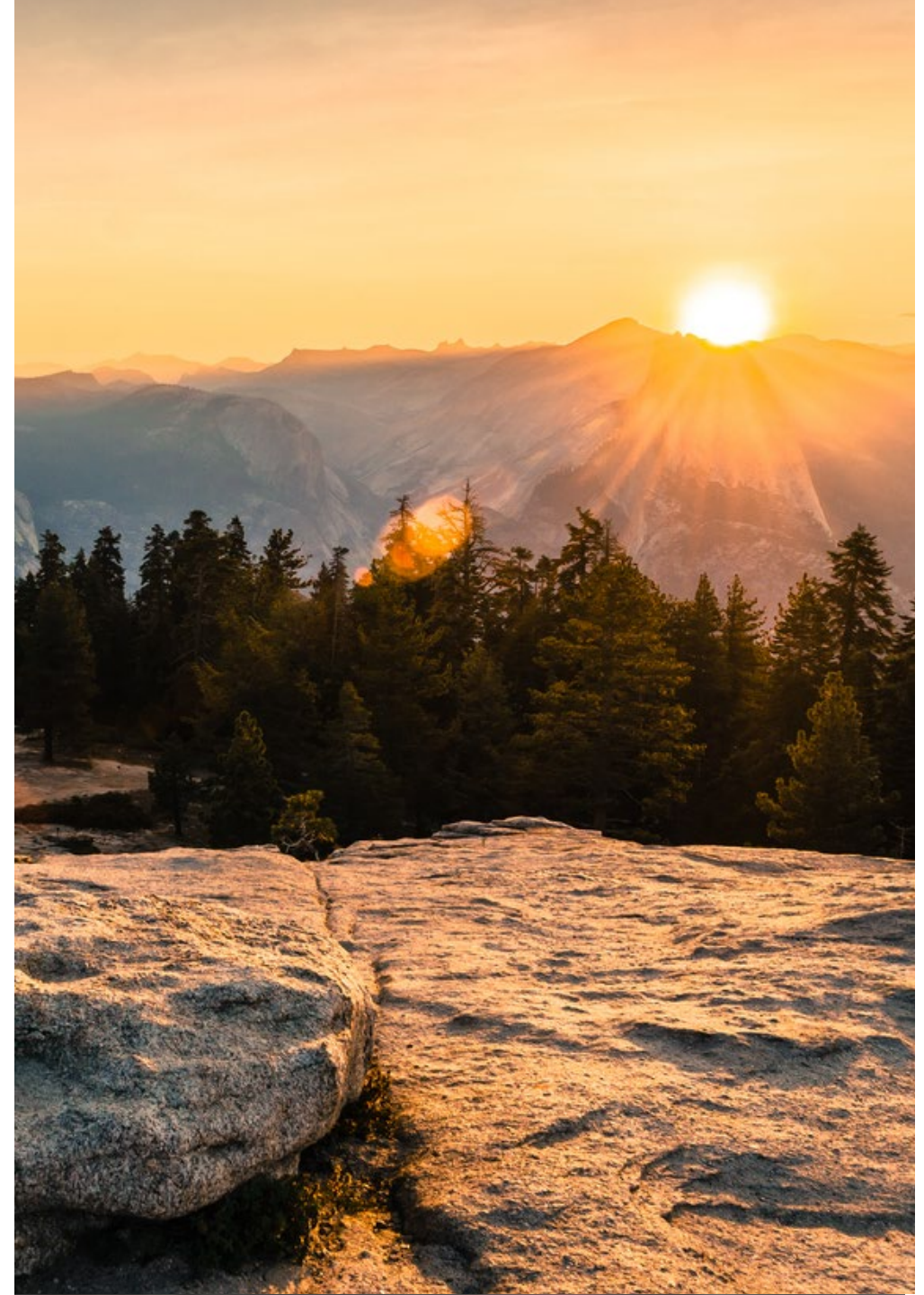
MARCH 26, 2026

Strategic Plan Update Discussion

Brenda Grealish, Executive Director

Eric Douglas & Karin Bloomer, Leading Resources Inc.

bhsoac.ca.gov



Discussion Overview

1. Scope and approach to the strategic plan update
2. Proposed priorities and results for next two years



Scope and Approach to the Strategic Plan Update

How we got here

- **January 2023:** 2024-2027 Commission Strategic Planning efforts commence
- **January 2024:** 2024-2027 Strategic Plan approved by the Commission
- **March 2024:** Proposition 1 passed by Voters
- **January 2025:** Commission's BHSA statute implemented

CBH Strategic Plan: Update to Reflect BHSA changes

- Recall: 100% of CBH funding is from the Behavioral Health Services Fund
- Establishment of a time-limited Strategic Plan (SP) Advisory Committee at the January 2026 Full Commission Meeting
- Contract with LRI to support this update
- Timeline:
 - Strategic Plan update: January – May 2026
 - SP Advisory Committee meetings in February and April 2026
 - SP Update discussions at the Full Commission meeting in March, with the final update proposed for adoption in May 2026
 - Staff SP Implementation Planning: June – July 2026

Strategic Plan Advisory Committee Members

Chair: Commissioner Karen Larsen

Vice Chair: Commissioner Brandon Fernandez

Commissioner Bill Brown

Commissioner Robert Callan, Jr.

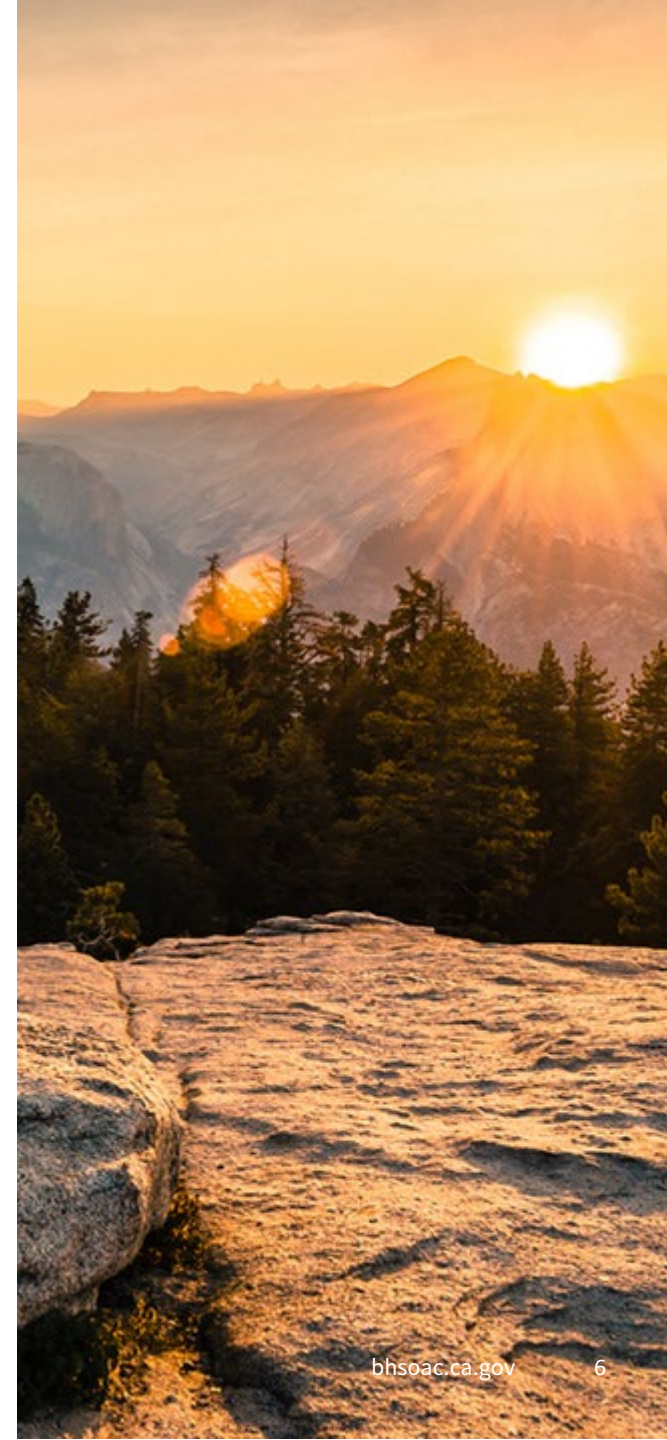
Commissioner Steve Carnevale

Commissioner Amy Fairweather, J.D.

Commissioner Jay'Riah Thomas-Beckett, DHA, M.ED

Commissioner Gary Tsai, MD

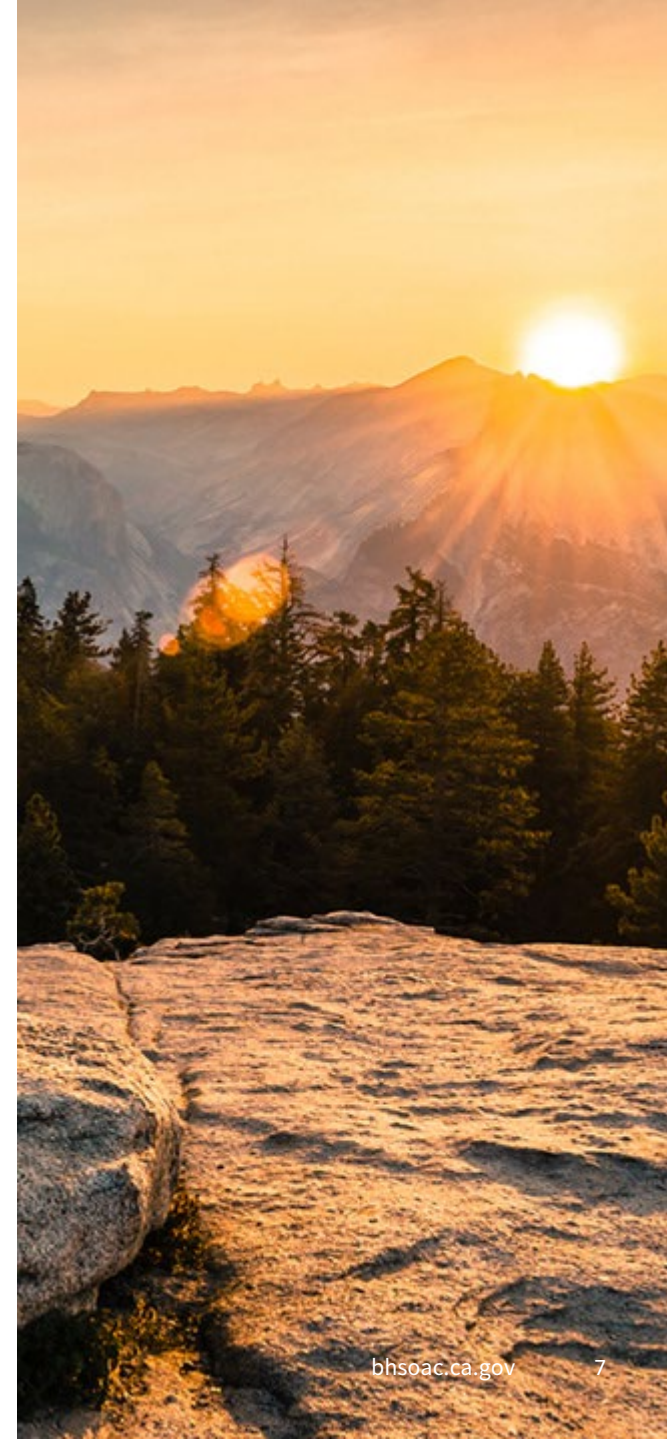
Commissioner Jevon Wilkes



Committee Charter

Commission's charge to Strategic Plan Advisory Committee regarding existing 2024-2027 CBH Strategic Plan:

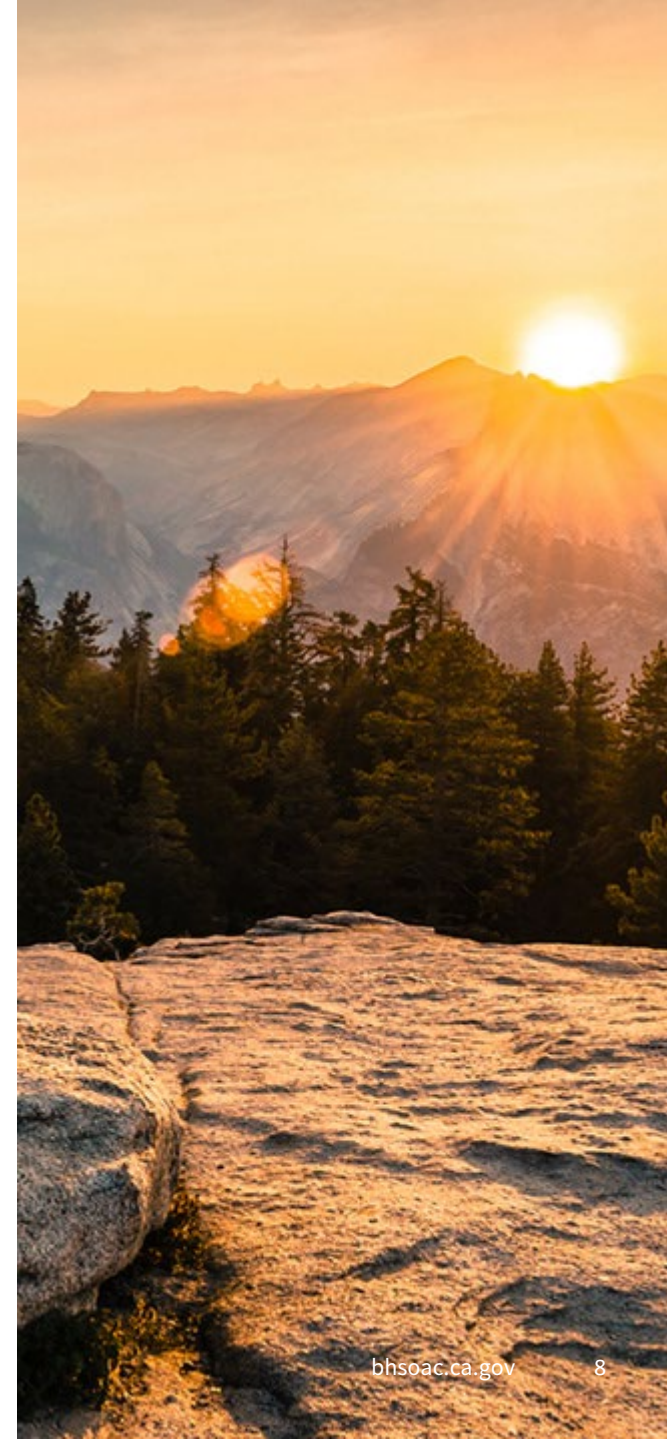
Update the strategic plan, specifically focusing on incorporating the new mandates and opportunities enacted under the BHSA into the strategic plan.



February Committee Meeting

Committee endorsed:

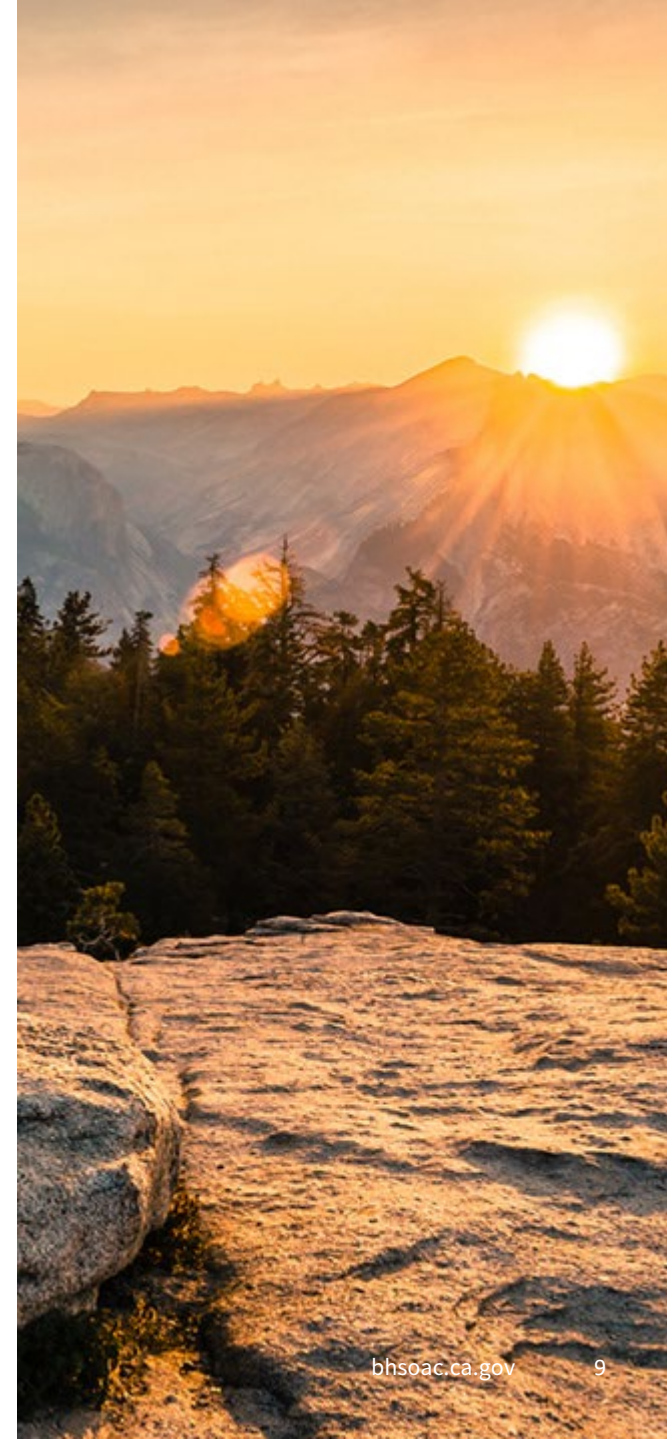
1. Retaining existing strategic plan's goals and objectives.
2. Using a focusing lens of priorities and desired results reflective of BHSA to articulate how these goals and objectives will be pursued through 2027.
3. Aligning CBH's current project portfolio within these priorities and results.
4. Understanding that the strategic plan will be revisited in its entirety in the next strategic planning cycle.



February Committee Meeting Cont'd

The Committee reviewed and refined draft priorities and results, with input that included:

- Highlighting the full continuum of housing options
- Acknowledging substance use disorder (SUD) as a standalone – as well as co-occurring – condition
- Addressing not just SUD treatment but the full SUD service continuum (e.g., prevention, harm reduction, treatment, recovery housing)
- Elevating the essential role peers play in the success of behavioral health services



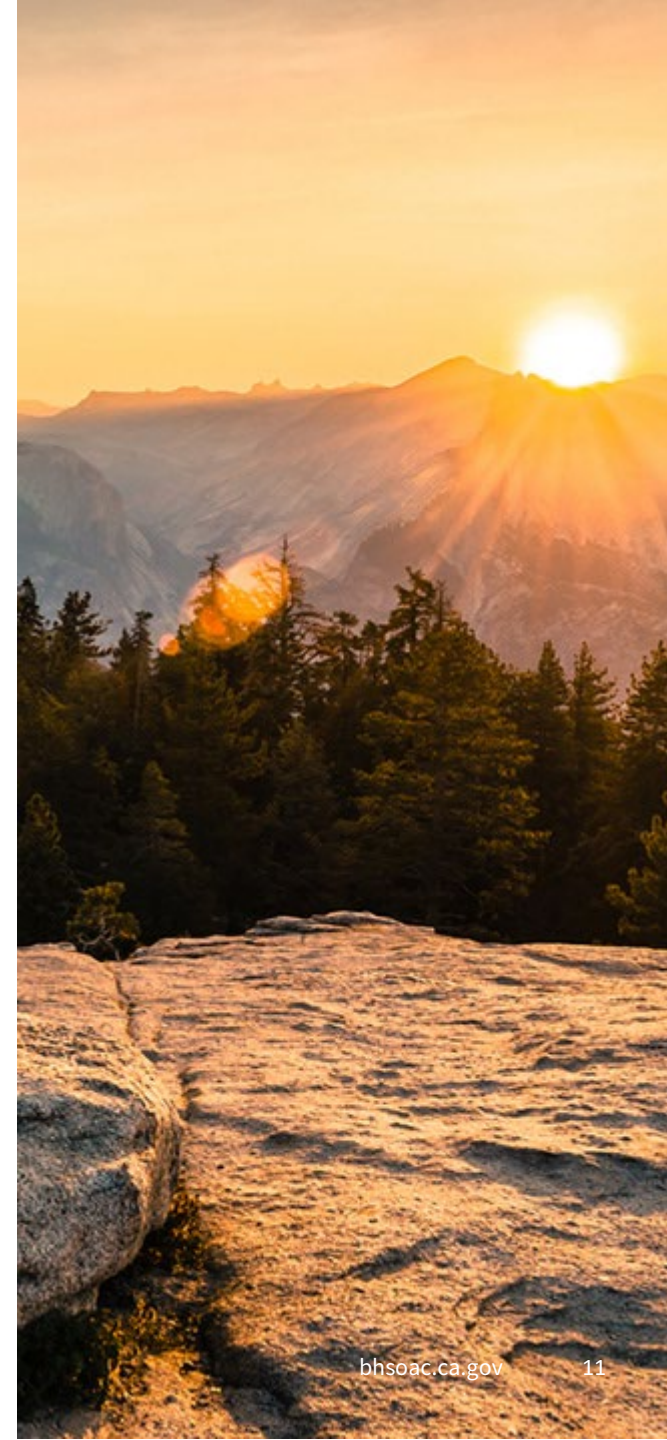


Priorities and Results to Update and Focus the Strategic Plan for Calendar Years 2026 and 2027

Priorities

1. Meet the Needs of People with the Highest Behavioral Health Needs*
2. Ensure that the Substance Use Disorder Continuum Is Incorporated Throughout the Commission's Work
3. Expand Peer Behavioral Health Services
4. Build the Evidence Base for the Effectiveness of New and Innovative Statewide Strategies

*See BHSA Priority Populations definition in the [DHCS Behavioral Health Services Act County Policy Manual](#).



Priority 1 and Desired Results

Priority 1. Meet the Needs of People with the Highest Behavioral Health Needs*

- **Result #1:** The Commission will educate key stakeholders on the distinction between the MHSA and the BHSA and the intended results of the BHSA.
- **Result #2:** The Commission will increase transparency and shared understanding of how county behavioral health departments are allocating BHSA resources to serve individuals with the highest behavioral health needs (subject to available information).
- **Result #3:** The Commission will become a trusted steward of knowledge and learning regarding Full Service Partnerships (FSPs) during and beyond California’s transition to a new behavioral health data and accountability framework.
- **Result #4:** The Commission will increase statewide understanding of the standard of care experienced by individuals served through FSPs, focused on the BHSA priority populations, by systematically gathering and synthesizing qualitative, community-based insights.
- **Result #5:** The Commission will increase statewide understanding and visibility of how housing scarcity and housing service mismatches across the full continuum of housing, including recovery housing, affect individuals served in FSPs—particularly those with SMI, SUD, and co-occurring SMI/SUD—in order to inform policy, planning and future investment decisions.

Priority 2 and Desired Results

Priority 2. Ensure that the Substance Use Disorder Continuum Is Incorporated Throughout the Commission's Work

- **Result #1:** The Commission will continue efforts to expand Medications for Addiction Treatment (MAT) providers and help to strengthen county infrastructure to support effective, scalable MAT implementation.
- **Result #2:** The Commission will support the integration of the SUD service continuum into school-based behavioral health programs in order to improve timely access to care for children and youth.
- **Result #3:** The Commission will increase local-level understanding and acceptance of the evidence-based SUD service continuum by supporting community-based advocacy that addresses stigma, misinformation and philosophical resistance within local SUD systems.
- **Result #4:** The Commission will increase statewide understanding of the SUD service continuum landscape in California to inform more effective integration of mental health and SUD care across the public behavioral health system.

Priority 3 and Desired Results

Priority 3. Expand Peer Behavioral Health Services

- **Result #1:** The Commission will support the expansion, visibility and appropriate use of behavioral health services provided by peers, including peer respites, as recovery-oriented alternatives within the behavioral health crisis continuum. This includes empowering peers to organize and advocate for their leadership and contributions within the public behavioral health system.
- **Result #2:** The Commission will elevate and strengthen the role of peers in serving individuals with SUD and SMI conditions, including through education and training.
- **Result #3:** The Commission will raise statewide understanding that peers who reflect the BHSA's Priority Populations are essential to the success of behavioral health services, including FSPs.

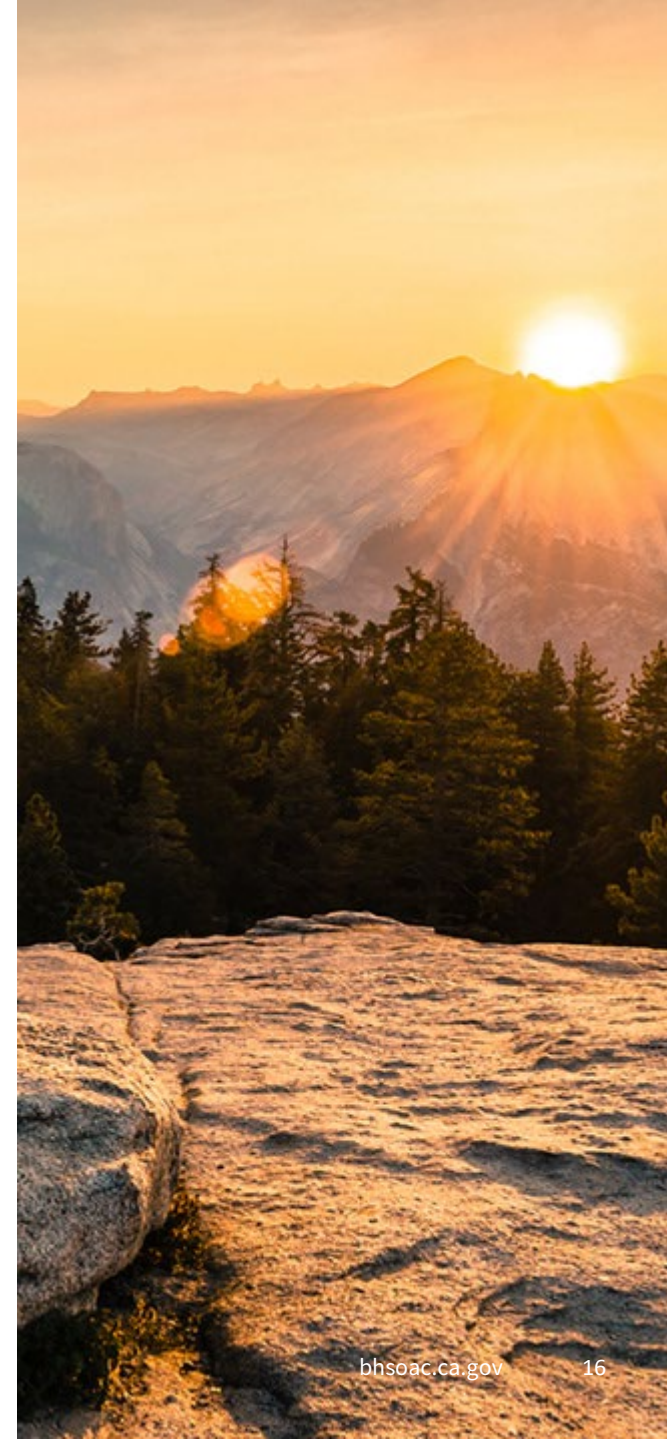
Priority 4 and Desired Results

Priority 4. Build the Evidence Base for the Effectiveness of New and Innovative Statewide Strategies

- **Result #1:** The Commission will uplift best and promising practices and sustainability strategies through effective administration and evaluation of the Innovation Partnership Fund grant portfolio.
- **Result #2:** The Commission will explore strategies for ensuring long-term public behavioral health system revenue stability, efficiency, and effectiveness.

Commission Discussion

What questions or feedback do you have about the priorities and desired results?



Next Steps

April Strategic Plan Advisory Committee meeting:

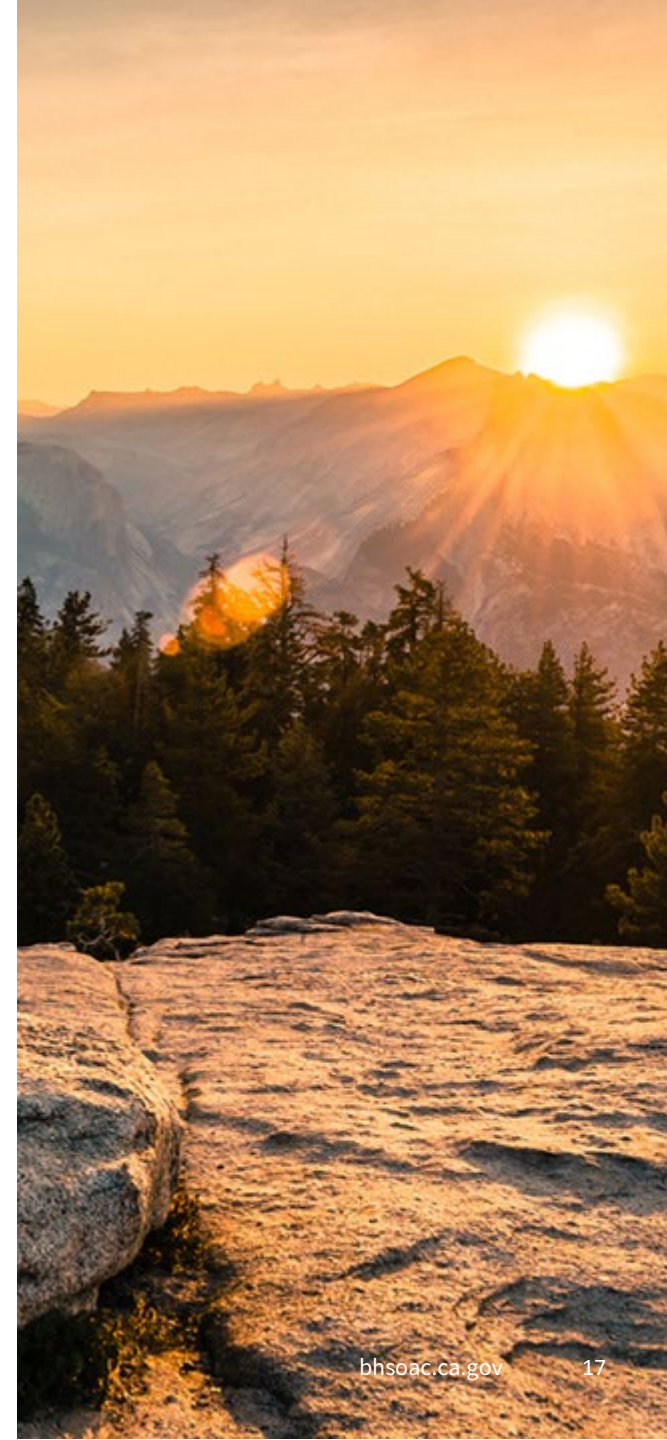
- Address feedback from Commission. Executive Director shares initial strategies for implementing priorities and results.

May Commission meeting:

- Adopt priorities and results as the focusing lens of CBH work for 2026 – 2027. Executive Director shares initial strategies for implementation.

June – July:

- Staff and LRI complete implementation planning.





Public Comment



Thank you!