

California Behavioral Health Planning Council

Housing & Homelessness Committee Agenda

Thursday, April 17, 2025

8:30 am to 12:00 pm

Lake Natoma Inn
702 Gold Lake Drive
Folsom, CA 95630
Natoma/Folsom Room

[Zoom Meeting Link](#)

Join by phone: (669) 444-9171

Meeting ID: 860 4564 8112

Passcode: 488905

8:30 am	Welcome, Introductions, and Housekeeping <i>Deborah Starkey, Chairperson</i>	
8:40 am	Review and Accept January 2025 Meeting Minutes	Tab 1
8:45 am	Member Debrief: Housing California 2025 Annual Conference <i>Deborah Starkey, Chairperson</i>	Tab 2
8:55 am	Housing California's Advocacy Priorities <i>Divya Shiv, Senior Policy Advocate, Housing California</i>	Tab 3
9:40 am	Public Comment	
9:45 am	Break	
9:55 am	Discussion of Housing California's Advocacy Priorities (Action item) <i>Deborah Starkey, Chairperson</i>	Tab 4
10:10 am	Prop 1 Member Discussion <i>Deborah Starkey, Chairperson</i>	Tab 5
11:00 am	Break	
11:10 am	Recovery Housing Overview & Planning	Tab 6
11:45 am	Wrap Up/Next Steps <i>Deborah Starkey, Chairperson</i>	
12:00 pm	Adjourn	

The scheduled times on the agenda are estimates and subject to change.

Public Comment: Limited to a **2-minute maximum** to ensure all are heard.

Officers: Deborah Starkey, Chairperson Maria Sierra, Chairperson Elect

Committee Members: Susie Baker, John Black, Stephanie Blake, Monica Caffey, Dave Cortright, Erin Franco, Lynne Martin Del Campo, Barbara Mitchell, Don Morrison, Jessica Ocean, Sarah Poss, Darlene Prettyman, Danielle Sena, Daphne Shaw, Bill Stewart, Arden Tucker

TAB 1**California Behavioral Health Planning Council
Housing & Homelessness Committee****Thursday, April 17, 2025****Agenda Item:** Review and Accept January 2025 Draft Meeting Minutes**Enclosure(s):** January 2025 Draft Meeting Minutes**Background/Description:**

The Housing and Homelessness Committee will review the draft meeting minutes for the January 2025 Quarterly Meeting and have a chance to make corrections. The committee will then accept the draft meeting minutes.

California Behavioral Health Planning Council
Housing and Homelessness Committee
DRAFT January 2025 Meeting Minutes

Thursday, January 16, 2025

8:30 am to 12:00 pm

Council Members Present:

Arden Tucker, Barbara Mitchell, Danielle Sena, Daphne Shaw, David Cortright, Deborah Starkey, Don Morrison, Erin Franco, John Black, Jason Bradley, Maria Sierra, Monica Caffey

Staff Present:

Jenny Bayardo, Simon Vue, Gabriella Sedano (virtual)

Item #1 Welcome and Introductions

The committee meeting began at 8:30am. Chairperson Deborah Starkey welcomed all committee members and guests. A quorum was established with 12 out of 20 members.

Item #2 Review and Accept October 2024 Meeting Minutes

The Housing and Homelessness Committee reviewed the October 2024 Draft Meeting Minutes. The minutes were accepted by the Committee with no revisions.

Action/Resolution

The minutes are approved and will be posted to the California Behavioral Health Planning Council's website.

Responsible for Action-Due Date

Simon Vue – January 2025

Item #3 Nominate Chair-Elect for 2025 (Action)

Council Member Daphne Shaw nominated Council Member Maria Sierra as the Housing and Homelessness Committee Chair-Elect for 2025. Council Member Dave Cortright seconded the nomination. With a quorum of 11 committee members, the Committee unanimously elected Maria Sierra as Chair-Elect.

Item #4 Overview of Addressing Older Adult Homelessness Report

Patrick Smith, Policy and Research Analyst with the California Commission on Aging, presented their September 2024 report, "Housing Those Hardest Hit: Addressing Older Adult Homelessness." He shared that the causes for the increase in older adult homelessness include housing shortages, higher market rates,

scattered employment histories among older adults, and insufficient social safety nets for events like medical emergencies or loss of income. Patrick also emphasized the importance of understanding the housing continuum of care, which outlines four critical steps toward achieving stability:

- Outreach and Intake
- Emergency Shelter
- Transitional Housing Services
- Permanent Supportive Housing

He added that policy considerations must account for this continuum to effectively address the needs of older adults experiencing homelessness.

The Committee engaged in a question-and-answer session with the presenter. Patrick explained that the University of California, Davis has a “Community for Healthy Living and Independence” program dedicated to intergenerational communities and offered to share contacts at the university. Additionally, he noted that Residential Care Facilities for the Elderly have local augmented programs providing services for low-income individuals.

Patrick defined the continuum of care as the range of settings from homelessness to permanent housing for older adults, with needs based on the level of care. He mentioned two local programs, Housing and Disability Advocacy Program and HomeSafe, that successfully coordinate efforts to prevent homelessness. When asked if the Commission has considered policies that would require facilities to designate 5% or 10% of the units as assisted living units, Patrick shared that the Commission has not looked much into independent living.

Patrick addressed the challenges faced by older adults living in affordable apartments on fixed incomes who encounter rent increases every 6 to 12 months. While he noted that he is unaware of any controls beyond the 10% annual cap, he recognized the significance of the issue. Patrick also committed to providing information on any advocacy efforts or legislative bills supported by the Commission.

Action/Resolution

Council staff will follow up with Patrick to obtain contacts at the University of California, Davis regarding the Community for Healthy Living and Independence program. Staff will also obtain information on any advocacy efforts or legislation supported by the Commission.

Responsible for Action-Due Date

Simon Vue – January 2025

Public Comment:

Barbara Wilson from Los Angeles County highlighted a critical issue where many individuals receive Social Security but not Medi-Cal, sharing an example of a 70-year-old man who receives \$1,200 a month. Given that assisted living programs do not accept government aid such as Medicare or Medi-Cal, Barbara had to relocate him to another community. She also mentioned that senior apartment complexes in their community require prospective residents to have 2.5 times their monthly income

to move in. Barbara discussed their advocacy for a bill to make it easier for families and social workers to identify which facilities serve regional center clients. Barbara emphasized the ongoing difficulty in finding timely information about facilities serving specific populations and requested support to address this issue.

Theresa Comstock from the California Association of Local Behavioral Health Boards & Commissions inquired about the status of a bill the Commission plans to introduce this legislative cycle regarding Residential Care Facilities for the Elderly. She also reminded the Committee of an Adult Residential Facilities (ARF) issue paper the Council authored a few years ago.

Gregory Farron, a longtime activist in the homeless and low-income housing community, requested that Committee meetings be recorded and made accessible to the public.

Cliff highlighted the challenge his family faced when they transitioned his father to an assisted living program due to increasing care demands. Cliff inquired about available programs for elderly individuals to receive the same level of care at home as in assisted living facilities.

Stacy Dalgleish from Los Angeles County stressed the importance of tracking residential care facilities in California and expressed concern over the lack of follow-through on Assembly Bill 1766 by Assembly Member Bloom, which was previously passed. She urged the use of the California Office of the Auditor to ensure accountability and implementation of such measures, despite changes in committee memberships and retirements.

Item #5	Overview of Behavioral Health Bond Application & Award
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Marlies Perez, Behavioral Health Transformation Project Executive and Chief of the Community Services Division at the Department of Health Care Services, presented on the Behavioral Health Continuum Infrastructure Program funded by Proposition 1. The California Department of Health Care Services oversees \$4.4 billion of the \$6.3 billion general obligation bond, aimed at building infrastructure for mental health and substance use disorder treatment facilities in California through competitive grants.

The program extends the current Behavioral Health Continuum Infrastructure Program initiative, which has already funded over \$1.7 billion in grants. An additional \$2 billion of the bond is managed by the California Housing and Community Development Department under the HomeKey+ program, focusing on housing individuals as well as veterans with behavioral health conditions.

Marlies shared that Round One of Behavioral Health Continuum Infrastructure Program grants was released in July 2024, with applications due by December 13, 2024, and award announcements expected in May 2025. \$1.5 billion is allocated to government entities, with \$30 million designated for tribal partners. Nearly 300 applications totaling over \$8 billion were received in Round One. She also mentioned that Round Two, with up to \$1 billion in funding, will be released after the Round One awards.

Marlies shared that the Department of Health Care Services conducted a needs assessment in January 2024 to identify gaps in mental health and substance use disorder facilities. The assessment guides the request for application and award process to address urgent needs across various populations. The request for application provides information on match requirements, including cash matches and other funding sources. Marlies added that information on previously funded facilities is available on the Department of Health Care Services website.

The committee engaged in a question-and-answer session with Marlies, who shared that the Department has relevant statistics on their website about the number of applications for involuntary treatment versus other facilities in the last round of the Behavioral Health Continuum Infrastructure Program. She explained that data on the estimated cost per involuntary treatment bed, categorized by adult and children's beds, is currently unavailable. She further noted that costs can vary widely depending on factors such as whether the facility involves new construction or renovation, as well as the type of facility.

Public Comment:

Barbara Wilson from Los Angeles County expressed gratitude for the presentation and shared her advocacy efforts for funding Adult Residential Facilities and Residential Care Facility for the Elderly. She highlighted that the County has seen a significant reduction in licensed facilities, replaced by many unlicensed facilities, causing distress within the community. Despite finally passing legislation, the funds were delayed, resulting in only 24-25 facilities in the county receiving the necessary funding for maintenance. Barbara emphasized the great need for more facilities to support families with loved ones suffering from serious mental illness.

Teresa Pasquini expressed support for Barbara Wilson's comments and conveyed concerns from family members and groups about the guidelines and restrictions on funding. She shared that they feel excluded from the process despite being strong advocates for Proposition 1. Teresa commended the Planning Council and advocates for their efforts but highlighted concerns that Adult Residential Facilities and Residential Care Facilities for the Elderly are not part of the Proposition 1 funding options.

Cliff questioned the measures that are being taken to address these gaps and ensure that the elderly receive the necessary services.

Committee Member Discussion

There was a suggestion for Council staff to review the Department of Health Care Services website to gather information on the types of facilities previously funded such as voluntary beds versus involuntary beds. Erin noted that the Department's website indicates the announcement for the latest funding round will not be available until May 2025 and reported that no details were available on the types of applications submitted.

Barbara Mitchell suggested reviewing the applications from previous rounds of the Behavioral Health Continuum Infrastructure Program to help the committee understand the types of facilities that were funded in past rounds.

Monica Caffey expressed hope that the committee can leverage its collective strength to effect change and bring forward solutions for individuals who are currently not receiving necessary services. She emphasized the need for the committee to take actionable steps in advocating for changes.

Erin Franco highlighted that many organizations lack visibility for their advocacy efforts. She mentioned Mercy Housing as an example, noting their commendable work and suggesting the committee learn more about their initiatives. Erin proposed identifying and supporting agencies to amplify their efforts, especially those focused on housing for older adults. She recommended inviting organizations like Mercy Housing to present at the next Housing and Homelessness Committee meeting.

Action/Resolution

Council staff will review the applications from previous Behavioral Health Continuum Infrastructure Program rounds to identify the types of facilities that were funded. Staff will also reach out to Mercy Housing for a presentation at our April 2025 Housing and Homelessness Committee meeting.

Responsible for Action-Due Date

Simon Vue – February 2025

Item #6 Member Discussion on Proposition 1

Jenny Bayardo reported on the work of the Proposition 1 Ad Hoc Committee. She provided an update on the Behavioral Health Services Act Council Prioritization crosswalk, which includes relevant code sections and recently added implementation date timelines. Jenny shared that a new "committee action update" column was added to document actions such as signing letters with other organizations or making policy recommendations.

Barbara Mitchell clarified that the Secondary Tenants Policy only applies to the Veterans Housing and Homelessness Prevention Program, allowing the redesignation of some housing units to accommodate incomes up to 60% of the area median income. She noted that different housing programs have varying income level restrictions, with "low income" defined by the area median income. For example, earning \$80,000 a year can still be considered low income in San Francisco.

Erin Franco inquired if there is a database that provides information on housing occupancy rates for veterans across California, specifically detailing how much housing is full and how much is vacant. Barbara Mitchell noted there are anecdotal reports about the number of vacant supportive housing units in San Francisco. However, she emphasized that understanding why these units are vacant is crucial, as it may not always be due to a lack of eligible residents and could be related to issues with processing applications.

Barbara Mitchell expressed interest in exploring which California programs can be designated for elderly persons. Barbara mentioned a project in San Francisco that offers assisted living for low-income elderly persons with their own units and in-house services. She suggested legislative changes to allow certain housing programs to be age-specific or to make affordable models more accessible.

Monica Caffey emphasized advocating for equitable housing access for individuals with serious mental illness across all ages. She pointed out that Proposition One primarily focuses on children and veterans, leaving out the older adult population. Monica asserted that the Committee must take a strong stance to influence policy changes that prioritizes healthy housing and addressing homelessness for vulnerable populations, especially the elderly.

Erin Franco emphasized the need to identify and partner with key housing advocates in California, listen to their perspectives, and amplify their voices in the housing advocacy realm.

Building on this discussion, the conversation shifted toward the Housing First and Recovery Model issue. Barbara Mitchell sought clarification from Chairperson Deborah Starkey on whether the Housing and Homelessness Committee should take up the Housing First and Recovery Model issue or leave it under the purview of the Legislation and Public Policy Committee. Drawing from her experience as a clinician in the substance use disorder field, Erin Franco expressed concerns regarding recovery housing. She highlighted the existence of different levels of care for substance use disorder and stressed that the ultimate treatment goal is to reintegrate individuals into society. Erin further stated that she would not support a permanent housing solution based solely on recovery.

Jenny Bayardo emphasized the need for the Council to examine the Behavioral Health Services Act. While the committee can look beyond the Behavioral Health Services Act, it is crucial to address the potential discrepancy between the Housing First model and the recovery model. She shared that the Substance Abuse and Mental Health Services Administration (SAMHSA) has been researching and discussing this issue, providing specific recommendations in an August 2023 report, "The Intersection of Recovery Housing & Housing First— A Dialogue on Collaboration and Partnership." Jenny reminded the Committee that Hal Zawacki, the Substance Abuse and Mental Health Services Administration representative, has previously presented at meetings and has expertise in housing-related issues. Jenny emphasized the importance of maintaining a connection with Substance Abuse and Mental Health Services Administration and staying informed about their housing initiatives.

Dave Cortright suggested arranging for Substance Abuse and Mental Health Services Administration to provide more information on the Recovery Model and Housing First issue at the next Committee meeting.

Barbara Mitchell found it surprising that some housing clients do not have a lease or tenant rights because their rent is paid by someone else, as mentioned in the presentation from Tarzana at the Legislation and Public Policy Committee. She

emphasized the need to investigate the legalities of housing in California, specifically regarding tenant rights when a program fee is paid by a third party.

Danielle Sena agreed that examining the legalities of these operations is a good idea but stressed the importance of being precise with definitions. She shared that recovery housing, sober living, and inpatient housing vary widely by county, state, and whether they are publicly, privately, or non-profit owned. Danielle added that privately owned sober living environments operate differently, with owners requiring residents to sign contracts with specific rules. This differs from Partial Hospitalization Programs and Intensive Outpatient Programs, where rent is included in the program's contracted rate, creating a structured environment.

There was a consensus to have a presentation on the different types of recovery housing options and the legalities surrounding them, with a focus on the Behavioral Health Services Act.

Action/Resolution

Council staff will secure a presentation on the different recovery housing options and the legalities surrounding them.

Responsible for Action-Due Date

Simon Vue – February 2025

Item #9 Wrap-up Next Steps

Chairperson Deborah Starkey thanked the Committee for their feedback and time. The meeting adjourned at 12:00 pm.

TAB 2

California Behavioral Health Planning Council Housing & Homelessness Committee

Thursday, April 17, 2025

Agenda Item: Member Debrief: Housing California 2025 Annual Conference

How This Agenda Item Relates to Council Mission

To review, evaluate and advocate for an accessible and effective behavioral health system.

The Planning Council advocates for children with serious emotional disturbances and adults and older adults with serious mental illness. Active participation in public meetings, conferences, and events plays a vital role in fostering strong relationships with stakeholders and the public, promoting knowledge exchange and building impactful advocacy efforts. This agenda item corresponds to Committee Work Plan Goal 1:

- **Goal 1:** Advocate for Equitable Access to Housing for Persons with Serious Mental Illness Across the Lifespan

Background/Description:

Committee members and staff will share their experiences and key highlights from the Housing California 2025 Annual Conference, which took place from March 5-7, 2025, at the SAFE Credit Union Convention Center in Sacramento, CA.

The event featured community tours and a variety of sessions, including learning labs, workshops, and roundtable discussions hosted by dynamic affordable housing, homelessness, and cross-sector thought leaders.

Session Tracks Included:

- Produce & Preserve Affordable Homes
- Solve Homelessness
- Protect Low-Income Renters
- Shape Narratives & Move Mindsets
- Advance Intersectional Solutions For Housing Justice
- Build Power, Increase Solidarity & Win Campaigns at Scale
- Foster a Strong & Purposeful Housing Justice Sector

Additional Resources:

[Housing California's website](#)
[Plenaries 2025](#)

TAB 3

California Behavioral Health Planning Council Housing & Homelessness Committee

Thursday, April 17, 2025

Agenda Item: Housing California's Advocacy Priorities

Enclosure: [Roadmap Home 2030](#)

Housing and Homelessness Advocacy Presentation - For a copy of this document, please contact Simon Vue at Simon.Vue@cbhpc.dhcs.ca.gov.

How This Agenda Item Relates to Council Mission

To review, evaluate and advocate for an accessible and effective behavioral health system.

This agenda item informs the Housing and Homelessness Committee (HHC) about the advocacy priorities and initiatives of Housing California, a statewide advocacy organization dedicated to addressing homelessness and creating affordable housing in California. The committee will have the opportunity to engage in discussions and strategize advocacy efforts to address the housing needs of Californians.

This agenda item corresponds to Committee Work Plan Goal 1:

- **Goal 1:** Advocate for Equitable Access to Housing for Persons with Serious Mental Illness Across the Lifespan
- **Objective:** Assess the availability of housing resources for persons across the lifespan and review how state laws have impeded matters contributing to housing and homelessness issues.

Background/Description:

Divya Shiv, Senior Policy Advocate at Housing California, will provide an overview of Housing California's advocacy priorities and initiatives to combat homelessness and housing issues in California.

Divya Shiv is a Senior Policy Advocate at Housing California focused on homelessness policy. In collaboration with partners, the Resident United Network, and key legislators, she works to advance legislative and



budgetary policy priorities that decrease and eliminate homelessness in the state.

Divya began her career as a Community Organizer at the Washington Low-Income Housing Alliance where she co-led a statewide network of people who had lived experience of housing insecurity and homelessness. Within this role, Divya advocated for bills to improve access to affordable housing. Following this, she served as a consultant for the City of Albuquerque as part of her graduate program to identify policy strategies to mitigate the effects of evictions. Divya continued her career in policy advocacy as a Research and Policy Analyst at New Mexico Voices for Children where she advocated for bills at the state and local level to improve public health outcomes in New Mexico. Within this role, she helped pass a state bill to ensure recurring funding for affordable housing development, a local bill that bans discrimination against people using housing vouchers, and a state bill to provide universal free school meals, among others.

Divya received a Master of Public Policy from University of California, Berkeley and a Bachelor of Arts in English literature and Psychology from Haverford College.

About Housing California

Housing California began as a conference in 1979 with a small gathering across the street from the State Capitol. The gathering became an annual event, and over the last four decades has grown into one of the largest and most diverse affordable housing and homelessness conferences in the country.

Housing California became a broader, state-wide advocacy organization in 1988 as a result of the growing state advocacy work in affordable housing.

Housing California brings together a diverse, multi-sector network to prevent and end homelessness, increase the supply of safe, stable, affordable housing options, and reverse the legacy of racial and economic injustice by building power among the people most impacted by housing injustice, shaping the narrative, and advocating for statewide policy solutions.

Additional Resources:

[Housing California's website](#)

TAB 4

California Behavioral Health Planning Council Housing & Homelessness Committee

Thursday, April 17, 2025

Agenda Item: Discussion of Housing California's Advocacy Priorities

Enclosures: None

How This Agenda Item Relates to Council Mission

To review, evaluate and advocate for an accessible and effective behavioral health system.

This agenda item allows the committee to identify Housing California's advocacy priorities that align with CBHPC policy priorities. This will allow HHC to effectively advocate for equitable access to housing for persons with lived experience of Serious Mental Illness and Substance Use Disorder.

This discussion aligns with Committee Work Plan Goal 1.

- **Goal 1:** Advocate for Equitable Access to Housing for Persons with Serious Mental Illness Across the Lifespan

Background/ Description:

This agenda item provides the Committee with an opportunity to review and discuss the advocacy priorities presented by Housing California. The Committee will consider necessary action items and outline potential next steps, as appropriate.

TAB 5

California Behavioral Health Planning Council Housing & Homelessness Committee

Thursday, April 17, 2025

Agenda Item: Member Discussion on Proposition 1

Enclosures: [Behavioral Health Continuum Infrastructure Program \(BHCIP\) Outcomes](#)

How This Agenda Item Relates to Council Mission

To review, evaluate and advocate for an accessible and effective behavioral health system.

The Council's scope of work includes identifying best practices and evaluating programs funded by the public behavioral health system. The Housing and Homelessness Committee will discuss the Behavioral Health Infrastructure Bond Act and housing component of the Behavioral Health Services Act and use this information from the discussion to advocate for best practices and policies to improve access to housing and services for individuals and families experiencing or at risk of homelessness.

This agenda item corresponds to Committee Work Plan Goals 1 & 2.

- **Goal 1:** Advocate for Equitable Access to Housing for Persons with Serious Mental Illness Across the Lifespan
- **Goal 2:** Contribute to the Development of Regulations for Housing Initiatives for Persons with Serious Mental Illness

Background/ Description:

In March 2024, voters passed Proposition 1, which includes two parts: the Behavioral Health Services Act (BHSA) and a \$6.4 billion Behavioral Health Bond for community infrastructure and housing with services. BHSA modernizes the Mental Health Services Act (MHSA) to address today's behavioral health system and needs. These reforms expand services to include treatment for people with substance use disorders, provide ongoing resources for housing interventions and workforce, and continue investments in prevention, early intervention, and innovative pilot programs.

Housing is an essential component of behavioral health treatment, recovery, and stability. Beginning in 2026 under the Behavioral Health Services Act, 30 percent of each county's funding allocation must be used for housing interventions for Californians with the most significant behavioral health needs who are homeless or at risk of homelessness. Half of that amount is prioritized for those experiencing chronic homelessness.

The Behavioral Health Infrastructure Bond Act authorizes \$6.4 billion in bonds to finance behavioral health treatment beds, supportive housing, community sites, and funding for housing veterans with behavioral health needs:

- \$4.4 billion of these funds will be administered by the Department of Health Care Services for grants to public and private entities for behavioral health treatment and residential settings.
 - \$1.5 billion of the \$4.4 billion will be awarded only to counties, cities, and tribal entities, with \$30 million set aside for tribes.
- The remaining \$1.972 billion will be administered by the California Department of Housing and Community Development (HCD) to support permanent supportive housing for individuals at risk of or experiencing homelessness and behavioral health challenges.
 - Of that amount, \$1.065 billion will be for veterans.

All these efforts will leverage effective existing programs, including the Behavioral Health Continuum Infrastructure Program (BHCIP), Project Homekey, and Veterans Housing and Homeless Prevention Program (VHHP).

During this agenda item, the Committee will review and discuss the enclosed Behavioral Health Continuum Infrastructure Program (BHCIP) Outcomes document, which summarizes key data including beds and facility types funded during Rounds 3, 4, and 5.

Additionally, the Council provided feedback and recommendations to the Department of Health Care Services (DHCS) on the draft Behavioral Health Services Act (BHSA) County Policy Manual, Module 1. On February 19, 2025, the Department published the final version of the policy manual. Committee staff will provide updates highlighting which recommendations were incorporated into the final version and which were not. Insights from this discussion will inform the Committee's efforts to advocate for best practices and policies to improve access to housing and services for individuals and families experiencing or at risk of homelessness.

Additional Resources:

[HCD Project Homekey+](#)

[DHCS Behavioral Health Transformation webpage](#)

[Senate Bill 326 - BHSA](#)

[Assembly Bill 531- The Behavioral Health Infrastructure Bond Act](#)

[Behavioral Health Services Act \(BHSA\) Policy Manual – Final Module 1](#)

[Behavioral Health Continuum Infrastructure Program \(BHCIP\) Dashboard](#)

TAB 6

California Behavioral Health Planning Council Housing & Homelessness Committee

Thursday, April 17, 2025

Agenda Item: Recovery Housing Overview & Planning

Enclosure: [The Intersection of Recovery Housing & Housing First— A Dialogue on Collaboration and Partnership](#)

How This Agenda Item Relates to Council Mission

To review, evaluate and advocate for an accessible and effective behavioral health system.

The purpose of this agenda item is to identify best practices and evaluate programs funded by the public behavioral health system.

This agenda item corresponds to Committee Work Plan Goals 1 and 2:

- **Goal 1:** Advocate for Equitable Access to Housing for Persons with Serious Mental Illness Across the Lifespan
- **Goal 2:** Contribute to the Development of Regulations for Housing Initiatives for Persons with Serious Mental Illness

Background/Description:

Due to recent cuts to the Substance Abuse and Mental Health Services Act (SAMHSA) regional staff, HHC staff will provide a summary of SAMHSA's report examining the intersection of Recovery Housing and Housing First model.

The Committee will also explore the possibility of hosting a panel on Recovery Housing during the June Committee Meeting. This discussion will focus on identifying potential speakers, as well as formulating relevant questions and topics for the panel.

Additional Resources:

[Substance Abuse and Mental Health Services Administration's website](#)