

California Behavioral Health Planning Council

Performance Outcomes Committee Agenda

Tuesday, October 14, 2025

2:00 p.m. to 5:00 p.m.

[Embassy Suites San Francisco Airport Waterfront](#)

150 Anza Boulevard
Burlingame, CA 94010
Solano Room

[Zoom Meeting Link](#)

Join by phone: 1-669-900-6833

Meeting ID: 872 3058 4581

Passcode: 661775

- | | | |
|-----------|--|-------|
| 2:00 p.m. | Welcome, Introductions, and Housekeeping
<i>Noel O'Neill, Chairperson</i> | |
| 2:05 p.m. | Review June 2025 Meeting Minutes
<i>Noel O'Neill, Chairperson</i> <ul style="list-style-type: none">• Committee Discussion• Public Comment• Accept Minutes | Tab 1 |
| 2:10 p.m. | CBHPC Homelessness in the Public Behavioral Health System Webinar Proposal (Action)
<i>Noel O'Neill, Chairperson</i> <ul style="list-style-type: none">• Committee Discussion of Proposed Event• Public Comment• Approve Event Outline | Tab 2 |
| 2:20 p.m. | Updates on Data Notebook 2025: Wellness and Recovery Centers in the Public Behavioral Health System
<i>Linda Dickerson and Justin Boese, CBHPC Staff</i> | Tab 3 |
| 2:35 p.m. | Public Comment | |
| 2:40 p.m. | Break | |
| 2:50 p.m. | Development of the Data Notebook 2026 on Youth Wellness Programs in the Public Behavioral Health System
<i>Noel O'Neill, Chairperson and All</i> | Tab 4 |
| 3:25 p.m. | Public Comment | |
| 3:30 p.m. | Break | |

If reasonable accommodations are required, please contact the Council at (916) 701-8211, not less than 5 working days prior to the meeting date.

- 3:45 p.m. Allcove Youth Centers Presentation** **Tab 5**
Dr. Steven Adelsheim, Clinical Professor and Associate Chair for Community Engagement, Allcove
- 4:45 p.m. Public Comment**
- 4:50 p.m. Discussion of the 2025 Performance Outcomes Committee Activities for the Council’s Year-End Report (Action)** **Tab 6**
Noel O’Neill, Chairperson and All
- 4:55 p.m. Next Steps and Planning for Future Activities**
Noel O’Neill, Chairperson and All
- 5:00 p.m. 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

Performance Outcome Committee Members

Chairperson: Noel O’Neill

Chair-Elect: Don Morrison

Members:

Karen Baylor

Steve Leoni

Catherine Moore

Liz Oseguera

Susan Wilson

Uma Zykofsky

Lanita Mims-Beal

Invited External Partners

Theresa Comstock, CA Association of Local Behavioral Health Boards/Commissions

Samantha Spangler, Behavioral Health Data Project

Council Staff

Justin Boese

Linda Dickerson

TAB 1

**California Behavioral Health Planning Council
Performance Outcomes Committee**

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Agenda Item: Review June 2025 Meeting Minutes

Enclosure: Draft of June 2025 Meeting Minutes

Background/Description:

Committee members will review the draft June 2025 meeting minutes and have the opportunity to request edits to the documents before they are accepted.

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Meeting Minutes

Committee Members Present:

Noel O’Neill, Chairperson
Karen Baylor
Susan Wilson

Don Morrison, Chair-Elect
Liz Oseguera
Uma Zykofsky

Invited External Partners Present:

Theresa Comstock, CA Association of Local Behavioral Health Boards/Commissions
Samantha Spangler, Behavioral Health Data Project

Staff Present:

Justin Boese
Linda Dickerson

Jenny Bayardo

Item #1: Welcome and Introductions

The committee meeting began at 2:00 p.m.

Noel O’Neill welcomed all committee members and guests. A quorum was established with 6 out of 10 members.

Item #2: Review Meeting Minutes

The Committee reviewed the meeting minutes for April 2024. The minutes were accepted with one minor revision.

Item #3: Data Notebook “Part I” Analysis

In May 2024, the Council contracted with Samantha Spangler of the Behavioral Health Data Project to analyze the Part I data collected from 2019 to 2023. Samantha presented a complete draft of the Part I analysis report for committee approval. The report was revised based on feedback from the April 2025 meeting. She highlighted changes from the previous draft, which incorporated feedback from committee members.

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Samantha reviewed edits to the recommendations. The final recommendations are:

1. Focus on quantifying and reporting unmet needs.
2. Ensure services are provided at the appropriate level of care.
3. Expand the availability of IMD services in all regions, especially rural areas.
4. Increase service availability and provider skills for serving children and youth in group care.
5. Prioritize diversion, shelter, and affordable housing for individuals experiencing both behavioral health challenges and risk of homelessness.
6. Track performance outcome measures to demonstrate the effectiveness of behavioral health programs, with a focus on recovery-oriented outcomes.

Susan Wilson noted that relevant recommendations from this report will also be used in the 2024 Data Notebook Report on Homelessness in the Public Behavioral Health System.

Action Item: Susan Wilson made a motion to approve the final draft of the analysis report. The motion was seconded by Uma Zykofsky. Staff took a roll call vote. The motion passed.

Noel O’Neil thanked Samantha and the Behavioral Health Data Project for the work that went into the report. He then asked the committee how they thought the report should be distributed to stakeholders. Susan Wilson said that the report needs a cover letter to serve as an introduction and overview. She suggested that the committee send the report and cover letter to every behavioral health board/commission and behavioral health department, as well as any legislators who are interested in this issue. Uma Zykofsky said that the report should go to all legislators and any relevant committees, rather than being selective about who to send it to.

Karen Baylor asked Jenny Bayardo if the report needed to be reviewed by the Department of Health Care Services before it is distributed to the legislature. Jenny said that because it will be posted online, it will be reviewed for accessibility and data requirements, but there won’t be any barriers to sharing the report.

Item #4: Behavioral Health Transformation Quality and Equity Advisory Committee Updates

Noel O’Neill provided an update on the activities of the Behavioral Health Transformation Quality and Equity Advisory Committee (QEAC). Noel shared slides from the fifth meeting of the committee that occurred on June 3, 2025. He said that at

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this meeting, John Black spoke to the committee to share his personal experience and journey of recovery, as well as recommendations for the behavioral health system. He also provided a quick overview of Phase 2 of the committee's work, which includes the development of statewide behavioral health goals and measures.

Liz Oseguera and Samantha Spangler shared concerns about the direction that the Department of Health Care Services is going regarding the statewide behavioral health goals. Liz also said that it feels like concerns from members of the Quality and Equity Advisory Committee and other stakeholders are not being taken into account. Samantha Spangler agreed and added that some of the goals exist outside of the behavioral health system. She said that addressing the goals is going to be very challenging for counties while developing their integrated plans.

Karen Baylor asked Samantha how this work connects to the Performance Outcomes Committee. Samantha said that the Performance Outcomes Committee should continue to communicate recommendations and concerns to the Quality and Equity Advisory Committee. Noel said that members of the Performance Outcomes Committee volunteered to be on the Quality and Equity Advisory Committee so that they could have some input.

Theresa Comstock commented that it will be very meaningful to the Performance Outcomes Committee, as well as the local boards, to have the performance outcomes measures that the Department is working on. She added that she had seen some adjustments in response to feedback from the Quality and Equity Advisory Committee, but that she thinks there are some requirements in California law that they need to meet.

Samantha informed the committee that the Technical Subcommittee of the Quality and Equity Advisory Committee will have their first meeting about Phase 2 next week.

Item #5: Data Notebook 2024 (Homelessness) Report

Susan Wilson presented the final draft of the 2024 Data Notebook on Homelessness in the Public Behavioral Health System for committee review. The updated draft includes some of the recommendations from the Part I analysis report. Karen Baylor said that she approved of the statement in the report that behavioral health is not, and should not be, primarily responsible for the issue of homelessness.

Action item: Susan made a motion to approve the final draft of the 2024 Data Notebook on Homelessness in the Public Behavioral Health System with the inclusion

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of some minor final edits. The motion was seconded by Don Morrison. Staff took a roll call vote. The motion passed.

Item #6: Data Notebook 2025 (Wellness Centers) Development

Noel O’Neill began a discussion of the 2025 Data Notebook on Wellness and Recovery Centers by asking staff member Justin Boese to tell the committee about the background resources he has found on the topic. Justin said that he was not able to find many resources on this topic besides the Council’s own report on wellness and recovery centers, which was published in 2011. Justin said that the 2011 report is well written and is still a valuable resource.

Uma Zykofsky said that the 2011 report came out fairly early in the development of wellness centers, and that the models have evolved and changed significantly.

Noel O’Neill introduced Chad Castello, the executive director of the California Association of Social Rehabilitation Agencies (CASRA), who helped the committee develop a draft of the survey questions. Chad said that CASRA member organizations operate 37 Wellness and Recovery Centers across the state. Some counties are concerned about losing funding for their wellness centers as soon as the upcoming fiscal year. In other counties, organizations are being asked to open new centers. Chad has hired a consultant to conduct interviews to collect information about these wellness centers in order to add that information to the discussion of this topic.

Noel then reviewed the draft survey questions with the committee. Committee members and others present provided feedback on each of the questions, as well as suggestions for new questions. Staff will edit the survey questions based on the feedback received.

Item #7: Next Steps and Planning for Future Activities

Noel O’Neill and the committee members identified some next steps and agenda items for the October 2025 meeting. These next steps include:

- Finalize the 2025 Data Notebook Survey Document for distribution.
- Review preliminary results of the 2025 Data Notebook on Wellness Centers.
- Develop the 2026 Data Notebook on wellness and recovery centers for youth.

The meeting adjourned at 5:00pm.

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Agenda Item: CBHPC Homelessness in the Public Behavioral Health System Webinar Proposal (Action Item)

Enclosure: Draft of Homelessness in the Behavioral Health System Webinar Outline

How This Agenda Item Relates to Council Mission

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

This agenda item provides Council members with an opportunity to discuss and approve a proposal for a webinar on homelessness in the Public Behavioral Health System, featuring data and recommendations from committee reports.

This discussion aligns with the Performance Outcomes Committee Work Plan Goal 1 and Goal 2.

- **Goal 1:** Collect County-Specific Data to Evaluate the Public Behavioral Health System.
- **Goal 2:** Facilitate Regular Stakeholder Engagement on Behalf of the Planning Council.

Background/Description:

In 2024-2025, the Performance Outcomes Committee produced two reports that include data and recommendations regarding homelessness in the public behavioral health system. These reports were the 2024 Data Notebook Overview Report, and the Data Notebook Part I 5-Year Analysis Report. The committee leadership developed a proposal for a webinar to present the data and recommendations to the public. This one-hour event is tentatively scheduled for December 4, 2025. Committee members will review the draft outline for the event and will have the opportunity to provide input.

Motion: Approve the Homelessness in the Public Behavioral Health System webinar, as outlined in the enclosure.



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DRAFT

Performance Outcomes Committee Webinar: Homelessness in the Public Behavioral Health System

Goal: Share data and recommendations regarding homelessness and behavioral health from Performance Outcomes Committee reports with stakeholders.

Objectives:

- 1) Educate stakeholders on the topic of homelessness in the public behavioral health system.
- 2) Present findings and recommendations from Performance Outcomes Committee reports, including:
 1. The Data Notebook 5-Year Analysis Report
 2. The 2024 Data Notebook Report on Homelessness in the Public Behavioral Health System

Audience: This webinar is open to the public. Behavioral health board/commission members, county behavioral health staff, and other behavioral health stakeholders are encouraged to attend.

Event Outline

1. **Welcome and Opening** (5 Minutes)
Noel O’Neill, Event Facilitator

Introduce speakers, explain the objectives of the event, and outline the agenda for the webinar.

2. **Council Introduction** (5 minutes)
Jenny Bayardo, Executive Officer

Overview of the Council and an explanation of who we are & what we do.

- a. Composition of the Council (WIC 5771 (a) (b) (c))
- b. Federal Mandate ([Public Law 103-321](#))
- c. State Mandates ([5771](#) | [5771.3](#) | [5771.5](#) | [5772](#) | [5814](#) | [5845](#) | [5892](#))



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3. **Data Notebook 5-Year Analysis Report** (10 minutes)
Samantha Spangler, CEO, Behavioral Health Data Project

Brief overview of the Data Notebook 5-Year Analysis Report, followed by findings on homelessness. (10 minutes) *Samantha Spangler*

4. **2024 Data Notebook** (20 minutes)
Susan Wilson, Performance Outcomes Committee Member CEO, Behavioral Health Data Project

Overview of the 2024 Data Notebook Report on Homelessness in the Public Behavioral Health System, including findings and highlights from county responses.

5. **Recommendations** (10 minutes)
Susan Wilson, Committee Member and Samantha Spangler, CEO, Behavioral Health Data Project

Share recommendations from the Data Notebook 5-Year Analysis Report and the 2024 Data Notebook Report on Homelessness in the Public Behavioral Health System.

6. **Q/A:** 10 minutes.
Susan Wilson, Committee Member and Samantha Spangler, CEO, Behavioral Health Data Project

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Agenda Item: Updates on Data Notebook 2025: Wellness and Recovery Centers in the Public Behavioral Health System

Enclosure: 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 provides Council members with an update on the survey results and analysis of the 2025 Data Notebook on Wellness and Recovery Centers in the Public Behavioral Health System. The Performance Outcomes Committee will use this data to evaluate the behavioral health system.

This agenda item corresponds to the Performance Outcomes Committee Work Plan Goal 1.

- **Goal 1:** Collect County-Specific Data to Evaluate the Public Behavioral Health System.

Background/Description:

Each year, the Council releases a Data Notebook to the local mental/behavioral health boards and commissions to complete with their perspectives on focused areas of the public behavioral health system. The topic for the 2025 Data Notebook is *Wellness and Recovery Centers in California's Behavioral Health System*.

The 2025 Data Notebook Survey was sent out in August 2025. Counties were asked to complete the Data Notebook Survey by November 1, 2025. This deadline was chosen to ensure that the Council can complete the 2025 Data Notebook Overview Report in time to inform the community planning process and Behavioral Health Services Act Three-year Integrated Plan. Staff will present preliminary survey results for the 2025 Data Notebook to the committee. Committee members have an opportunity to review and comment on the analysis and discuss recommendations.

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Agenda Item: Development of the Data Notebook 2026 on Youth Wellness Programs in the Public Behavioral Health System

Enclosures: 2025 Data Notebook Survey

How This Agenda Item Relates to Council Mission

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

This agenda item provides Council members with an opportunity to discuss the development of the 2026 Data Notebook as part of the committee's goal to evaluate the behavioral health system.

This agenda item corresponds with the Performance Outcomes Committee Work Plan Goal 1.

- **Goal 1:** Collect County-Specific Data to Evaluate the Public Behavioral Health System.

Background/Description:

At the April 2025 meeting, the committee decided to focus on wellness and recovery services for adults and youth for the 2025 and 2026 Data Notebooks. The focus of the 2025 Data Notebook is Wellness and Recovery Centers in the Public Behavioral Health System. The 2026 Data Notebook will focus on wellness services for youth in middle and high school.

Committee members will begin the development of the 2026 Data Notebook. The 2025 Data Notebook Survey document is included as a reference for developing survey questions for 2026.

DATA NOTEBOOK 2025

FOR CALIFORNIA

BEHAVIORAL HEALTH BOARDS AND COMMISSIONS



Prepared by California Behavioral Health Planning Council, in collaboration with:
California Association of Local Behavioral Health Boards/Commissions



The California Behavioral Health Planning Council (Council) is under federal and state mandate to review, evaluate and advocate for an accessible and effective behavioral health system. This system includes both mental health and substance use treatment services designed for individuals across the lifespan. The Council is also statutorily required to advise the Legislature on behavioral health issues, policies, and priorities in California. The Council advocates for an accountable system of seamless, responsive services that are strength-based, consumer and family member driven, recovery oriented, culturally, and linguistically responsive and cost effective. Council recommendations promote cross-system collaboration to address the issues of access and effective treatment for the recovery, resilience, and wellness of Californians living with severe mental illness and/or substance use disorders.

For general information, you may contact the following email address or telephone number:

DataNotebook@CBHPC.dhcs.ca.gov

(916) 701-8211

Or you may contact us by postal mail at:

Data Notebook
California Behavioral Health Planning Council
1501 Capitol Avenue, MS 2706
P.O. Box 997413 Sacramento, CA 95899-7413

For questions regarding the SurveyMonkey online survey, please contact Justin Boese at Justin.Boese@cbhpc.dhcs.ca.gov

NOTICE:

This document contains a textual **preview** of the California Behavioral Health Planning Council 2025 Data Notebook survey, as well as supplemental information and resources. It is meant as a **reference document only**. Some of the survey items appear differently on the live survey due to the difference in formatting.

DO NOT RETURN THIS DOCUMENT.

Please use it for preparation purposes only.

To complete your 2025 Data Notebook, please use the following link and fill out the survey online by **November 1, 2025**:

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CBHPC 2025 Data Notebook: Introduction

What is the Data Notebook? Purpose and Goals

The Data Notebook is a structured format to review information and report on aspects of each county's behavioral health services. A different part of the public behavioral health system is addressed each year, because the overall system is large and complex. This system includes both mental health and substance use treatment services designed for individuals across the lifespan.

Local behavioral health boards/commissions (local boards) are required to review performance outcomes data for their county and to report their findings to the California Behavioral Health Planning Council (Planning Council). To provide structure for the report and to make the reporting easier, each year a Data Notebook is created for local boards to complete and submit to the Planning Council. Discussion questions seek input from local boards and their departments. Planning Council staff analyze these responses to create annual reports to inform policy makers and the public.

The Data Notebook structure and questions are designed to meet important goals:

- To help local boards meet their legal mandates¹ to review and comment on their county's performance outcome data, and to communicate their findings to the Planning Council;
- To serve as an educational resource on behavioral health data;
- To obtain the opinions and thoughts of local board members on specific topics;
- To identify successes, unmet needs and make recommendations.

How the Data Notebook Project Helps You

Understanding data empowers individuals and groups in their advocacy. The Planning Council encourages all members of local boards to participate in developing the responses for the Data Notebook. This is an opportunity for local boards and their county behavioral health departments to work together to identify critical issues in their community. This work informs county and state leadership about behavioral health programs, needs, and services. Some local boards use their Data Notebook in their annual report to the County Board of Supervisors.

¹ W.I.C. 5604.2, regarding mandated reporting roles of Behavioral Health Boards and Commissions in California.

In addition, the Planning Council will provide our annual ‘Overview Report,’ which is a compilation of information from all of the local boards who completed their Data Notebooks. These reports feature prominently on the website² of the California Association of Local Mental Health Boards and Commissions (CALBHBC). The Planning Council uses this information in their advocacy to the legislature, and to provide input to the state mental health block grant application to the Substance Abuse and Mental Health Services Administration (SAMHSA)³.

CBHPC 2025 Data Notebook: Wellness and Recovery Centers in California’s Public Behavioral Health System

Wellness and Recovery Centers represent an essential model within California’s public behavioral health landscape. These community-based programs are designed to support individuals living with serious mental illness and/or substance use disorders by offering accessible, voluntary, and person-centered services. Drawing from principles of peer support, empowerment, and holistic wellness, Wellness and Recovery Centers provide a welcoming space where individuals can pursue recovery on their own terms and engage in services that promote stability, resilience, and social connection.

This year, the California Behavioral Health Planning Council has chosen to focus the Data Notebook on Wellness and Recovery Centers to better understand how they are implemented across the state, identify common strengths and needs, and highlight their role within a continuum of care. This focus is particularly timely given recent shifts in policy and funding under California’s Behavioral Health Services Act (BHSA) and broader Behavioral Health Transformation efforts. As counties adapt to new mandates and resource allocations, there is growing concern that Wellness and Recovery Centers may face reductions or loss of support, despite their alignment with goals of equity, prevention, and community-based care.

The California Behavioral Health Planning Council first examined the role and potential of Wellness and Recovery Centers in its 2011 report, *Wellness & Recovery Centers: An Evolution of Essential Community Resources*⁴. That report identified Wellness and Recover Centers as innovative, peer-driven models that foster empowerment, social inclusion, and wellness outside of traditional clinical settings. It emphasized the

² See the annual Overview Reports on the Data Notebook posted at the [California Association of Local Behavioral Health Boards and Commissions website](#).

³ SAMHSA: Substance Abuse and Mental Health Services Administration, an agency of the Department of Health and Human Services in the U.S. federal government. For reports, see www.SAMHSA.gov.

⁴ [Wellness and Recovery Centers: An Evolution of Essential Community Resources](#). Published 2011 by the California Behavioral Health Planning Council.

importance of these centers in promoting recovery-oriented systems of care, particularly for individuals who may not engage readily with formal treatment environments.

More than a decade later, this year's *Data Notebook* serves as a follow-up to that foundational work, revisiting the concept of Wellness and Recovery Centers in light of changing policy landscapes, evolving community needs, and local program development. While the core values of these programs remain consistent, their structure, scope, and funding have evolved significantly. This survey seeks to increase understanding of how Wellness and Recovery Centers are functioning today.

Defining Wellness and Recovery Centers

While the design and operation of Wellness and Recovery Centers vary widely across the state in name, scope, staffing, and funding, most share common elements. For the purposes of the 2025 Data Notebook Survey, we are using the following definition:

***Wellness and Recovery Centers** are community-based programs that offer voluntary support services to individuals experiencing mental health and/or substance use challenges. These centers prioritize peer support, empowerment, and self-determined approaches to recovery, often providing activities such as support groups, wellness education, resource navigation, and social connection. They are designed to be welcoming, low-barrier spaces that affirm dignity, autonomy, and lived experience as central components of healing and recovery.*

2025 Data Notebook Survey Questions

Please answer the following questions about your county using the Survey Monkey link provided with this Data Notebook:

1. **What is the name of your county?** *(Drop down menu)*
2. **How many Wellness Centers are there in your county?** *(Numerical response)*
3. **Does your county also currently operate a Clubhouse Model program?**
(Yes/No)

For the following questions, please select **one** Wellness and Recovery Center that you feel is representative of the programs in your county. Answer the following questions in regard to the selected program. ***If the answer to a question is not known and is not easily obtainable, please feel free to skip it and answer the questions that you can.*** Our goal is to gather as much information as possible without requiring burdensome research; we aim to have a complete report available by the end of the year, so this information can be considered by the stakeholder process within each county.

Section 1: Program Operations

4. **Name of Center/Program** *(Text Response)*
5. **Address** *(Text Response)*
6. **Is the program operated by the county?** *(Yes/No)*
7. **Is the program a non-profit organization?** *(Yes/No)*
8. **Is the program part of another organization?** *(Yes/No)*
9. **Does the program receive any issues or stigma from the surrounding community, i.e. “NIMBYism”?** *(Yes/No)*
10. **Who can we reach out to for more information about the program? (This may or may not be the same person who completed the survey.) Please provide their name, title, and contact information.** *(Text Response)*

Section 2: Management of the Program:

11. **Does the program have a Board of Directors?** *(Yes/No)*
12. **Are the participants engaged in the management and design of the program?** *(Yes/No)*
13. **Will the program assist participants’ inclusion in community planning activities, such as the integrated plan for the behavioral health department?** *(Yes/No)*

Section 3: Program Model

14. **Is the program based on the recovery model?** *(Yes / No)*
15. **Is the program drop-in?** *(Yes/No)*
16. **Please indicate who is welcome at your center** *(check all that apply):*
 - a. Persons who identify mental health needs
 - b. Persons who identify substance use disorders needs
 - c. Persons who do not identify with either category
 - d. Other *(text box)*
17. **Does your program follow a specific model? If yes, what is the name of the model?** *(Yes with text response / No)*

Section 4: Program Finances

18. **Which of the following funding sources are used for program operations?**
Please check all that apply.
 - a. County
 - b. MediCal
 - c. BHSA
 - d. Grants
 - e. Other *(text response)*
19. **Does the program operate as part of a larger organization that is not the county behavioral health department? If yes, what organization?** *(Yes with text box response / No)*

Section 5: Program Staffing

20. **Do the supervisors of the program have lived experience?** *(Yes/No)*
21. **Does the program utilize volunteers with lived experience from your membership?** *(Yes/No)*
22. **Does the program utilize other volunteers, such as family members of people with lived experience?** *(Yes/No)*
23. **Does the program employ certified peer support specialists?** *(Yes/No)*
24. **If you answered “Yes” to question 22, are the peer support specialists the program employs billing Medi-Cal for their services?** *(Yes/No/NA)*
25. **Please list other categories of people working in the program:** *(Text Response)*

Section 6: Activities and Supports

26. **Does the program have guidelines or a code of conduct that participants must agree to?** *(Yes/No)*
27. **Does the center offer support or activity focused groups? If yes, what are some of the topics?** *(Yes with text response / No)*
28. **Does the center have a set schedule of groups and activities?** *(Yes/No)*
29. **Is there a list of activities provided to participants by staff?** *(Yes/No)*
30. **Does the center offer activities in different languages? If yes, what languages?** *(Yes with text response / No)*
31. **What personal supports does the center offer to participants? Please check all that apply:**
- a. Showers
 - b. Meals
 - c. Snacks
 - d. Laundry services
 - e. Clothing closet
 - f. Personal grooming
 - g. Personal products / toiletries
 - h. Other (text response)
32. **Are transportation services or support provided to participants?** *(Yes/No)*
33. **Is there a licensed clinician at the center?** *(Yes/No)*
34. **Do you provide medication management support? If yes, please describe the services.** *(Yes with text response / No)*

Section 7: Participant Referrals

35. **Does the program accept drop-in participants?** *(Yes/No)*
36. **Does the program receive referrals from the county?** *(Yes/No)*
37. **Does the program receive referrals from other organizations? If yes, please list some of those organizations.** *(Yes with text response / No)*

Section 8: Other Information

38. **Does the program conduct satisfaction surveys for participants?** *(Yes/No)*
39. **If possible, please describe one brief success story from/about the program.** *(Large text box)*

Post-Survey Questionnaire

Completion of your Data Notebook helps fulfill the board's requirements for reporting to the California Behavioral Health Planning Council. The questions below ask about operations of mental health boards, and behavioral health boards or commissions, etc.

1. **What process was used to complete this Data Notebook?** *(Please select all that apply)*
 - a. BH board reviewed WIC 5604.2 regarding the reporting roles of mental health boards and commissions.
 - b. BH board completed the majority of the Data Notebook.
 - c. Data Notebook placed on agenda and discussed at board meeting.
 - d. BH board work group or temporary ad hoc committee worked on it.
 - e. BH board partnered with county staff or director.
 - f. BH board submitted a copy of the Data Notebook to the County Board of Supervisors or other designated body as part of their reporting function.
 - g. Other (please specify)
2. **Does your board have designated staff to support your activities?**
 - a. Yes (if yes, please provide their job classification)
 - b. No
3. **Please provide contact information for this staff member or board liaison.**
4. **Please provide contact information for your board's presiding officer**
(chair, etc.)
5. **Do you have any feedback or recommendations to improve the Data Notebook for next year?**

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Performance Outcomes Committee**

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Agenda Item: Allcove Youth Centers Presentation

Enclosure: The Youth Mental Health Imperative: Creating a Public Mental Health Early Intervention Continuum of Care Presentation*

How This Agenda Item Relates to Council Mission

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

This agenda item provides Council members with information regarding wellness centers and programs for youth. The Performance Outcomes Committee will use this information to assist in the development of the 2026 Data Notebook.

This agenda item corresponds to the Performance Outcomes Committee Work Plan Goal 1 and Goal 4.

- **Goal 1:** Collect County-Specific Data to Evaluate the Public Behavioral Health System.
- **Goal 4:** Showcase effective programs that feature the guiding principles of the committee and the Planning Council that successfully assist consumers in their recovery.

Background/Description:

The mission of Allcove is to develop an innovative network of integrated youth mental health centers designed with, by, and for youth that reduce stigma, embrace mental wellness, increase community connection, and provide access to culturally-responsive services. Dr. Steven Adelsheim, clinical professor and associate chair for community engagement, will present to the committee on Allcove youth centers and other youth-oriented programs led by the Stanford Center for Youth Mental Health & Wellbeing.

Steven Adelsheim, MD is a child and adolescent psychiatrist and Associate Chair for Community Engagement in Stanford's Department of Psychiatry, where he directs the Center for Youth Mental Health and Wellbeing. A national leader in early intervention, Dr. Adelsheim spearheaded the launch of Allcove—a youth-driven, integrated mental health model now expanding across California. He also co-leads the Psychosis-

Risk and Early Psychosis Program Network (PEPPNET), the national early psychosis clinical network. His work extends to youth suicide prevention, school mental health systems, and partnerships with Indigenous communities to strengthen culturally grounded early intervention for tribal youth. Dr. Adelsheim's career is grounded in building equitable, accessible mental health systems for young people nationwide.

*For a copy of this document, please contact Justin Boese at Justin.Boese@cbhpc.dhca.ca.gov

**California Behavioral Health Planning Council
Performance Outcomes Committee**

Tuesday, October 14, 2025

Agenda Item: Discussion of the 2025 Performance Outcomes Committee Activities for the Council's Year End Report (Action)

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 review the activities and action items the committee completed in 2025. The discussion will support the Council's 2025 Year-End Report.

Background/Description:

The California Behavioral Health Planning Council releases an annual report highlighting the achievements and activities of each committee. The Performance Outcomes Committee will review the committee's activities and accomplishments for 2025. Committee members will have the opportunity to discuss and prioritize items for inclusion in the Performance Outcomes Committee section of the Council's 2025 Year-End Report.