

California Behavioral Health Planning Council

Workforce and Employment Committee Agenda

Wednesday, January 21, 2026

1:30 p.m. to 5:00 p.m.

[Bahia Hotel](#)

998 West Mission Bay Drive
San Diego, California, 92109
Ventana Room

[Zoom Link](#)

Meeting ID: 843 9598 2956

Passcode: WEC2026

Join by phone: 1-669-900-6833

Passcode: *6570328#

- | | | |
|----------------|---|--------------|
| 1:30 pm | Welcome, Introductions, and Housekeeping <i>Bill Stewart, Chairperson, and All Members</i> | |
| 1:35 pm | Change of Officers <i>Bill Stewart, Chairperson</i> | |
| 1:40 pm | Review and Accept October 2025 Draft Meeting Minutes (Action) <i>Dave Cortright, Chair-Elect and All Members</i> <ul style="list-style-type: none">• Committee Discussion• Public Comment• Accept Minutes | Tab 1 |
| 1:45 pm | Presentation and Discussion of ELEVATE Behavioral Health Workforce Fund <i>Andy Hall, Project Manager, ELEVATE Behavioral Health Workforce Fund</i> <ul style="list-style-type: none">• Presentation• Committee Member Discussion• Public Comment | Tab 2 |
| 3:15 pm | Break | |
| 3:30 pm | Presentation and Discussion of Supported Employment Integration in Substance Use Disorder Treatment Programs <i>California Department of Health Care Services</i> <ul style="list-style-type: none">• Presentation• Committee Member Discussion• Public Comment | Tab 3 |

If reasonable accommodations are required, please contact the Council at (916) 701-8211, not less than 10 working days prior to the meeting date.

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4:40 pm **Wrap Up/Next Steps and BH-CONNECT Workforce Initiative Written Update** **Tab 4**

Bill Stewart, Chairperson, and All Members

- Committee Member Discussion
- Public Comment

5:00 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.

Workforce and Employment Committee Members

Chairperson: Bill Stewart **Chair-elect:** David Cortright

Members: Susie Baker, John Black, Lynne Martin Del Campo, Jessica Grove, Lanita Mims-Beal, Donald Morrison, Dale Mueller, Deborah Pitts, Marina Rangel, Maria Sierra, Arden Tucker, Milan Zavala

WET Steering Committee Members: Abby Alvarez, Rayshell Chambers, Theresa Comstock, Chad Costello, Kristin Dempsey, Shanti Ezrine, Janet Frank, Tara Gamboa-Eastman, Randall Hagar, Le Ondra Clark Harvey, Kathryn Kietzman, Robb Layne, Robert McCarron, Steve Sodergren, Sierra Smith, Carli Stelzer, Heidi Strunk, Karen Vicari

Staff: Ashneek Nanua, Simon Vue

If reasonable accommodations are required, please contact the Council at (916) 701-8211, not less than 10 working days prior to the meeting date.

**California Behavioral Health Planning Council
Workforce and Employment Committee**

Wednesday, January 21, 2026

Agenda Item: Review and Accept October 2025 Draft Meeting Minutes

Enclosures: October 2025 Draft Meeting Minutes

Background/Description:

The Workforce and Employment Committee will review the draft meeting minutes for the October 2025 Quarterly Meeting. Members will have the chance to request corrections before the minutes are accepted.

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Workforce and Employment Committee

Meeting Minutes - DRAFT
Quarterly Meeting – October 15, 2025

Committee Members present: Susie Baker, John Black, David Cortright, Jessica Grove, Lanita Mims-Beal, Don Morrison, Dale Mueller, Deborah Pitts, Marina Rangel, Maria Sierra, Bill Stewart, Arden Tucker, Milan Zavala

WET Steering Committee Members Present: Abby Alvarez, Shanti Ezrine, Janet Frank, Randall Hagar, Lynn Rivas, Sierra Smith, Carli Stelzer, Danny Thirakul on behalf of Karen Vicari

Presenters: Sharmil Shah, Anne Powell, Jeannie Benoist, Tracy Williamson

Staff present: Ashneek Nanua, Simon Vue

Meeting commenced at 1:30 p.m.

Quorum Established: 14 out of 14 members

Item #1 Review and Accept June 2025 Draft Meeting Minutes (Action)

The Workforce and Employment Committee reviewed the June 2025 Draft Meeting Minutes. The minutes were accepted by the committee with no edits.

Action/Resolution

The June 2025 Workforce and Employment Committee Meeting Minutes are accepted and will be posted to the Planning Council’s website.

Responsible for Action-Due Date

Ashneek Nanua – October 2025

Item #2 Overview of Emerging Findings of the Workforce Education and Training (WET) Plan Summer 2025 Stakeholder Sessions

Sharmil Shah and Anne Powell from the Department of Health Care Access and Information (HCAI) summarized stakeholder feedback collected at the development of the 2026-2030 Workforce Education and Training (WET) Plan. The stakeholder sessions took place in the summer of 2025. The goal of this presentation was to gather

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the committee's input and reactions to the recommendations to help the HCAI team prepare the 2026-2030 Five-Year WET Plan.

The presenters first reviewed HCAI's mission, vision, program areas, and workforce strategies. Sharmil Shah provided a brief overview of the Behavioral Health Services Act (BHSA) and its priority populations. Sharmil shared that the Workforce Education and Training Plan was established under the Mental Health Services Act and continues under the BHSA. Effective July 1, 2026, ten percent of BHSA funds will be directed to statewide investments, which includes three percent allocated to HCAI for workforce investments. Counties may use a portion of their Behavioral Health Services and Supports funds for Workforce Education and Training activities.

The Five-Year WET Plan guides the development of Behavioral Health Workforce programs. The community engagement process will inform the plan, help HCAI prioritize BHSA funds through meaningful input from community members, and help shape collaborative strategies that strengthen talent pipelines and better align education and training with the needs of California's communities.

The presenters shared results from the community engagement process in these topic areas: education and training, diversity and equity, compensation and incentives, wellness and work-life balance, digital literacy and access, and language services. The presenters then shared the community's recommendations in the following topic areas: expansion and diversification of the workforce pipeline, improvements for compensation and incentives, increase access to education and training, stabilize funds for workforce development, digital literacy and access to equitable care, technology, data, and accountability, and workforce wellness and retention.

After the presentation, HCAI invited facilitators from Sacramento State University, Jeannie Benoist and Tracy Williamson, to lead a stakeholder feedback activity with the Workforce and Employment Committee and Workforce Education and Training (WET) Steering Committee. All topic areas for the emergent findings and recommendations were posted in the meeting room. In-person committee members wrote their comments and suggestions on large notepads, while those who attended online via Zoom used the chat function to share their feedback. The Sacramento State facilitators collected and summarized the feedback afterward. HCAI representatives then participated in a question-and-answer session with the committee and WET Steering Committee. Key points discussed at the stakeholder engagement and question-and-answer session included the following:

- A WET Steering Committee member mentioned that the expansion of a provider cohort for rural communities could be beneficial. This would support mentorship opportunities to deliver culturally responsive care and address the needs of diverse communities, such as the Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual, and Two-Spirit (LGBTQIA2S+) population.
- Committee members recommended recruitment efforts for providers to involve the public behavioral health system and make use of wellness coaches and peers.

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- A WET Steering Committee member said that people with mild to moderate mental health issues do not have access to peer support in the Managed Care system. Additionally, jobs are not readily available for Peer Support Specialists, so these individuals often work as Community Health Workers and Peer Navigators within the system of care.
- A WET Steering Committee member suggested that HCAI explore ways to connect programs to the workforce pipeline. The Certified Wellness Coach Program offers scholarship awards and has over 3,000 wellness coaches; however, it is essential to consider additional individuals for the pipeline to licensure and other roles. It would be beneficial to draw from current programs.
- Committee members and WET Steering Committee members urged HCAI to continue funds for peer support training and application fees.

Action/Resolution

The committee staff and Officer team will coordinate next steps for the Council's review of the draft 2026-2030 Workforce Education and Training Plan.

Responsible for Action-Due Date

Ashneek Nanua, Simon Vue, Deborah Pitts, Bill Stewart – January 2026

Item #3 Public Comment

Steve McNally expressed concern that the Department of Health Care Services (DHCS) and the Department of Health Care Access and Information (HCAI) have different unlicensed professions, such as peer certifications, Community Health Workers, Alcohol and Drug Counselors, and Wellness Coaches, that serve similar roles but come from different sectors and funding sources. These positions compete against each other based on geography and system of care. Assembly Bill 96 would allow peers to bill in the Managed Care System. Steve added that it can be helpful to train individuals with these skills before they turn 18, so they can pursue certification in these roles.

Daniel Shermantine stated that he is a recovering alcoholic and has been sober for two years. He said that his non-profit, CalVoices, aims to keep people out of jails and prisons, but limited funding has made it difficult to operate and support populations in recovery.

Shanti Ezrine, from the California Association of Marriage and Family Therapists (CAMFT) and a member of the Workforce Education and Training (WET) Steering Committee, stated that CAMFT has been actively engaged in community engagement sessions. He inquired about how involved HCAI has been in the Commission for Behavioral Health's Innovation Partnership Fund (IPF) Framework, since one of the pillars of the framework is workforce. The IPF has the flexibility to use its funds

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creatively and innovatively, which may help address challenges related to compensation.

Action/Resolution

N/A

Responsible for Action-Due Date

N/A

Item #4 **Presentation and Discussion of Supported Employment Integration in Substance Use Disorder Treatment Programs**

The committee's interim Chairperson, Deborah Pitts, provided background on the agenda item. In response to the committee's interest to continue the dialogue and exploration of employment services within substance use disorder (SUD) treatment, Deborah informed the committee that the leadership met with the Department of Health Care Services. DHCS told her that the Individual Placement and Supports (IPS) model is supposed to be available for individuals with a SUD per guidance under the Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment (BH-CONNECT) Initiative. A key feature of the IPS model is that an employment specialist is integrated into mental health services, rather than a standalone service. DHCS confirmed that Drug Medi-Cal and the Drug Medi-Cal Organized Delivery System (DMC-ODS) will include IPS as a Medi-Cal Benefit. Therefore, SUD programs in California may potentially be able to offer IPS services. Deborah stated she is not aware of any providers currently provides these services. As a result, Deborah conducted research and prepared a presentation for the committee on the current literature on the integration of SUD and employment services. She clarified that her presentation is not comprehensive and is not intended for dissemination. It is based on the 2022 report, *Integrating Employment Services with Substance Use Treatment and Recovery: The Experiences of Five Programs*, and various other sources.

Deborah Pitts delivered her presentation to the committee and summarized the report. The report found that SUD is more common among people who are unemployed, have lower income, possess lower educational levels, and live in communities with higher unemployment rates. Employment can help individuals with SUD stay on the recovery path and reduce financial stress for those in SUD treatment. Additionally, employment is linked to better treatment compliance.

Challenges faced by individuals with an SUD to find and maintain employment are due to several factors. There is discrimination against this population based on previous involvement in the criminal justice system, their mental and physical health conditions, limited work history, and limited educational attainment. Additionally, people with low incomes affected by SUD encounter systematic barriers to employment, such as limited

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public transit routes between their residences and areas with more job opportunities. The report states that many employers are reluctant to hire people with a history of SUD. Providers are concerned that the integration of employment services might lead to increased costs due to higher workers' compensation claims, medical expenses, job turnover, and fewer days worked. They also face obstacles to incorporate employment support into SUD treatment. Some believe that clients are not ready for employment, that employment services are not a priority for the agency, that there is insufficient time in treatment to focus on employment, and that resources lack to support these new services.

Deborah Pitts highlighted different approaches to integrate employment services into SUD treatment, such as the provision of all services through a single program, the provision of all services through the same agency but with employment and SUD treatment as separate services, or deliver SUD and employment services by different agencies. The report states that there might be a need to achieve certain SUD treatment milestones before they begin employment services, and client participation in employment services could be required as a condition to remain in a program.

Substance Use Disorder services may impact employment services. For example, residential treatment often requires attendance at meetings, completion of chores, and participation in treatment for many hours weekly, which limits time available for employment activities. Curfews may make it difficult for participants to attend evening training or work night shifts. Environmental restrictions include the avoidance of places with alcohol or neighborhoods that could trigger a relapse. Some settings restrict technology use to minimize triggers, but this also hampers clients' ability to search for jobs. Additionally, certain programs require patients to follow strict schedules to receive daily medication doses, which can interfere with training or work shifts.

Current employment options for the SUD population include referrals to educational programs, job readiness, and occupational training through formal partnerships and referrals, or in-house options for therapeutic workplaces. Supported employment is also offered through the Individual Placement and Support (IPS) Model. Deborah Pitts reviewed key components of IPS and therapeutic workplaces, along with research findings for each model. She mentioned that the IPS Center for Excellence is available to SUD providers to help integrate SUD programs into their services.

The *Integrating Employment Services with Substance Use Treatment and Recovery: The Experiences of Five Programs Report (2022)* provided guidance to design and implement employment services for individuals with SUD, such as:

- Determine the order in which the program will provide treatment, recovery, and employment services, along with the nature and content of those services.
- Develop organizational partnerships to deliver the full spectrum of employment, treatment, and recovery services participants need.
- Adapt employment services to better support people in recovery from SUD.
- Identify the funding sources required to meet the full spectrum of participants' needs.

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The committee participated in a discussion and a question-and-answer session following the presentation. Key discussion points are included below:

- A committee member suggested that the Workforce and Employment Committee adopt the recommendations in the reports presented.
- A member stated that Homeboy Industries is a program that models the therapeutic workplace discussed during the presentation.
- A committee member mentioned that Delancey Street is another program that focuses on employment. The member stated that they built resumes and mock interviews when they worked in residential programs, but the clients struggled to obtain employment due to the program's requirements. The committee member recommended a balance to integrate treatment with employment supports.
- A member mentioned a program called Police and Corrections (PAC), which is a team-based initiative that helps pay for housing and provides vocational training to participants to support their recovery. This program targets parolees.
- Committee members emphasized the importance for individuals with lived experience to share their stories.

Deborah Pitts asked the committee for feedback on the next steps for integrating employment support for clients with substance use disorder. Below is a list of suggestions from committee members.

- Invite substance use disorder providers and programs to inquire how they can implement job training and share best practices from programs like Delancey Street or Homeboy Industries.
- Gather data on the progress and advantages people experience from employment and SUD integration to determine what is effective.
- Consult with Centers of Excellence about their materials for SUD providers and how they might include employment in their programs.
- The California Department of Corrections and Rehabilitation (CDCR) has parole contracts with residential treatment programs that assist individuals with employment if they are interested. There is a program called SBC in Sacramento that helps people connect to employment services. This could be a potential presenter.
- Recommend a team approach for SUD clients who seek employment.

Action/Resolution

The committee leadership will continue to look for ways to include supported employment in substance use disorder treatment programs. They will also invite the Department of Health Care Services to present how individuals with SUD can access IPS services at the next quarterly meeting.

Responsible for Action-Due Date

Ashneek Nanua, Simon Vue, Deborah Pitts, Bill Stewart – January 2026

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Item #5 Public Comment

Daniel Shermantine mentioned that his brother will soon be released from prison. He talked about the difficulties people face when they try to return to work after incarceration, especially early in recovery. Daniel also showed appreciation for the resources available and pointed out that a lack of employment creates problems for this group and can lead to repeat offenses.

Abby Alvarez from the County Behavioral Health Directors Association (CBHDA) stated that her organization contacted counties that have already implemented Individual Placements and Supports (IPS) to ask how they provide services for individuals with substance use disorders. Abby mentioned that CBHDA hasn't received any responses yet, but will bring this information to their substance use disorder workgroup and gather details on how it's implemented. CBHDA also plans to collaborate with the Centers of Excellence and offered to share this information with the Workforce and Employment Committee.

Action/Resolution

N/A

Responsible for Action-Due Date

N/A

Item #6 Discussion of 2025 Workforce and Employment Committee Activities for the Council's Year-End Report (Action)

Committee staff reviewed a document in the committee packets that summarizes the accomplishments of the Workforce and Employment Committee in 2025, which will inform the Council's year-end report. Staff asked that committee members provide additional suggestions if they want to highlight any specific accomplishments not mentioned in the document.

Committee members provided the following feedback on the information presented:

- A member asked staff to share the question list created by the committee for county behavioral health departments to answer about their peer programs. Staff said the question list has already been given to the committee and will send a follow-up email with the list for future use.
- A member suggested the inclusion of information about the committee structure adopted in 2025. The structure included one presentation from external entities, and the rest of the committee time was devoted to discussion. The member found this structure to be effective.

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Action/Resolution

Committee staff will distribute the list of questions for peer programs. The committee leadership and staff will work together to identify the key points for the Workforce and Employment Committee section of the Council's Year-End Report.

Responsible for Action-Due Date

Ashneek Nanua, Simon Vue, Deborah Pitts, Bill Stewart – December 2025

Item #7 Election of 2026 Committee Chair-Elect (Action)

Committee staff reviewed the responsibilities and role of the Chair-Elect in preparation for the committee to select a new Chair-Elect for 2026. Jessica Grove motioned to appoint Dave Cortright as the Workforce and Employment Committee Chair-Elect. John Black seconded the motion. Committee staff took a roll-call vote. The motion was approved with a quorum.

Action/Resolution

The Council's Officer team will review the nomination of Dave Cortright as the committee Chair-Elect.

Responsible for Action-Due Date

Council's Officer team and Executive Officer – January 2026

Item #8 Wrap Up/Next Steps

Committee members discussed the next steps for future committee meetings. Dave Cortright offered to give an overview of interventions for the behavioral health workforce in low- and middle-income areas, which include non-credentialed and non-licensed workers. He mentioned that these models could potentially be implemented in California and would align with the committee's Work Plan goals.

Action/Resolution

The committee leadership will develop the agenda for the January 2026 Quarterly Meeting.

Responsible for Action-Due Date

Ashneek Nanua, Simon Vue, Deborah Pitts, Bill Stewart – January 2026

**California Behavioral Health Planning Council
Workforce and Employment Committee**

Wednesday, January 21, 2026

Agenda Item: Presentation and Discussion of ELEVATE Behavioral Health Workforce Fund

Enclosures: ELEVATE Fact Sheet

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 about the ELEVATE Program in San Diego County. Committee members will use this information to familiarize themselves with various approaches to support and grow the behavioral health workforce with a focus on apprenticeships and peer workers.

This agenda item corresponds to the **Workforce and Employment Committee Work Plan Objective 1.3**: Build the Council's understanding of County-specific workforce development initiatives and their successes and challenges to advocate best practices that may be standardized across local agencies in consideration of different needs in local and urban areas.

Background/Description:

The Workforce and Employment Committee aims to evaluate various workforce strategies that help individuals obtain education and training to provide high-quality care in the public behavioral health system, such as apprenticeship programs. The committee is also interested in how county behavioral health departments include Medi-Cal certified and non-Medi-Cal certified Peer Support Specialists in the behavioral health workforce. Therefore, the committee has invited the San Diego County Behavioral Health Services Department and Andy Hall, the ELEVATE Project Manager, to present on the [ELEVATE Behavioral Health Workforce Fund](#). The fund aims to address San Diego County's shortage of behavioral health workers with a \$75 million investment to develop and strengthen the local behavioral health workforce. The presentation will focus on the Behavioral Health Apprenticeship Network Program and the Peer Support Training and Placement Program. Since the program has not yet been implemented, the presenters will share their knowledge of the approaches being used for future implementation based on information gathered about client needs.

Background Materials:

ELEVATE Peer Support Specialist Training Program Websites

- [ELEVATE Peer Support Training and Placement Program - Pacific Clinics](#)
- [ELEVATE Peer Support Training and Placement Program Webpage - NAMI San Diego](#)

Presenter Biography:



Andy Hall is the President and Chief Executive Officer of Trailhead Strategies where he has been leading projects and teams to help clients on their journey to build a more inclusive, resilient, and competitive American workforce since January 2022. Andy has served as a project manager, subject matter expert, and consultant on talent initiatives in the behavioral health, healthcare, technology, biotech, food service, public sector, construction, and social enterprise sector. Andy stands shoulder to shoulder with clients helping them research, design, finance, and execute projects that lead to a more inclusive, resilient, and competitive American workforce.

From 2014 – 2021, Andy was Chief Operating Officer and Chief Impact Officer at the San Diego Workforce Partnership, directing the overall strategy and execution of \$25 million to \$35 million in annual workforce development programming, research, and operations. In this role, Andy specialized in designing and executing workforce innovations related to talent finance, federal program administration (WIOA, SNAP, TANF), outcomes-based contracting, business services, research, and building regional coalitions to address youth disconnection, job quality, sector-specific workforce shortages, and more.

Prior to his time at the San Diego Workforce Partnership, Andy was a consultant for Public Consulting Group (PCG) where he assisted state and local government agencies improve the impact and operations of public employment programs. Andy earned his B.A with a double major in Economics and History from UC San Diego and holds an M.B.A. from Clark University in Worcester, Massachusetts. Andy is a graduate of the [Presidio Institute for Cross-Sector Leadership Fellow](#) program, was named to San Diego's 30 under 30 list in 2017, and his work has been profiled in [Forbes](#), [CNBC](#), [CalMatters](#), the [San Diego Union Tribune](#), among other outlets.

Fact Sheet

ELEVATE's goal is ***to expand and diversify the pipeline of well-trained behavioral health providers serving San Diego County's most vulnerable residents.***

History of ELEVATE

The County of San Diego commissioned the Behavioral Health Workforce Report to develop county- and position-specific data identifying the behavioral health workforce needed to meet demand within the public behavioral health system. In response, the Board of Supervisors allocated a \$75 million Mental Health Services Act (MHSA) Innovation grant to address the significant shortfall in behavioral health providers. The County subsequently issued a competitive procurement to select an administrator responsible for implementing strategies to expand and strengthen the workforce—particularly within the Medi-Cal service delivery system – the Policy & Innovation Center was selected.

About PIC & Its Role

The Policy & Innovation Center (PIC) is a think tank and social-impact incubator dedicated to solving San Diego's most pressing community challenges. PIC conducts research and policy analysis to identify creative solutions, while building cross-sector partnerships to advance those solutions at scale.

PIC was chosen by the County of San Diego to codesign ELEVATE to train, retain, and grow San Diego's behavioral health workforce. PIC leads implementation across partners to drive accountability, measure impact, and ensure long-term sustainability. PIC has acquired several of the researchers who authored the Behavioral Health Workforce Report—bringing expertise and insight to this effort and positioning the initiative for success. Learn more at ThinkPIC.org/ELEVATE.

About the Partners

Social Finance - A national nonprofit and registered investment advisor, Social Finance mobilizes capital and partnerships to measurably improve lives. They co-designed and manage the San Diego Pay It Forward Loan Program. SocialFinance.org

Trailhead Strategies – Oversees the management of training partners operating the four upskilling programs (apprenticeships, peer support, nurse practitioner, and internships), providing infrastructure and program management expertise. TrailheadStrat.com

Local Education & Training Partners (to date) – San Diego State University, California State University San Marcos, LAUNCH Apprenticeship Network, San Diego & Imperial Counties Community Colleges

Regional Consortium, San Diego Workforce Partnership, Pacific Clinics, and NAMI San Diego. UC San Diego Health and SDSU are conditional awardees for Nurse Practitioner Expansion Grant Program. More partners will be added once procurement and contract process for Internship Programs is finalized.

Key Impact Goals

- \$75 million investment over five years.
- 3,000 new behavioral health workers trained and placed into San Diego's public workforce.

ELEVATE Programs

San Diego Pay It Forward Loan Program:

Offers zero-interest, forgivable loans for learners participating in licensed behavioral health clinician programs through select training providers. Loan repayments are recycled to fund future students. Additional benefits for incumbent workers.

Behavioral Health Apprenticeship Network Program:

Setting up apprenticeships with employers and education partners to allow individuals to "earn and learn" on the pathway to becoming substance use disorder counselors, case managers, community health workers, and other in-demand roles.

Peer Support Specialist Training and Placement Program:

Funding and support for individuals with lived experience to complete training, pass certification exams, and succeed on the job as Certified Peer Support Specialists.

Nurse Practitioner Expansion Grant Program:

Expands local Psychiatric Mental Health Nurse Practitioner graduate and post-graduate fellowship programs while also providing more clinical experiences and employment opportunities for PMHNPs in public behavioral health settings.

Social Work, Therapy & Counseling Internship Program:

Dedicated funding for supervision, internship recruitment and support, licensing and certification, and retention incentives for master's level social work, counseling, and therapy interns and associates.

Funded by



Supporting Behavioral Health Care Students and Workers

**California Behavioral Health Planning Council
Workforce and Employment Committee**

Wednesday, January 21, 2026

Agenda Item: Presentation and Discussion of Supported Employment Integration in Substance Use Disorder Treatment Programs

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 about the state's efforts to support providers with the integration of the Individual Placement and Support (IPS) supported employment model into substance use disorder services in California. The committee will use this information to advocate for best practices to support substance use disorder populations with employment services.

This agenda item corresponds to the **Workforce and Employment Committee Work Plan Objective 2.2:** Build Council's understanding of employment services "best practices" and resources across the lifespan with due exploration of impact of social and racial inequities on such best practices, including but not limited to: Individual Placement & Support (IPS) Model of Supported Employment; Social Enterprises; Clubhouses, self-employment and gig work; supported education; high school pipeline and career development; Behavioral Health Services Act (BHSA) or other funding sources; and career pathways and advancement for consumers and peers.

Background/Description:

The Workforce and Employment Committee has expressed interest in how supported employment services can be integrated into substance use disorder programs in California. Ivan Bhardwaj, Chief of the Medi-Cal Behavioral Health Policy Division for the Department of Health Care Services will present on how the state supports local providers with the delivery of supported employment services within substance use disorder programs to identify best practices for statewide and local implementation. The presentation will include the state's perspective on challenges and successful approaches for implementation. Committee members will have the opportunity to ask questions during the presentation and discuss potential action items afterward.

California Behavioral Health Planning Council Workforce and Employment Committee

Wednesday, January 21, 2026

Agenda Item: Wrap Up/Next Steps and BH-CONNECT Workforce Initiative Written Update

Enclosures: Department of Health Care Access and Information (HCAI) BH-CONNECT Workforce Initiative Update (December 2025)

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 updates for the BH-CONNECT Workforce Initiative, led by the Department of Health Care Access and Information (HCAI). The committee will use this information to advocate for best practices to support individuals with mental health and substance use conditions in California.

This agenda item corresponds to the **Workforce and Employment Committee Work Plan Objective 1.5:** Monitor and determine advocacy needed regarding funding opportunities at the local, state, and national levels for workforce development, scholarships, tuition support, etc.

a.) Track the Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment (BHCONNECT) Section 1115 Demonstration and provide feedback on the policy and implementation of the Workforce Initiative and optional Clubhouse services Benefit.

i.) Track the number of individuals from diverse and underrepresented communities being served in BH-CONNECT workforce programs.

Background/Description:

The Department of Health Care Access and Information (HCAI) has provided a written update on the plan and implementation of the five workforce programs within the BH-CONNECT Workforce Initiative. Committee members will review the written update and discuss potential action items for the BH-CONNECT Workforce Initiative. The committee will then open a discussion to plan the next steps for the upcoming quarterly meeting.

Department of Health Care Access and Information (HCAI) BH- CONNECT
Workforce Initiative Update (December 2025)

Medi-Cal Behavioral Health Student Loan Repayment Program:

- Cycle 1:
 - Launched in July 2025. HCAI received 5,286 applications.
 - Thus far 1,615 awards, totaling \$132,923,785, have been announce.
More awards will follow in the next weeks
- Cycle 2:
 - To launch in May 2026.

Medi-Cal Behavioral Health Residency Training Program:

- Cycle 1:
 - Launched in July 2025. HCAI received 6 applications.
 - Awards were made on Oct 16 to 5 awardees, totaling \$15,807,400.
- Cycle 2 (only for available for fellowship programs):
 - To launch in May 2026.

Medi-Cal Behavioral Health Scholarship Program:

- Cycle 1 launching in Feb 2026
- Peer Support Specialist highlight: In addition to other behavioral health degrees, this program funds tuition, fees, books/supplies for students attending CalMHSA-approved college-based Peer Support Specialists programs.

Medi-Cal Community-Based Provider Training Program:

- Cycle 1 launching in Feb 2026
- Peer Support Specialist highlight: In addition to AOD Counselor and CHW training, this program funds tuition, fees, books/supplies, and exam/certification fees for students attending CalMHSA-approved CBO or college-based Peer Support Specialists programs.

Medi-Cal Recruitment and Retention Program:

- Cycle 1 launching in Mid 2026