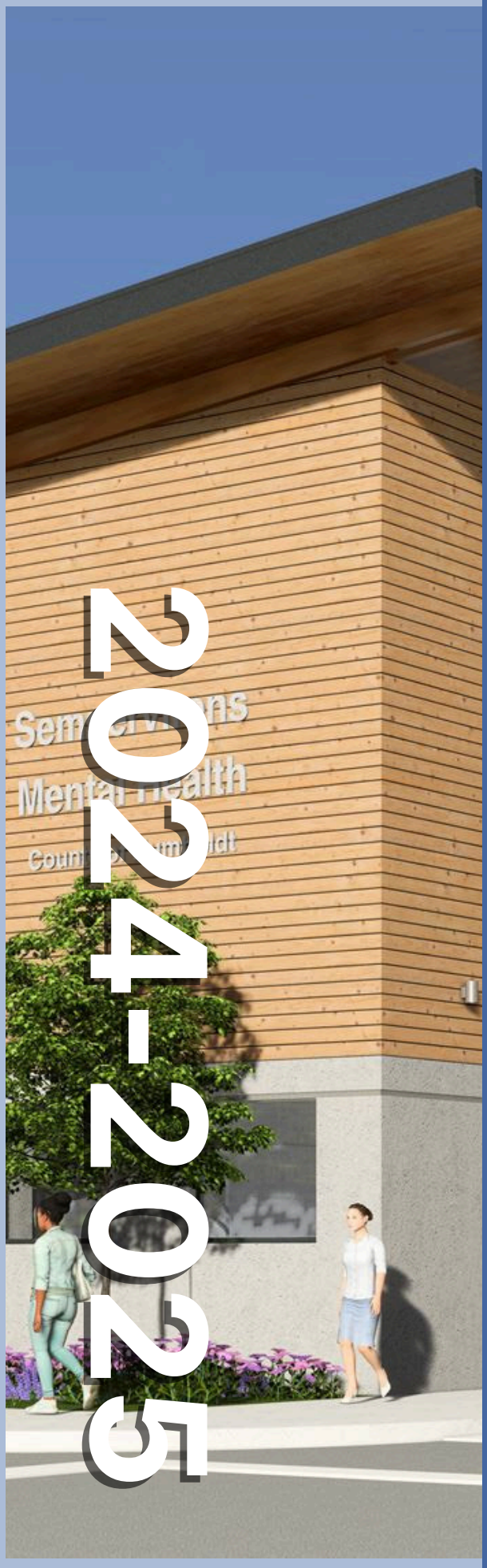

Humboldt County Behavioral Health Board

Annual **Report**

Prepared By :

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Presented By :

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About Us

The Humboldt County Behavioral Health Board meets monthly to discuss and evaluate the community's behavioral health needs and priorities.

Membership on the Board is open to consumers, family members and transition-age youth. Final approval of membership comes from the Humboldt County Board of Supervisors. Due to potential conflicts of interest, Behavioral Health contract providers are not eligible to join the Board.

Our job is to review and evaluate the local public mental health system and substance use disorder treatment system, including evaluation of the community's needs, services, facilities and special problems in any facility within the county or jurisdiction where mental health or substance use disorder evaluations or services are being provided, including, but not limited to, schools, emergency departments, and psychiatric facilities.

Our Leaders

Connie Beck
Director DHHS

Emi Botlzer-Rogers
Director
Behavioral Health

Paul Bugnacki
Deputy Director
Behavioral Health

Jack Breazeal
Deputy Director
Behavioral Health

Our Board

Board members act as advocates for mental health and alcohol and other drug (AOD) needs and services in the community. Board members serve 3-year terms and are volunteers. We are a 15-member board. We are currently interviewing 5 applicants to fill the remaining 3 vacancies.

Laura Montagna
Chair

Kelly Johnson
First Vice Chair

Shawn Burger
Second Vice Chair

Natalie Arroyo
Supervisor Rep

Alex Childers
Member

Virginia Bass
Member

Raphael DiCaprio
Member

Vernon Price
Member

Danette Kellerman
Member

Margarite Story-Baker
Member

Peter Stoll
Member

Bob Daugherty
Member

Our Mission

The Humboldt County Behavioral Health Board (BHB) is responsible for the following:

1. Review and evaluate the community's mental health needs, services, facilities, and special problems.

2. Review any mental health services performance contracts entered into pursuant to Section 5650, a part of the Act that establishes an annual report by the Board of Supervisors to the State.

3. Advise the governing body and the local mental health director as to any aspect of the local mental health program.

4. Review and approve the procedures used to ensure citizen and professional involvement at all stages of the planning process.

5. Submit an annual report to the governing body on the needs and performance of the county's mental health system.

6. Review and make recommendations on applicants for the appointment of a local director of mental health services. The board shall be included in the selection process prior to the vote of the governing body.

7. Review and comment on the county's performance outcome data and communicate its findings to the California Health Planning Council. The Act prescribes the composition of the BHB. The BHB can be comprised of up to 15 members appointed by the Board of Supervisors. One half of the BHB should be either individuals who are consumers or parent, spouse, sibling, or adult child of same. At least 20% of total membership should be consumers and 20% family members. A copy of the BHB's Bylaws are attached.

A Year in Review

JULY 2024

Children's Behavioral Health (CBH) Presentation - Kayleigh Emry

- CBH provides integrated services to Medi-Cal youth, including outpatient therapy, SUD treatment, and TAY programs. CBH is responsible to provide mental health services to Medi-Cal beneficiaries needing Specialty Mental Health Services. There are also community providers that CBH works with to provide services. Staff provide services to children who meet criteria for services in their home, school or other locations. Organizational Providers contracted with DHHS also provide these services. Staff are trained in ART, TIP, Wraparound and ACRA programs.
- The CBH programs include Outpatient clinic located at 2440 6th Street, Child Welfare Services, Case Management/Parent Partners, SUD services, Juvenile Hall/New Horizons and TAY/HCTAYC. The Outpatient clinic provides individual and family therapy, medication support, case management and MRT services. Case Management provides support, linkage and rehabilitation services. SUD services are provided through the ATP program with group treatment and individual SUD treatment. The TAY program provides services to youth ages 16-26 and provides independent living skills, Peer Support and Counseling. Some changes for CBH include aTelehealth clinician and Smart Care conversion.

UPCOMING PROGRAMS & FACILITIES

- Adult Crisis Residential Facility scheduled to open in August.
- Navigation Center lease amendments in progress; construction timeline pending.

EVENTS & OUTREACH

- Recovery Happens event planning continues for September.
- Overdose Awareness Day scheduled for August 30.
- Members engaged in CIT training, Free Meal service fair, and community outreach.

COMMITTEE UPDATES

- SUD Committee has new leadership (Chair: Danette Kellerman, Co-Chair: Raphael DiCaprio).

SEPTEMBER 2024

Recovery Month Presentation - Raphael DiCaprio, Danette Kellerman, Marguerite Story-Baker

- Focused on reducing stigma, promoting hope, and the importance of trauma-informed care in SUD recovery.

COMMUNITY EVENTS

- Recovery Happens event held successfully.
- Veterans Stand Down event hosted at Ferndale Fairgrounds.
- Overdose Awareness Day held August 31.

NAVIGATION CENTER

- Plans evolving to a five-story facility with three stories for housing and two for services.

BOARD ACTIONS

- Laura Montagna's membership renewal approved.
- Discussion on including youth (HCTAYC/TAY) representatives starting 2025.

FACILITIES PLANNING

- DHHS seeking architects to design new Sempervirens (SV) replacement facility.

OCTOBER 2024

CARE Court Implementation Presentation - Sharon Wolff

- CARE Court begins December 1, 2024 for individuals with schizophrenia or psychotic disorders. It will begin on December 1, 2024 and Humboldt County is part of Cohort II. Petitions that could start the process of evaluation for CARE Court can be filed as of December 1, 2024. Much work to be done. Stakeholder feedback will help identify gaps in the process. The CARE Act allows people known as petitioners to request that someone enter CARE Court. The process involves assessments and hearings to determine if the person is eligible. The process can be complicated. Persons 18 years and older with a diagnosis of Schizophrenia or other psychotic disorders are eligible to apply The person must have severe and persistent symptoms. Those who can file a petition include a person who lives with them, a spouse, partner, parent, sibling, child or grandparent.

STRATEGIC PLANNING

- Updates ongoing, in collaboration with Cal Poly's CCRP, integrating equity work.

PROGRAM UPDATES

- Assisted Outpatient Treatment (AOT) ending November 1; clients to be referred to alternate Behavioral Health services.
- Sorrel Leaf juvenile facility construction ongoing, completion targeted for 2026.

BOARD & MEMBERSHIP

- Oscar Mogollon recommended for removal due to attendance; recruitment planned for TAY and Education reps in 2025.
- Bylaws update review in progress.

OTHER ITEMS

- Data Notebook topic is Homelessness within Behavioral Health systems.

NOVEMBER 2024

Substance Use Disorder (SUD) Program Presentation - Deanna Bay

- HCPR, Adolescent Treatment, Healthy Moms, and Dual Recovery programs overview.

BOARD ACTIONS

- Approved minutes for September and October.
- Approved CALBHB/C annual invoice.
- Approved Kelly Johnson's membership application.
- Approved Bylaws update effective January 2025.
- Approved letter of support for Proposition 1 psychiatric facility funding.

COMMUNITY UPDATES

- Feather House transitional living facility visited; additional women's facility and reentry housing under development.
- New Adult Residential Facility opening in December to support step-down needs from SV and Crestwood.
- Withdrawal management facility licensing process underway.

DHHS UPDATES

- Co-location of staff with Hoopa Tribe planned for December 9.
- Crisis Triage Center and new psychiatric facility design planning continues.

OTHER COMMUNICATIONS

- Veteran programs, Native Veterans meetings, and Recovery Happens Thanksgiving dinner noted.

JANUARY 2025

MHSA Stakeholder Meeting Presentation - Oliver Gonzalez

- Approx. $11M for 2025-26; Proposition 1 will rename MHSA to BHSA with new funding splits: Housing (30%), Full-Service Partnerships (35%), Behavioral Health Services (35%).

BOARD ACTIONS

- Approved minutes for November.
- Approved Peter Stoll (HCOE PEI Director) membership application.
- Approved Alex Childers (TAY Coach) membership application.

COMMUNITY UPDATES

- Continued equity work with Tribes on mobile crisis coordination.
- Concerns raised about budget deficits and upcoming audits.

DHHS UPDATES

- New Adult Residential Facility opened in Eureka amid community stigma concerns. The facility in Eureka opened Dec 2024 for step-downs from SV and Crestwood
- CARE Court: Five applications since Dec 2024; policy development continues.

OTHER COMMUNICATIONS

- Future presentation requested from New Life Discovery.

FEBRUARY 2025

Crisis Continuum in Humboldt County Presentation - Paul Bugnacki

The presentation focused on Humboldt County's crisis response continuum, describing how people in crisis enter the system, the available services, and ongoing challenges.

ENTRY POINTS INTO CRISIS SERVICES

- Crises typically start with calls—people reaching out for themselves or others. Calls come in through 911, the local crisis line (707-445-7715), or the national 988 line. Previously, law enforcement often responded, but mobile crisis teams now play a larger role.

MOBILE CRISIS TEAMS

- Humboldt County operates adult and children's mobile response teams as well as a MIST team (Mobile Interventions and Supports). They handle crises in the community, hospitals, and emergency departments, including reassessing 5150 psychiatric holds. In 2024, mobile teams had over 1,500 interactions with community members.

CRISIS STABILIZATION & SUBACUTE SERVICES

- Services include the Crisis Stabilization Unit (CSU), Hyperion crisis residential (10 beds), Crestwood Pathways (43 beds), and Sempervirens Psychiatric Health Facility (16 beds)—one of only two county-run acute psychiatric hospitals in California. Average stays were 12 days for non-conserved patients and 94 days for conserved individuals, highlighting bottlenecks in step-down care.

STATISTICS ON HOLDS

- In 2021, 1,033 holds (5150s) were written. About 51% were rescinded after reassessment, allowing treatment in less restrictive environments. This reflects a push to balance public safety with civil liberties.

CALL VOLUME

- A 2022 study found nearly 7,900 calls in six months, averaging 43 per day. Around 16 calls nightly came in after hours. The busiest times were late mornings to early afternoons midweek.

CONTINUED

FEBRUARY 2025 CONTINUED

FUTURE INFRASTRUCTURE

- The county is pursuing grants and projects to expand capacity, including a new Crisis Triage Center near Mad River Hospital, modernization of Sempervirens, and partnerships with tribal health entities. State funding has supported this buildout.

CHALLENGES & NEXT STEPS

- Ending use of an answering service for crisis calls (July 1).
- Staffing shortages for mobile teams.
- Need for flexible facilities that can treat both adults and youth locally.
- Upcoming Senate Bill 43 (expanding grave disability criteria to substance use).
- Proposition 1 funds to expand psychiatric care.
- Board members expressed appreciation for staff efforts under difficult circumstances and stressed the importance of expanding infrastructure to meet demand.

"In 2022… we had 7,876 calls into these two numbers—that's about 43 calls a day… 16 calls a night after hours."

"Of 1,033 psychiatric holds written last year, 520 were rescinded—about 51%—so people could be treated at a lower level of care."

"We're one of only two counties in California operating our own acute psychiatric hospital."

"Kudos to the state… finally investing in psychiatric infrastructure after decades of disinvestment."

BOARD ACTIONS

- Approved minutes for January.

COMMUNITY UPDATES

- 40-hour CIT: Apr 14–18 at the Wharfinger, co-hosted by Yurok Tribal Police & EPD..
- May Mental Health Month (City of Eureka): May 4 kickoff at the Wharfinger with keynote Joseph Reid ("Broken Like Me")
- "Brave Faces" storytelling training (Stand Against Stigma, Shasta County model) to build a speaker bureau

DHHS UPDATES

- FY23–24 Behavioral Health expenditures about $64M; still ~$2.7–3M short despite multiple revenue streams (realignment, MHSA, Medi-Cal claims, grants, small GF). Largest structural gaps: SV (≈$4M in the red) and placements (≈$10M with no revenue).
- Mandates keep expanding (e.g., CARE Court, AOT, SB 43), often under-/unfunded. Dept is seeking efficiencies, protecting core mandates, and communicating tradeoffs.
- Leadership noted Jet DeCruz retiring Apr 1 (≈38 years); recruitment and transitions underway.

OTHER COMMUNICATIONS

- Peer Support Specialist Week (third week of May) recognition request to Board of Supervisors.

MARCH 2025

HEPI (Early Psychosis Intervention Program) Presentation - Dana Taylor

- The HEPI program provides specialty care for individuals and their families who are experiencing their first episode of voice hearing, visions or other unusual or extreme experiences(also referred to as psychotic symptoms) as well as those individuals who may be showing warning signs of symptoms. HEPI uses assessments to identify at risk individuals early in their illness and provides evidence-based treatment, focusing on youth-self-determination and family support as a path to recovery. Staff for the HEPI program includes a Sr. Program Manager, Child Psychiatrist, Supervising Behavioral Health Clinician, Lead Clinician , Clinician, Case Manager and Supported Education and Employment Specialist.
- HEPI provides services to youth ages 16-26 who are having signs of first episode of psychosis and are Medi Cal insured. The process includes a self-administered PQ-B is completed and a referral form is then completed. Both are sent to staff. A phone interview is scheduled and conducted with the youth and caregiver. The goal of HEPI is to provide support as early as possible to prevent symptoms from recurring such as voice hearing, visions or other extreme experiences. Staff work with individuals and caregivers to become more active participants in their treatment and to meet their goals
- Dana explained the process for making a referral to the HEPI program which includes having client complete self administered PG-B, collect ROI for program, complete HEPI intake form and then submitting the package to the HEPI email at HEPIREQUEST@co.humboldt.ca.us

BOARD ACTIONS

- Approved minutes for February 2025.
- Approved renewal for Danette Kellerman.

COMMUNITY UPDATES

- Planning for May Mental Health Month (BBQ May 23, courthouse walk, BOS proclamation).
- SB43 Steering Committee launched to expand grave disability criteria by 2026.
- CIT Training (April) at capacity with multi-agency participation.
- Discussions on Federal funding cuts impacts.

OTHER COMMUNICATIONS

- Board will be holding elections for Chair, 1st Vice Chair and 2nd Vice Chair in May. The Board members may nominate any board member who is interested.

APRIL 2025

Behavioral Health Crisis Triage Center Presentation - Connie Stewart & Nancy Stark

- b) The Crisis Triage Center is expected to be completed in early 2027. The center will be located in Arcata near the Mad River hospital. The center will offer behavioral health services like sobering, mental health support, crisis stabilization and crisis residential services. The project funding will come from various sources, including grants, county funding, and private donations. The project is a collaborative effort involving Mad River hospital, Providence St. Joseph hospital, Humboldt County Behavioral Health and Cal Poly Humboldt. The project is expected to break ground in 2025 and should be open in late 2026 or early 2027.There will be eight crisis beds for adults and 4 crisis beds children. There will be a separate space for children's crisis services. The facility will have walking and biking access and there are also bus stops nearby along with private parking. The Architect is using the same design on the facility as the Orange County facility that the organizers visited last year. There is still a lot of work be done on the programing and staffing and the organizers will be getting input on what the community wants. The diagrams and floorplans were reviewed.

CONTINUED

APRIL 2025 CONTINUED

BOARD ACTIONS
- Approved minutes for March.
- Approved 2025-26 officer slate: Laura Montagna (Chair), Kelly Johnson (1st Vice Chair), Shawn Burger (2nd Vice Chair).

COMMUNITY UPDATES
- Bob Dougherty reported that Nations Finest has an event in May.
- Alex Childers reported that there are a lot of events for the HCTAYC members in May. There will be a youth summit in May also.

DHHS UPDATES
- Connie Beck reported that DHHS will be doing a budget presentation to the BOS in May and will report on positions and services that could be affected by budget cuts.
- Emi Botzler-Rodgers reported that the Federal funding reductions will have an impact on BH, and that the MHSA funding is transferring to the BHSA and there are a lot of unknowns about how this can affect Behavioral Health.
- There have been more audits recently and they are always challenging.
- Several May is Mental Health Month events happening and Emi reported that she will also be on a Professional Panel for the city of Eurekas workshop in May.
- Paul Bugnacki reported the Diversion grant is going to the BOS in May. The state is also working on the IST backlog at state hospital admissions, clients are having to wait a long time in jail.
- Jack Breazeal reported that things are going well for Hyperion, Lighthouse and Willow Glen.

SUD COMMITTEE
- Presentation from Aegis; rising Trans client service access noted.

MAY 2025

MHSA Stakeholder Meeting Presentation - Oliver Gonzalez
- Presented the final MHSA annual update before California transitions to the new Behavioral Health Services Act (BHSA)
- He emphasized that MHSA is community-driven and stressed the urgency of preparing for BHSA, which begins July 2026, with draft plans due as early as March 2026.

KEY FUNDING AREAS INCLUDED
- Community Services & Supports (CSS) – 70% of funds (e.g., Full-Service Partnerships, Crisis Alternatives in Eureka, tribal support).
- Prevention & Early Intervention (PEI) – 21% (e.g., Hope Center, suicide prevention, Humboldt Early Psychosis Intervention [HEPI]).
- Innovation – 5% (e.g., REST program focused on homelessness prevention).
- Workforce, Education, & Training (WET) – 2% (cultural humility training, Reliant e-learning, tribal outreach, possible transgender care training).
- Community feedback emphasized the need for expanded services, stronger youth supports, and bilingual/culturally responsive care.

BOARD ACTIONS
- Approved minutes for April.
- Approved 2025-26 officers elected: Laura Montagna (Chair), Kelly Johnson (1st Vice Chair), Shawn Burger (2nd Vice Chair).

CONTINUED

MAY 2025 CONTINUED

COMMUNITY UPDATES

- Education & School-Based Mental Health Updates: The Prevention and Intervention Services Department is expanding its mental health and wellness program, now staffed with two licensed clinicians and additional licensed staff.
- A training program is being developed in partnership with Cal Poly Humboldt, focusing on increasing interns and placing them in rural areas.
- Schools are increasingly implementing Positive Behavior Intervention and Supports (PBIS), with several recognized by the state for strong implementation.
- There is also a focus on Universal Design for Learning (UDL), which promotes student belonging by providing multiple ways to demonstrate competence.
- Redwood Preparatory Charter School was recently recognized as a California model school for UDL.
- Recovery Happens is Sept. 13th.
- First reading of a Nitrous Oxide ban for the County.
- Overdose Awareness Day
- May is Mental Health day kickoff was well attended and videos are online.

DHHS UPDATES

- Sonya Levy-Boyd hired as CBH Senior Program Manager.
- Navigation Center still in negotiations.
- SB43 Committee meetings include multiple agencies.
- HHH Home Key 2.2 million for Homeless services for supportive housing.
- Prop 1 funding 43.5 million for a new SV located near the Courthouse. WIll be better for youth to stay in county, instead of having to be sent out of town. Short timeline.
- MIST team going 24/7 in June.
- Humboldt County secured $27.8 million over five years from the Department of State Hospitals to support a permanent diversion program and a community-based restoration program, which will go out to bid soon. These programs include a housing component.
- The CARE Act rollout continues gradually, with outreach and petitions in progress.
- The Providence residency program is giving residents mental health experience in multiple settings (SV, correctional facility, etc.). Plans are underway to also host nurse practitioners for psychiatric certification hours.
- Partnerships with Cal Poly Humboldt remain strong, creating a pipeline of interns who often move into clinician roles locally.
- Construction at Sorrel Leaf's facility is progressing (walls up, interiors underway), with an expected completion and licensing by early next year.

OTHER COMMUNICATIONS

- Empire Rehab in Redding is going to be closing. Humboldt County sends approximately 20 people per month there for medical detox.

JUNE 2025

Adult Services Presentation - Jack Breazeal
Case management, Psychiatric appointments, Nursing and coordination of care with APS and IHSS.

- Jack Breazeal gave a presentation on adult services and gave an example of a client going through the different programs. The programs are Same Day Services, Access, Adult Outpatient, Hope Center, REST, CCT, Regional and Older Adults. A Risk Assessment is done in SDS. An Adult Assessment is done by ACCES program. The client is then referred to Adult Outpatient for Therapy and Case Management. The Case Managers can assist clients in getting housing and links to other services. The REST program specializes in making sure clients are successfully housed and can perform tasks of daily living. The Hope Center offers Peer Support and activities for clients. Clients are often transferred to CCT after discharge from SV. CCT offers Case Managers, Clinicians and Peer support. Regional Services offers Therapy, Case Management, Medication support and SUD services to the outlying communities in the county. The Older Adult program is designed for clients 60 years and older and provides

BOARD ACTIONS

- Approved minutes for May.

COMMUNITY UPDATES

- Veterans Stand Down will be happening in September
- HCTAYC is looking at some bills that could affect youth in the county. The Youth Advisory Board is not in favor of the following bills: SB 67, SB 825, SB 331, SB 820, AB 416 and AB255. Sharon Wolf reported that staff are watching these bills closely and asked if the Board wanted to start an ad hoc committee to look at these closer and make recommendations.
- Brave Faces training successful; planned as annual.
- Nitrous Oxide ban passed by BOS.

DHHS UPDATES

- Crossroads had their 50 year anniversary last week and was recognized by the BOS.
- Connie reported she spoke with representative from Sen Maguires office about one time funding for the Mad River Crisis Center and Sorreal Leaf facility. The funding needs to come through the county.
- Connie reported that the state budget does no look good and there are positions that are not funded.
- DHHS received Proposition One funding for the SV facility and the Tribes also received some funding for their projects.
- Work continues on the Strategic Plan and Racial Equity plan. Staff are working on increasing direct services percentages. Contracts were all completed on time this year.
- Kayleigh Emry the Deputy Director at CBH has resigned and yesterday was her last day. Martin Stephan is the new interim Deputy Director for CBH.
- QI has been very busy lately with several audits taking place and some state visits. There is an upcoming audit for SV with DHCS.

OTHER COMMUNICATIONS

- SUD Committee: New Detox facility opening soon.

JULY 2025

HCTAYC Recommendations - Alex Childers and D'NajaToohey
HCTAYC is a safe space for youth ages 16-26 - they provide support to youth.

- There was discussion on the Hart's Ladder which was about young people and adults sharing decision making, enabling young people to lead and initiate action, shared decisions, Tokenism, Decoration and Manipulation. One of the recommendations is to meet in a more accessible place. Community centered and not in an office building and to post location of meeting place in advance of the meeting. There was a group discussion, and the Board shared some of their ideas for a different meeting place. The items included free parking and audio/visual access. The next item was the outreach coordinator, this is for someone to visit other clubs, committees and groups and to bring in the different backgrounds and cultures. Can an existing position at DHHS be used for the outreach coordinator? Also, can DHHS Media assist with posting on social medial and creating flyers and brochures. How much unity is in the TAY community to support the BHB? Also need mentoring and onboarding for new members. Can new members be mentored by existing members and can the Board member act as liaison for new members.

BOARD ACTIONS

- Approved minutes for June with corrections.

COMMUNITY UPDATES

- Long Beach SUD conference is happening on August 19-21.
- On August 12th Supervisor Arroyo and Supervisor Madrone will be sponsoring a proclamation for transgender healthcare access with a focus on suicide prevention. Keeping all medical information private and there are concerns in the community about transgender access to healthcare.
- Virginia Bass reported she is part of a legislative committee looking at what bills to support. Marguerite Story-Baker reported there is legislation for seniors and SUD legislation, and she will send information to Virginia.
- Raphael DiCaprio reported that plans are moving forward for the Withdrawal Management facility in Eureka. They are waiting on the licensing.

DHHS UPDATES

- There is a recruitment for the CBH Deputy Director position.
- Jack Breazeal reported they are onboarding new clinicians in his programs.
- The SV licensing review which happens every two years happened recently and went well, and staff are working on follow up. DHCS is asking counties for more information.

Goals & Accomplishments

1

Full Board Membership

The Behavioral Health Board has operated without full membership for several years. This year, we made a concerted effort to expand membership to the full 15 seats. As of January 1, 2025, changes to the Welfare and Institutions Code—resulting from Proposition 1 and SB 326—officially took effect. Our Board is now in full compliance with these updated requirements. We currently have a complete Board, pending final approval from the Board of Supervisors, along with a waitlist of prospective members.

2

Updated Bylaws

The Behavioral Health Board's Bylaws had been outdated for several years. With the changes to the Welfare and Institutions Code resulting from Proposition 1 and SB 326, which took effect on January 1, 2025, an update was necessary. As of that date, our Bylaws have been revised, approved, and are now fully compliant.

3

Community Relationship Building

The Behavioral Health Board has recognized that one effective way to share the complex knowledge we gain is through collaboration—with local agencies, service providers, and community members—and by actively disseminating that knowledge to the broader public. To support this goal, we have participated in several service fairs and public events to increase visibility and engagement. Additionally, we partnered with the City of Eureka and the Department of Health and Human Services (DHHS) to develop stigma reduction educational panels, which have been professionally recorded and are now available as a community resource. These efforts reflect our commitment to transparency, education, and reducing stigma around behavioral health and substance use disorders in Humboldt County.

Summary

In the first half of 2025, the Humboldt County Behavioral Health Board focused on new programs, funding changes, and community outreach. They welcomed new members, prepared for the shift from MHSA to BHSA under Proposition One, and continued equity work with Tribes on mobile crisis. The Board learned about early intervention for youth psychosis, supported full CIT training, and planned Mental Health Month events. They also kept a close eye on federal funding cuts, upcoming audits, and new policies like CARE Court and SB43, which will expand grave disability criteria by 2026.

By spring and summer, the Board approved new officers, celebrated programs like Brave Faces training, and saw key services expand—such as MIST becoming 24/7 and new facilities like a Crisis Triage Center, Navigation Center, Youth BH facility and a detox site moving forward. Concerns about staffing and budgets remained, but the Board also marked community wins like obtaining State funding for a new psychiatric facility. Across all meetings, the themes of equity, system coordination, and sustainability under funding and staffing pressures were consistent priorities.

What Next?

Over the next two years, numerous new laws and programs will significantly impact our local populations affected by Substance Use Disorder, behavioral health challenges—both in adults and youth—and ongoing staffing shortages. Our role is to stay informed, share knowledge, and support our staff and programs through these changes.