



COUNTY OF SAN DIEGO BEHAVIORAL HEALTH SERVICES (BHS)

Evolving Our Local Engagement Infrastructure: *Optimal Care Collaboratives (OCCs)*

Fiscal Year 2026-2027

Recap: February 2025 SoC Input Sessions

Nearly 150 total attendees at sessions

- Children, Youth, and Families: 82
- Adult: 18
- Older Adult: 23
- Transition Age Youth: 24

3 live polls; 5 discussion questions in virtual breakout rooms

Over 500 comments received

- 322 comments submitted via Mentimeter across all sessions
- 209 comments through open discussion and chat windows of breakout rooms

Recap: February 2025 SoC Input Sessions

Key Learnings

1. Attendees' impression of the primary purpose of SoC meetings appears to be split — some view convenings as a critical mechanism to elevate and advise BHS on unique service needs and delivery gaps, while others shared they attend to receive more general updates, learn about resources/best practices, and network with others.
2. While participation is not exclusively intended or reserved for provider organizations, that is 'who' is most able to join convenings as they are currently structured.
3. The venue of SoC meetings enables direct access to/dialogue with BHS staff and/or other subject matter experts who can elaborate and explain key changes and updates.
4. Majority of attendees view SoC meeting content as valuable, but the high volume of information can be overwhelming and impacts capacity for back-and-forth dialogue.

Recap: February 2025 SoC Input Sessions

Key Learnings

5. It is unclear to most how stakeholder input collected by BHS is integrated into the department's program planning or policy development efforts.
6. Smaller subcommittees and workgroups present the best opportunity for continuous dialogue/shared planning, but need clearer threading to BHS' broader planning efforts.
7. Majority of attendees indicated they also attend Behavioral Health Advisory Board (BHAB) and/or BHAB subcommittee meetings, but noted that the format of BHAB convenings does not present the same opportunities for dialogue as SoC meetings.
8. Strong desire for engagement opportunities beyond age-oriented SoC meetings that focus on ADDITIONAL topics and populations, including but not limited to, LGBTQ+ youth and families, continued examination of BH workforce challenges, immigrant and undocumented youth and families, and supports for unhoused individuals.

Example 2: BHS Housing Council (12/2025)

Q1. What would you like this group's purpose to be as we evolve together under BHSA?

A group that comes together to discuss, strategize and advocate for housing opportunities for people experiencing a behavioral health issue

first line of defense for my program to share countywide updates, changes etc. As well as share important updates re: my program

Support efforts to increase permanent housing for BHS connected client with mental health and substance use disorders.

Still having a workgroup as part of the collaborative

A place to share successes and challenges. Forum to discuss policy changes at all the government levels

Lend expertise and guidance on housing solutions and on best practices for housing systems design

A dialogue about how behavior health services dollars are spent to create housing opportunities

A place to share where issues are occurring so we have a feedback loop to the County

Ability to influence the process regarding capitalize dollars for housing.

a group that shares information on housing opportunities and issues for our constituents

a group for people who are devoted to housing issues affecting our community

Example 2: BHS Housing Council (12/2025)

Q2. What topics or updates would you want on this group's agenda?

housing innovations the county is looking at on the horizon

Plain language processing of the BHSA transitions. What does it mean for service providers.

-County HHSA updates -BHAB Updates -Updates on BHSA planning and implementation -special presentations on housing related tasks -County HCDS updates -Housing production related to our clients - Funding

Funding updates and opportunities

The most relevant updates in relationship to BHS housing funding streams an input on how those are being used. Having written updates on some of the things like the behavioral health board information

Explanation of how BHS will work with MCP regarding Medi-Cal benefits.

Example 2: BHS Housing Council (12/2025)

Q3. How could we evolve the current meeting format to make it easier for more people to participate?

I think the current is a good mix, but open minded on other thoughts

joint meetings with other councils that are remaining (such as the peer council) once or twice a year

The current model (in-person and virtual) works, offering food always is enticing!

Not losing the virtual component of the meetings

Eliminate the forum process and membership allow/ invite in a variety of Housing entities.

Move the meeting back to 90 minutes

CSH has been so important in this process and keeping them as a part of the housing council would be amazing

KEEP CSH as technical advisor KEEP the work group

OCC Details & Tentative Logistics

Proposed collaborative topics are based on FY2025-2026 CPP input (baseline year) and organized around four core questions:

Proposed Collaborative	Core Question
Access, Navigation & Care Pathways	<i>How do people get connected to and stay connected to care?</i> • State Goal Area: Access to care • State Goal Area: Untreated behavioral health conditions
Family Wellbeing & School Partnerships	<i>How do we support youth and families before challenges escalate?</i> • State Goal Area: Removal of children from the home
Housing Stability & Homelessness Prevention	<i>How do we help people stay housed and support recovery?</i> • State Goal Area: Homelessness • State Goal Area: Institutionalization
Recovery, Diversion & Community Integration	<i>How do we help people recover, stay connected to community, and avoid unnecessary system involvement?</i> • State Goal Area: Justice Involvement • State Goal Area: Social Connection

OCC Details & Tentative Logistics

- **Proposed collaborative topics are based on FY2025-2026 CPP input (baseline year)**
 - **Bi-monthly convenings (virtual)**
 - Each OCC would have a main session with standing agenda components/updates
 - Such as:
 - Short community organization/resource spotlight presentation
 - Upcoming actions being brought forward to County Board Supervisors
 - State guidance or updates on XXXX and local implementation/observance details
 - Local capital project-related updates (Example: Behavioral Health Wellness Campus)
 - Optimal Care Pathways (OCP) and State Goal Area data updates
 - Age-specific breakout rooms*
- *To ensure opportunity for bi-directional dialogue, need to determine reasonable split of proposed total meeting time*

OCC Details & Tentative Logistics

- **1-2 annual convenings (in-person)**

1. Goal setting focus in FY2026-2027 (first year of BHSA IP implementation)
 - Tentative timing: Within first half of the FY, pending local venue availability
2. Global review/report outs (how'd the year go/“*What next?*” conversations)
 - Tentative timing: Align to formal public comment periods