



Alameda County Behavioral Health Advisory Board (BHAB)

Ad Hoc Committee

Members:

Bloom, Brian

Ad Hoc Committee CHAIR
BHAB Chair (District 4 Appointment)

Land, Terry

Ad Hoc Committee Co-CHAIR
BHAB Vice Chair (District 1 Appointment)

Cooper-Kahn, Mia

BHAB Member (District 5 Appointment)

Leftwich, Juliet

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CFJL Ad Hoc Committee Member

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Schwartz, Myrna

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Sikora, Kathleen

CFJL Ad Hoc Committee Member

Care First, Jails Last (CFJL) Ad Hoc Committee Summary

Location: 2000 Embarcadero Cove, Suite 400, Oakland, CA (Chabot Conference Room)

Zoom Link –

<https://us06web.zoom.us/j/83541678892?pwd=4B72ExuBj3GzGz0O5Hd3RvU5bTILG.1>

Date: Thursday, February 5, 2026

Time: 1:00PM – 3:00PM

Attendees: Ad Hoc Committee Members, RDA Consulting, ACBHD

Agenda:

- I. Call to order – Introduction/Welcome & Announcements
- II. Discussion of Memo from BHD re: Reduction in Contracts
- III. Plan for next Report to Board of Supervisors (March 2026)
- IV. Agency Subcommittees Report
- V. Data Committee
- VI. Updates from RDA work
- VII. Parking Lot Review & Wrap-up

Summary

The Care First Jails Last Subcommittee's charter is to monitor the implementation of its recommendations. Since May of last year, the Subcommittee has developed a new set of recommendations intended for presentation to the current Joint Committee.

Discussion of Memo from BHD re: Reduction in Contracts

Subcommittee members provided an overview of the fiscal impacts associated with the implementation of Proposition 1 and the corresponding changes to Behavioral Health Services Act (BHSA) funding allocations.

It was reported by subcommittee members that there is an estimated \$22 million shortfall in BHSA funding related to the restructuring of allocation "buckets" under Proposition 1. The shortfall is expected to disproportionately impact Prevention and Early Intervention (PEI) programs, which are particularly vulnerable under the revised funding framework.

Approximately 50–60 Community-Based Organizations (CBOs) have received notification from the County indicating that their funding may be reduced or eliminated. While final budget determinations for the current fiscal year are still pending, the projected impact on prevention providers is significant.

The County is currently projecting approximately \$122 million in BHSA revenue for Fiscal Year 2026–2027, representing a decrease from prior fiscal years. This projected reduction has raised questions, particularly considering recent stock





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market performance. However, it was noted that BHSA revenue is subject to several structural factors:

- BHSA funding operates on an approximate two-year revenue lag, meaning allocations in FY 2026 are based on taxable income reported in Tax Year 2024.
- Revenue derived from the “millionaires’ tax” is highly dependent on capital gains income, which can fluctuate substantially year over year.
- Reported income levels may vary due to some individual tax reporting practices.

Plan for next Report to Board of Supervisors (March 2026)

Subcommittee members reported that the presentation to the Joint Committee remains in the queue. At this time, no confirmed date has been scheduled for the meeting.

It was noted that clarification regarding these updated recommendations was recently provided to Erin Armstrong of the Board of Supervisors. Prior to that discussion, there had been lack of clarity regarding the scope and intent of the newly developed recommendations.

New Recommendations

2A – Full-Service Partnership

The Subcommittee reported that available studies indicate the Full-Service Partnership (FSP) program is currently approximately 300 slots below identified need. The County has expressed a commitment to funding these additional slots, which would increase total capacity to 1,400 Full-Service Partnership slots.

It was noted that the exact funding allocation to support this expansion will be determined upon release of the forthcoming Three-Year Plan.

Committee members suggested incorporating a formal update section within the recommendations framework to provide ongoing status reports regarding implementation progress and funding developments.

3D – Public Information Campaign/3M – Directory of Services (Service Directory Bundle)

During the discussion, it was reported that AC Health has developed a standardized template for updating all departmental website content. At this time, no modifications can be made while the template is being finalized and prepared for release. Once the updated website is launched, feedback from subcommittee members will be welcomed and considered.

One committee member suggested removing Recommendation 3D (Public Information Campaign). After discussion, it was determined that Recommendation 3D will remain in place at this time.





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7A – Connect people to housing before reentry/7B – Coordinated Entry Point at Santa Rita Jail (Pre-release and reentry housing Bundle)

The subcommittee reported that this marks the first time in the County's history that individuals exiting custody will have a structured pathway to secure housing upon release from jail.

Health and Human Services (HHS) will have staff onsite at Santa Rita Jail to support implementation of the reentry housing program and assist individuals as they transition back into the community.

Some committee members expressed concern that critical program information may not be consistently communicated to individuals prior to release. For example, it was noted that newly released individuals may not be clearly directed to access services immediately upon release, such as connecting with the Roots van located directly outside of Santa Rita Jail.

Members emphasized the importance of strengthening communication protocols to ensure that all individuals being released receive clear and actionable information regarding available housing and reentry resources.

7H – Independent Living Association

Subcommittee members discussed and reported that the Board has approved approximately \$8.5 million in Community Development Agency (CDA) funding to support several housing initiatives. These funds could possibly be used to support:

- Permanent supportive housing
- Unlicensed board and care homes, including those operating under the Independent Living Association (ILA) model; and
- Inspection, rehabilitation, and repair of units within licensed board and care facilities.

A member of the subcommittee suggested inviting Liz Riebenstorf to serve as a speaker to provide an overview of the Independent Living Association model and highlight accomplishments achieved since its inception. Ms. Riebenstorf was identified as a longstanding advocate with substantial subject matter expertise.

Additional updates are pending from the Housing Subcommittee.

9A – Assign a CM or family navigator to patients/families experiencing early illness episodes

9B – Involve families when first mental health crisis occurs

9C – Implement Advice Line/hot line





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(9A-9C are being combined as a Family Support Bundle)

It was agreed by the Subcommittee to hold off on bringing this bundled Recommendation to the Joint Committee at this time. Further coordination and updates will occur at a later date.

Gap in IST Beds vs acute beds/Collaborative court data (Data Bundle)

The Data Committee reported that it has met and is recommending that the Board be asked to renew Wendy Weir's contract, with an expanded scope of work specific to data collection and analysis within the jail.

It was noted by members that the previous scope of work did not include mental health or substance use data within the jail setting. The proposed contract renewal would incorporate these components, as Ms. Weir has already established relevant data systems and contacts in these key areas.

The subcommittee emphasized the importance of strengthening and expanding data collection for Behavioral Health as well.

Revisit Recommendations

1A – African American Wellness Center

The Subcommittee reported that it met with Alameda County Behavioral Health Department (ACBHD) and received a commitment to include psychiatric services within the treatment center model.

Due to limited meeting time, further discussion is needed regarding the structure and role of the advisory group, the current formation of a support group, evaluation processes, and related implementation details. Additional feedback and questions remain outstanding and will be addressed in future meetings.

Subcommittee discussion continued to center on the lived experience criteria associated with participation at the African American Wellness Center. Members emphasized the importance of clearly defining and honoring lived experience standards to ensure meaningful representation and engagement.

2C – Safe Landing Project

The Subcommittee noted that under Proposition 1, funding allocations for prevention programs has been significantly reduced. As a result, the Safe Landing Project, which is focused on prevention, will experience a reduction in funding.

Subcommittee members are coordinating with Dr. Noah and Roots to see if Roots intends to pursue any action in response to the funding loss.





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3L – First Episode Psychosis (FEP)

Recommendation 3L for First Episode Psychosis (FEP) is a request to hire five staff members and identify a suitable facility to support the proposed early intervention program.

The program's objective is to provide treatment within the first few months of an individual's episode, with the goal of preventing incarceration or prolonged periods of instability. Early intervention is expected to improve functional outcomes for participants and generate long-term cost savings for the County.

5A – Point of arrest Diversion (CARES navigation)

The Subcommittee reported that this recommendation will be removed at this time, as no agreement has been finalized with LaFamilia. It was noted that there may be no substantive updates to report until at least April 2026.

5C – Court Based Diversion which includes Mental Health Court

Subcommittee members discussed the possibility of presenting a funding plan to the Board to request additional resources for increasing social worker headcount. Some Court Diversion members, however, expressed concern that such a proposal could be perceived as biased, so if pursued, the funding plan should come from a neutral entity to ensure objectivity and maintain credibility within the recommendation.

5D – IST Diversion

Recommendation 5D is currently in the contract phase. There is no estimated completion date currently.

6A – Transparent Public Reporting on Funds

Meeting scheduled for February 26, 2026, to discuss the details and how to proceed with this recommendation.

6C – Babu Funds: Reallocate Santa Rita Jail (SRJ) mental health program service unit funds to permanent supportive housing

Recommendation 6C pertains to the potential reallocation of funds originally designated for mental health centers and jails into other Care First programs. Currently, these funds reside in the Capital Improvement bucket, which is segregated from other budgetary allocations.

The County Administrator subcommittee will convene to review this recommendation, determine next steps, and establish prioritization moving forward.





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7I – Build and support licensed Board and Cares facilities

Subcommittee members reported that the housing fund associated with this recommendation has completed the initial committee review phase and is now pending a vote by the Board.

Subcommittee members noted that a needs assessment is still required to evaluate the full continuum of care and ensure that funding aligns with identified gaps and priorities.

8B – Fund gap analysis to understand existing mental health needs and service gaps

The subcommittee determined that this recommendation will be removed and replaced. Further details regarding the replacement recommendation will be provided in future updates.

Agency Subcommittee Report

No updates.

Data Committee Report

No updates to report.

Updates from RDA work

No updates to report.

Parking Lot Review

No updates to report.

Next meeting date: March 5, 2026

