Behavioral Health Services Act Advisory Committee Meeting

Friday, May 29, 2026

Agenda

Highlight MHSA Innovation Project Contributions

MHSA PEI FY 24-25 Annual Report Highlights

Behavioral Health Services Act Transition

MHSA Innovation Projects - Purpose

Innovation Project Reflections
What We Learned

- Community-centered approaches increase engagement
- Trusted partnerships improve access
- Early outreach reduces barriers
- Flexible service models support underserved populations
- Peer and lived-experience voices matter

Innovation Projects- Report Out

Embedded Neighborhood Mental Health Team (StanConnect)

NAMI on Campus

MHSA Innovation Spotlight

Embedded Neighborhood
Mental Health Team INN
Project
“Stan Connect”

Luis Martinez, AMFT
Stan Connect Program Supervisor

Central Valley

Embedded Neighborhood Mental Health Team

Stan Connect

www.LaFamiliaCentralValley.org

875 Geer Road, Turlock, CA 95380

Stan Connect Program Overview

Building Healthy Neighborhoods

- **Reduce Crisis**
- Reduce Barriers
- Bring Services Into Communities
- Focus On Communities With High Need and Low Engagement
- Riverbank- West Modesto - Airport
- Spanish Speaking & Ethnic Communities
- LGBTQ+

A program designed to **support** and **empower** Central Valley families to embrace a better tomorrow.

www.LaFamiliaCentralValley.org

Stan Connect Program Overview

- A five-year initiative to establish and operationalize an Embedded Neighborhood Mental Health Team and support system across multiple communities in Stanislaus County. Each community is served by three dedicated neighborhood-based mental health teams.

- Funded through the “Embedded Neighborhood Mental Health Team” Innovation Project authorized by Stanislaus County Behavioral Health and Recovery Services

- Goal: to serve 1,250 people in the designated neighborhoods over the 5 year period

Stan Connect - Services

- Three teams focused on 1 site each
- Two Case Managers at Each Site
- One Therapist Floating at All Three
- One Supervisor
- One Office Administrator

Impact: Prioritizing Outreach

☆ Our team reached **3,318** community members, through events and walkabouts.

☆ Provided 18 workshops and 15 community forums

Stan Connect Locations

Our Approach: Partner with schools in each community to establish a brick and mortar presence at **Healthy Start Family Resource Centers.** Each location acts as a centralized hub for outreach, referral, screening, assessment, case management, and support.

- ➔ **Riverbank - C.A.S.A. del Rio at Riverbank Language Academy**
  - Riverbank Unified School District ***Launched January 2025*
- ➔ **West Modesto - Healthy Start Franklin Elementary**
  - Modesto City Schools ***Launched March 2025*
- ➔ **Airport District - Healthy Start Orville Wright Elementary**
  - (Modesto City Schools) ***Launched May 2025*

Stan Connect Team

The Stan Connect Team consists of a Program Supervisor and three specialized teams, each comprising one Mental Health Specialist and one Promotora.

Stan Connect Program Supervisor	Luis Martinez, AMFT
Mental Health Specialists	Jenny Cruz Yomaira Ceballos Silvia Lemus
Promotoras	Monica Esparza Yomaira Ceballos Yamilex Alvarez
Clinician	Jose Betancourt, AMFT
Clerical	Maria Jaramillo

Juan Perez, Deputy Regional Clinical Director
Mia DiGiovanni, Assistant Director of Administration

Culturally Relevant Approach

Bi-Lingual Services

Only one-third of Latinos with a mental health disorder get treatment, compared to 45 percent of non-L
communicate with patients in the language of their choosing to ensure patients are able to fully partici

- All Stan Connect service teams speak Spanish and English and will utilize Latino-specific curricula such a

LGBTQIA+ Services

The LGBTQ+ community often faces unique barriers to accessing mental health services, including d
clients face (Moagi et al., 2021).

- LFCV is dedicated to addressing the mental health disparities experienced by the LGBTQ+ population by
gender identity, can receive the compassionate care they need, and by partnering with trusted LGBTQ+ c

Service Approach

Proactive Outreach to Build a Community Culture of Mental Health

- Teams engage in proactive outreach, including at least two "walkabouts" per shift. Walkabouts are a way for our outreach team to go out into the community and engage all facets of the community around us. Walkabouts often happen in local businesses, popular coffee shops, visits to churches and school offices, or simply handing out flyers at school pickup. Outreach is geared to educate the community on mental health resources, emphasizing support for underserved LGBTQ+ and ethnic communities.

Service Links

- Teams provide vital linkages to community resources by partnering with other community organizations to empower self-directed recovery

Service Approach

One-on-One Care Support

- One-on-one support, assist in navigating care pathways, and advocate for client needs, ensuring every individual receives personalized, culturally responsive and appropriate care.

Direct Treatment

- Teams focus on case coordination and the development of individualized treatment plans. Clients come in for intake and needs assessment with case manager, before starting with groups or therapy.

Interventions

- Engage in grassroots outreach, provide education on health and wellness, and guide community members through healthcare systems, ensuring that clients receive relevant information and support.
- Conduct home visits, community workshops, and canvasing to educate on available resources, facilitate access to care, and promote self-advocacy for mental health and wellbeing.
- Assist with decreasing stigma associated with mental health care and overcoming barriers to accessing mental health services.
- Involve family and provide psychoeducation, parent training, skills building, and resources. Provide family the needed support and services to address burnout, frustration, and confusion.
- Host support groups on topics including Mental Health and Substance Use.
- Provide trainings such as Mental Health First Aid
- Host interactive workshops and seminars at local community centers, providing hands-on education and direct engagement to demystify mental health resources and encourage proactive wellness in our communities.

Partnerships

Over the course of the program we will be developing partnerships with trusted organizations in each target community including:

- City or County Governments
- CBOs
- Non-profit organizations
- Churches

Year 1 Work Plan Goals

Hire the team

- Case managers first -> soon after Supervisor -> then Clinician -> then Office Coordinator

Train Team team

- Youth and Adult Mental Health First Aid
- Joven Noble and Girasol (Culturally responsive youth development groups)

Identify Community Needs

- Case Managers identify needs through walkabouts and community forums (mom groups).
- Clinician and Supervisor review referrals to identify trends and create therapeutic groups.

Open All 3 Sites

- Airport - West Modesto - Riverbank

Data Collection Protocols

- Done

Year 1 Work Plan Goals cont.

Team Collaboration Across 3 Sites

- This happened naturally through coverage for absences, tabling events, staff meetings, training etc.

Walkabout Effectiveness Assessed

- 2 per day is very time and labor intensive
- 10 per week allowed for more flexibility
- (Eventually) 4 per week allowed for more time for case management and targeted outreach

Identify Community Needs

- Case Managers identify needs through walkabouts and community forums (mom groups).
- Clinician and Supervisor review referrals to identify trends and create therapeutic groups.

Year 1 Work Plan Goals cont.

One Event at All 3 Sites

- Grand Openings

Data Collection Protocols

- Key Performance Indicator - KPI
- Minutes of Case Management and Therapy appointments are tracked in our EHR (Exym)
- Workshops, Walkabouts, Events are tracked through Salesforce ticketing system
  - Internal monthly report tracks progress
    - Walkabout Compliance
    - 1 Workshop per site
    - 4 Groups per site per month
    - Notes compliance
- Internal auditing with help of office coordinator

Year 1 Work Plan Goals cont.

Grand Openings

Riverbank

www.LaFamiliaCentralValley.org

Year 1 Work Plan Goals cont.

Grand Openings

West Modesto

Year 1 Work Plan Goals cont.

Grand Openings

Airport

I had to privilege to speak at the grand opening of La Familia Central Valley's embedded mental health awareness center in the Airport neighborhood. La Familia's efforts to bring services into our community is part of a broader effort to improve the mental health of our community. It's important to recognize the importance of providing services to individuals in the language they speak and in close proximity to their home. I'm excited to be a small part of bringing much needed support to the families of the airport neighborhood and greater Stanislaus county.

Challenges Overcome

LGBT+ Engagement

Engaging the LGBT+ community was slow to start. Even after partnering with CalPride people were skeptical of our understanding of the community. Groups, workshops, and meet & greet events provided opportunities for the community to get to know us first before committing to services. .

Space / Facilities

All three sites have dedicated desk space for case managers, and limitations on confidential /therapeutic space. We find creative solutions, such as a schedule of dedicated days with our host sites well in advance. Storage is also an obstacle. We have tables, carts, and boxes of materials for our outreach efforts.

Challenges Overcome

Mental Health First Aid

It took time to get started with trainings. The obstacles were logistical. All three Mental Health Specialists (one from each site) needed to complete training in order to provide the classes. . Then they met with more experienced MHFA trainers at La Familia to observe and gain confidence. Mental Health Specialists coordinated with school and county participants to find the ideal location and time for an all day training with a large group. Our first MHFA training was done in October 2025 in Riverbank. Once we got started it was fairly easy to fill the calendar with more trainings.

Key Learnings

Walkabouts are labor intensive; it was a good start. Flexibility in this area led to more success and less stress for case managers.

Flyers / Events /Tabling are a good way to spread the word but result in few referrals to case management and therapy.

Workshops/Presentations/Cafecito are good to build relationships which equal engagement in case management & therapy. Leaning into relationships with established partners is a good way to receive referrals.

Key Learnings

Spanish Speaking Moms and their families continue to be our most active participants across all three sites.

Group counseling is an effective tool to provide quality care and respond to trends in referrals. Coping skills and mindfulness for Spanish speaking moms.

Neurodiversity is at the core of much of our work. Referrals for “problem behaviors” in the classroom often lead to an ADHD and/or ASD diagnosis. Workshops on neurodiversity have been instrumental in engaging the LGBTQ+ community.

Success Stories

One of our favorite success stories is the story of Gloria (not her real name). Gloria is a Spanish speaking grandmother who raised several children and grandchildren in Modesto. She is incredibly hardworking, a business owner, and a kind soul. She was originally referred to us because her son has severe mental illness and was in prison. She told us that she felt hopeless and was skeptical of our services. She didn't think anyone could help her.

She had nothing to lose, so she started working with our case managers who helped her navigate through the confusing intersection of the criminal justice system and mental illness. She had never had a family member in jail before, and so she had no idea how to communicate with him, or send him money or advocate for him. Our case managers supported her in order for her, in turn, to support her son and family.

Success Stories

This initial success opened the doors for Gloria. She saw the power of asking for help, and for the first time in her life she felt that she could go to someone for help outside of her family. She started therapy for the first time ever. Then she joined one of our groups. Gloria and her family continue to face major challenges, and what is so exciting for us to see is that she feels newly empowered to face those challenges. She has hope again, and she knows she is not alone. When asked if it would be ok to share her story she said, “Absolutely! You have no idea how much your help means to me. I don’t have words to say how this has changed my life. I was so broken and alone, but now I have hope.”

“ . . . now I have hope.”

Contact Us

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MHSA Innovation Spotlight

NAMI on Campus High
School Clubs INN Project

Kym Barber
NAMI On Campus INN Project Manager

NAMI on Campus High School

Innovation Project Final Report

Strategies for Improving Behavioral Health Support in Schools

Project Period: May 2020 - April 2025

Presented by: Kym Barber, Youth Program Coordinator, Retired
Stanislaus County Office of Education

CBH Commission for Behavioral Health

Stanislaus County Behavioral Health and Recovery Services
Striving to be the Best

Stanislaus County Office of Education

Why This Project Mattered

A timely response to student mental health needs

- The project launched just weeks before COVID-19 disrupted traditional schooling.
- Students were experiencing increased isolation, stress, anxiety, and disconnection.
- Schools needed prevention-focused ways to make mental health information visible and approachable.
- Youth were not only recipients of support — they became messengers, advocates, and bridge-builders.

Student-led mental health promotion became a practical way to bring prevention into everyday school life.

The Learning Questions

The project was guided by four core questions

Access
Can expanded outreach improve access to mental health education, resources, and support?

Collaboration
Can coordinated partnerships among StanCOE, NAMI, districts, and community partners sustain outreach?

Stigma
Can peer-led mental health education reduce stigma and normalize help-seeking?

Student Well-Being
Can participation in NAMI on Campus strengthen protective factors and improve well-being?

What Was Innovative?

The innovation was not the club alone

- NAMI on Campus High School clubs already existed as a statewide model.
- StanCOE already had experience coordinating youth-led prevention through PHAST.
- The Innovation Project brought these structures together in a new way.
- The project tested whether student-led mental health clubs could be strengthened through:
  - countywide coordination,
  - advisor support,
  - shared monthly themes,
  - school and community partnerships,
  - and prevention science.

Starting Point

The potential was there — but so were the barriers

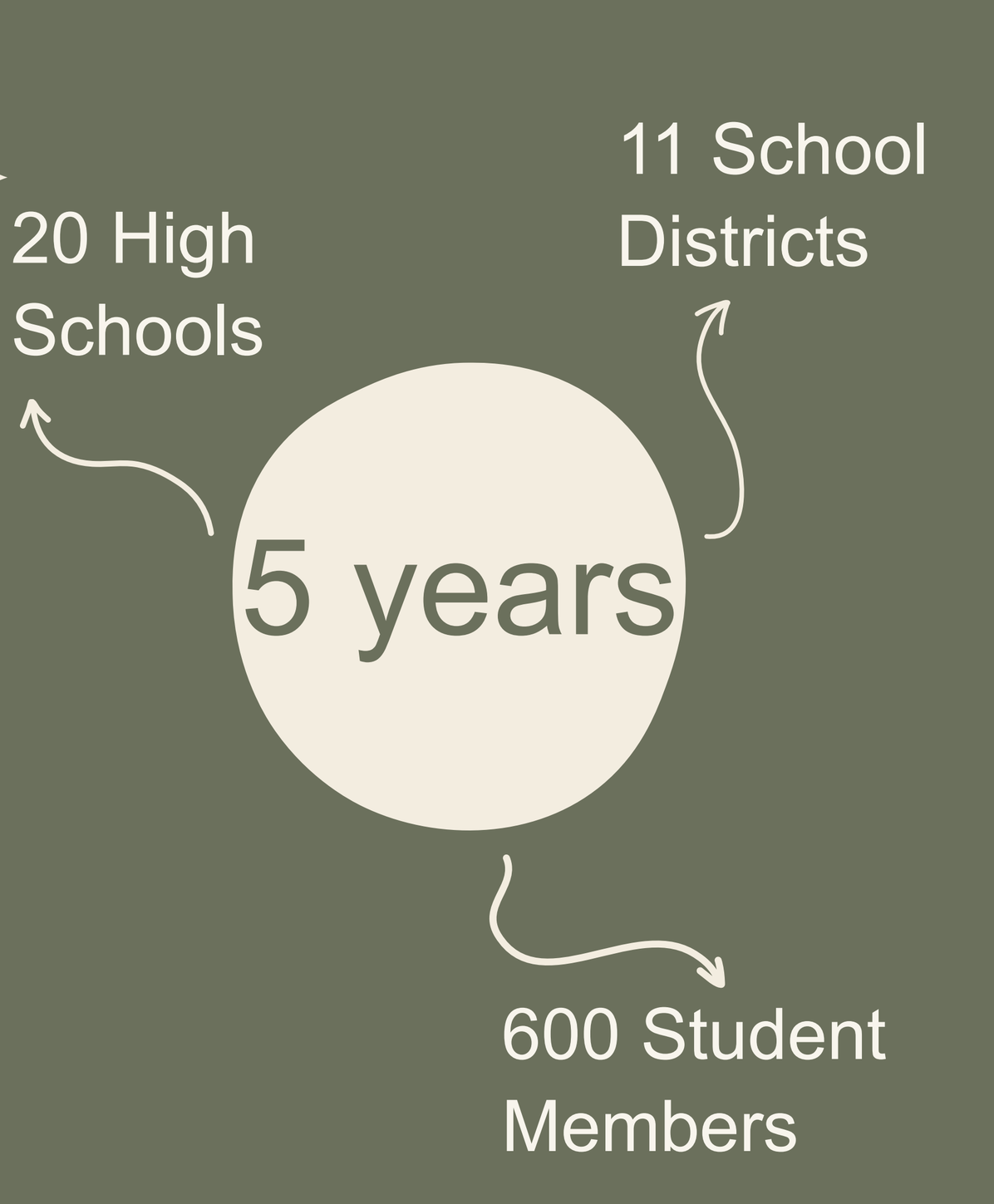
- In 2017, NAMI California hosted a local training
- More than 70 students and staff from seven schools attended.
- By 2019, only two clubs remained officially active.
- Earlier efforts struggled due to:
  - staff turnover,
  - limited follow-up support,
  - lack of ongoing coordination,
  - and no shared countywide structure.

The project asked...”What would happen if student passion was supported by structure?

Growth Over Five Years

Into A Countywide Network

- The number of active NAMI on Campus High School clubs expanded from 2 to 17.
- A total of 20 high schools engaged in the project over the grant period.
- Clubs represented 11 school districts.
- Nearly 600 student leaders participated over the life of the project.
- Interest expanded beyond high school, leading to pilot middle school clubs and a collegiate NAMI on Campus club.



Countywide coordination made local implementation possible

How the Model Worked

The model included:

- Monthly advisor meetings
- Shared mental health themes
- Ready-to-use activity ideas and campaign templates
- NAMI California reporting tools
- District agreements and fiscal supports
- Student-led campaigns and events
- Community partner involvement
- Alignment with Tier One, MTSS, SEL, and protective factors

NCHS Member Survey (Spring 2025): How Confident in Your Ability to Encourage a Friend to Seek Help for Mental Health Concerns?

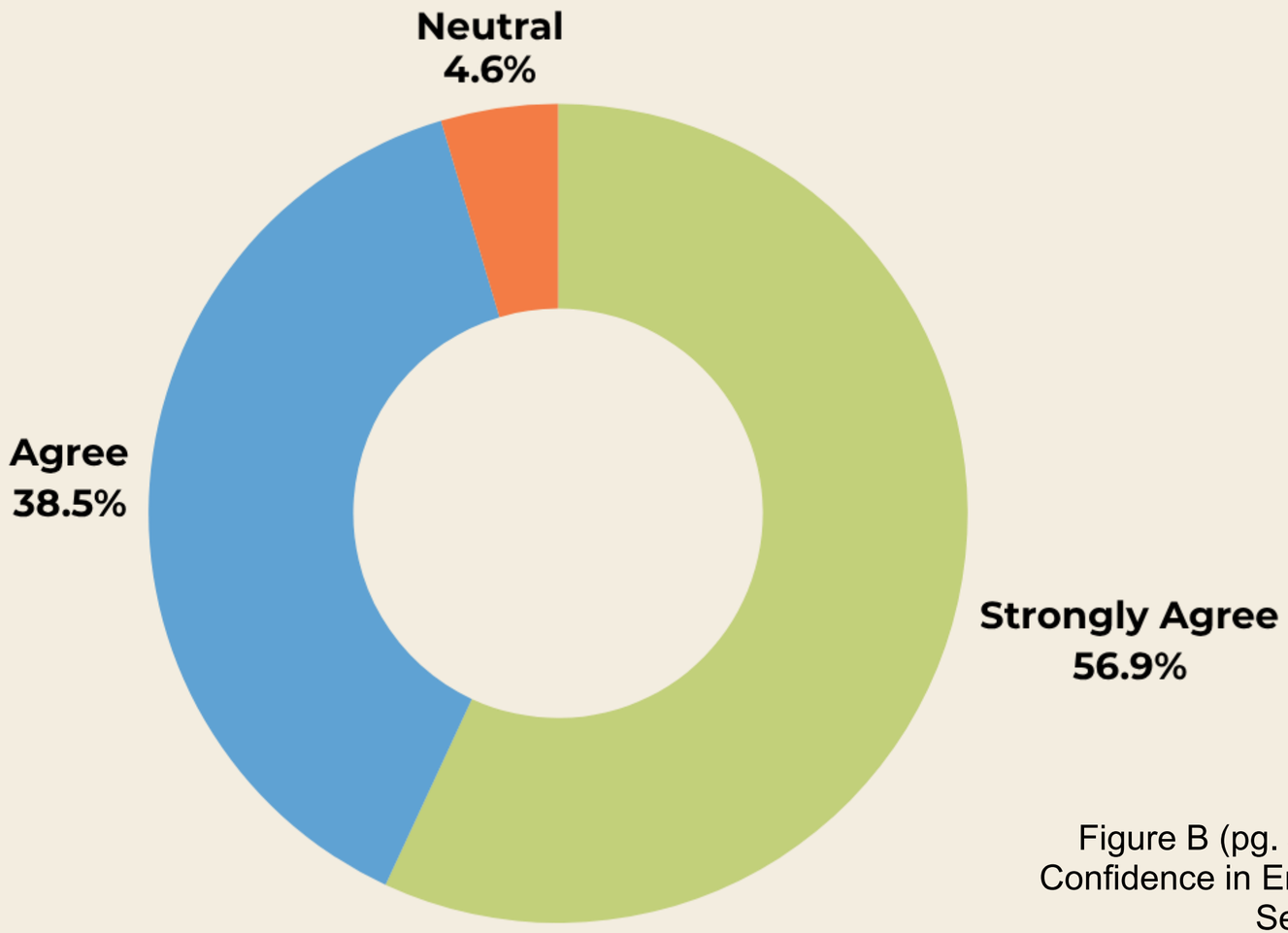


Figure B (pg. 31). NCHS Member Confidence in Encouraging a Friend to Seek Help
(Spring 2025 NCHS Member Survey, n = 65).

Learning Question

#1: Access

Did expanded outreach improve access to mental health support?

What students did:

- Led classroom presentations and lunch-time experiences.
- Created awareness campaigns and peer engagement activities.
- Shared resources in youth-friendly ways.

What we learned:

- Access is not only about services existing.
- Access also depends on whether students know where to go, who to talk to, and whether help feels safe and approachable.

Findings: Access

Peer navigation became an access pathway

A majority of surveyed NCHS members reported confidence encouraging a friend to seek help for mental health concerns.

Reflects an important prevention outcome:

- students recognizing need,
- knowing support exists,
- and feeling able to guide peers toward help.

“A skill I have gained from being in NAMI Club is being able to find help for peers in need.”

Learning Question

#2:Stigma

Did student-led outreach help reduce stigma?

What students did:

- Led awareness campaigns and classroom presentations.
- Hosted peer workshops on anxiety, depression, and coping skills.
- Participated in schoolwide campaigns tied to suicide prevention, helping a friend, and mental health themes.

What we learned:

- Stigma reduction requires repetition.
- Youth voice makes mental health conversations feel more relatable.
- Students can create safer entry points for dialogue.

Findings: Stigma

Students reported greater comfort and confidence

Most NCHS survey respondents agreed or strongly agreed that they felt comfortable talking openly with peers about mental health

A majority also reported confidence identifying signs and symptoms of mental health challenges.

Reflects an important prevention outcome:

- awareness,
- communication,
- advocacy,
- and peer-support skills.

“I have gained confidence speaking about mental health without feeling ashamed, and I have learned how to spread awareness.”

NCHS Member Survey (Spring 2025): How Confident in Your Ability To Talk Openly About Mental Health With Peers?

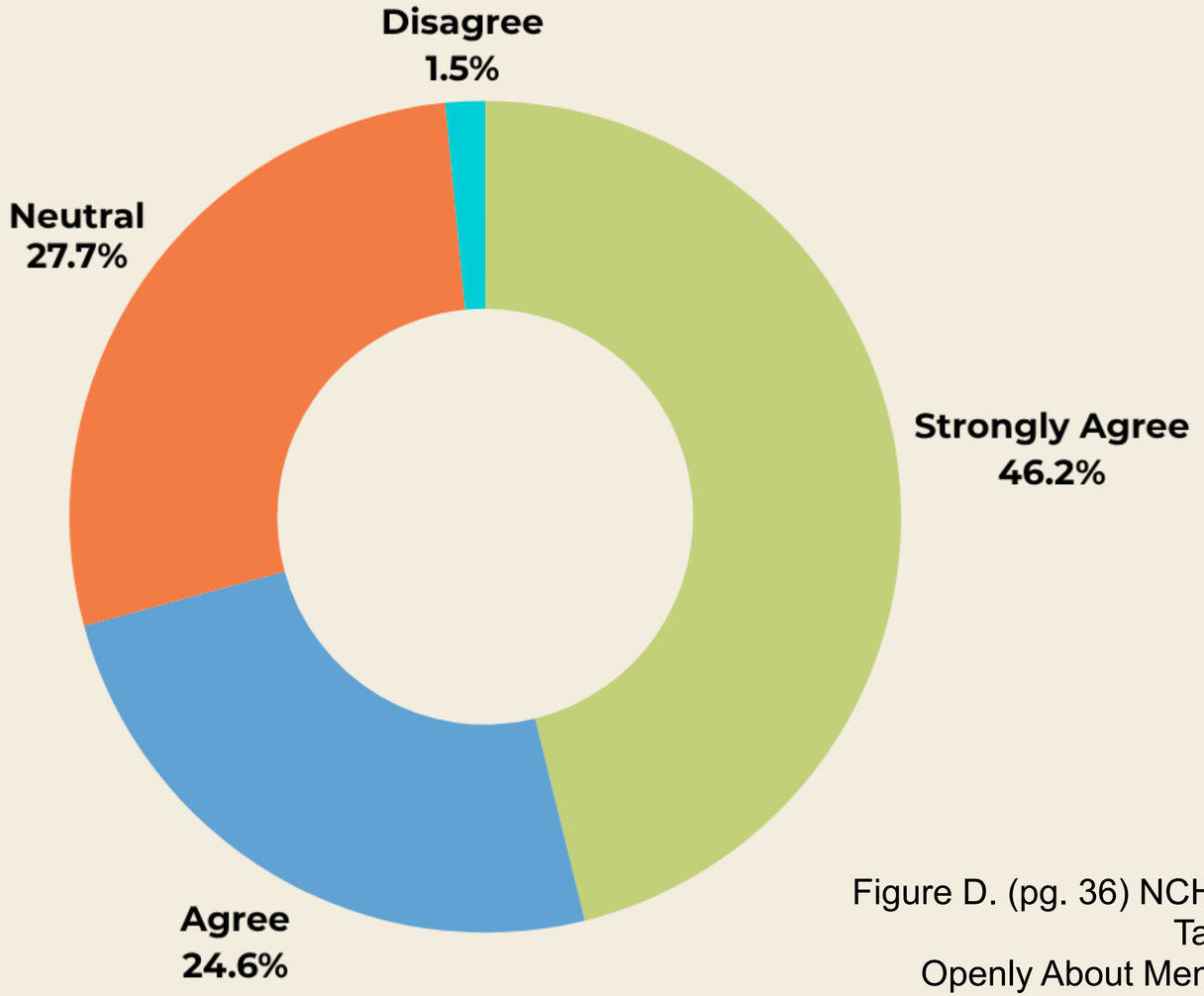


Figure D. (pg. 36) NCHS Member Confidence in Talking
Openly About Mental Health with Peers
(Spring 2025 NCHS Member Survey, n = 65).

NCHS Member Survey (Spring 2025): How Confident in Your Ability To Identify Signs and Symptoms of Mental Health Challenges?

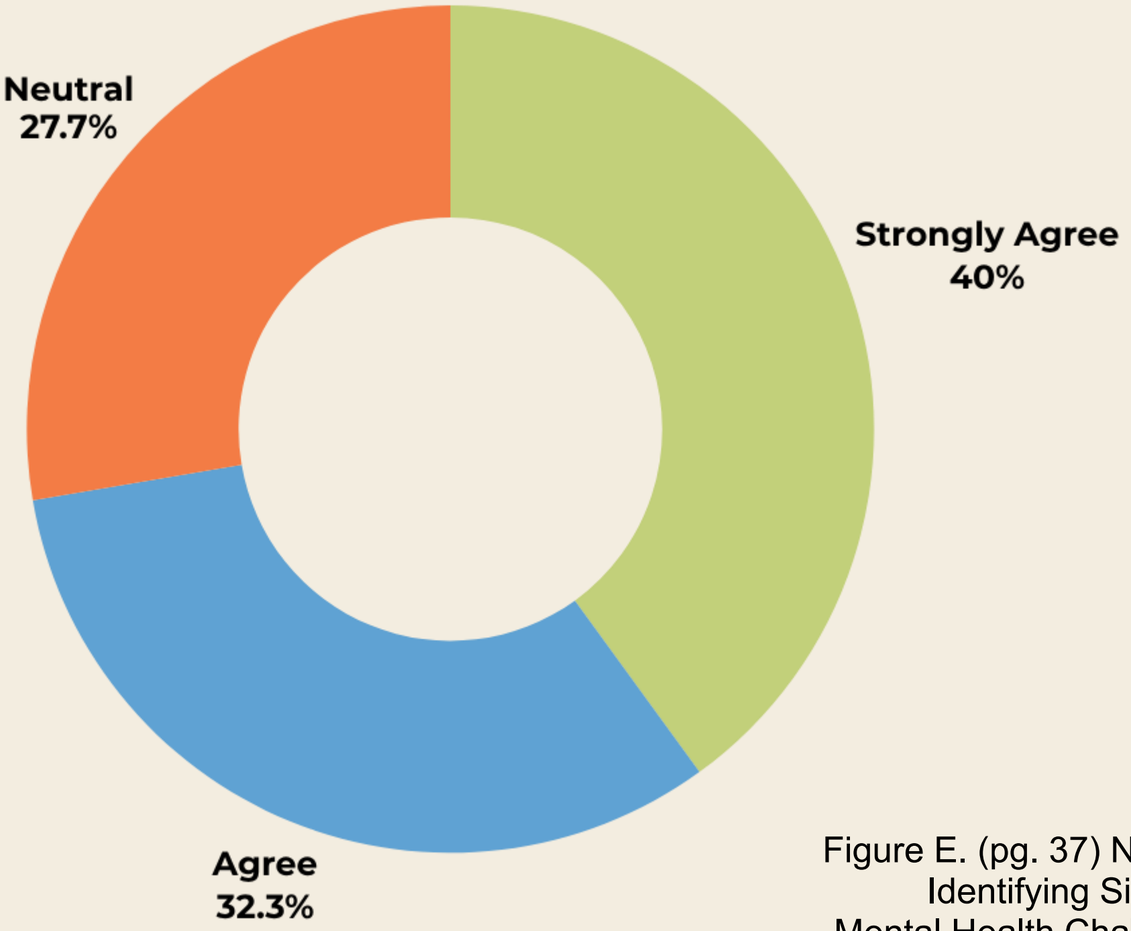


Figure E. (pg. 37) NCHS Member Confidence in Identifying Signs and Symptoms of Mental Health Challenges (Spring 2025 NCHS Member Survey, n = 65).

Findings: Stigma
Protective Factors and School Climate

Conditions became more favorable for connection and help-seeking behaviors

CHKS protective factor trends showed improvement from 2021–23 to 2024–25:

- School Connectedness increased.
- Caring Adult Relationships increased.
- High Expectations increased.
- Meaningful Participation returned to pre-pandemic levels.

When students feel connected and supported, schools become safer places to talk about mental health.

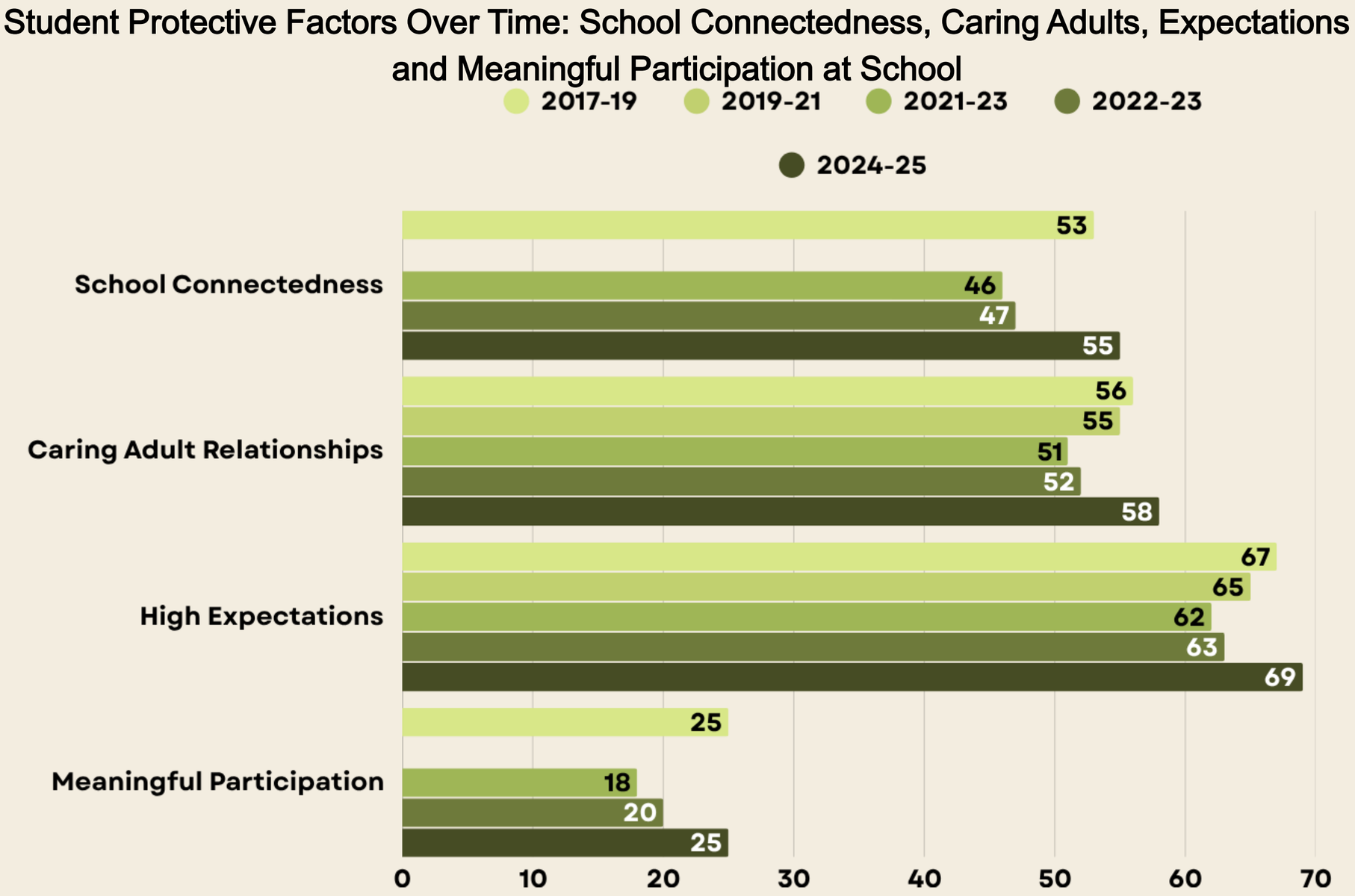


Figure C. Trends in Protective Factors Among 9th and 11th Grade Students (California Healthy Kids Survey, 2017–2025).

Learning Question

#3: Collaboration

Did collaboration increase and sustain outreach?

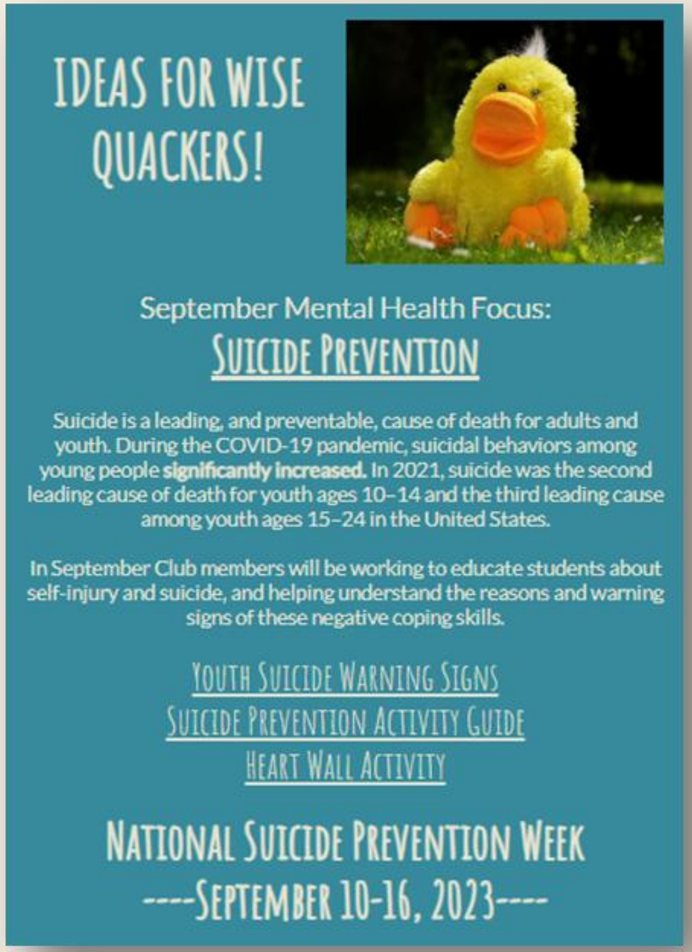
What the project built:

- Regular advisor meetings
- Cross-district communication
- Shared planning tools
- Common monthly themes
- NAMI California reporting alignment
- StanCOE coordination
- BHRS oversight and partnership
- Community partner connections

Collaboration was not just an administrative process.
It became a lived, ongoing presence within school communities.

Robust Website

Inspiring Newsletters



Supportive Advisor Network

Findings: Collaboration

Students experienced the impact of coordinated support

- 76.6% of surveyed NCHS members reported that participation in the club made their school a more supportive environment for mental health.
- Students identified monthly activities, increased awareness, and club belonging as important successes.
- Coordinated support helped schools move from isolated activities to more consistent mental health promotion.

Countywide coordination helped local clubs stay connected, visible, and active.

NCHS Member Survey (Spring 2025):
Has your participation in the NCHS Club made your school a more supportive environment for mental health?

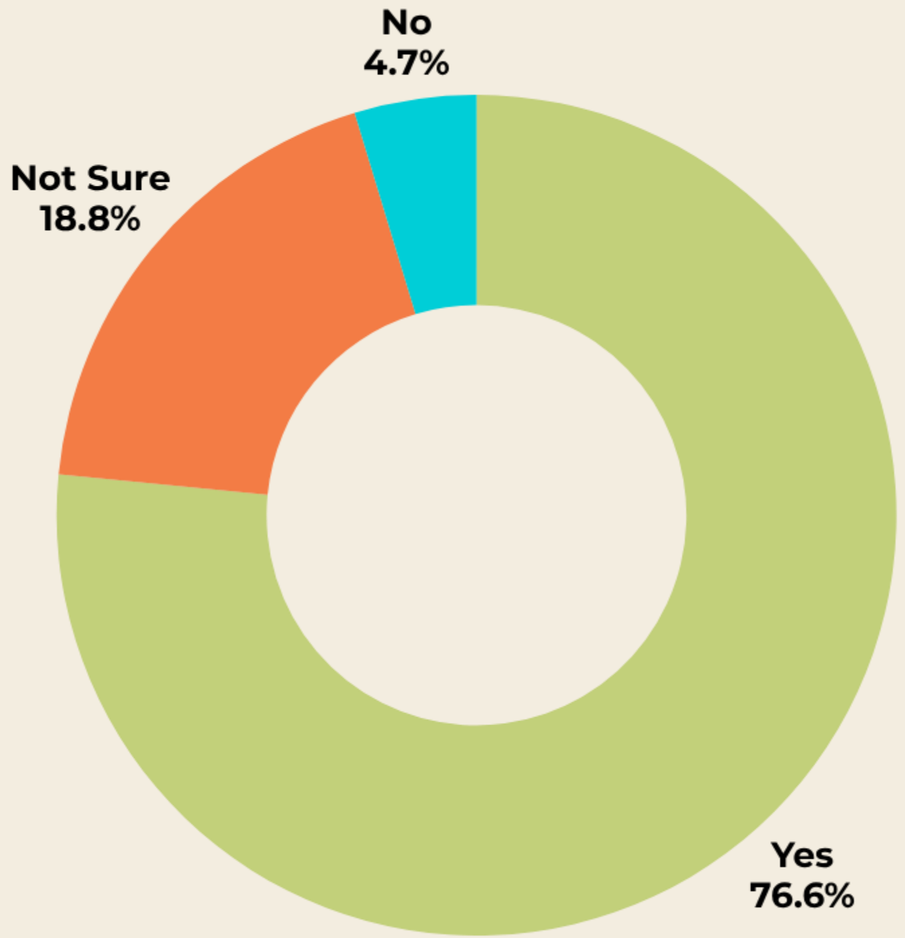


Figure F (pg. 41). Student Perception of School Supportiveness Following NCHS Participation (Spring 2025 NCHS Member Survey, n = 65).

Learning Question

#4: Well-Being

Did participation strengthen protective factors and well-being?

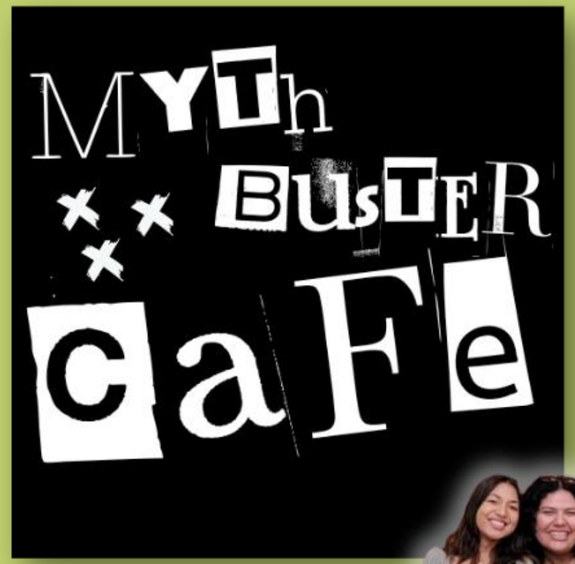
Student-led activities supported well-being through:

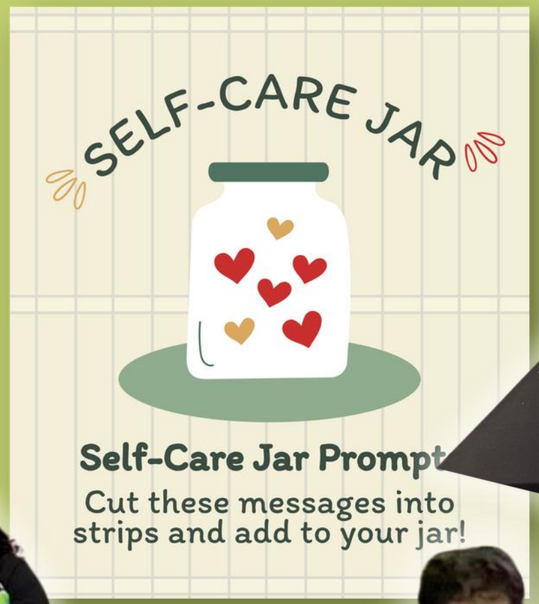
- Suicide prevention scavenger hunts
- “Take a note, leave a note” kindness campaigns
- Mental Health Jeopardy
- Movie nights with mental health themes
- Wellness display cases
- Red Cross blood drives and service projects
- Community outreach and peer support activities

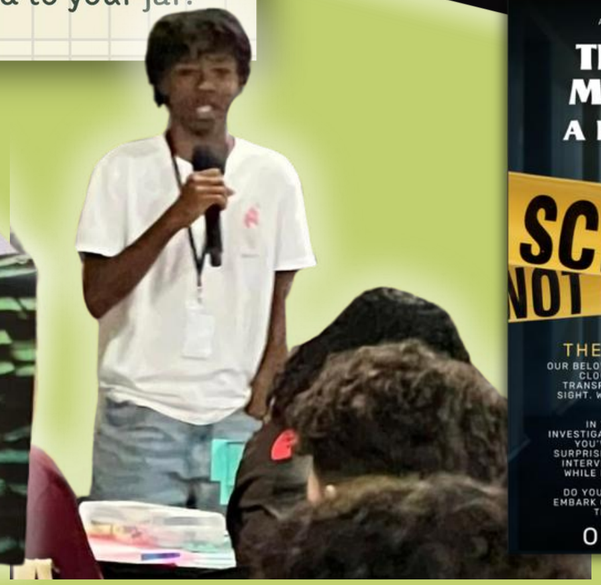
Activities created opportunities for belonging, visibility, contribution, peer interaction, and meaningful participation.

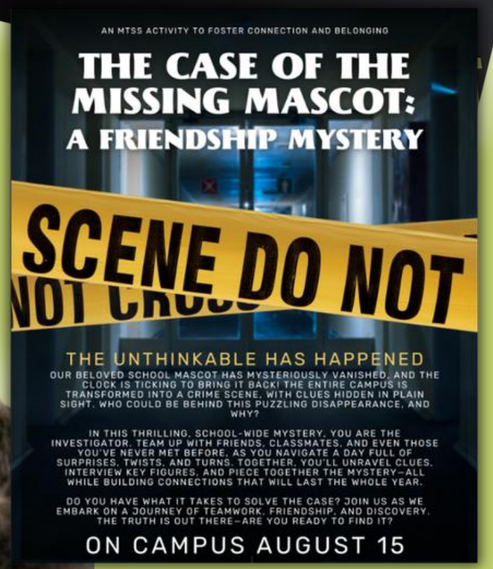
NAMI ON CAMPUS

National Alliance on Mental Illness









What's in Your STRESS-BUSTING TOOLKIT

Stress is your body's way of reacting to challenges or threats. When you're stressed, your body releases chemicals and hormones to help you deal with the situation. While a little stress can help you stay focused, too much stress can be bad for your health.

fidgets, pop-its and squishies
When anxiety strikes, it's common to fidget and squirm, feeling restless, edgy, and downright jumpy. This little gizmo gives your fidgety fingers a playful outlet to soothe your soul, ease tension, and keep your mind focused in overwhelming environments.

breathe with bubbles
Breathe in, chill out! By taking deep, relaxing breaths, you pump up your brain with precious oxygen, which signals your body to dial down and welcome in tranquility. Blowing bubbles encourages deep, rhythmic breathing, which relaxes your mind and body, helping to decrease stress and boost your mood.

sour candy & chocolate
Pucker Up! Next time you feel a panic attack creeping up, pucker up with some sour candy! The tangy taste can jolt your senses and take your mind off of the panic. So, go ahead and treat yourself! Prefer chocolate? great choice! Chocolate can release endorphins, the body's natural "feel-good" chemicals, which can enhance your mood.

color pages
When life's throwing too much your way, it's time to unwind with some coloring. Not just a fun pastime, it's a healthy stress-buster that helps switch off your mind and calm your body, leaving you feeling totally zen. Coloring mandalas helps you concentrate on a simple task, which can be meditative and calming, reducing anxiety and promoting mindfulness.

visual imagery
Looking at a calming image, like a sunset or a puppy, can instantly lift your mood and trigger relaxation responses in your brain, lowering stress levels. A few shapes, hues, and scenes can soothe your brainwaves, boost your spirits, and leave you feeling like a chilled-out superhero.

journal
Writing in a journal allows you to express your thoughts and feelings, helping to process emotions and clear your mind, leading to reduced anxiety and increased life satisfaction. You'll unlock the deepest parts of yourself, revealing fears, hopes, and quirky thoughts... it's a mental escape from reality that helps you chill and shake off stress.

Student Well-being: Findings

Well-being indicators showed improvement

- The California Student Wellness Index showed improvement between the 2021–23 and 2023–25 reporting windows.
- CHKS protective-factor indicators also reflected recovery after pandemic-related disruption
- Student survey responses described growth in:
    - empathy,
    - confidence,
    - communication,
    - self-awareness,
    - and ability to support others.

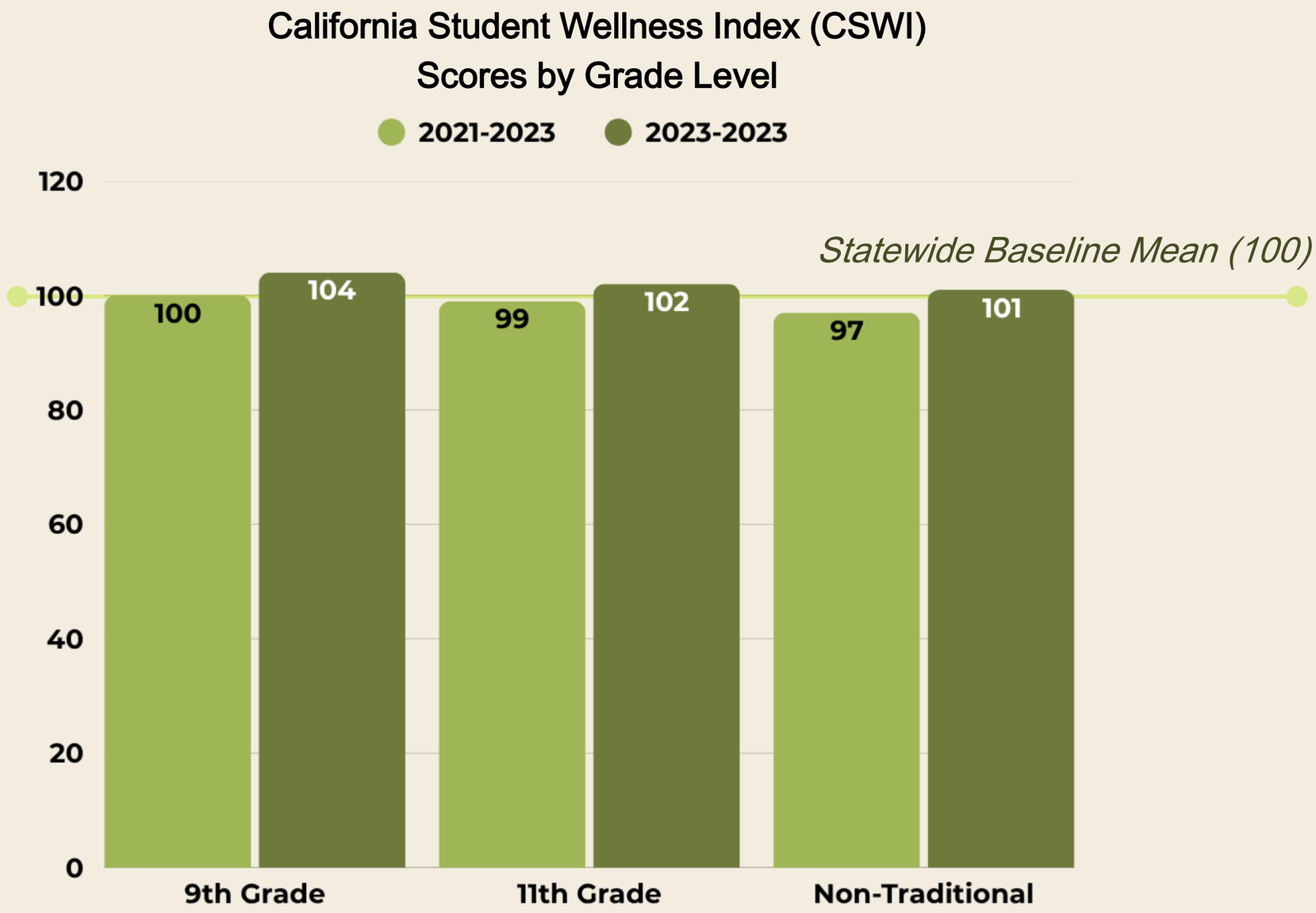


Figure G (pg. 43). Changes in California Student Wellness Index (CSWI) Scores by Grade Level (2021–2023 to 2023–2025).

Findings: Well-Being
Lessons Learned and Sustainability

The project demonstrated a foundation worth sustaining

Key lessons:

- Access must be visible, repeated, and youth-friendly.
- Peers are powerful messengers.
- Advisor support is essential.
- Flexibility is an asset, not a flaw.
- County coordination bridges systems.
- Protective factors give student activities deeper purpose.
- Sustainability requires structure, not enthusiasm alone.

“Sustainability depends on structure, not enthusiasm alone.”

Moving Forward

From Innovation Project to Prevention Strategy

- Sustain NAMI on Campus clubs as Tier One mental health promotion supports.
- Maintain advisor meetings, shared resources, and countywide coordination.
- Continue aligning club activities with CHKS protective factors, SEL, MTSS, and LCAP priorities.
- Braid funding across BHSA, education, and community systems.
- Elevate youth voice in BHSA planning, advisory groups, and local decision-making.

Thank You

Kym Barber
ph: 209-224-4760
email: kym@namistanislaus.org

The work does not conclude with the end of grant funding.

It provides a tested foundation upon which future prevention and early intervention efforts can continue to build.

Stanislaus County Behavioral Health & Recovery Services
Fiscal Year 2024–2025
Prevention & Early Intervention (PEI) Annual Report

What is Prevention & Early Intervention (PEI)?

- PEI programs are funded through the Mental Health Services Act (MHSA)

- Focus on:
  - Early identification of behavioral health needs
  - Prevention of more severe mental health conditions
  - Increasing access to behavioral health services
  - Community-based outreach and engagement

- Programs emphasize:
  - Cultural responsiveness
  - Wellness and recovery
  - Family and community partnership

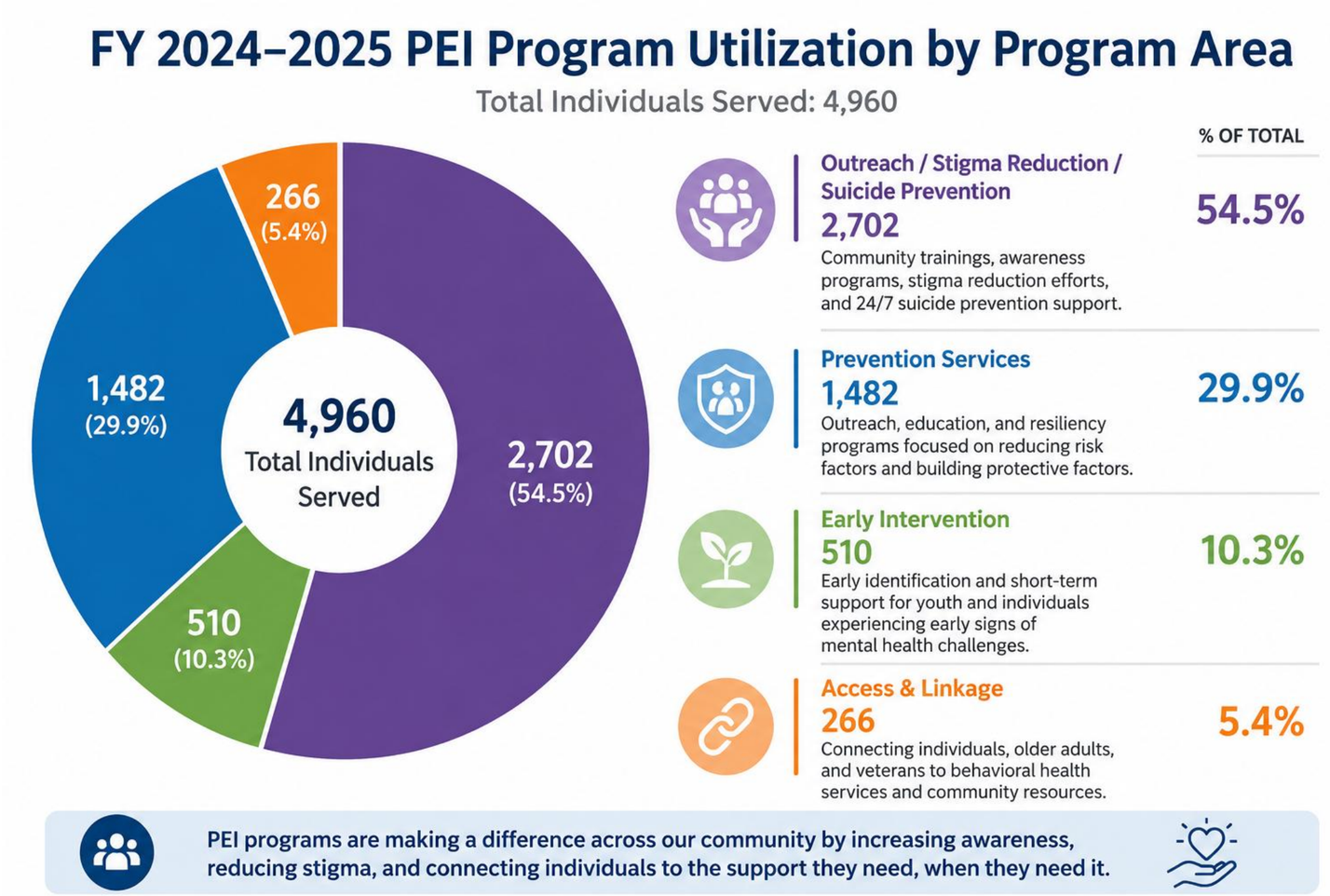
FY 2024–2025 PEI Highlights

- 4,960 individuals served
- $6.89 million invested
- Services delivered countywide through:
  - Community organizations
  - Schools
  - Outreach teams
  - Peer and family support
- Focus on underserved and culturally diverse populations

PEI Program Areas

PEI Services Include:

- Prevention Programs
- Early Intervention Services
- Outreach & Early Recognition
- Stigma Reduction
- Suicide Prevention
- Access & Linkage to Treatment



Prevention Program

Prevention Services
- Programs focused on reducing risk factors and building protective factors.

Programs include:
- Promotores / Community Behavioral Health Outreach Workers
- Youth Assessment Center
- Youth Behavioral Health Outreach

Key Focus Areas:
- Community outreach
- Behavioral health education
- Referrals and navigation
- Youth resilience and wellness

Prevention Outcomes

Prevention Program Results

- 1,482 participants served
- 18,242 services provided
- 823 referrals completed
- 85 community presentations

Key Highlights:

- Strong engagement in Hispanic/Latino communities
- 77% of participants served in Spanish
- Increased awareness of behavioral health resources

Early Intervention Program

Early Intervention (EI)
- Supports individuals experiencing mental health concerns early in onset.

Programs include:
- LIFE Path Early Psychosis Intervention
- School Behavioral Health Integration

Services provided:
- Assessments
- Brief interventions
- School-based support
- Care coordination
- Family support

Early Intervention Outcomes

EI Program Results

- 510 individuals served
- 6,672 clinical services provided
- 3,907 support services provided
- Services delivered in schools and community settings

Key Outcomes:

- Early identification and support
- Increased access to care
- Reduced barriers to behavioral health treatment

Outreach, Stigma Reduction & Suicide Prevention

Community Awareness & Prevention Efforts

Programs and partnerships included:

- Community Cultural Collaboratives
- NAMI education programs
- Mental Health First Aid
- QPR Suicide Prevention Trainings
- Friends Are Good Medicine
- Central Valley Suicide Prevention Hotline

Focus Areas:

- Reducing stigma
- Increasing awareness
- Suicide prevention education
- Community engagement

Suicide Prevention & Training Outcomes

FY 2024–2025 Outcomes

- 2,702 community training participants
- 2,314 hotline calls answered
- 1,441 crisis calls supported
- 14 active rescues conducted
- 9 suicide interventions (“talk downs”)

Key Message:

- Community-based prevention and crisis response continue to play a critical role in behavioral health support.

Access & Linkage Program

Aging & Veteran Services (AVS)

- Focused on connecting older adults and veterans to behavioral health services.

Services included:

- Outreach and engagement
- Referrals and navigation
- Community resource connections
- Home and community-based support

FY 2024–2025 Results:

- 266 participants served
- 1,098 services provided outside the office
- 77 successful referral engagements

Community Impact

PEI Programs Continue to:

- Improve early access to care
- Strengthen community partnerships
- Increase behavioral health awareness
- Reduce stigma related to mental illness
- Support underserved and rural communities
- Connect residents to appropriate services earlier

Transition to the Behavioral Health Services Act (BHSA)

Transition from MHSA to BHSA

Transition to the Behavioral Health Services Act (BHSA)

- Proposition 1 created statewide behavioral health funding changes
- Counties are transitioning programs to align with BHSA requirements
- Focus areas include:
  - Treatment services
  - Housing
  - Integrated care systems

Key Message:

- BHRS continues planning efforts to align services with new state requirements while maintaining community engagement and access.

Looking Ahead

Future Priorities

- Continue supporting underserved populations
- Strengthen partnerships with community organizations
- Expand culturally responsive engagement
- Integrate community health worker models into treatment settings
- Maintain focus on prevention, early access, and wellness


Stanislaus
County
Behavioral Health and
Recovery Services


STANISLAUS COUNTY
BHRS
ACCESS, CRISIS,
& SUPPORT LINE
1-888-376-6246

THANK YOU!