BEHAVIORAL HEALTH TASK FORCE MEETING

CALIFORNIA HEALTH & HUMAN SERVICES AGENCY

March 8, 2022
VIRTUAL MEETING PROTOCOLS

• Meeting is being recorded
• American Sign Language interpretation in pinned video
• Live captioning link provided in chat

BHTF MEMBERS

• Mute/Unmute Functionality for members and policy partners.
• Stay ON MUTE when not speaking and utilize the “raise hand feature” if you have a question or comment.
• Please turn on your camera as you are comfortable
• Use chat for additional conversation

MEMBERS OF THE PUBLIC will be invited to participate during public comments period at the end of the meeting
WELCOME & INTRODUCTIONS

MARK GHALY, SECRETARY, CalHHS

STEPHANIE WELCH, DEPUTY SECRETARY OF BEHAVIORAL HEALTH, CalHHS
MEMBER INTRODUCTIONS

Dr. Devika Bhushan, Acting Surgeon General of California
California Office of the Surgeon General

Katherine Lucero, Director
CalHHS Office of Youth and Community Restoration

Tony Thurmond, State Superintendent
California Department of Education

Christine Olmstead, Associate Superintendent and Interim Chief Academic Officer
Orange County Department of Education

Karen Larsen, Board Chair
Steinberg Institute

Toni Trigueiro, Legislative Advocate
California Teachers Association (CTA)
TASK FORCE MEETING AGENDA

1. Welcome & Introductions
2. The Behavioral Health Task Force (BHTF) Assessment Process and Charter
3. Short Break
4. Children and Youth Behavioral Health Initiative (CYBHI) General Update
5. Bringing Youth Voices into BHTF Work: CYBHI Youth, Children, and Family Engagement Approaches and Strategy
6. CYBHI Development of Outcomes
7. Public Comment
8. Lunch Break
9. CYBHI Outcomes – BHTF Breakout Discussions
10. Short Break
11. CYBHI Outcomes – Report Out on BHTF Discussions
12. Closing – Reflections and Next Steps
BHTF ASSESSMENT PROCESS & CHARTER

ORIT KALMAN, SENIOR FACILITATOR, CSUS
**ASSESSMENT PROCESS**

Inform the development of a Charter to refocus and clarify the goals and work of the BHTF.

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<th>CalHHS Department Directors</th>
<th>BHTF Members</th>
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<td>Interviews</td>
<td>Survey</td>
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**Zow can the BHTF best link with and fit the work of the Agence and its Departments?**

- CalHHS Guiding principles
- Intra-agency coordination/collaboration
- Engagement with BHTF

**Zow does the BHTF work to(ether and)?**

- The culture of the BHTF
- Connection among members
- Contributions of the members to ensure that the BHTF provides relevant input
1. **Purpose and scope**: What is our shared agenda as a Task Force?

2. **Guiding Principles**: What is the culture and approach to our shared work?

3. **Membership**: Who’s voice needs to be at the table?

4. **Engagement**: How do we connect and leverage the different spheres that members engage in?

5. **Communication**: How do we ensure transparent and inclusive environment that promotes equity and learning?

6. **Evaluation process**: How do we assess our impact and success?
BHTF MEMBERSHIP (63 MEMBERS)

CalHHS Departments and Offices (13 members)

State and Legislative Partners (13 members)

Non-Governmental Organizations (37 members)

Representing the following perspectives:

Public Participation
Additional Expertise Represented:

- Large private/public purchaser perspective
- Treatment - psychiatrist
- Latinx Community
- Intersectionality
Survey participants identified numerous organizations and communities that they are actively connected to as well as State convened taskforces and advisory committees.
CalHHS has convened the BHTF to inform its work on behavioral health issues across the state.

The diverse BHTF memberships is positioned well to elucidate connections among wide ranging perspectives and interests related to behavioral health needs and care, validate the framing of behavioral health issues in the State, and advance innovative and coordinated work to drive progress.

Goal 1
*Ground truth the State’s behavioral health agenda

Goal 2
Uplift constituency voices

Goal 3
Promote learning to expand collective understanding of behavioral health issues facing the State

Goal 4
Advance approaches that are creative, responsive, and coordinated

*Ground truth – To confirm or validate State policy directions and impacts with direct experience, knowledge, and observations in affected communities.
BHTF GUIDING PRINCIPLES

• FOCUS ON EQUITY
  • Bring an equity lens to all work
  • Access, Accountability, Inclusion, Diversity, Equity

• ACTIVELY LISTEN
  • Community-wide perspective in addressing Behavioral Healthcare needs: Community members, Families, Youth-led, Youth + Adult Partnership
  • BHTF is an opportunity for government to listen to the unique perspectives, needs, and experiences of different communities before making decisions

• USE DATA TO DRIVE ACTION
  • Identify opportunities for the BHTF to help identify and fill data gaps

• SEE THE WHOLE PERSON
  • Integrated care at all levels of the Behavioral Healthcare system
  • Coordinate systems to meet an individual’s complete needs: Unity, not uniformity, of systems
BHTF GUIDING PRINCIPLES

• PUT THE PERSON BACK IN PERSON-CENTERED
  • Culturally relevant and responsive
  • Focus on *who we are serving*: the end goal is not the services a person is receiving but how the person is able to live their life

• CULTIVATE A CULTURE OF INNOVATION
  • Remove barriers
  • The broad reach and membership of the BHTF creates opportunities for creativity and fresh perspectives

• DELIVER ON OUTCOMES
  • Work collectively towards revolutionary change – the whole is greater than the sum of its parts

• WORK TO REDUCE STIGMA
  • Decrease BH Stigma, especially from marginalized populations who face increased barriers to accessing care
COMMITMENT TO ENGAGEMENT

1. Stay focused on the agenda
2. Anchor discussions in a person-centered approach
3. Strive to examine and act in an equitable and inclusive manner
4. Think innovatively and welcome new ideas
5. Involve all BHTF members in discussions
6. Uphold a respectful dialogue
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- Critically examine our sense of what is “objective”
- Focus on systems and outcomes
- Be aware of and explore intersectionality
- Practice Oops and Ouch to support a respectful learning space
  - If you realize you said something harmful, acknowledge it and try again
  - If someone else has said something harmful, identify it so it can be discussed further
- Acknowledge and welcome differing perspectives
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- It is ok to voice a thought that is not fully formed
- Focus on interests, not positions
  - Positions: concrete conditions, demands, ‘lines in the sand’
  - Interests: underlying motivations that ‘drive’ one’s opinions – needs, aspirations, concerns
- Promote continual learning, not what we already know
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- Honor time and share the airtime – practice stepping up and stepping back
- Acknowledge and welcome differing perspectives; silence is not an agreement
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6. Uphold a respectful dialogue

- Critique the point, not the person; disagree openly without being “disagreeable”
- Use common conversational courtesy; assume good intent
EQUITY LENS IN PRACTICE

BHTF INPUT: BRING AN EQUITY LENS TO EVERYTHING THAT THE BHTF ENGAGES ON

• Advance the Guiding Principles and commitment to engagement
• Focus on how to disrupt disparities
• Think about access and outcomes of care
• Ensure strategies being implemented work for those most vulnerable in the state

BHTF PROCESS: PROVIDE A SAFE AND WELCOMING SPACE THAT PROMOTES EQUITY

Ground our discussions in the voices of communities that are disproportionately impacted
• Incorporate dedicated time to hear from disproportionately impacted communities to center and ground all our work in these experiences, impacts, and needs
• Provide opportunities for all to share through small group and one-on-one conversations
• Create space to hear from BHTF members about the process and discuss any concerns that may arise
COMMITMENT TO ENGAGEMENT

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FOR DISCUSSION:
How can we ensure that the commitments reflect and support all members’ equitable and full participation in the BHTF?
PROCESS, ENGAGEMENT, ACCESSIBILITY, AND COMMUNICATION

KEY ELEMENTS OF THE BHTF QUARTERLY MEETINGS:

• Standing agenda item for youth perspective (and others)
• Presentations on key topics
• BHTF discussions and input (small group discussions, live polls, chat)
• Public participation during small group discussions and comment period

MEETING FOLLOW-UP:

• Meeting summaries and key input themes
• Update on topics discussed as appropriate

OTHER OPPORTUNITIES FOR BHTF ENGAGEMENT:

• Topic specific work groups (To be developed further)
• Asynchronous work (document review, surveys)
• Engage with members through interviews and 1:1 conversations

ACCESSIBILITY ACCOMMODATIONS

• American Sign Language interpretation and closed captioning
• Additional accommodations can be provided upon request
• Provide meeting materials with discussion questions ahead of meetings to help members prepare for discussion
EVALUATION AND ACCOUNTABILITY

ONGOING EVALUATION OF THE BHTF PROCESS

• How well are we keeping our commitments to engagement?
• How well does the BHTF meeting agenda (presentations/discussions) reflect and help advance the BHTF goals?
• Do BHTF members feel that they are able to express their views and fully contribute to the BHTF discussions?

PERIODIC EVALUATION OF BHTF IMPACTS

• Do you feel that your participation in the BHTF is making a difference?
• How effective is the BHTF in advancing the State’s work to address behavioral health needs?
• To what extent are behavioral health services becoming accessible and equitable?
DISCUSSION

What **questions** should we be asking to evaluate the effectiveness and relevance of the BHTF?

**PROCESS** Questions to evaluate how effective the BHTF is in its collective work

**IMPACT** Questions to evaluate our impact and progress in addressing our goals

- **Goal 1**
  - Ground truth the State’s behavioral health agenda

- **Goal 2**
  - Uplift constituency voices

- **Goal 3**
  - Promote learning to expand collective understanding of behavioral health issues facing the State

- **Goal 4**
  - Advance approaches that are creative, responsive, and coordinated
NEXT STEPS TO FINALIZE THE CHARTER

• BHTF members are invited to continue to provide input through BHTF Member Survey (See survey link in chat) – due March 22\textsuperscript{nd}.

• The facilitation team will finalize the Charter
  • Identify 2022 focus areas for discussion and workgroups
  • Finalize commitments to engagement
  • Finalize evaluation process and questions

• Share the final charter with members to get their commitment ahead of the next BHTF meeting
CHILDREN AND YOUTH BEHAVIORAL HEALTH INITIATIVE – GENERAL UPDATE

MELISSA STAFFORD JONES, DIRECTOR, CYBHI
Overview of the Children and Youth Behavioral Health Initiative

The goal of the Children and Youth Behavioral Health Initiative is to **reimagine** the way behavioral health support is provided to all children and youth in California, by bringing together support systems to create an ecosystem that fosters social and emotional well-being and addresses the behavioral health challenges facing children and youth.

The initiative will take a **whole system approach** by creating cross-system partnerships – involving stakeholders from the various systems that support children and youth behavioral health – to ensure that the reimagined ecosystem is children and youth centered and equity focused.

Source: California Health and Human Services Agency
Young people have so many ideas. Allow them the room to dream and have that ambition. Let’s try… Even if it seems impossible.

1. Quote captured during conversation with youth during the CYBHI cross-department meeting convened on Friday, February 4, 2022. Source: California Health and Human Services Agency, cross-department meeting convened on Friday, February 4, 2022.
Phases of the Children and Youth Behavioral Health Initiative

What is our vision?

1. Set goals and stand up infrastructure
   Setting overall vision, initiative-level goals, and standing up performance infrastructure

How do we get there?

2. Develop detailed plans & design the future state
   Developing a robust and detailed plan, with clear accountability for design and delivery; sourcing ideas and designing the future state

Let’s make it happen!

3. Deliver and accelerate impact
   Launching a full-scale effort to drive, accelerate, and sustain impact

- Modules / activities may be in different phases based on when they started, their relative priority, etc.
- Phases will be iterative, ensuring feedback and learnings are continuously incorporated

Source: Reviews of large-scale transformation efforts in other states / countries; California Health and Human Services Agency
Current focus areas for the CYBHI

**Goal setting:** Align on aspiration and define initiative-level outcomes

**Governance:** Define and operationalize governance model; resource and onboard CYBHI teams; establish methodology and tools for progress tracking and coordination

**Stakeholder engagement:** Create initiative-wide and workstream-specific stakeholder engagement plans, launch initial stakeholder engagement activities, and establish processes to coordinate stakeholder engagement

**Communications:** Develop communication plan and launch initiative-wide communication (e.g., regular stakeholder updates)

**Capability building and way of working:** Identify training and capability building needs across teams involved in CYBHI planning and implementation; foster a new way of working

Source: California Health and Human Services Agency
CYBHI stakeholder engagement plan includes initiative-wide and workstream focus areas

Initiative-wide stakeholder engagement, including activating and expanding children, youth, and family engagement network, convening cross-sector workgroups on system-level topics, conducting community listening sessions

Workstream-specific stakeholder engagement, including engaging stakeholders through established channels and creating workstream-specific forums and channels as needed

Coordinate and build capabilities across stakeholder engagement activities

Source: California Health and Human Services
Focus areas for initiative-wide and workstream-specific stakeholder engagement

Initiative-wide stakeholder engagement

Focus on topics that require initiative-wide alignment (e.g., outcomes) and have system-level implications (e.g., equity and prevention)

Focus on stakeholders who are engaged across multiple topics and workstreams, especially where new forums and channels are needed (e.g., children youth and families)

Workstream-specific stakeholder engagement

Focus on topics that are within the scope of specific workstreams (e.g., workstream-specific need assessment, solution design, expert input, user testing)

Focus on a broad range of stakeholders and engagement models, based on workstream-specific needs and stakeholder engagement plans

Coordinate and build capabilities across stakeholder engagement activities

Source: California Health and Human Services
CalHHS focus areas related to stakeholder engagement (1/2)

Near-term CalHHS focus areas related to stakeholder engagement:

Initial initiative-level stakeholder engagement efforts are focused on areas that span across workstreams and address near-term needs. Examples of initial focus areas include:

- **Activate children, youth, and family engagement network** to provide engagement channels and forums for initiative-wide and workstream activities
- **Conduct initiative kickoff webinar** to increase awareness of the initiative, aspiration, workstreams, and how stakeholders will be able to engage with the work
- **Engage stakeholders in developing overall CYBHI outcomes** to define success at the initiative level and inform workstream-specific priorities

Source: California Health and Human Services Agency
CalHHS focus areas related to stakeholder engagement (2/2)

Initiative-wide stakeholder engagement going forward:

Going forward, CalHHS will focus on initiative-wide stakeholder engagement as well as support for ongoing stakeholder engagement activities across workstreams, including:

- **Expand children, youth, and family engagement network, establish formalized roles and a range of opportunities** for children, youth and families to be integrated into initiative ongoing activities

- **Form and support cross-sector workgroups to address system-wide topics and opportunities for redesign** (e.g., equity, prevention)

- **Host periodic listening sessions** to get stakeholder input on initiative progress and direction

Source: California Health and Human Services Agency
Additional sources of information or updates on the CYBHI’s progress

- **Children and Youth Behavioral Health Initiative Stakeholder Update**, published February 7, 2022
  Provides an outline of the scope of the initiative, shares highlights of current activities in the early planning phase, and includes a chart of key milestones over the initiative’s five-year horizon

- **Initiative kickoff webinar**, tentatively March 2022
  Single webinar focused on disseminating information to stakeholders and the public, to be co-facilitated by CalHHS and the department teams

Source: California Health and Human Services Agency
At this point in time, what additional questions do you have about the CYBHI’s progress?

Source: California Health and Human Services Agency
BRINGING YOUTH VOICES INTO BHTF WORK:
CHILDREN, YOUTH, AND FAMILY ENGAGEMENT FOR CYBHI

MELISSA STAFFORD JONES, DIRECTOR, CYBHI
Sources of insight: expert interviews

CalHHS interviewed youth engagement experts to learn from experience and ongoing efforts focused on engaging children, youth, and families.

Topics covered during the interviews included:
- Guiding principles of children, youth, and family engagement
- Approaches to engaging wide/diverse populations
- Perspective across behavioral health continuum
- Design choices for CYBHI
- Capabilities required

Experts representing the following organizations have been interviewed as of February 17:

Source: California Health and Human Services Agency
Emerging themes from expert interviews

**Partner with existing networks of youth organizations** to tap into experience, expertise, and established channels of reaching youth

**Empower youth** by offering formalized roles (e.g., facilitator, researcher), avoiding complex or sector-specific language, and providing compensation for involvement

**Prepare facilitators (including adult facilitators)** by providing trainings to promote effective youth-adult partnerships and a strength-based engagement approach, and to avoid tokenism and adultism

**Establish a variety of engagement options, from one-time feedback to co-creation and formalized roles**

**Ensure broad and diverse children, youth, and family participation** (including hard-to-reach or traditionally underserved populations) by ensuring accessibility in format and language (e.g., translations, avoid jargon) and cultural sensitivity

**Engage youth in both age/identity-based groups** conducive to trust-based, open conversations and **heterogenous groups** (e.g., intergenerational) conducive to sharing of diverse perspectives on system-level topics

Source: Expert interviews
Approach to children, youth, and family engagement

Approach under consideration for engaging children, youth, and family stakeholders:

- Identify partner(s) to build on and activate existing networks and trusted relationships
- Provide broad range of forums (youth-facilitated, adult-led, intergenerational) and engagement options (from one-time inputs to formalized roles)

Role of children, youth, and family network partner(s):

- **Build and coordinate a broad state-wide network** engaging children, youth, and families, with trusted relationships and equitable engagement
- **Ensure quality and consistency of engagement** throughout the network, including supporting comprehensive and detailed synthesis of findings that represent a broad set of perspectives and provide actionable insights
- **Co-design solutions and approaches** with CYBHI and department teams to ensure that the approach, topics, and outputs achieve defined objectives and meaningful engagement
- **Develop capabilities** for CYBHI teams to ensure that adult partners and facilitators use trauma-informed approaches and engage in ways that promote effective youth-adult partnerships

Once initial children, youth, and family network and partnership are established, CalHHS will focus on expanding the children, youth, and family engagement network and establishing formalized roles (e.g., youth council) and a range of opportunities for children, youth and families to be integrated into ongoing activities

Source: California Health and Human Services Agency
Question for discussion

How do the themes that emerged from the expert interviews show up in your work?

OR

In your work related to these themes, what have you found to be successful and/or challenging?

Source: California Health and Human Services Agency
DEVELOPMENT OF CYBHI OUTCOMES

MELISSA STAFFORD JONES, DIRECTOR, CYBHI
Overview of the aspiration and initiative-level outcomes for the CYBHI

Objective

- **Cultivate commitment** from all stakeholders and teams involved in the initiative
- **Enable clear communication and system-level alignment** across multiple, cross-sector stakeholders
- **Ensure alignment** across department and workstream efforts

Source: California Health and Human Services Agency, CYBHI department teams

CYBHI aspiration

CYBHI initiative-level outcomes

- **Facilitate strategic decision-making and prioritization** of efforts
- **Inform workstream-specific efforts**, ensuring alignment across departments and workstreams
### Approach for developing CYBHI outcomes

<table>
<thead>
<tr>
<th>Definition</th>
<th>CYBHI Aspiration</th>
<th>Initiative-level outcomes</th>
<th>Workstream-level outcomes and activities</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Desired future state the CYBHI seeks to achieve</td>
<td>Concrete impact sought for CYBHI stakeholders</td>
<td>Cascading priorities for workstreams¹</td>
</tr>
</tbody>
</table>

| Example             | Reimagine behavioral health and emotional wellbeing for children and youth in California | Eliminate stigma related to behavioral health and normalize help-seeking and wellness as part of everyday life | Raise behavioral health literacy through public awareness and education campaign |

¹ Specific metrics to be defined

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1. To be co-developed by CalHHS and department teams in future phase

Source: California Health and Human Services Agency
### Approach and timeline for developing CYBHI outcomes

Inputs from CalHHS, CYBHI department teams, and various other stakeholders will be used to co-develop and refine the CYBHI aspiration and initiative-level outcomes.

<table>
<thead>
<tr>
<th><strong>February 2022 (completed)</strong></th>
<th><strong>March 2022</strong></th>
<th><strong>March-May 2022</strong></th>
<th><strong>March-May 2022</strong></th>
<th><strong>Spring-Summer 2022</strong></th>
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<tr>
<td>CYBHI department teams</td>
<td>Behavioral Health Task Force</td>
<td>Youth and Parent Focus Groups</td>
<td>Existing Stakeholder Forums</td>
<td>Community Listening Sessions</td>
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<tr>
<td>Joint work with CalHHS and the CYBHI department teams to identify emerging outcomes</td>
<td>Gather input and feedback on the CYBHI aspiration and initiative-level outcomes from members of the Behavioral Health Task Force</td>
<td>Convene focus groups with youth and parents to gather inputs related to initiative-level outcomes for CYBHI</td>
<td>Discuss outcomes in existing groups and forums to gather expert and cross-sector input</td>
<td>Host listening sessions to engage stakeholders and the broader community on CYBHI outcome development</td>
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Source: California Health and Human Services Agency
Discussion: Current draft of the CYBHI aspiration

Reimagine behavioral health and emotional wellbeing for ALL children, youth, and families in California by delivering equitable, appropriate, timely, and accessible mental health and substance use services and supports from prevention to treatment to recovery in an innovative, up-stream focused, ecosystem

1. Inputs from CYBHI department teams to be incorporated

Source: California Health and Human Services Agency
Draft of potential CYBHI outcomes – based on initial inputs

Eliminate stigma related to behavioral health conditions and normalize help-seeking and wellness as part of everyday life

Embed preventive interventions and supports throughout the ecosystem to decrease downstream needs

Improve accessibility of services and supports, across the continuum of care, by building capacity and expanding the breadth of services

Equitably improve behavioral health outcomes across the State, addressing the needs of at-risk and underserved communities

Improve overall health, social outcomes, and emotional wellbeing for children and youth

Ensure that positive outcomes are sustainable in the short- and long-term

Source: California Health and Human Services Agency, CYBHI cross-department workshop on February 4, 2022
PUBLIC COMMENT

Is this set of outcomes complete to fully realize the aspiration of the CYBHI?
Lunch Break

Instructions for afternoon working session:

Please consider joining the afternoon Zoom meeting now to help us start on time. Zoom meeting link is provided on the Meeting Agenda and can be found on the BHTF website.
CYBHI OUTCOMES – BREAKOUT DISCUSSIONS
BREAKOUT DISCUSSION PROCESS

PURPOSE:

✔ Connect with other members of the BHTF
✔ Inform the development of the CYBHI outcomes

TIMING: 50 minutes in breakout discussion – introductions, discuss questions, prepare for report out

GROUP ASSIGNMENTS are random and are intended to provide opportunities for cross pollination of ideas.

QUESTIONS FOR DISCUSSION:

1. As part of introductions: Pick one word in the CYBHI aspiration statement and share how it is meaningful to you.

2. Discussion: Is this set of outcomes complete to fully realize the aspiration?
   • Do these outcomes appropriately reflect your hopes?
   • Are there additional outcomes that should be included?

3. What would these outcomes look like in your community and how do they relate to your work?

Each group will need a notetaker: Please see the Chat Panel for links to each group’s breakout templates.
BREAKOUT DISCUSSION AGENDA

[1:05pm] Logistics. Before starting the discussion, please identify:
   • Timekeeper
   • Facilitator to ensure that everyone has an opportunity to contribute to the conversation
   • Notetaker and reporter on behalf of the group when we reconvene

[1:07] Introductions. Please take few moments to introduce yourselves by sharing:
   • Your name, affiliation, and perspective that you represent
   • Pick one word in the CYBHI aspiration statement and share how it is meaningful to you.

[1:15pm] Discussion. Please address the following two key questions:
   • Is this set of objectives complete to fully realize the Aspiration? Do these outcomes appropriately reflect your hopes? Are there additional outcomes that should be included?
   • What would these outcomes look like in your community and how do they relate to your work?

[1:45pm] Closing. Consider what you heard from other participants in the group
   • What are two key themes from your discussion that the group wants to report out on?
   • Each group will have 3 minutes to report out on the discussion.

[1:55pm] Transition. Short break as we transition out of breakouts for the report out
SHORT BREAK
Draft Outcomes
1. Eliminate stigma related to behavioral health conditions and normalize help-seeking and wellness
2. Embed preventive interventions and supports throughout the ecosystem
3. Improve accessibility of services and supports across the continuum of care
4. Equitably improve behavioral health outcomes across the State
5. Improve overall health, social outcomes, and emotional wellbeing for children and youth
6. Ensure that positive outcomes are sustainable

Report out: Please share two key takeaways from your discussion to inform the development of the CYBHI outcomes.
CLOSING – REFLECTIONS AND NEXT STEPS

STEPHANIE WELCH, DEPUTY SECRETARY OF BEHAVIORAL HEALTH, CaIHHS