



THREADS

Synthesis Report

**A Collaborative Behavioral Health
Bridge Housing Symposium**

February 2026

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This report was prepared in collaboration by:





Executive Summary

The Transforming Housing, Resources, Engagement, Advocacy, Development, and Solutions (THREADS) 2025 symposium brought together leaders, practitioners, and people with lived experience across behavioral health, housing, homelessness services, and more. The goal of THREADS 2025 was to explore how California can advance cross-sector systems transformation and improve outcomes for the people these systems serve, specifically individuals experiencing homelessness with serious mental illness (SMI) and/or substance use disorders (SUD). The event highlighted both the limits of current structures and the conditions where collaboration and learning are already happening. It also laid the groundwork for future symposiums and ongoing engagement through a statewide Community of Practice (CoP).

The landscape is complex and challenging. Participants shared that services are fragmented, transitions between programs are difficult, and administrative and eligibility rules often create barriers. Funding limitations, regulatory complexity, workforce strain, and housing scarcity further challenge effective care coordination and service delivery.

Despite these challenges, the field is advancing innovative practices. Shared framing, collective responsibility, and equity-minded practices emerged as foundations for sustainable systems change. Numerous state-level reforms provide new opportunities but also add complexity, reinforcing the need for collaborative problem-solving approaches along with clear guidance, practical tools, and aligned infrastructure.

This synthesis identifies several key areas for action. Capacity building and workforce support are needed to help staff navigate complex systems and improve service delivery across numerous reform opportunities. Shared guidance, tools, and standardized resources can reduce administrative burden and support consistent practice. Peer learning, networking, and CoPs create opportunities to share strategies, strengthen relationships, and accelerate collective problem-solving. Policy and regulatory alignment are also critical to reduce fragmentation and create conditions for integrated, person-centered care.

THREADS 2025 provided a foundation for continued learning, ongoing problem-solving, and future symposiums that together can translate insights into equitable, coordinated, and person-centered outcomes across California's systems serving people experiencing homelessness.

Background and Introduction

Overview of THREADS 2025 and Its Objectives

“THREADS 2025: A Collaborative Behavioral Health Bridge Housing Symposium” convened in November 2025 in Santa Rosa, California, by the Sonoma County Department of Health Services (DHS) (Figure 1.). THREADS—which stands for Transforming Housing, Resources, Engagement, Advocacy, Development, and Solutions—was built on Sonoma County’s long-standing local Behavioral Health Conferences, which were established to support cross-sector dialogue and problem-solving at the intersection of behavioral health, housing, homelessness response, healthcare, and public systems. After a 2024 conference expansion to include neighboring counties, it was confirmed that these challenges were not unique to Sonoma County but were being experienced across jurisdictions throughout California.



Figure 1. A photograph of the THREADS 2025 symposium venue, the Luther Burbank Center for the Arts.

THREADS 2025 represented the next evolution of this work. For the first time, with support of Behavioral Health Bridge Housing (BHBH) funding and additional sponsors (see full list of sponsors in the Symposium program, Appendix A), the symposium was convened as a statewide event. THREADS was designed as a learning-oriented convening rather than a program evaluation or policy forum. Key objectives of THREADS 2025 included:

- Creating space for participants to reflect on how systems operate together in practice;
- Surfacing common challenges and areas of misalignment across sectors;
- Highlighting practices that are currently holding under real-world conditions; and
- Supporting shared learning to inform ongoing collaboration and future convenings.



The symposium brought together a cumulative 300 participants from across California which represented housing, homelessness response, behavioral health, healthcare, justice, and community-based organizations. A foundation piece of the three-day event was a Brave Space Agreement to support open, respectful, and transformative conversation (Figure 2.). Through film screening, facilitated dialogue, scenario-based exercises, and collective reflection spanning 13 sessions (see full session list in Symposium Program, Appendix A),

A Brave Space Agreement

To support open, respectful, and transformative dialogue, we ask attendees commit to co-creating a Brave Space during this event. This means we agree to:

- **Start with Curiosity** – We will “try it on” by staying open to new ideas and perspectives, even when they challenge our own.
- **Respect Impact** – We acknowledge that intent and impact are not always the same, and we will take responsibility for the effects of our words and actions.
- **Speak Honestly and Listen Deeply** – We will express our thoughts with care and courage and make space for others to do the same.
- **Disagree with Respect** – We recognize that conflict can be productive and commit to engaging without personal attacks or defensiveness.
- **Share the Space** – We will notice when to speak up (“move up”) and when to step back and listen (“move back”), ensuring all voices are heard.
- **Honor the Right to Pass** – We respect that anyone may choose not to share at any point, without pressure or judgment.
- **Focus on Outcomes, Not Comfort** – We understand that discomfort can be part of growth, and we aim to foster honesty in service of insight, collaboration, and meaningful change.

By joining this space, we hold ourselves and each other accountable to these agreements in the spirit of mutual care, learning, and transformation.

“It takes two to speak the truth – one to speak and another to hear.”

– Henry David Thoreau


participants then examined how interconnected systems are functioning in practice—particularly at points of transition for individuals experiencing homelessness with serious mental illness (SMI) and/or substance use disorders (SUD) [serious behavioral health needs].

The symposium served as a catalytic event for shared learning and collaboration across counties, agencies, providers, and community-based organizations engaged in coordination of care and support for those experiencing homelessness. It also served as the genesis for a CoP and will be followed by an additional symposium in 2026.

Statewide Behavioral Health Transformation Efforts in Context

The symposium occurred at a pivotal moment in California’s implementation of sweeping behavioral health and healthcare

Figure 2. The foundational Brave Space Agreement from the THREADS 2025 symposium.




delivery transformations. These include, but are not limited to, the [California Advancing and Innovating Medi-Cal \(CalAIM\) initiative](#), the [Behavioral Health Transformation](#) effort, the [Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment \(BH-CONNECT\) Initiative](#), the [Children and Youth Behavioral Health Initiative \(CYBHI\)](#), [Medi-Cal Mobile Crisis, 988 Suicide & Crisis Lifeline expansion](#), and the [Behavioral Health Continuum Infrastructure Program \(BHCIP\)](#). Collectively, these efforts signal a fundamental shift in how California finances, delivers, and governs behavioral health care, particularly for some of its most vulnerable populations—moving away from fragmented, crisis-driven systems toward community-based, person-centered models designed to better serve individuals with complex needs.

Amidst these reforms, new programs such as BHBH have emerged. BHBH was established to address critical gaps in safe interim and transitional housing capacity for individuals with serious behavioral health needs who are experiencing homelessness or transitioning from institutional, crisis, or justice-involved settings. As the state expands crisis response, care management, and community-based treatment, BHBH provides the physical and programmatic “bridge” necessary to ensure individuals are not discharged into homelessness or instability while awaiting ongoing care.

BHBH sits at the intersection of multiple systems, including housing, homelessness response, behavioral health, healthcare, and justice. In concept, these systems are intended to function together to support individuals experiencing behavioral health needs and housing instability. In practice, they are often structured, funded, and governed separately. BHBH therefore becomes both a service model and a stress test, making visible the strengths and weaknesses of system alignment, particularly at points of transition between care and service settings.

While the numerous behavioral health transformation efforts currently underway are funded and governed through distinct mechanisms, results will depend on how well they align and reinforce on another in practice:

- CalAIM and BH-CONNECT reshape Medi-Cal financing and benefits to support enhanced care management, community supports, and expanded access to community-based behavioral health services.
- Behavioral Health Transformation strengthens the county's behavioral health delivery system, reinforcing accountability and modernizing service structures.
- CYBHI advances upstream investment in children and youth.

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- Mobile Crisis and 988 expand front-end crisis response.
 - BHCIP builds the bricks-and-mortar infrastructure required to sustain the continuum of care.
 - BHBH, in turn, creates the stabilization capacity that allows individuals to engage in and benefit from these reforms.


Each initiative holds distinct, sometimes overlapping levers (financing, workforce, infrastructure, accountability, crisis response, housing stabilization), but no single reform is meant to resolve systems challenges on its own. The promise of this moment lies not in isolated implementation, but in coordinated execution. Successful transformation that leads to improved systems depends on sustained collaboration of the people working in community-based organizations, counties, healthcare, housing, law enforcement, managed care plans, and with lived experience to align policy, funding, and practice. Without collaboration and commitment, reforms risk operating in parallel. With it, they form the foundation of a coherent, flexible, durable ecosystem of care capable of improving outcomes for California’s most vulnerable people.

THREADS as a Catalyst for Critical Cross-Sector Learning

The need for coordination and changes described in statewide reform policies was directly echoed during THREADS 2025. Participants did not speak about transformation in abstract terms. Instead, they described the day-to-day realities of working across housing, homelessness services, behavioral health, healthcare, outreach, and justice systems—realities that closely mirror the operational assumptions embedded in current forms.

Participants repeatedly conveyed that the many sectors and systems involved in care coordination and service delivery for people experiencing homelessness are interconnected by necessity, even when structured and operating in silos. The challenges they identified—clear handoffs, fragmented communication, workforce strain, and gaps during transitions—are precisely the friction points that statewide initiatives are designed to address.

In this sense, THREADS served as a ground-level validation of reform narratives. Policy emphasis on care coordination, continuity across settings, housing stabilization, and crisis diversion was reflected in participants’ experience. Participants emphasized that the most significant breakdowns occur at transition points—between outreach and crisis response, crisis and clinical care, clinical care and housing placement, and housing and long-term



support. Strengthening alignment at these junctures is essential to achieving the goals of behavioral health reform.

THREADS 2025 also served as a catalyst for critical cross-sector learning. This concept emerged as critical—not because collaboration is aspirational, but because reform implementation and better care for California’s most vulnerable depends on it. Many of the most persistent barriers do not sit within a single agency or funding stream. They surface at the boundaries between systems—where handoffs occur, roles overlap, accountability becomes diffuse, and individuals become most vulnerable to falling through gaps. THREADS provided a novel opportunity to surface these shared pressures and learn from one another’s experiences.

Purpose and Use of This Synthesis

This synthesis was developed by the [Population Health Innovation Lab](#) (PHIL) of the Public Health Institute. PHIL serves as a third-party technical assistance provider who was contracted by DHS through the Providing Access and Transforming Health (PATH) TA Marketplace to capture, organize, and synthesize cross-sector insights from THREADS.

As such, this synthesis was designed to:

- Capture shared themes and patterns that emerged across the symposium;
- Provide a common reference point for participants, partners, and funders;
- Support CalAIM implementation and inform ongoing learning and coordination through the THREADS CoP; and
- Support planning for future THREADS convenings and related learning activities.

The report is structured to move from context and shared experience to integrated analysis of what surfaced and then to implications for action and learning. Evaluation findings are incorporated selectively to reinforce qualitative themes where appropriate. The synthesis does not seek to finalize conclusions, rather to support continued dialogue and coordinated action as California advances to the next phase of behavioral health transformation.



Methodology

This synthesis draws on multiple qualitative and quantitative data sources collected before, during, and immediately following the THREADS 2025 Symposium. The methodology was designed to surface cross-cutting threads across sectors, roles, and implementation contexts, with particular attention to how participants described operational realities within the current environment of CalAIM reforms.

Data Sources


The analysis integrated data from the following sources:

- Session documentation: Facilitation outputs and synthesized summaries were developed for select symposium segments based on facilitator capture and contemporaneous documentation generated during the convening
- Participant notes: Notes taken by PHIL representatives during the symposium—including tabletop exercise outputs and affinity group documentation—were used to supplement these summaries and capture contextual elements not always evident in written materials (e.g., emphasis, areas of consensus, or points of divergence).
- Tabletop exercise outputs: Written artifacts and summaries generated during structured tabletop exercises were reviewed to identify applied challenges, decision points, and cross-sector dynamics.
- Live polling results (Appendix B): Real-time polling conducted with Mentimeter during the symposium provided structured input on participant perspectives, areas of alignment or divergence, and priority concerns.
- Post-symposium evaluation survey results (Appendix C): A survey administered via Qualtrics captured participant feedback on key themes, learning needs, and implementation challenges. The survey included both closed-ended and open-ended items.

Together, these sources allowed for triangulation across different forms of participation and levels of formality, strengthening confidence in the threads that emerged.

Data Analysis

Quantitative data were analyzed using descriptive techniques. Descriptive analysis explored frequency and mean. Qualitative data were analyzed using an iterative thematic analysis



approach to identify key themes and patterns emerging across data sources. Themes were prioritized based on how frequently they appeared, whether they emerged across multiple data sources, and their relevance to the symposium's goals.

Limitations

The PHIL team used multiple data sources to increase reliability and validity of the findings by allowing for triangulation across inputs. However, several limitations should be considered when interpreting these findings, including:

- Participation varied across symposium sessions and activities, which may have influenced which perspectives were most prominently captured.
- Time constraints within sessions may have limited the depth of discussion on certain topics.
- Much of the data relied on self-reported experiences, reflections, and perceptions shared during facilitated discussions, live polling, and the evaluation survey.

As a result, findings are not intended to be representative of all participants, and they are intended to inform learning and future planning rather than serve as definitive or generalizable conclusions.

Participant Representation (Mentimeter Snapshot)

The information below reflects descriptive patterns from Mentimeter responses collected during the symposium. Mentimeter participation varied by session and prompt and does not represent total attendance. These results are presented to illustrate the range of geographic locations, organizational types, sectors, and areas of focus present across the convening.

Based on Mentimeter responses (Figure 3.), participants most frequently identified their organization as located in Santa Rosa (n=40) and other areas within Sonoma County (n=27), with additional locations represented across California and beyond. Respondents represented a range of organizational types, most commonly county agencies (50% of respondents) and non-profit organizations (33% of respondents), alongside public sector entities, city governments, federal partners, and individuals identifying with lived experience or peer roles.



Figure 3. Word cloud generated by Mentimeter on Day 1 of the THREADS 2025 symposium showcasing where participants were joining from (N = 105). Each time a repeated location was submitted, it increased in size within the cloud, so larger words represent more frequent responses, while smaller words reflect fewer mentions.

At the symposium, each participant was invited to identify the affinities or “threads” that resonated most with their work and individual expertise. Participants were then invited to select a bracelet with colorful threads representing their affinities. These threads were conceptualized to represent the essential components of bridging behavioral health and homelessness response systems, reflecting both individual expertise and collective priorities:

- **Transforming (Orange):** Focuses on driving innovative change in behavioral health and housing systems through collaboration.
- **Housing (Gray):** Represents commitment to practical bridge housing solutions that support individuals on their path to recovery and stability.
- **Resources (Green):** Highlights the sharing of multi-county resources, expertise, and tools to address complex behavioral health challenges.

- **Engagement (Yellow)**: Reflects fostering active participation from government, partners, and stakeholders to create meaningful solutions.
- **Advocacy (Pink)**: Signals dedication to policy development and advocacy for sustainable behavioral health and housing initiatives.
- **Development (Blue)**: Provides professional development through collaborative training, guest speakers, and think tanks to advance community-drive solutions.
- **Solutions (Red)**: Emphasizes building ongoing networks of support among counties and partners to ensure lasting impact.

As shown in Figure 4., housing was the most frequently identified affinity for participants (30%), followed by solutions (21%), resources (13%), engagement (12%), advocacy (10%), transforming systems (8%), and development (7%), underscoring multiple entry points into behavioral health bridge housing and system coordination efforts.

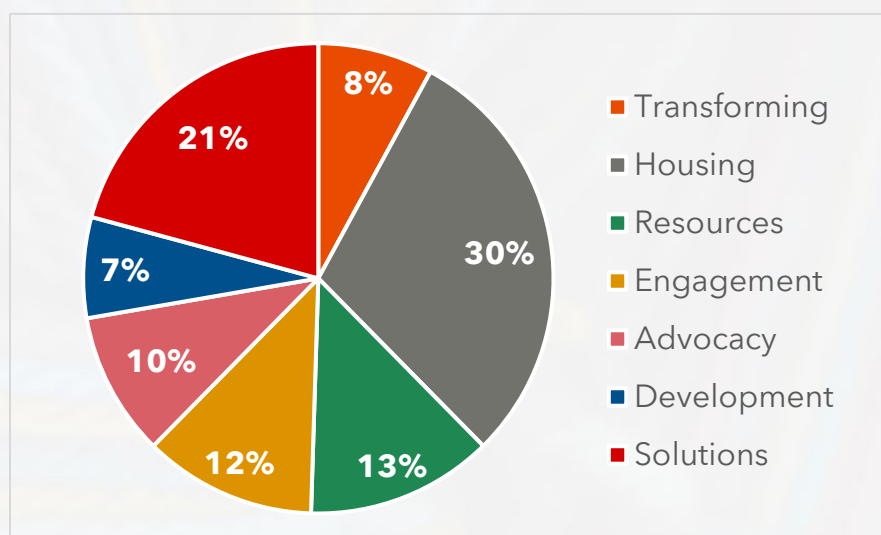


Figure 4. Affinities of THREADS 2025 participants as identified on Day 1 of the symposium via Mentimeter polling participation (N = 101).

Across sessions where sector information was collected, Mentimeter responses reflected representation from homelessness and housing programs and providers, behavioral health providers and community-based organizations, county and city administration, social services, justice system partners, healthcare settings, and community members. Together, these responses highlight the cross-sector nature of participation in THREADS 2025.



The Threads That Rose to the Surface


The THREADS 2025 Symposium had a meaningful and measurable impact on participants. Seventy-five percent of post-event evaluation respondents reported gaining a deeper understanding of cross-sector perspectives, and 70% left with a stronger sense of trust and shared purpose with cross-sector partners. Nearly half of post-event evaluation respondents (49%) reported gaining actionable strategies they could apply to their organization or community. These strengthened perspectives and shared insights created a foundation for reflection and dialogue about the realities of implementing behavioral health bridge housing across systems. Additionally, the sharing of insights that feel valuable enough to drive actionable change for nearly half of the participants after only a single event speaks to the power of mere connection and the potential for even further impact with sustained engagement.

Analyses across data sources revealed several consistent threads regarding how behavioral health bridge housing and related systems are currently experienced in practice. These threads reflect shared challenges, areas of momentum, shifts in perspective, equity considerations, and how CalAIM is shaping the current landscape. Together, they provide a grounded picture of the conditions under which this work is unfolding.

Fragmentation and the Experience of Transition

Participants consistently described behavioral health, housing, homelessness, healthcare, and justice systems as operating in parallel rather than as an integrated whole. This fragmentation was not described as abstract or theoretical, but as something most visible at moments when individuals move across settings. Transitions between outreach teams, crisis response, emergency departments, housing providers, and ongoing services were described as uneven and fragile, with continuity often dependent on individual relationships rather than shared processes.

When multiple systems were involved, participants described transitions as particularly vulnerable to breakdown. Handoffs were described as inconsistent, with responsibility for follow-up frequently unclear. Rather than moving smoothly from one point of care to another, individuals were described as encountering gaps where coordination weakens and momentum is lost. These experiences were raised repeatedly across sessions as a defining



feature of how fragmentation is felt in practice.

Compounding Barriers: Information, Eligibility, and Administrative Complexity

Within these fragile transitions, participants described a set of interrelated barriers that compound coordination challenges. Uncertainty around information sharing surfaced repeatedly, including questions about what information can be shared, who is permitted to share it, and at what point sharing is allowed. These uncertainties were described as affecting both formal system interactions and day-to-day coordination across partners.


Eligibility rules were described as further complicating navigation. Participants discussed eligibility as varying across programs, funding sources, and timeframes, and as shifting when individuals experience changes in housing status, health needs, or system involvement. Movement in and out of eligibility was described as common, requiring staff to repeatedly reassess options and pathways.

Administrative workload associated with documentation, compliance, and verification was described as intersecting with both information-sharing and eligibility challenges. Rather than existing as a separate burden, administrative complexity was described as embedded within coordination itself, shaping how quickly systems can respond and how easily continuity can be sustained. Together, these factors were described as contributing to delays, handoff breakdowns, and difficulty maintaining momentum across systems.

Operating Within Constraint: Funding, Regulation, and Workforce Strain

Participants consistently situated information, eligibility, and administrative challenges within broader funding and regulatory environments constrains. Funding limitations were described as shaping program scope, staffing levels, and flexibility, while regulatory requirements were described as influencing how services are delivered and documented. Together, these constraints were described as reinforcing reactive modes of operation, with systems responding to immediate needs rather than planning proactively.

These structural conditions were described as having direct implications for the workforce. Case managers, outreach workers, and peers were repeatedly described as central to keeping systems functioning, particularly in the absence of shared processes. At the same time, participants described staffing capacity as stretched and burnout as an ongoing



concern. Workforce strain was discussed in relation to high caseloads, administrative demands, and the complexity of navigating multiple systems on behalf of individuals.

Rather than framing workforce challenges as isolated staffing issues, participants described them as emerging from the same structural conditions that complicate coordination and continuity. The workforce was described as absorbing the friction created by fragmented systems, variable eligibility, and administrative complexity.

Housing Scarcity as a Structural Condition

Housing scarcity was described as a foundational constraint shaping all other efforts. Participants discussed long waiting periods for housing and demand that exceeds available supply, noting that even well-coordinated systems operate within these limits. Housing scarcity was frequently referenced as setting the boundaries of what is possible, regardless of improvements in coordination or service delivery.


Prioritization processes were described as necessary but difficult, with acknowledgment that not all individuals can be served. Participants emphasized the importance of being transparent about these limits while continuing to navigate complex pathways. Housing scarcity was not framed as a discrete challenge, but as a structural condition that amplifies pressure across systems and affects decision-making at every stage.

Practices That Are Working Today

Alongside constraints, participants described practices that are currently working today in real-world conditions. Mobile crisis teams were frequently referenced as a flexible access point within a broader crisis continuum. These teams were described as meeting people where they are and linking crisis response, stabilization, and bridge-to-care pathways.

Reduced reliance on law enforcement and faster response times were described as defining features of mobile crisis team models. Participants also referenced unofficial “side door” pathways to urgent outpatient care as alternatives to emergency department reliance, particularly for individuals whose needs fall outside traditional entry points.

In other contexts, participants described movement toward more coordinated outreach practices. Examples included shifts from siloed outreach toward coordinated efforts supported by regular collaboration meetings, shared outreach calendars, and tools that track where outreach has occurred and what resources have already been deployed.



System-level changes such as unified street outreach standards, defined caseloads, trauma-informed redesigns of the By-Names List, and improvements in coordinated entry outcomes were also discussed. These examples were presented as context-specific and shaped by local conditions.

Fragility, Relationships, and the Conditions for Sustainability

Across bright spots that surfaced, participants emphasized the role of relationships, trust, and consistent communication in making coordination possible. Informal agreements and relational knowledge were described as enabling work to move forward despite system constraints.


At the same time, reliance on specific individuals and informal arrangements was described as a vulnerability. Participants noted that when coordination depends heavily on personal relationships, it can be difficult to sustain in the face of staff turnover, shifting funding, or policy changes. What is working was frequently described as fragile, requiring ongoing effort to maintain.

Shifts in Framing, Responsibility, and Equity in Practice

The symposium also surfaced shifts in how participants are framing the work itself. Participants described increased recognition that experiencing homelessness and behavioral health challenges reflect system-level and structural conditions—not individual failings—and therefore require coordinated, system-oriented solutions rather than isolated program responses. Discussions emphasized shared responsibility across sectors and highlighted collaboration as a necessary condition for addressing complex needs.

Lived experience was consistently described as central to understanding system gaps and impacts. Participants emphasized the value of lived experience voices in interpreting how systems function in practice.

Equity surfaced primarily through operational considerations. Participants discussed equity in relation to access, eligibility, contracting, accountability, and who is able to participate in funding and service delivery structures. Equity-centered contracting approaches, participatory practices, and shifts in data culture away from punitive use and toward learning were raised as ways to reshape accountability.



Tribal perspectives were named as a distinct and essential thread, with emphasis on transparency, relational approaches, and cultural practices that support recovery. At the same time, participants noted the need for deeper investment to sustain Tribal participation and storytelling.

CalAIM as the Operating Environment

Throughout these discussions, CalAIM was consistently present as a major operating force shaping funding, sustainability, and access. Participants described CalAIM as complex, with uncertainty around how guidance is interpreted and applied across settings. This complexity was reflected in the post-event evaluation, where respondents, on average, reported feeling neutral to somewhat positive (M=3.7 of 5) that the symposium had provided them with new insights on how CalAIM can be leveraged to better support the populations they serve.


Transitional rent emerged as a recurring area of confusion, alongside broader questions about housing navigation, vouchers, and eligibility. Participants described navigating movement in and out of eligibility categories and the need for braided and blended funding approaches. Sustainability and capacity concerns were raised repeatedly, particularly for smaller providers seeking to participate fully within CalAIM-related models.

Taken together, these threads reflect a field operating within constrained and interconnected systems, while actively adapting practices to improve coordination, access, and continuity under real-world conditions.

What the Field Is Asking For

Against this backdrop, participants articulated a set of needs that reflect what is required to move from shared understanding toward sustained practice. Across sessions, participants expressed a desire for clearer and more consistent guidance across systems, particularly in areas where interpretation varies or expectations are communicated unevenly. Uncertainty around eligibility, information sharing, and evolving requirements was described as a source of friction that complicates coordination and planning.

Participants also emphasized the need for practical, applied support that helps translate guidance into day-to-day operations. There was strong interest in technical assistance that is



grounded in real-world conditions and responsive to the complexity of working across systems, rather than high-level explanations of policy intent. Participants described value in support that acknowledges constraints while offering concrete ways to navigate them.

Peer learning and shared problem-solving emerged as a consistent request. Participants described the importance of learning from others facing similar challenges, particularly across sectors and jurisdictions. Structured opportunities to share approaches, troubleshoot common barriers, and reflect on what is holding in practice were described as especially valuable.


Concerns related to timelines, readiness, and compliance surfaced alongside these requests. Participants described wanting greater confidence in how expectations are applied and assessed, and clearer signals about what constitutes readiness over time. These concerns were often raised in relation to sustainability and the risk of uneven implementation across settings.

Finally, participants expressed a desire to reduce unnecessary complexity and administrative burden. Improving usability and proportionality was described as essential for supporting frontline staff who balance service delivery with documentation, coordination, and compliance demands. Participants emphasized that reducing friction in these areas would directly support continuity, collaboration, and workforce sustainability.

Together, these requests reflect a field seeking clarity, applied support, shared learning, and alignment—conditions that participants described as necessary to sustain momentum and deepen impact within complex and evolving systems.

Implication for Action and Learning

Building on the themes surfaced during the symposium, this section translates what the field is asking for into a set of recommended near-term achievable strategies and longer-term achievable strategies to strengthen implementation, coordination, and learning moving forward. While time for implementing strategies will vary based on local context, near-term achievable strategies can more likely be completed in two years or less while longer-term achievable strategies may take three to five years to fully materialize. Recommendations are not limited to those explicitly requested by participants but are grounded in the collective learning and implementation realities surfaced through the convening. Keep in mind that



the myriad of behavioral health reforms currently underway in California may already be addressing certain recommendations, however, due to time limitations during the symposium, key reforms advancing certain strategies may not have been directly discussed.

These recommendations are intended to support participation across roles, sectors, and jurisdictions while grounding action in what is achievable within existing authority and capacity. Recommendations are organized into the below four focus areas:

1. Capacity Building, Training, and Workforce Support
2. Guidance, Tools, and Shared Infrastructure
3. Peer Learning, Networking, and Communities of Practice
4. Policy, Regulatory, and Structural Alignment.

Capacity Building, Training, and Workforce Support

This focus area centers on strengthening the workforce and partner organizations to operate effectively within complex, cross-system environments. Emphasis is placed on practical, applied learning; reducing unnecessary administrative burden; increasing clarity where guidance is uneven; and supporting sustainability through systems thinking, equity-centered design, and adaptive leadership.

Who Should Engage?

- Managed care plans and funders
- Provider organizations across behavioral health, housing, and homelessness systems
- State and county agencies
- Training and technical assistance providers
- Tribal partners


Near-term Achievable Recommendations

- Ease access to training and learning materials.
 - Make key symposium content, tools, and learning modules available in accessible formats (e.g., recorded sessions, short videos, learning briefs) to support broader reach and ongoing use.
 - Provide training for managers, frontline staff, and partners that encourages systems thinking, learning organization practices, and cross-sector problem-solving.

- Identify population-specific cultural humility trainings (as opposed to generalized cultural humility trainings) and embed them into staff development. For example, partner with local Tribes and Native communities to train staff on cultural humility of working with Native communities.
- Invest in Tribal knowledge and sovereignty-centered approaches
 - Provide dedicated resources, training, and support for Tribal partners that honor Tribal governance, cultural practices, and storytelling as essential elements of recovery and systems design.
- Support innovation and implementation that addresses real-world constraints
 - Build a living document of “working interpretations” to help reduce uncertainty by clarifying what has worked for whom and when
 - Collect transition practices currently in use and document the problem each practice addresses, conditions under which it works, and where it breaks down
 - Offer applied training focused on testing, adapting, and sustaining practices under real constraints, rather than launching one-time pilots.
 - Assess practices for transferable patterns and support limited testing in new contexts.
- Reduce administrative burden where possible
 - Identify locally determined administrative steps (e.g., parallel intake forms, internal approval layers).
 - Test small, reversible burden-reduction changes, such as time-limited documentation waivers for crisis-to-housing pathways

Longer-term Achievable Recommendations

- Improve workforce adaptive leadership skills and equitable outcomes through operational design
 - Embed learning and reflection into accountability structures rather than treating them as add-ons.
 - Support training and technical assistance that embeds equity into contracting, accountability, data use, and participation structure as a core design principle.
- Strengthen collaborative partnerships across likely and unlikely collaborators
 - Facilitate collaboration between service system partners and housing production actors (developers, investors, architects, property owners).

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- Build shared understanding of timelines, constraints, and roles across service delivery and housing development.
 - Facilitate learning and collaboration across Behavioral Health, Housing, and Homeless Service system providers with developers, investors, architects, property owners, and housing finance partners to bridge gaps between service delivery and housing production.
 - Build workforce sustainability into system design
 - Invest in systems thinking and adaptive leadership training for managers and frontline staff.
 - Align caseload expectations and documentation requirements with the realities of cross-system coordination.

Guidance, Tools, and Shared Infrastructure

This focus area prioritizes reducing ambiguity and duplication by making guidance, tools, and examples easier to find, easier to use, and more closely aligned with how work happens in practice. The intent is to reduce friction, duplication, and uncertainty by grounding tools and infrastructure in real-world workflows and ensuring they are directly connected to training and day-to-day practice.

Who should engage?

- County system leaders and implementers
- Data and IT partners
- State agencies
- Training and technical assistance providers
- Tribal leaders

Near-term Achievable Recommendations

- Develop a centralized resource and guidance hub
 - Create a shared library that houses guidance, tools, examples, and learning materials related to bridge housing, CalAIM implementation, and cross-sector coordination.

- Curate examples of key processes used in the behavioral health, homelessness, and housing systems
 - Document practical examples of successful processes across outreach, crisis response, hospitals, housing, and ongoing care to support learning, to include the context of where they are most useful (e.g., rural vs. urban; local vs. state).
- Provide standardized, ready-to-use tools
 - Develop shared glossaries, checklists, and templates to support consistent implementation across systems.
- Align training with tools and guidance
 - Ensure that training offerings are directly connected to the tools and guidance being promoted, supporting immediate application at various levels of readiness across systems rather than abstract understanding.

Longer-term Achievable Recommendations

- Expand access to approved housing design tools
 - Support the development and dissemination of standard, pre-approved accessory dwelling unit (ADU) and housing design plans that can be adapted locally to accelerate development timelines.

Peer Learning, Networking, and Communities of Practice

This focus area recognizes peer learning as essential infrastructure for navigating complexity across behavioral health, housing, and homelessness systems. It emphasizes structured opportunities for shared problem-solving, testing, and reflection across jurisdictions and sectors, using the THREADS CoP as a catalyst to surface what is holding in practice and support adaptation over time.

Who should engage?

- Provider organizations across behavioral health, housing, and homelessness systems
- State and county agencies
- Training and technical assistance providers
- Tribal partners



Near-term Achievable Recommendations

- Resource and use the THREADS CoP
 - Focus CoP activity on a limited number of cross-cutting friction points identified by THREADS participants
 - Use the CoP as a structured space for shared learning, testing, troubleshooting, and iterative applications across jurisdictions and sectors to help resolve friction points.
 - Document the THREADS CoP structure and process for replication at local levels within communities and regions across the state.
- Create regular connection points
 - Establish ongoing forums (virtual or in-person) that allow operational and front-line staff to maintain relationships, share updates, and adapt to evolving guidance.
- Support affinity-based peer learning
 - Facilitate affinity groups (e.g., housing leads, behavioral health providers, Tribal partners, smaller CBOs) to allow for deeper, role-specific problem-solving while remaining connected to cross-sector dialogue.

Longer-term Achievable Recommendations

- Document and share replicable practices
 - Capture and disseminate examples of approaches that are holding under real-world conditions, with attention to context, constraints, and implementation lessons.

Policy, Regulatory, and Structural Alignment

This focus area addresses the structural conditions that shape what is possible across behavioral health, housing, and homelessness systems. Advancing alignment across land-use policy, permitting processes, data-sharing rules, and housing supply limitations is essential for creating durable pathways to housing and sustaining cross-system investments.



Who should engage?


- Behavioral health and homelessness system leaders
- City and county leadership and planning departments
- Data governance partners
- Public safety and justice partners
- Housing authorities and developers
- State policymakers and regulatory agencies

Near-term Achievable Recommendations

- Strengthen public communication around housing policy changes
 - Improve public understanding of policy changes related to ADUs and affordable housing to reduce misinformation and increase community acceptance.
- Reduce permitting barriers and costs
 - Explore streamlined permitting, fee reductions, or expedited review processes for bridge housing, supportive housing, and ADU development aligned with behavioral health and homelessness response goals.
- Enable responsible data sharing across systems
 - Clarify and align policies related to data sharing across housing, behavioral health, healthcare, and justice systems to support coordination while protecting privacy.

Longer-term Achievable Recommendations

- Review and modernize local land-use and housing regulations
 - Support city and county reviews of zoning, density limits, and building codes that restrict affordable and bridge housing development, including pathways to convert single-family zoning to multi-family or mixed-use where appropriate.
- Incentivize private and community participation in housing development
 - Expand incentives for homeowners, developers, and property owners to participate in housing options such as ADU development, master leasing, and bridge housing models, particularly in high-need areas.

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- Leverage public land for housing solutions
 - Identify and prioritize opportunities to use publicly owned land for bridge and supportive housing developments, particularly near services and transit.

Keeping the Weave Intact Moving Forward


THREADS 2025 surfaced both the promise and the complexity of aligning behavioral health, housing, and homelessness response systems in the context of Medi-Cal transformation. Across counties and sectors, participants named a shared truth: meaningful integration is not achieved through one-time convenings or isolated pilots, but through building sustained relationships, shared language, and collective problem-solving over time. This report reflects that understanding—and points toward what comes next.

To keep the weave intact between the THREADS 2025 symposium and the planned November 2026 convening, the Population Health Innovation Lab (PHIL), as part of its technical assistance scope, will convene a CoP designed to carry this work forward. The CoP will serve as a structured yet flexible space to sustain cross-county and cross-sector dialogue, deepen shared learning, test potential solutions, and surface real-time barriers.

At the heart of the CoP is a commitment to shared stewardship. PHIL will integrate a Design Team approach, inviting a diverse range of participants to help shape session agendas, identify priority topics, and co-facilitate selected sessions. This model is intended to center practical knowledge, elevate peer expertise, and ensure the CoP remains responsive to the realities facing counties and community partners. The CoP will also foster a sense of collective ownership—seeking to explore interest in future leadership and facilitation beyond the formal TA period.

Insights, lessons learned, and recommendations emerging from the CoP—together with the findings synthesized in this report—will directly inform DHS’s ongoing planning for the 2026 symposium. All CoP materials will be shared with DHS and THREADS participants to support future use, adaptation, and replication.

To support broader field learning, DHS encourages statewide partners to share this report with their local partners as a practical resource to inform CalAIM implementation planning, housing and homelessness integration strategies, and workforce development efforts. In doing so, we can all help THREADS to extend beyond its initial convening and participants—



contributing to a growing, interconnected learning ecosystem committed to advancing equitable, integrated systems of care.

The work ahead is iterative and relational. Stay engaged through the CoP and consider joining DHS at the November 2026 symposium. Together, we can refine strategies, strengthen trust and alignment, and advance the shared purpose needed to sustain lasting systems change. Keeping the weave intact is both the challenge and the invitation—join us in this work.



Appendices

Appendix A: Full THREADS 2025 Symposium Program

Reference the [THREADS 2025 Symposium program](#) for details about sessions, speakers, sponsors, and more.



Appendix B: Mentimeter Symposium Decks & Polling Results

Click the links below to open the Mentimeter slide decks used during the THREADS 2025 symposium. The results from all live polling and open response questions that solicited input through Mentimeter during the event can be found in the decks in order of their presentation.

- [Symposium Day 1: November 17, 2025](#)
- Symposium Day 2:
 - [November 18, 2025 \(part 1\)](#)
 - [November 18, 2025 \(part 2\)](#)
- [Symposium Day 3: November 19, 2025](#)

Appendix C: Post-Symposium Evaluation Survey Results

A post-symposium evaluation survey was conducted between November 19 and December 11, 2025, to assess participants' experiences, learning outcomes, and opportunities to strengthen cross-sector collaboration in future. The evaluation survey received responses from 122 participants. Of the 122 respondents, 88 (72%) completed the evaluation survey in full while 35 (28%) submitted partial responses. Partial responses were included in analyses where data were available.

The results presented below highlight selected findings. This summary is not comprehensive; the full set of post-symposium evaluation survey results, including detailed quantitative tables and qualitative feedback, can be accessed through the [Qualtrics dashboard](#).



Figure 5. Organizational Participation in Initiatives to Improve Homelessness

This figure highlights a variety of initiatives organizations have engaged with to improve care for individuals experiencing homelessness. The most common were Community Supports ($n = 60$), Enhanced Care Management ($n = 45$), and the Behavioral Health Bridge House program ($n = 38$).

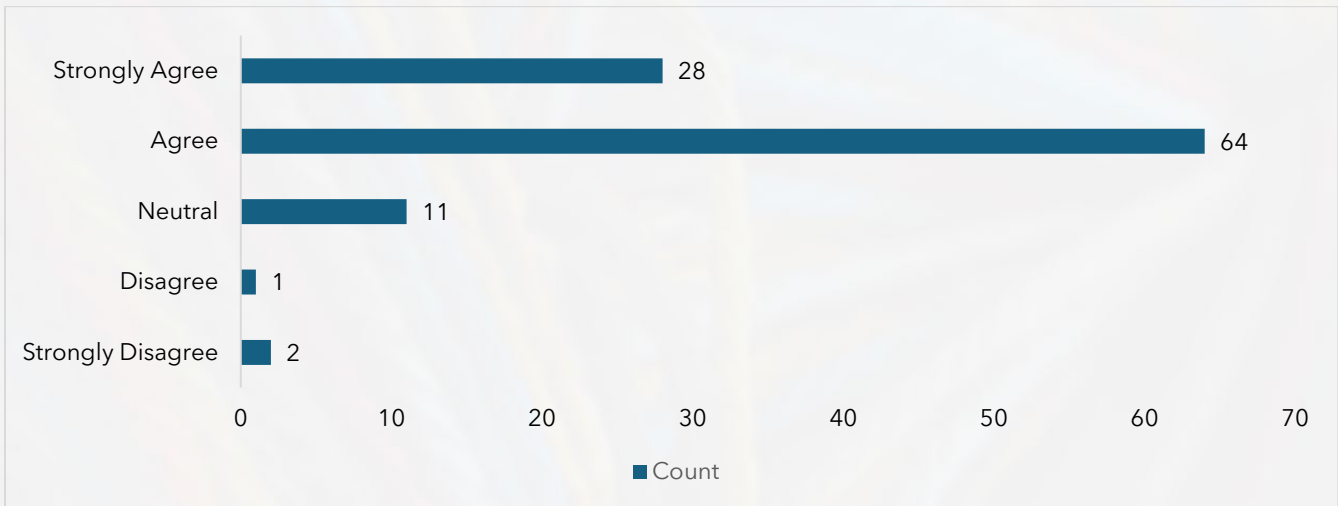


Figure 6. Participant Agreement with Cross-Sector Understanding Outcome

This figure shows participants' level of agreement with the statement about gaining a deeper understanding of the work and perspectives of other sectors through symposium participation. Overall, participants reported a strong positive response, with 92 participants agreeing or strongly agreeing with this statement.

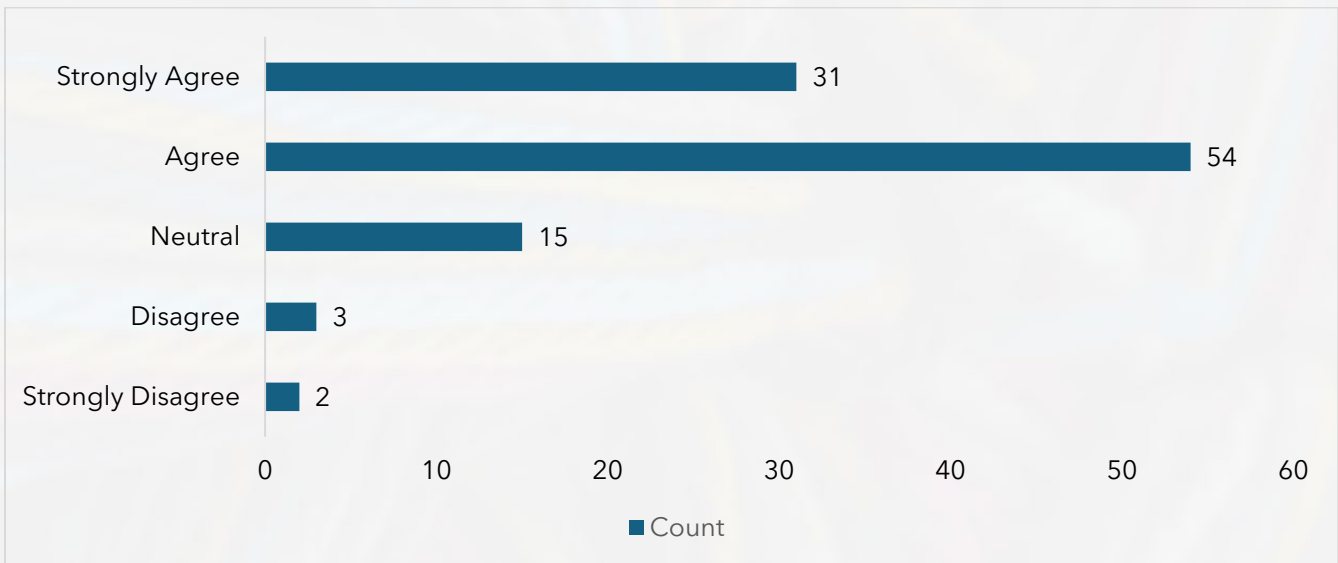


Figure 7. Participant Agreement with Trust and Shared Purpose Outcome

This figure illustrates participants' level of agreement with the statement about leaving the symposium with a stronger sense of trust and shared purpose with cross-sector partners. Overall, participants reported a strong positive response, with 85 participants agreeing or strongly agreeing.



Figure 8. Key Supports Desired for Moving from Learning to Action

This figure highlights the supports participants identified that would most help in moving their community from learning to collaborative action. The top supports selected include opportunities to learn from leaders in other communities with established successes (n=62), opportunities to regularly connect with partners across sectors (n=61), and leadership or organizational backing to enable and sustain cross-sector work (n=52).

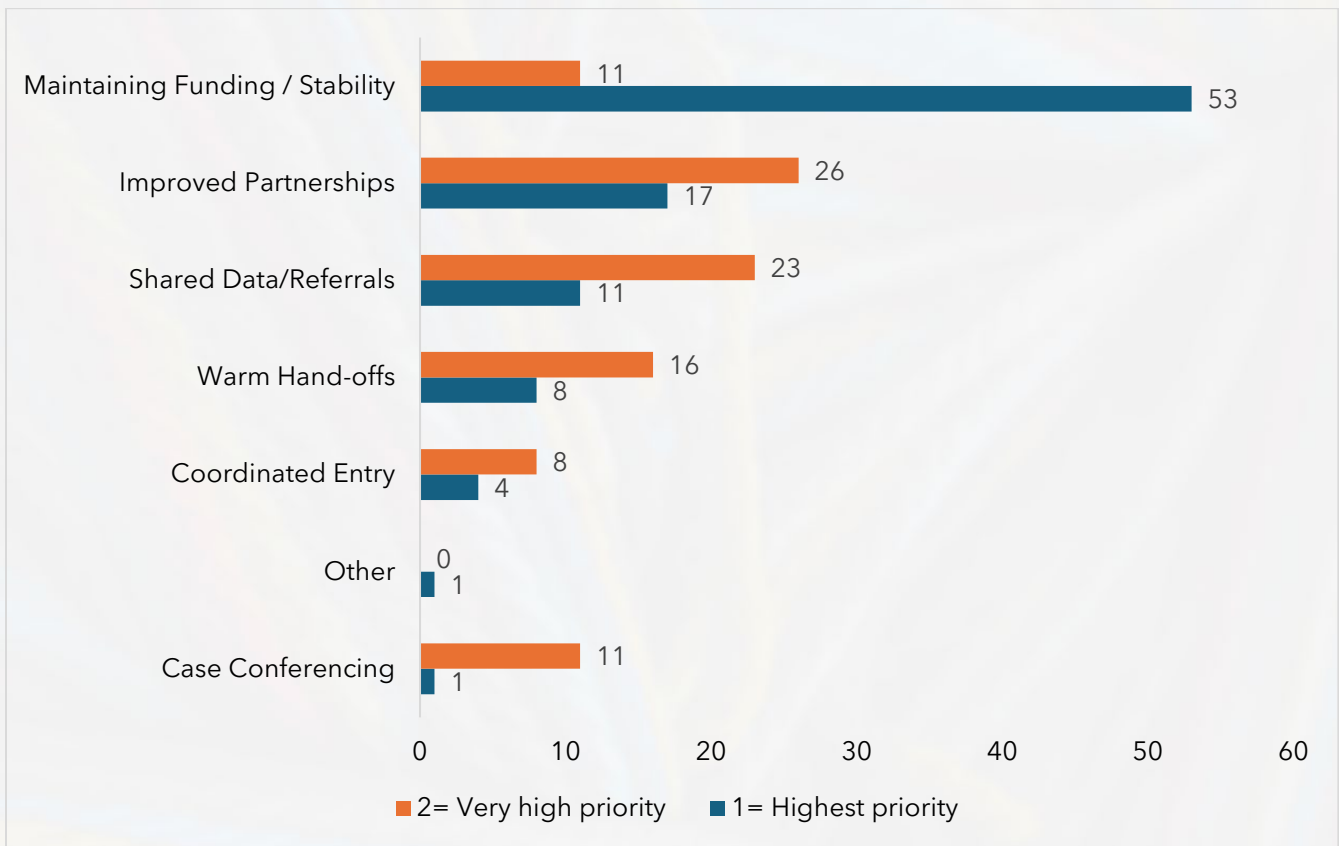


Figure 9. Top Priorities for Continuity of Care

This figure presents the areas participants identified as the highest priorities for improving continuity of care for people experiencing homelessness. Maintaining funding and organizational stability was rated as the top priority (n=53), followed by improved partnerships, which was also rated as a very high priority (n=26).