

**Multi-County Psychiatric Advance Directives
(PADs) Innovation Project-Phase 2
Annual Report - Fiscal Year 2025-26**



**Psychiatric
Advance Directive™**
My Plan • My Voice

Prepared by Concepts Forward Consulting

Table of Contents

Executive Summary	3
1. Roll-Out & Implementation.....	4
2. Engagement & Collaboration	5
3. Training	5
4. Testing & Platform Performance.....	7
5. Evaluation.....	8
6. Fiscal	8
7. Transparency & Communications	9
8. Year 2.....	10

Executive Summary

Multi-County Psychiatric Advance Directives (PADs), Innovation Project Phase Year 1 (FY 2025–26) Annual Report Executive Summary

PADs Phase Two opened Year 1 (FY 2025-26) having moved from a pilot site to a “live,” accessible registry website. This website is now available in our eight participating counties. For this project, counties include Alameda, Contra Costa, Fresno, Mariposa, Monterey, Orange, Shasta, and Tri-City Mental Health Authority. All eight counties can now access the PADs website at www.myplanmyvoice.com, which launched publicly in February 2026. Training of Crisis Teams commenced between February and May 2026, training more than 350 professionals. Those trained reported strong confidence gains (21-75 points), and 90-96 percent reported intent to use PADs. Two statewide convenings and 75-plus meetings kept counties aligned, and PADs gained visibility in California's 988 Strategic Plan and the CARE Court arena. The “Talking About PADs” marketing campaign reach was also strong, with (3.27M impressions) and without paid promotion (padsca.org: 3,400+ users).

The priority for Year 2 is adoption depth: of 140 PADs started on the platform, only 8 (5.7 percent) reached fully published status, mainly due to difficulty collecting the two required witness signatures. Evaluation, led by Syracuse University's Burton Blatt Institute, is continuing to evolve outreach and data collection methodology to successfully capture the positive longitudinal progression of individuals and professionals engaging with PADs.

Fiscal Year (FY) 2025–2026 Annual Report: Evaluation Points by Category

Concepts Forward Consulting synthesized the information found in this report from Chorus Innovations, Idea Engineering, Painted Brain, Burton Blatt Institute (BBI/Syracuse), Alpha Omega Translations, and Syracuse University annual and fiscal reports.

1. Roll-Out & Implementation

Data available:

- **8 counties became active in Year 1:** Alameda, Contra Costa, Fresno, Mariposa, Monterey, Orange, Shasta, and Tri-City Mental Health Authority (TCMHA). These counties once again joined the collaborative by signing a standardized agreement provided by Syracuse University. This process timeline improved significantly from Phase 1, taking most counties 90 days to fully execute agreements. The start date of the project was October 1, 2025, for most subcontractors. Concept Forward continued meeting with counties and subcontractors throughout the process to ensure a seamless transition for Phase 1 to Phase 2.
- **Public platform launch:** www.myplanmyvoice.com officially launched in February 2026, moving the tool from pilot to live status. Meaning, individual completed PADs could be accessed by trained first responders in the event of a behavioral health crisis.
- **Key technical milestones:** Chorus worked diligently to bring the platform up to launch by including OneSpan digital signature integration (Jul–Aug 2025); AWS-based multi-language translation with automated English conversion for professionals (Sep–Oct 2025, all threshold languages live toggle, May 2026); the platform was tested based on WAVE Compliance reaching WCAG AAA/AA accessibility standards, and professional training accounts and live-access provisioning while maintaining full HIPAA compliance was completed for trained professionals to access a published PAD.

Continued Collaboration:

- **Implementation timing:** Counties have a minimum of 10-12 weeks of lag between starting a project and having all contracts and funding in place. Throughout this time, the counties requested to continue to meet weekly to ensure the continuity of the project. The dedication of the participating counties was inspiring and the main reason the PADs project continues to gain in popularity within each county.

Challenges Encountered:

- **Staffing:** both counties and subcontractors encountered staffing turnover challenges. The project is very adept at onboarding new staff, but there remains a learning curve to the PADs project. This was also identified as a challenge with any new County Council, who did not understand the project or the previously agreed-upon Standard Agreement.
- **Behavioral Health Transformation:** In addition, the transition from MHSA to BHSA and the Behavioral Health Integrated Plan was a pain point for staff as they balanced the expectations of their county, the State, and their existing workload. Due to new funding constraints, some counties had to pivot from planned internal collaborations with local vendors, such as Wellness Centers and Peer Providers.

2. Engagement & Collaboration

Data available:

- **Convening:** Concepts Forward Consulting held two convenings as required by the project outline. At least one representative from each county participated in Monterey County (October 2025) and 7 of 8 counties, minus Alameda, participated in the Orange County (April 2026) convening. All convenings include subcontractor presentations with extensive county discussion, collaboration, and shared learning. The convenings help move the project forward, with customizable paths for each county but toward the project's overall common goals.
- **Meeting volume:** Concepts Forward Consulting led subcontractors and counties through 75+ collaboration and planning meetings, including subcontractor-only, county/subcontractor 1:6 meetings, "Third Thursday" full-project meetings, marketing, facilitator, and county-to-county support sessions. Project evaluator, BBI logged over 60 project meeting observations (county/subcontractor, marketing, all-subcontractor, and peer facilitator workgroup meetings). The project remains successful due to the unwavering participation of the counties and commitment to advancing the project within each agency.
- **Policy-table engagement:** Painted Brain represented the project on the California 988 Statewide Advisory Planning Committee, which led to PADs being recognized as a key intervention with the state's 988 5-Year Strategic Plan, and maintains ongoing communication with commission staff on PAD policy strategy. Concepts Forward Consulting continued to represent the project in the CARE Court arena by providing slides and ongoing information to be used throughout the state as a subject matter expert. Concepts Forward Consulting engaged state-level and several county Behavioral Health Advisory Boards, and provided ongoing guidance for how PADs fit seamlessly within Prop 1 and the Behavioral Health Transformation.
- **Peer voice:** Idea Engineering launched the "Talking About PADs" video-podcast campaign featuring recorded conversations with peers, facilitators, and project partners from Contra Costa, Mariposa, Monterey, and Orange Counties, plus Chorus and Painted Brain staff. Idea Engineering has also created county-ready versions of all media for sustainable use within existing County media networks in both English and Spanish. In addition, Painted Brain and TCHMA each created Instagram videos to promote PADs and the "live" roll-out.

3. Training

Data available:

Training delivered during the reporting period (Concepts Forward Consulting delivered the training; BBI evaluated them).

Concepts Forward Consulting set out to train all Crisis Teams across the eight counties between the initial roll-out of February 1, 2026, and the completion of training presented at the April Convening in Orange County. The team logged almost 6000 miles of travel, encompassing all 8 Counties, noting favorite spots of interest in each county. The training success, proven in the number of evaluations received and statistically significant learning gains, showcases the importance and impact of learning about PADs for the first time. Some key aspects of the training are as follows:

Training type	Sessions delivered	BBI observations/surveys
Crisis team	23 in-person + 2 virtual	14 observations; 25 surveys
Facilitator (Painted Brain/CFC)	3 four-hour sessions	2 observations; 3 surveys
Law enforcement	1 (first-ever, Orange County)	1 observation; 1 survey

BBI surveyed more than 350 individuals across these trainings.

Though more were trained within each county, CFC, working with each department's clinical supervisors, allocated the following number of "live" access accounts within each county:

County	Live Access
Alameda	16
Contra Costa	21
Fresno	54
Mariposa	3
Monterey	23
Orange	120
Shasta	5
TCMHA	5
	247

Painted Brain separately reports conducting 3 total facilitator training courses and finalizing three training-curriculum products: the PADs Readiness Training curriculum, the Train-the-Facilitator curriculum, and the companion Readiness Training Workbook. Over 130 facilitators have been trained since the start of Phase 2, leading to robust expansions of County priority populations as more staff are familiar with and supportive of PADs for both themselves and the individuals they engage with.

- **Measured impact:** Across all three training types, 91–96% of participants reported no prior PADs experience pre-training (starting point under 20% for all competencies listed below), with post-training confidence gains increasing roughly from 21 to 75 percentage points across specific competencies (e.g., navigating the platform, balancing PAD preferences with safety, understanding legal limitations). Behavioral intent was

high post-training: 90–96% of participants across groups said they intend to seek out and honor PADs in practice.

- **Observational impacts:** Participants frequently shared examples from their professional experiences, suggesting that the training content was relevant to their daily practice. Peer Support Specialists' live testimonials and shared lived experience, as well as the video presentation, added emotional depth and relevance to the training. Both observational and survey findings suggested that the training increased awareness of PADs and participants expressed preparedness to support PADs implementation. BBI also provided valuable insights after each training, highlighting areas of improvement, all of which were quickly acted on and led to higher rates of understanding and engagement of stakeholder groups.
- **Supporting materials:** Idea Engineering produced bilingual (English/Spanish) Crisis Team Training outreach materials, such as trifold and bifold brochures, laminated wallet cards, and custom infographics. Translation subcontractor Alpha Omega continues to translate all required print and digital material into threshold languages.
- **Additional presentations:** Concepts Forward Consulting continued to move the conversation of PADs forward within the counties and California by providing presentations to CALBHBC, CARE Court Public Defenders, Judicial Council and Department of State Hospitals, local Crisis Intervention Team meetings, law enforcement Sheriff's, all-staff meetings, leadership briefings, Managed Care and hospital staff, and Governing Boards. These presentations took place both virtually and in-person.
- **Facilitator Workgroup:** Seeing the need to address ongoing facilitator questions and to share in-the-moment information on platform development, Concepts Forward Consulting added a monthly Facilitator Workgroup to the calendar. There are 125+ invitations that go out monthly with a regular attendance of 25-30 facilitators from across our participating counties. This has been a great opportunity for Facilitators to share their thoughts on individual engagement and platform utility, and to give subcontractors a clear audience to roll out specific facilitation resources, such as Painted Brain showcasing the upcoming PADs Readiness Training and accompanying Guide and Workbook. This workgroup also provides a protected safe space for Facilitators to share any difficulties they are encountering with PADs, with the group as a whole



working together to discover solutions that ultimately benefit the entire project peer community, not just individual Counties. The discussions in the Workgroup have been instrumental in updating best practices for training, platform ease-of-use, marketing direction, and new resources that benefit facilitation for all 8 Counties.

4. Testing & Platform Performance

Data available:

Since the “live” release of the PADs platform or the digital registry website on February 1, 2026, PADs use has been growing each month.

- **Platform usage (BBI, excludes test accounts):** 140 web-based PADs created — 131 in draft, 1 edited, 8 published. Of those, 13 have all three required signatures completed, and 15 are awaiting one or more signatures. One item of note was that some PADs with all three signatures were not published. The Chorus team identified an internal snag and was able to remedy this for future PADs.

Demographics of PAD creators: 47% female, 36% male; 42% White, 39% Hispanic/Latino, with smaller shares Black/African American, American Indian/Alaska Native, MENA, and Asian (categories not mutually exclusive).

UX refinements made this year:

Chorus reduced cognitive load by moving key information (e.g., last-updated date) to the top of the page, clarified professional-facing privacy/access indicators, and is developing a way to distinguish independently completed PADs from facilitator-assisted ones.

- **Friction points identified in training:** Sign-in difficulties, missing access emails, and platform readability/navigation concerns during live demonstrations were a recurring theme across crisis team, law enforcement, and facilitator trainings.
- **Most important platform metric:** only 8 of 140 started PADs (5.7%) have reached “published” status. This completion/drop-off rate will be an important platform metric, as it speaks directly to whether the tool is achieving its purpose, not just whether people are starting to use it. This will be an important parameter to address within the county meetings and bi-annual convenings.

County	PADs	% of Total
Shasta	21	15%
Monterey	17	12%
Orange	15	11%
TCMHA	8	6%
Contra Costa	6	4%
Alameda	5	4%
Mariposa	3	2%
Fresno	1	1%
Outside Participating Counties	12	9%
Not specified	52	37%

Challenges Encountered:

- **Pared County Data:** Chorus is working on identifying how to ensure all signed PADs are being “published” or “live”; if not, then what is the root cause: is something missing from the individual’s PAD, or is it technology? As part of the project, these types of challenges are expected. An expectation of Chorus is vetting data and creating a data dashboard to assist the counties in identifying potential data reporting challenges earlier in the process. This gives county staff an opportunity to work with individuals who have facilitated PADs in real time.
- **Signatures:** As expected, having an individual living with a behavioral health condition, and maybe even having had a recent behavioral health crisis, to find two additional signatures, as required by current probate law in California, continues to pose a challenge. The platform can

email and request a digital signature, or, if created autonomously, the individual must return to the platform to confirm they have obtained all signatures. Once the individual leaves their facilitated appointment, our peer facilitators may never see them again. Some counties allow staff to sign the PADs as a witness, while others do not. The TCMHA contracted peer provider sits with the individual as they call their witnesses and waits with them until the document is digitally signed. This distinction in signature facilitation has provided TCMHA with the highest proportion of fully completed PADs (4 of 13). The counties and subcontractors are each working to identify what will work best to gather signatures from individuals who have facilitated PADs within the pilot groups, whether that is follow-up from the Facilitators or automated reminder emails from the Chorus platform. Because the instructional PAD for this project does not include medical advance directives for incapacity during a medical emergency, it is important to identify the distinct differences between these types of directives and lower the witness expectation for an instructional PAD. These will be explored in upcoming legislative discussions.

5. Evaluation

Data available:

BBI (Burton Blatt Institute, Syracuse University) is conducting a multi-year mixed-methods process and outcome evaluation addressing five core questions: understanding of PADs, creation/completion rates, use during crisis, association with outcomes, and whether implementation goals are being met.

- **Instruments and IRB:** IRB approval obtained for the Facilitator Training Survey, Crisis Team Training Survey, Law Enforcement Training Survey, Stakeholder/Professional Pop-Up Survey, and Individual PADs Survey; some instruments are already fielded, others are scheduled for later phases.
- **Evaluation infrastructure built:** a comprehensive PADs literature review; a de-identified “variable wish list” shared and discussed individually with each county; a standardized PADs data tracking template for outreach, completion, and decline-rate tracking.
- **Key evaluation challenge to disclose:** the platform-embedded Individual PADs Survey, the primary planned channel for reaching individual PAD-creators directly, has produced zero complete responses to date. BBI has proposed direct email outreach with a \$25 incentive per survey, through discussion with project partners, with an expectation to be finalized in July 2026. Though the project will continue to produce strong training-outcome evidence, without individual-level survey data, we will not have direct individual PAD-holder experience. Concepts Forward Consulting has also updated existing and created additional facilitator training to encourage survey participation with facilitated PADs. Of note, however, are a few verbal self-disclosures from individuals who have engaged with hospital staff about PADs during their own behavioral health crisis. Hospital staff have engaged with the individual to identify, with their PAD, what types of de-escalation techniques have worked for the individual in the past. These encounters led to a return to baseline within hours, with hospital discharge within the same day.
- **Secondary challenge:** Two of eight counties had not yet responded to BBI's data-sharing/variable-list feedback request as of this report; BBI and the Counties agreed to move forward with a streamlined data request, with Syracuse University facilitating formal data-sharing agreements as needed, if client-level internal data is required for the pilot populations being tested in each county.

6. Fiscal

Data available

Total multi-year contract: \$13,083,450. Year 1 budget: \$3,270,862.50. Year 1 actual + anticipated expenses: \$2,921,301 — 89.3% of the Year 1 budget.

Subcontractor	Total contract	Yr 1 budget	Yr 1 spend	% Yr 1 spent
Chorus Innovations	\$4,850,000	\$1,212,500	\$1,212,498	100.0%
Concepts Forward Consulting	\$2,300,000	\$575,000	\$574,992	100.0%
Burton Blatt Institute (Eval.)	\$2,251,386	\$562,847	\$403,198	71.6%
Syracuse Univ. (Fiscal Admin)	\$1,482,064	\$370,516	\$267,843	72.3%
Painted Brain	\$1,000,000	\$250,000	\$213,187	85.3%
Idea Engineering	\$1,000,000	\$250,000	\$247,461	99.0%
Alpha Omega Translations	\$200,000	\$50,000	\$2,123	4.2%
Total	\$13,083,450	\$3,270,863	\$2,921,301	89.3%
County	Total budget	Yr 1 budget	Yr 1 spend	% Yr 1 spent
Orange	\$6,125,448	\$1,531,362	\$1,390,287	90.8%
Fresno	\$3,000,000	\$750,000	\$646,390	86.2%
Alameda	\$1,168,002	\$292,001	\$257,799	88.3%
Contra Costa	\$1,000,000	\$250,000	\$214,813	85.9%
Monterey	\$1,000,000	\$250,000	\$222,596	89.0%
Tri-City	\$500,000	\$125,000	\$109,249	87.4%
Shasta	\$265,000	\$66,250	\$61,640	93.0%
Mariposa	\$25,000	\$25,000	\$18,527	74.1%

- **Explained variances:** All subcontractors, with the exception of Concepts Forward Consulting, began Phase 2 work product after contracts were signed on October 1, 2025. Most subcontractors worked diligently to catch up with Year 1 expectations. Some challenges could not be remedied, such as staff turnover within Painted Brain and BBI, or low translation utilization of Alpha Omega. All project deliverables remain on schedule.

7. Transparency & Communications

Data available

For marketing and social media, the project utilizes Idea Engineering, who provided expertise and analytics for the following project campaigns:

- **padsca.org:** 3,432 users and 5,542 visits from July 2025–June 2026 without paid promotion (paid traffic was directed to myplanmyvoice.com instead); average session length of 2 minutes 27 seconds.
- **“Talking About PADs” campaign:** paid media ran May–June 2026 across Meta, YouTube, and Google Search in 7 of 8 pilot counties (Fresno did not participate), generating 3.27M impressions and 79,865 clicks (2.44% CTR); Spanish-language content represented 21.3% of impressions and 21.5% of clicks.
- **Newsletter/social:** a May e-newsletter announcing the launch reached 239 recipients (36.4% open rate, 9.6% click-through); ongoing Instagram support; Painted Brain featured PADs in 4 monthly newsletters and 1 advocacy newsletter.
- **Fillable PDF resource:** Idea Engineering produced a 30-page fillable/printable PDF version of the PAD, mirroring the online platform questions, for individuals who would like to be prepared for the questions asked of them to inform their decisions when entering the digital platform. This PDF version is available through www.padsca.org and in the upcoming Painted Brain led “PADs Readiness Trainings.”



Lessons learned:

- **Ongoing advertising:** when rolling out a new product or program, a county will have to advertise on a monthly or ongoing basis. The thought of a “one-and-done” advertising approach to reach the desired population is simply not effective.
- **Variety is key:** together, the multi-channel communications provided practical tools for implementation and a coordinated foundation for broader awareness and use of PADs across participating communities. Customizing social media, print material, bus-stop signs, radio, and newspaper ad placement seems to be the best course of action.

8. Year 2

Next Steps:

- Platform will be fully accessible in all threshold languages within the participating counties, which include the translation back to English for professionals with individuals who use their native language to fill out their PAD.
- Continued Platform enhancements and updates.
- Provide PADs Readiness training created by Painted Brain for facilitators and staff in each county.
- Continue priority population expansion and engagement within all Counties.
- Continue Proposition 1 and BHSA Transformation alignment
- Continue professional training of Crisis Systems, including Stabilization Units, Residential Treatments, Mobile Crisis, law enforcement, and hospital staff to access the PADs portal, County Executive Teams, or any other identified as needing access training.
- Encourage Billing of PADs activities under Department of Health Care Services BHIN 23-025 and 25-010.
- Outreach and engagement campaigns continue throughout the year, based on the individual county needs.

- Continued cycle of meetings and convenings for learning community and collaboration.
- Continued data collection and evaluation.
- Begin legislative conversations to enhance the use, access, and acceptance of PADs throughout California.
- Continue to provide PADs subject matter expertise in presentations and conferences to widen the understanding and engagement of PADs throughout California.