



Community Health Commission
Andy Katz, Chair
Susan Reese, Vice Chair
Kellie Knox, Staff Secretary

Community Health Commission

Thursday, June 25, 2026, 6:30 – 9:00pm

Meeting Location:

Judge Henry Ramsey Jr. South Berkeley Senior Center
2939 Ellis Street, Berkeley, CA 94703
Phone: 510-981-5170

AGENDA

Preliminary Matters

1. Call to Order by Chair
2. Roll Call by Secretary
3. Land Acknowledgement (Attachment 5)
4. Announcements & Introductions
5. Public Comment – The public may comment about any item **not** on the agenda. Public comments are limited to two minutes per speaker.

Discussion and Action Items

Public comments regarding agenda items will be heard while the Commission is discussing the item. Public comments are limited to two minutes per speaker.

1. HHCS Director Report – Scott Gilman
2. CHC Chair's Report
3. Approval of Draft Minutes from 5/28/26 Regular Meeting – Action (Attachment 1)
4. City Manager's FYI 2027 & 2027 Proposed Budget Balancing Plan - Action (Attachment 6)
5. Community Health Improvement Plan - Working Group Updates - Discussion
6. CHC FY 26-27 Work Plan Review - Discussion (Attachment 2)
7. Commission Workgroups - Action

Future Agenda Items:

- PH Program Presentations
- MIH/CP pilot and CARE/Health One presentation
- Briefing on Housing funding by Homeless Panel of Experts or Housing Action Committee
- Environmental Justice/Safety Elements Presentation Plan – July or September
- Proposal to Resume Operations of BEAR Program – June
- Environmental Health Restaurant Inspection Audit Update – Fall 2026

Adjournment

Attachments

1. Draft minutes from 05/28/2026 CHC Regular meeting
2. CHC 2025-2026 Work Plan
3. CHC Meeting Calendar 2026
4. City Council and Community Health Commission Timeline 2026

A Vibrant and Healthy Berkeley for All

5. Land Acknowledgement
6. CHC Recommendations to Council re City Manager's FY 2027 & 2028 Proposed Budget Balancing Plan

The *next meeting* of the Community Health Commission is scheduled to be held on Thursday, July 23, 2026 with a *deadline of Tuesday, July 14, 2026 for the public's submission of agenda items and materials for the agenda packet*. **Dates are subject to change.** Please contact the Commission Secretary to confirm.

Any writing or documents provided to a majority of the commission regarding any item on this agenda will be made available for public inspection at Health, Housing & Community Services Department located at 2180 Milvia Street, 2nd floor, Berkeley, CA 94704 during regular business hours. The Commission Agenda and Minutes may be viewed on the City of Berkeley website: [Boards & Commissions | City of Berkeley \(berkeleyca.gov\)](#) (SB 343)

CONFLICT OF INTEREST INFORMATION: City commissioners, pursuant to Government Code section 1090, are responsible for recusing themselves from all commission discussions and actions in which they may have a conflict of interest. If your affiliation, paid or unpaid, with other agencies has changed since the last meeting of this commission, your ability to participate in commission activities may have changed. Individual guidance is available from the City Attorney's Office (CAO). Commissioners are encouraged to consult with the CAO if they have questions, concerns, or would like clarification about matters related to potential conflicts of interest.

The CAO may be reached at:

Email: attorney@cityofberkeley.info
TEL: (510) 981-6950 TDD: (510) 981-6347, FAX: (510) 981-6960
2180 Milvia Street 4th Floor, Berkeley, CA 94704 - Office Hours: Mon-Fri, 8am-5pm

COMMUNITY ACCESS INFORMATION: This meeting is being held in a wheelchair accessible location. To request disability-related accommodation(s) to participate in the meeting, including auxiliary aids or services, please contact the **Disability Services Specialist at 981-6418 (V) or 981-6347 (TDD)** at least three business days before the meeting date. Please refrain from wearing scented products to this meeting.

Communications to Berkeley boards, commissions or committees are public records and will become part of the City's electronic records, which are accessible through the City's website. Please note: e-mail addresses, names, addresses, and other contact information are not required, but if included in any communication to a City board, commission or committee, will become part of the public record. If you do not want your e-mail address or any other contact information to be made public, you may deliver communications via U.S. Postal Service or in person to the secretary of the relevant board, commission or committee. If you do not want your contact information included in the public record, please do not include that information in your communication. Please contact the commission secretary for further information.

Secretary:

Kellie Knox
Health, Housing & Community Services Department
2180 Milvia Street, 2nd Floor, Berkeley, CA 94704 510-981-5301 kknox@berkeleyca.gov



Community Health Commission
Andy Katz, Chair
Kellie Knox, Staff Secretary

Community Health Commission
DRAFT MINUTES
Regular Meeting, Thursday, May 28, 2026

The meeting convened at 6:46 p.m. with Commissioner Katz presiding.

ROLL CALL

Present: Commissioners Bacon, Charney, Herzer-Baptiste, Katz, Marasovic, and Reese.

Absent: Commissioner Breckwich Vasquez.

Excused: None.

Staff present: Roberto Terrones, Scott Gilman, Janice Chin

Community Members: None

COMMENTS FROM THE PUBLIC: None.

ACTION ITEM

3. M/S/C (Charney/Herzer-Baptiste): Motion to approve the draft minutes from meeting on April 23, 2026

Ayes: Commissioners Bacon, Charney, Herzer-Baptiste, Katz, Marasovic and Reese.

Noes: None.

Abstain: None

Absent from Vote: Commissioner Breckwich Vasquez

Excused: None.

Motion Passed.

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ACTION ITEM

8. M/S/C (Herzer-Baptiste/Charney) Motion to create ad-hoc work plan committee with Commissioners Herzer-Baptiste, Charney and Marasovic.

Ayes: Commissioners Bacon, Charney, Herzer-Baptiste, Katz, Marasovic, and Reese.
Noes: None.

Abstain: None

Absent from Vote: Commissioner Breckwich Vasquez.

Excused: None.

Motion Passed.

ACTION ITEM

- 10.M/S/C (Marasovic/Reese): Motion to extend meeting by 5 minutes.

Ayes: Commissioners Bacon, Charney, Herzer-Baptiste, Katz, Marasovic, and Reese.

Noes: None.

Abstain: None.

Absent from Vote: Commissioner Breckwich Vasquez.

Excused: None.

Motion Passed.

ACTION ITEM

- 9.M/S/C (Herzer-Baptiste/Charney): Motion to elect Commissioner Reese for Vice-Chair.

Ayes: Commissioners Bacon, Charney, Herzer-Baptiste, Katz, Marasovic, and Reese.

Noes: None.

Abstain: None.

Absent from Vote: Commissioner Breckwich Vasquez.

Excused: None.

Motion Passed.

Discussion and Action Items

1. Public Health Officer / HHCS Director Report – Scott Gilman
2. CHC Chair’s Report
3. Approval of Draft Minutes from 04/23/2026 Regular Meeting- Action (Attachment 1)
4. City Manager’s FY 2027 & 2028 Proposed Budget Balancing Plan – Action (Attachment 6)
5. Status Update: Disability Rights California v County of Alameda Settlement Agreement – Discussion (Attachment 7)
6. Community Health Improvement Plan – Discussion (Attachment 8)
7. Work Plan review -Discussion (Attachment 2)
8. Commission Workgroups -Action
9. Election of Vice Chair – Action
10. Extend meeting end - Action

Future Agenda Items:

- PH Program Presentations
- MIH/CP pilot and CARE/Health One presentation
- Briefing on Housing funding by Homeless Panel of Experts or Housing Action Committee
- Environmental Justice/Safety Elements Presentation Plan – July or September
- Work Plan – June
- Proposal to Resume Operations of BEAR Program – June
- Environmental Health Restaurant Inspection Audit Update – next update

This meeting adjourned at 9:06 p.m.

Minutes will be reviewed and approved on Thursday, June 25, 2026.

Respectfully submitted,
Kellie Knox, Commission Secretary _____

Community Health Commission 2025-26 Work Plan

Guiding Philosophy: To look at health through an equity lens in order to address, ameliorate, and abolish health inequities in Berkeley while addressing and supporting public health efforts in collaboration with the City of Berkeley City Council, City of Berkeley Public Health staff, and community members.

I. Mission/Purpose:

- A. Collaborate with the community, the City of Berkeley Health Officer Unit, Public Health Division, and Berkeley City Council to eliminate health inequity by: Advocating to the City Council for policies that have the potential to improve the health of Berkeley residents and that can be implemented, monitored and evaluated.
 - 1. Representing the diversity of the community through the diversity of this commission's membership.
 - 2. Increasing public education and engagement to develop greater understanding and awareness of public health issues.
 - 3. Advocating with the residents of Berkeley most affected by institutional, social, and organizational inequities and disparities.
 - 4. Providing a public forum for all community members to share their public- health related concerns and ideas
- B. Achieve progress in attaining general good health for all Berkeley residents by being responsive to community needs and facilitating general health and safety.

Overall issues to be addressed through a health equity lens.

- a. Be responsive to recommendations that will help Berkeley residents, care providers, and clinics cope with spending cuts to local, state, and federal funding.
- b. Continue to be a community advocate to City Council to address structural, institutional, and health inequities impacting all underserved populations, taking into account the social determinants of health.
- c. Evaluate and act on health status data such as the 2018 Health Status Report, and data updated in the Community Health Assessment and other periodic reports.
- d. Increase healthy food security, particularly preparing for SNAP/CalFresh changes, including advocating for the necessary support for the Berkeley Food Network / Pantry, and access to fresh groceries.
- e. Support expansion of affordable housing as a part of addressing root causes of health disparities.
- f. Work to support policies and initiatives that advance Universal Health Care such as Medicare for All.

- g. Advise the City Council as HHCS and Public Health Division develop the strategic plan and Results-Based Accountability framework, Community Health Assessment, and Community Health Improvement Plan.

II. General steps and actions needed to meet priorities:

- A. Conduct outreach to encourage Berkeley community members to engage with the CHC, inclusive of diverse communities.
- B. Collaborate with other commissions to share resources and support recommendations.
- C. Form focused/specialized work groups, as needed.

1. Basic Needs Security

- a. Focus on healthy food security and affordable/accessible housing.
- b. Advocate for affordability and accessibility of healthy foods by supporting programs in Berkeley that address these issues.
- c. Advocate for affordable housing and rent protections for Berkeley residents.
- d. Connect with community-based organizations and appropriate City of Berkeley departments to acquire information about available resources for Berkeley residents.

2. Chronic Disease Prevention

- a. Recommend interventions to address diabetes, obesity, heart diseases, and other chronic conditions highlighted by the updates to Berkeley health status report and Community Health Assessment.
- b. Engage with Public Health Division staff development of Results-Based Accountability framework and evaluation of public health programs.

3. Health Equity

Engage with Public Health staff and community members to advocate for the implementation of strategies that will reduce health inequities, detailed in the Health Status Report:

- a. Monitor the utilization and support outreach for the West Berkeley Family Wellness Center.
- b. Continue to support the development of the African American Holistic Resource Center.
- c. Investigate and implement efforts to improve immigrant access to health care.

4. Health Facilities

- a. Address the planned closure and replacement of Alta Bates Hospital to maintain acute care services for Berkeley residents, including evaluation and advocacy of the adequacy of the number of replacement beds in the successor acute care hospital facility, and the inclusion of critical care services such as Labor and Delivery, Cardiac Catheterization, and Burn Units.

- b. Continue to engage with and monitor city council actions related to implementation of the Commission's recommendation and council referral on ombudsperson funding and safe staffing at long-term care facilities.

5. Environmental Health

- a. Monitor and engage with city council actions responding to the City Auditor's audit of restaurant health and safety.
- b. Monitor environmental health division programs regarding vector control and other programs to protect environmental health and safety.
- c. Engage with the Planning Division to provide input to the City of Berkeley General Plan Environmental Justice element.

2026 Commission Meeting Schedule

Please complete this form and email it to the commission@berkeleyca.gov by: **Wednesday, January 7, 2026**

Name of Commission: Community Health

Commission Secretary: Kellie Knox

Example

Month	Meeting Day	Meeting Date	Time
February 2026	Wednesday	2/11/2026	7:00 pm

Month	Meeting Day	Meeting Date	Time
January 2026	Thursday	1/22/2026	6:30 pm
February 2026	Thursday	2/26/2026	6:30 pm
March 2026	Thursday	3/26/2026	6:30 pm
April 2026	Thursday	4/23/2026	6:30 pm
May 2026	Thursday	5/28/2026	6:30 pm
June 2026	Thursday	6/25/2026	6:30 pm
July 2026	Thursday	7/23/2026	6:30 pm
August 2026	Thursday	No Meeting	
September 2026	Thursday	9/24/2026	6:30 pm
October 2026	Thursday	10/22/2026	6:30 pm
November 2026	Thursday	No Meeting	
December 2026	Thursday	12/03/2026	6:30 pm

HHCS DEPARTMENT 2026 COUNCIL MEETING TIMELINE

Att-04

COUNCIL MEETING	THURSDAY 5:00 PM Reports Due to Director	THURSDAY 12:00 PM - Day 33 - DEPT. REPORTS DUE TO CLERK	THURSDAY 12:00 PM - Day 19 - AGENDA COMMITTEE PACKET TO PRINT	MONDAY 2:30 PM - Day 15 - AGENDA COMMITTEE MEETING	WEDNESDAY 11:00 AM - Day 13 - FINAL AGENDA MEETING (PRINT AGENDA ON WED.)	THURSDAY By 5:00 PM - Day 12 - COUNCIL AGENDA DELIVERY
Winter Recess [December 3, 2025 through January 19, 2026]						
Jan 20	12/4	12/18	1/2 (Fri)	1/5	1/7	1/8
Jan 27	12/11	12/26 (Fri)	1/8	1/12	1/14	1/15
Feb 10	12/26	1/8	1/22	1/26	1/28	1/29
Feb 24	1/8	1/22	2/5	2/9	2/11	2/11 (Wed)
Mar 10	1/22	2/5	2/19	2/23	2/25	2/26
Mar 24	2/5	2/19	3/5	3/9	3/11	3/12
Spring Recess [March 25 through April 13, 2026]						
Apr 14	2/26	3/12	3/26	3/31 (Tue)	4/1	4/2
Apr 21	3/5	3/19	4/2	4/6	4/8	4/9
Apr 28	3/12	3/26	4/9	4/13	4/15	4/16
May 12	3/26	4/9	4/23	4/27	4/29	4/30
May 19	4/2	4/16	4/30	5/4	5/6	5/7
Jun 9	4/23	5/7	5/21	5/28 (Thur)	5/28 (Thur)	5/29 (Fri)
Jun 16	4/30	5/14	5/28	6/1	6/3	6/4
Jun 30	5/14	5/28	6/11	6/15	6/17	6/18
Jul 7	5/21	6/4	6/18	6/22	6/24	6/25
Jul 14	5/28	6/11	6/25	6/29	7/1	7/2
Jul 28	6/11	6/25	7/9	7/13	7/15	7/16
Summer Recess [July 29 through September 14, 2026]						
Sep 15	7/30	8/13	8/27	8/31	9/2	9/3
Sep 29	8/13	8/27	9/10	9/14	9/16	9/17
Oct 13	8/27	9/10	9/24	9/28	9/30	10/1
Oct 27	9/10	9/24	10/8	10/13 (Tue)	10/14	10/15
Nov 17	10/1	10/15	10/29	11/2	11/4	11/5
Dec 1	10/15	10/29	11/12	11/16	11/18	11/19
Dec 15	10/29	11/12	11/25 (Wed)	11/30	12/2	12/3
Winter Recess [December 16, 2026 through January 18, 2027]						

VTO Affected Dates	Holiday Affected Dates	Religious Holiday Affected Date
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Updated 10/22/25

Reports not submitted by the deadlines listed will not be included on the agenda.

HHCS COMMISSIONS 2026 COUNCIL MEETING TIMELINE

COUNCIL MEETING	Thursday Commission needs to take action by	THURSDAY 5:00 PM Reports Due to Director	THURSDAY 12:00 PM - Day 33 - DEPT. REPORTS DUE TO CLERK	THURSDAY 12:00 PM - Day 19 - AGENDA COMMITTEE PACKET TO PRINT	MONDAY 2:30 PM - Day 15 - AGENDA COMMITTEE MEETING	WEDNESDAY 11:00 AM - Day 13 - FINAL AGENDA MEETING (PRINT AGENDA ON WED.)	THURSDAY By 5:00 PM - Day 12 - COUNCIL AGENDA DELIVERY
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Jun 30	5/7	5/14	5/28	6/11	6/15	6/17	6/18
Jul 7	5/14	5/21	6/4	6/18	6/22	6/24	6/25
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Winter Recess [December 16, 2026 through January 18, 2027]							

VTO Affected Dates	Holiday Affected Dates	Religious Holiday Affected Date
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Updated 10/22/25

Reports not submitted by the deadlines listed will not be included on the agenda.

Land Acknowledgement Statement

Att-05

The City of Berkeley recognizes that the community we live in was built on the territory of xučyun (Huchiun (Hooch-yoon)), the ancestral and unceded land of the Chochenyo (Cho-chen-yo)-speaking Ohlone (Oh-low-nee) people, the ancestors and descendants of the sovereign Verona Band of Alameda County.

This land was and continues to be of great importance to all of the Ohlone Tribes and descendants of the Verona Band.

As we begin our meeting tonight, we acknowledge and honor the original inhabitants of Berkeley, the documented 5,000-year history of a vibrant community at the West Berkeley Shellmound, and the Ohlone people who continue to reside in the East Bay.

We recognize that Berkeley's residents have and continue to benefit from the use and occupation of this unceded stolen land since the City of Berkeley's incorporation in 1878.

As stewards of the laws regulating the City of Berkeley, it is not only vital that we recognize the history of this land, but also recognize that the Ohlone people are present members of Berkeley and other East Bay communities today.



Att-06

Community Health Commission
Andy Katz, Chair
Kassandra Bacon, Vice-Chair
Kellie Knox, Staff Secretary

May 14, 2026

The Honorable Adena Ishii, Mayor and Members of the Berkeley City Council
2180 Milvia Street
Berkeley, CA 94704

**Re: Community Health Commission Recommendations on the City Manager's
FY 2027–2028 Proposed Budget Balancing Plan – Public Health Division**

Mayor Ishii and Members of the City Council:

At its regular meeting of April 23, 2026, the Berkeley Community Health Commission reviewed the City Manager's FY 2027–2028 Proposed Budget Balancing Plan as it pertains to the Public Health Division of the Health, Housing and Community Services Department (HHCS). The Commission voted unanimously to transmit the following recommendations to the City Council, which will consider adoption of the Biennial Budget on June 23, 2026.

The Commission recognizes the severity of the structural deficit facing Berkeley and the genuinely difficult choices before the Council. We write in that spirit, not to minimize the fiscal constraints, but to ensure that the public health consequences of specific proposed reductions are fully weighed, and to offer the Council a path that addresses the most serious impacts. Our recommendations focus on three areas: the Heart to Heart cardiovascular health program, Public Health Emergency Preparedness, and the cumulative effects of these and related cuts on Berkeley's most vulnerable residents.

**1. Heart to Heart Program – Retain or Ensure Continuity Through a
Community-Based Organization**

The Commission recommends that the Council **retain the Heart to Heart program with at least 1.0 FTE**. If full retention is not fiscally feasible, we urge the Council to direct the City Manager to develop a transition plan that preserves program functions through a qualified community-based organization, with an express goal of maintaining program continuity and a defined timeline before any position is eliminated.

Heart to Heart is a population-level public health outreach program, not a clinical service that can be substituted by federally qualified health centers (FQHCs). The program links residents in South Berkeley communities with high proportions of Black, Latino, low-income, and uninsured residents – with blood pressure screenings, cardiovascular health education, and warm hand-offs to clinical care. It operates through barbershops, senior centers, and community organizations, reaching people who are statistically least likely to have an established primary care relationship. This model shows promise for eventual extension to address other health disparities affecting Berkeley residents such as pre-natal and postpartum maternal health.

Cardiovascular disease is a leading driver of the documented life-expectancy gap of more than ten years between Berkeley's flatland and hill neighborhoods. The City's 2018 Health Status Report and successive Community Health Assessments identify hypertension and cardiovascular mortality as priority health inequities disproportionately affecting Black residents and other communities of color in South Berkeley. The Community Health Improvement Plan adopted by the City has made closing this gap an explicit goal. Heart to Heart is the City's primary programmatic tool for reaching residents who sit outside the clinical system. Eliminating it does not transfer its function to FQHCs; it removes the community bridge that connects uninsured and disconnected residents to those services in the first place.

The Commission acknowledges that LifeLong Medical Care operates a related Heart 2 Heart program serving overlapping geographies and shares the City program's emphasis on community engagement and hypertension reduction. The Council should explore whether a formal transition to LifeLong or another community-based partner, with City coordination and accountability requirements, could preserve program

continuity while responding to budget constraints. Any such transition must include measurable service-level commitments, outreach to existing program participants, and a report back to this Commission.

2. Public Health Emergency Preparedness – Retain at Least 1.0 FTE

The Commission strongly recommends that the Council **retain at least 1.0 FTE dedicated to Public Health Emergency Preparedness.**

The City Manager’s Plan acknowledges that the proposed Measure GG reallocation will leave HHCS without capacity to coordinate comprehensive city-wide emergency readiness and response. Public health emergency preparedness is a distinct discipline from fire suppression and emergency medical response. It encompasses disease surveillance and outbreak investigation, mass vaccination planning, Medical and Health Operational Area Coordination (MHOAC) with the County and State, heat-emergency and wildfire-smoke response for vulnerable populations, and health-equity integration into emergency operations. These functions must be planned, exercised, and sustained before a disaster strikes; they cannot be improvised in the moment.

At minimum, retaining 1.0 FTE preserves coordination capacity, continuity of the City’s obligations under regional emergency planning frameworks, and the ability to provide safety-net vaccination and other preventive services. The Commission urges the Council to condition any temporary reallocation of Measure GG public health funding on a written, time-limited plan with a restoration trigger tied to passage of the November 2026 Sales and Use Tax measure.

3. Impacts on the Unhoused Community and Long-Term Behavioral Health Needs

The Commission expresses its deep concern about the cumulative effects of the proposed reductions on Berkeley’s unhoused residents and on the community’s long-term behavioral health capacity.

People experiencing homelessness have substantially higher rates of chronic disease, mental illness, and substance use disorders, and they depend heavily on the

public health and behavioral health infrastructure that the proposed budget would significantly reduce. The elimination of Mobile Crisis clinicians, the reduction of Targeted Case Management capacity, and the contraction of other HHCS programs will fall hardest on unhoused residents who have few or no alternatives for accessing care. The City Manager's Plan acknowledges that responsibility for psychiatric emergencies and wellness checks will shift to the Berkeley Police Department, a direction that is inconsistent with the alternative-response policy goals the Council has adopted and that will not serve the most vulnerable residents well.

More broadly, the proposed elimination of 32 Mental Health Division positions represents a structural contraction of behavioral health capacity at a moment of sustained community need. Berkeley's Community Health Assessment and preliminary Community Health Improvement Plan have consistently identified behavioral health, including mental illness, substance use, and overdose, as a leading driver of health inequity and premature mortality in our community. The Commission urges the Council to ensure that any restoration mechanism established in the budget resolution, particularly if the November 2026 Sales and Use Tax measure passes, applies to public health and behavioral health positions on the same footing as public safety positions designated for restoration.

The Berkeley Community Health Commission stands ready to work with the City Manager, HHCS leadership, and Council to identify paths forward that preserve core public health capacity. We ask the Council:

1. Retain Heart to Heart with at least 1.0 FTE or require a continuity plan through a community-based partner;
2. Retain at least 1.0 FTE for Public Health Emergency Preparedness; and
3. Ensure that behavioral health and public health restoration is treated as a priority alongside public safety if new revenues materialize in November.

These programs represent Berkeley's commitment, built over decades, to reach residents who are most affected by health inequities and least able to navigate the

health system on their own. We ask that this commitment not be quietly abandoned in a budget cycle. Thank you for your consideration.

Sincerely,

A handwritten signature in blue ink that reads "Andy Katz". The signature is written in a cursive, flowing style.

Andy Katz
Chair, Berkeley Community Health Commission