



California Association of Local Behavioral Health Boards and Commissions

SUMMER 2018 Newsletter

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CALBHBC NEWSLETTER

CALBHBC: A STATEWIDE ORGANIZATION SUPPORTING THE WORK OF LOCAL MENTAL HEALTH & BEHAVIORAL HEALTH BOARDS AND COMMISSIONS.

Yield not to calamity,
but face her boldly.
Virgil

Whether the calamity is a personal mental/behavioral health crisis or one of the many disasters impacting Californians recently (fires, floods, shootings, and more), creating effective plans to address disaster-related mental/behavioral health needs is critical.

To address individual and community needs, CALBHB/C is providing information at our [June 22 Statewide Meeting in L.A.](#), and through our [website](#) regarding:

1. **Disaster Preparedness & Recovery:** Mental/Behavioral Health Issues/Gaps & Planning: At our [June 22nd Annual Meeting in L.A.](#), a panel of local and statewide Mental/Behavioral Health Disaster Response leaders will address:

- The Spectrum: Needs & Levels of Care
- The Structure: Mental/Behavioral Health in Emergency Response Organizations
- The Issues: Addressing Problems & Solutions in Disaster-Related Mental Health/Behavioral Health.

2. **Psychiatric Advance Directives (PAD)**
PADs are legal documents, drafted when a person is well enough to consider preferences for future mental health treatment. PADs allow appointment of a health proxy to interpret those preferences in a crisis, and the PAD is used when a person becomes unable to make decisions during a mental health crisis. PAD forms, information & Mental Health America's video links at: www.calbhbc.com/disaster-recoveryreadiness.html

MEETINGS / TRAINING

Statewide: June 22/23, Los Angeles
Central: October 19/20, Folsom
Superior: August 25, Redding
Southern: January 18/19 San Diego

CALBHB/C Friday Meeting and CA Institute for Behavioral Health Solutions (CIBHS) Saturday Training Registration:
calbhbc.com/meetings-and-trainings.html

TOP ISSUES / SOLUTIONS

Housing is the #1 issue as reported by MH/BH boards/commissions. Adult Residential Facilities (Board and Cares) are a critical piece of the solution. Issue information at: www.calbhbc.com

Employment—Individual Placement & Support (IPS) has been identified as a successful practice, facilitating sustained employment for adults with mental illness.
www.calbhbc.com/employment.html

GOT 15 MINUTES?

Check out CALBHB/C's on-line training modules. Each module takes approximately 15 minutes—time well spent for new members and old.

The current modules address the Mental Health Services Act:

- 1) MHSA: Role of the MHB
- 2) MHSA: Fiscal Information.

On-Line Training & Handbooks at:
www.calbhbc.com/training.html

CONNECT WITH CALBHB/C

Share needs/issues/successes at [meetings](#), by email: info@calbhbc.com or report form: www.calbhbc.com/report-form.html. "Like" us at www.facebook.com/CALBHBC

Resources ([link to website](#))

Best Practices Handbook:

for Mental/Behavioral Health Boards & Commissions

Brown Act (Open Meeting Rules)

Data Notebooks

Mental Health Services Act *Plans/Innovations*

Reports (Local & Statewide)

Templates/Sample Docs

Bylaws, Recruitment, Site Visit and more!

Training (Online and Handbooks)

And More! www.calbhbc.com/resources.html

Duties of Boards & Commissions

The local mental health board shall do all of the following: ([CA WIC 5604.2\(a\)](#))

1. Review and evaluate the community's mental health needs, services, facilities, and special problems.
2. Review any county agreements entered into pursuant to [Section 5650](#).
3. Advise the governing body and the local mental health director as to any aspect of the local mental health program.
4. Review and approve the procedures used to ensure citizen and professional involvement at all stages of the planning process.
5. Submit an [annual report](#) to the governing body on the needs and performance of the county's mental health system.
6. Review and make recommendations on applicants for the appointment of a local director of mental health services. The board shall be included in the selection process prior to the vote of the governing body.
7. Review and comment on the county's performance outcome data and communicate its findings to the California Mental Health Planning Council. ([Data Notebooks](#))
8. Nothing in this part shall be construed to limit the ability of the governing body to transfer additional duties or authority to a mental health board.

(b) It is the intent of the Legislature that, as part of its duties pursuant to subdivision [5604.2](a), the board shall assess the impact of the realignment of services from the state to the county, on services delivered to clients and on the local community.

Mental Health Services Act (MHSA) Summary

The Mental Health Services Act of 2004, passed by the voters as "Proposition 63," increased overall State funding for the community mental health system by imposing a 1% income tax on California residents with more than \$1 million per year in income. The stated intention of the proposition was to "transform" local mental health service delivery systems from a "fail first" model to one promoting intervention, treatment and recovery from mental illness. A key strategy in the act was the prioritization of prevention and early intervention services to reduce the long-term adverse impacts of untreated, serious mental illness on individuals, families and state and local budgets.

According to WIC 5813.5, MHSA Planning for services shall be consistent with the philosophy, principles, and practices of the Recovery Vision for mental health consumers:

1. To promote concepts key to the recovery for individuals who have mental illness: hope, personal empowerment, respect, social connections, self-responsibility, and self-determination.
2. To promote consumer-operated services as a way to support recovery.
3. To reflect the cultural, ethnic, and racial diversity of mental health consumers.
4. To plan for each consumer's individual needs.

The Six Components: The funds are divided into six components. County mental health agencies are required to develop detailed plans for the use of MHSA funds in each of these components, then submit those plans to the Mental Health Services Oversight and Accountability Commission (MHSOAC) or State for approval. The following are the components.

1. Community Program Planning (CPP)
2. Community Services and Supports (CSS)
3. Prevention and Early Intervention (PEI)
4. Innovation (INN)
5. Capital Facilities & Technology Needs (CFTN)
6. Workforce Education and Training (WET)

More Info:

Role of the Mental Health Board w/[On-Line Training](#)
Component Descriptions
and

Fiscal Information

On-line: www.calbhbc.com/mhsa-plans--updates.html