



**California Association of Local Behavioral Health  
Boards and Commissions**

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**Annual Report to the MHSOAC**

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2019 - 2020

CALBHB/C supports the work of California's  
59 local mental/behavioral health boards and commissions.

[www.calbhbc.org](http://www.calbhbc.org)

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2019-2020 Annual Report to the MHSOAC**

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## I. EXECUTIVE SUMMARY

The mission of the California Association of Behavioral Health Boards and Commissions (CALBHB/C) is to support the work of California's 59 local mental/behavioral health boards and commissions by providing resources, training, and opportunities for communication and state-wide advocacy. CALBHB/C succeeded in the past year in fulfilling this mission in many ways, including:

### Service to Mental/Behavioral Health Boards and Commissions (MHBs)

CALBHB/C staff and leadership engaged with MHBs throughout the state, offering technical assistance, resources, issue-based mental health information and training. Communications were provided through: a dynamic, go-to website ([www.calbhbc.org](http://www.calbhbc.org)), informational newsletters and social media; regional & state-wide teleconferences; in-person meetings.

**Issue Advocacy:** CALBHB/C advocates for the best system of behavioral health care, to include culturally competent, evidence-based, recovery-focused treatment and services for all behavioral health consumers, including the unserved and underserved.

Input from CA's local boards/commissions provided the basis to identify issues for advocacy and to identify successful programs. Top mental health issues identified for 2019-20 advocacy include:

- 1) Behavioral Health Workforce
- 2) Residential Care Facilities (ARF, RCFE) for those with SMI ("Board & Cares")
- 3) Crisis Care Continuum for all ages to include: Peer Respite, Crisis Stabilization Units (all ages), Mobile Crisis, Crisis Residential
- 4) Children & Youth:
  - a) Increasing Mental/Behavioral Health Training for foster parents, caregivers and other professionals who support California's Foster Children and Youth
  - b) School-based offerings – Increase Mental/Behavioral Health programs for students (from Prevention and Intervention to Crisis Residential).
- 5) Employment for those with SMI, including state-wide Peer Provider Certification

See page 4 for information on how CALBHB/C addressed issues in 2019-2020.

**State-wide Collaboration:** CALBHB/C increased its state-wide presence this year through: communicating, collaborating and establishing relationships among CA's 59 local mental health boards/commissions, state-wide organizations, government officials, state and local legislators, and stakeholder organizations to increase understanding of the work and interests of local mental/behavioral health boards and commissions. CALBHB/C connected with many organizations such as:

- Behavioral Health Action Coalition
- CA Behavioral Health Planning Council
- CA Behavioral Health Directors Association
- CA Access Coalition
- CA Connection Coalition
- CA State Association of Counties (CSAC)
- CA Department of Rehabilitation (DOR)
- Department of Health Care Services
- The Kennedy Forum (National Organization)
- Mental Health Services Oversight & Accountability Commission (MHSOAC)
- Mental Health America of CA
- National Alliance for Mental Health (NAMI) CA
- Steinberg Institute

## II. BACKGROUND

The California Association of Behavioral Health Boards and Commissions (CALBHB/C) is a 501(c)(3), non-profit public benefit corporation created in 1993.

### **Mission:**

CALBHB/C supports the work of California's 59 local mental/behavioral health boards and commissions (MHBs) by providing resources, training and opportunities for communication and state-wide advocacy.

Local boards are responsible for reviewing community mental health needs, services, facilities and special problems, and serve in an advisory capacity to local governing bodies and local mental/behavioral health directors per CA Welfare and Institutions Code 5604.2. Link to [www.CALBHBC.org](http://www.CALBHBC.org)

### **Membership:**

CALBHB/C membership is comprised of California's 59 local mental/behavioral health boards and commissions. Members include MHBs from 58 counties (two counties work together as one entity), plus the City of Berkeley Mental Health Commission and the Tri-City Mental Health Board.

Members of local boards are appointed by their board of supervisors or governing body. At least 50% of local board members must be individuals with lived experience of mental illness (aka "consumers") or family members of consumers. MHB membership should reflect the ethnic and cultural diversity of the communities served.

Local boards and commissions are located in five different regions: Superior, Central, Bay Area, Southern and Los Angeles (Regions coincide with the County Behavioral Health Directors Association regions). Link to [Regional Map](#) and [MHB Websites](#).

### **Leadership ([Link to Bios](#)):**

Governing Board: CALBHB/C is led by an elected Governing Board that is comprised of a President, Vice President, Secretary/Treasurer, with up to three board members from each of the five regions. The Governing Board members are all current members of local mental/behavioral health boards.

Staff Leadership: CALBHB/C has an Executive Director.

### **Funding:**

Funding includes membership [dues](#) from CA's local mental/behavioral health boards and commissions, and an annual \$55,500 contract from the Mental Health Services Oversight & Accountability Commission.

### III. SERVICE TO MENTAL HEALTH/BEHAVIORAL HEALTH BOARDS

#### 1. Addressing Issues:

**Listening:** Through in-person meetings, teleconferences, and on-line reporting, local boards/commissions were encouraged to report local mental/behavioral health issues. This input provided the basis to identify issues for advocacy and to identify successful programs.

**Responding:** Mental/behavioral health issues were addressed with issue papers, website resources, communication of successful practices, policy and legislative advocacy.

CALBHB/C supported 10 mental-health related bills/appropriations/policies. Issue-based advocacy was always done in compliance with state and federal laws and regulations affecting advocacy by non-profit, charitable organizations.

<u>Issue</u>	<u>Resource</u>
Access	<a href="#">Legislative Support for SB 855</a>
Adult Residential Facilities	<a href="#">Issue Brief, Legislative &amp; MediCal Waiver Advocacy</a>
COVID 19	Emergency BH Appropriations Advocacy – <a href="#">State</a> , <a href="#">Federal</a>
Criminal Justice	<a href="#">Issue Brief, Performance Outcome Data</a>
Peer Provider Certification	<a href="#">Legislative Support for SB 803</a>
Performance Outcome Data	<a href="#">Issue Brief &amp; Web Pages for 59 counties/jurisdictions</a>
Suicide Prevention	<a href="#">Issue Brief</a> , Mailed/Emailed MHSOAC “ <a href="#">Striving for Zero</a> ”
Various (29 Issues)	<a href="#">Website News/Issues</a>

#### 2. Meetings/Trainings:

CALBHB/C conducted meetings in conjunction with Mental Health Board trainings for each region. Meeting presenters included MHSOAC Advocacy Stakeholder Contractors, state-wide organizations and experts. Training recordings and materials are at: <https://www.calbhbc.org/training.html>

<u>City</u>	<u>Month</u>	<u>Region</u>	<u>Attendees</u>
Chico	August	Superior	28
Stockton	October	Central	24
San Diego	January	LA/Southern	25
Teleconference	April	Bay Area (State-wide)	30
Teleconference	June	Southern/Superior (State-wide)	43
Also Supervisors Caucus for local Board of Supervisor Members			20

**Teleconferences:** CALBHB/C also conducted the following topic-specific state-wide teleconferences for local mental/behavioral health board/commission members and local staff.

<u>Topic</u>	<u>Date</u>	<u>Attendees</u>
<a href="#">WIC 5604 Update (due to AB 1352)</a>	December 4	65
<a href="#">Adult Residential Facilities</a> – Critical Need	January 10	45
<a href="#">Criminal Justice (1) (2) &amp; Suicide Prevention</a>	January 31	34
<a href="#">Older Adults</a>	February 21	39
<a href="#">Public Meetings by Teleconference</a>	March 17	80

**Board-Specific:** Local board trainings were provided as requested, including Sierra and Amador Counties. Presentations regarding state-wide issues/policy were provided to Alameda and Sonoma counties.

### 3. Technical Support

CALBHB/C staff and Governing Board members were engaged with all mental/behavioral health boards and commissions in the state. In addition to hundreds of support calls and emails, staff and Governing Board members travelled for in-person visits with board/commission leadership around the state, and connected by teleconference.

Support resources found at [www.calbhbc.org/resources](http://www.calbhbc.org/resources) include “Frequently Asked Questions”, reports, templates/sample documents, handbooks, on-line trainings and more. Instructional materials are provided at [www.calbhbc.org/training](http://www.calbhbc.org/training) and technical questions from local board members are answered within 24 hours. Additional resources developed this year include: “Conduct”, “MHS Community Program Planning” and [Performance](#) Webpage.

CALBHB/C also provided communication and support to local boards to facilitate completion and submission of two surveys requested by the CA Behavioral Health Planning Council: the “Data Notebook” and “Patients’ Rights Advocacy in County Jails”.

### 4. MHS Review Strategy (for 3-Year Plans, Updates and Innovation Plans)

The review and analysis of the MHS Three-Year Plans, Annual Updates and Innovations Plans can be major undertakings for mental/behavioral health boards/commissions (MHBs). Related MHB duties (according to CA WIC 5604.2 and WIC 5848) include:

1. Assure Citizen and Professional Involvement (5604.2)
2. Review, and Advise (5604.2)
3. Conduct Public Hearings (5848)

The plan documents are lengthy and complex (including program descriptions, populations served, penetration rates, charts, graphs, and fiscal documents).

To help local boards/commissions fulfill MHS-related duties, CALBHB/C is focusing on two primary areas: **A) Resources/training** for local boards/commissions and staff; **B) Performance Outcome Data**.

**A. Resources/Training:** CALBHB/C provides resources, advice and training to MHBs to help with effective review of MHS Three-Year Plans, Annual Updates and Innovations Plans. Resources include:

1. [“Best Practices 2020” Handbook, Pages 19-23.](#)
2. [Frequently Asked Questions](#) (FAQs), #5, #6
3. On-line MHS Training Module/Materials include:
  - [MHS: Role of MHB \(15 Minutes\)](#)
  - [MHS: Fiscal \(15 Minutes\)](#)
  - [MHS CPP: Community Program Planning](#) (1 page PDF)
4. CALBHB/C included CPP training during all regional and state-wide MHB trainings.

- B. Performance Outcome Data:** To effectively review MHSAs Plans and Updates, boards and commissions need access to meaningful performance outcome data. Currently each of CA's 59 mental/behavioral health agencies collect and report on different MHSAs performance outcome data, with some providing meaningful data, and some providing very little performance outcome data.

CALBHB/C's [Performance Outcome Data Issue Brief](#) & [Performance web pages](#) were developed to:

- 1. Call for Standardization:** CA law specifies that MHSAs plans shall include reports on the achievement of performance outcomes, to be established jointly by: **DHCS, MHSOAC**, in collaboration with **County BH Director's Association** and with the review and approval of the **CA BH Planning Council**.

CALBHB/C has formally requested that DHCS and MHSOAC establish a standardized set of MHSAs performance outcome data points. [Link to March 3 Letter](#)

- 2. Provide Data:** CALBHB/C culled performance outcome data from the most recent MHSAs plans and updates for all counties, and provides links to "Promising Data" by category and for all 59 counties/jurisdictions for MHSAs performance outcome data related to:

- Children & Youth
- Criminal Justice
- Employment
- Hospitalization
- Housing/Homelessness

[CALBHC.org/performance](http://CALBHC.org/performance) provides MHSAs performance outcome data (where it exists) for all 59 counties/jurisdictions, along with Medi-Cal EQRO, and SAMHSA PATH performance outcome data.

**IV. Publications:**

**Newsletters:** A quarterly, online newsletter was sent to every local mental/behavioral health board and commission and the county mental/behavioral health directors. The newsletters included information about important issues, upcoming meetings/trainings, links to registration and a description of resources. Newsletters are at: [www.calbhbc.org/newsissues](http://www.calbhbc.org/newsissues). E-Updates were also provided (usually monthly.)

**Website:** The CALBHB/C website, [www.calbhbc.org](http://www.calbhbc.org) contains a wealth of information. Publications include manuals, reports, templates/sample documents, newsletters, legislative advocacy and other useful information. CALBHB/C's on-line resource listing is shown below, and at: [www.calbhbc.org/resources](http://www.calbhbc.org/resources)

**Handbooks/Manuals:** CALBHB/C developed and maintains the *Best Practices for Local Mental/Behavioral Health Boards and Commissions Handbook*.

<b>Topics</b>	<b>Templates/Sample Docs:</b>	<b>Training/Handbooks:</b>
1. <a href="#">Advocacy</a>	1. <a href="#">Agendas</a>	1. <a href="#">TRAINING</a> - Online Links, Training Materials, Training Dates.
2. <a href="#">Brown Act</a>	2. <a href="#">Annual Goals (and Task List)</a>	2. <a href="#">Best Practices 2020</a> Guidance & examples for local mental/behavioral boards/ commissions:
3. <a href="#">Community Program Planning</a>	3. <a href="#">Annual Reports</a>	<a href="#">Advocacy</a>
4. <a href="#">Conduct</a>	4. <a href="#">Bylaws</a>	<a href="#">Ad Hoc</a>
5. <a href="#">Cultural Competence</a>	5. <a href="#">Member Orientation</a>	<a href="#">Annual Reports</a>
6. <a href="#">Data Notebooks</a>	6. <a href="#">Recruitment (Application, Flyer, Interview Questions)</a>	<a href="#">Conduct</a>
7. <a href="#">Duties (CA WIC 5604.2)</a>	7. <a href="#">Site/Program Visit</a>	<a href="#">Data Notebooks</a>
8. <a href="#">Evidence-Based Practices</a>	<a href="#">Forms/Procedures</a>	<a href="#">MHSA:</a>
9. <a href="#">Frequently Asked Questions "FAQs"</a>	... <a href="#">and more</a>	<a href="#">Role of MHB</a>
10. <a href="#">Legislation -(W&amp;I Code) for Local Boards &amp; Commissions and Mental Health Divisions</a>		<a href="#">Community Program Planning</a>
11. <a href="#">Legislation - 2 (MHSA, Laura's Law, 5150+)</a>		<a href="#">MHSA Definition</a>
12. <a href="#">Legislative Advocacy</a>		<a href="#">MHSA Fiscal Information</a>
13. <a href="#">MHSA 3-Year Plans, Updates: MHB Role, Components, Fiscal Information</a>	<b>Issue Briefs:</b>	<a href="#">Recruitment</a>
14. <a href="#">Performance Outcome Data</a>	<a href="#">Board &amp; Care</a>	<a href="#">Resolutions-Recommendations</a>
15. <a href="#">Reports (Local Annual Reports, Statewide Reports)</a>	<a href="#">Criminal Justice</a>	<a href="#">Running a Good Meeting</a>
16. <a href="#">Templates/Sample Docs</a>	<a href="#">Disaster Prep/Recovery</a>	<a href="#">Site - Program Visits</a>
17. <a href="#">Training (Online Links, Training Materials, Training Dates)</a>	<a href="#">Employment</a>	<a href="#">Welfare &amp; Institution Code</a>
18. <a href="#">Websites for Local Boards &amp; Commissions</a>	<a href="#">Older Adults</a>	
19. <a href="#">Related Links (Other mental health resources/websites)</a>	<a href="#">Performance Outcome Data</a>	
	<a href="#">Suicide Prevention</a>	



## V. TRAINING

1. **On-Line:** On-line modules at [www.calbhbc.org/training](http://www.calbhbc.org/training) include:

**Duties of Local Boards** - Check Your Understanding of WIC 5604.2 Duties (15 minutes)

**Ethics Training (2-Hours)**

**Unconscious Bias** – To help boards/commissions advise within culturally/ethnically/racially diverse communities.

**MHSA Training Modules/Materials:**

1. [MHSA: Role of MHB \(15 Minutes\)](#)
2. [MHSA: Fiscal \(15 Minutes\)](#)
3. [MHSA CPP: Community Program Planning \(1 page\)](#)

2. **Hand-Book:** CALBHB/C developed and maintains the [Best Practices](#) for Local Mental/Behavioral Health Boards and Commissions Handbook.

3. **In-Person (Including Teleconference)** - CALBHB/C provided MHB trainings in all regions. Trainings (found at [www.calbhbc.org/training](http://www.calbhbc.org/training)) included instruction regarding “**Mental Health Board Training**” (including duties, performance, fiscal information and MHSA Community Program Planning – ensuring local stakeholder input during the development of MHSA 3-Year Plans, Updates and Innovation Plans) and “**Unconscious Bias**” – to help boards/commissions advise within culturally/ethnically/racially diverse communities. Additionally, a training on “**Public Meetings by Teleconference**” was provided to meet public health and safety needs due to COVID-19.

- **Regional:** All members of local mental/behavioral health boards and commissions are welcome to attend regional meetings and trainings. Additionally, the staff liaisons who support the local boards/commissions are welcome and encouraged to attend.
- **Los Angeles:** In addition to Los Angeles' Mental Health Commission, the Co-Chairs of the Service Area Leadership Teams were welcome to attend meetings and trainings.
- **State-wide:** For all teleconference trainings, all counties/jurisdictions are welcome to attend.
- **Expenses:** There is no fee to register for meetings/trainings. CALBHB/C covers travel expenses for one member per local mental/behavioral health board/commission in the region, but more are welcome. Additional members can be reimbursed in the case of boards/commissions with CALBHB/C Governing Board Members.
- **Schedule:** See page 4

## VI. REFLECTIONS & GOALS FOR THE FUTURE

### Progress, Challenges, Adaptation, Rationale and Goals for the Future

**Progress** came this year in the form of increased engagement and offerings:

1. **Technical Assistance:** There has been a steady flow of inquiries from local boards and commissions regarding duties, membership requirements, open meeting rules, conduct, racial bias, annual reports, ad hoc committees, and more. CALBHB/C responds via phone and email, providing resources electronically, and by mail when requested.
2. **Training** additions include: [Unconscious Bias](#) and [Public Meetings by Teleconference](#). Recordings of trainings are also now available on our website.
3. **Resource** additions include:
  - [Conduct](#)
  - [MHSA Community Program Planning \(CPP\) \(Definition, Participants & Process\)](#)
  - [Performance Outcome Data](#) for all 59 counties/jurisdictions (MHSA, Medi-Cal and SAMHSA)
4. **Issue Brief** additions include:
  - [Criminal Justice](#)
  - [Older Adults](#)
  - [Performance Outcome Data](#)
  - [Suicide Prevention](#)
5. **Issue-based Advocacy:** CALBHB/C leadership supported bills that are currently on Governor Newsom's desk (awaiting signature) regarding the Board and Care Issue (AB-2377, AB 1766), Access/Parity (SB 855) and Peer Support Specialist Certification (SB-803). These bills all could have transformative impact on local behavioral health systems of care.

### Challenges/Adaptation/Rationale:

1. **Commenting on performance outcome data** is a duty of the Mental Health Boards (WIC 5604.2 (a)(7.)) MHBs continue to need greater access to performance outcome data for review, analysis, and comment in order to better advise locally and communicate findings to the state.

CALBHB/C has addressed this issue in the following ways:

- A. Advocacy for standardization, collection and communication of performance outcome data.
  1. [December 3, 2019 Letter](#) to CA Assembly Budget Subcommittee No. 1 on Health & Human Services
  2. [March 3, 2020 Letter](#) to MHSOAC and DHCS
  3. [Performance Outcome Data Issue Brief](#)
- B. Performance Outcome Data for all 59 counties/jurisdictions (MHSA, Medi-Cal and SAMHSA) are provided at [www.calbhbc.org/performance](http://www.calbhbc.org/performance). We culled the MHSA performance outcome data from the most recent MHSA plans and updates. CALBHB/C now provides this information to make it more readily accessible to board/commission members.

CALBHB/C continues to advocate for performance outcome data. See "Goals", page 10.

2. **COVID-19** has impacted in-person meetings. CALBHB/C has adapted through:
  - A. Providing “[Public Meetings by Teleconference](#)” training to board/commission members and local support staff.
  - B. Using teleconferencing for CALBHB/C regional meetings and trainings.
  - C. Mailing printed copies and binders as requested.

**Goals for the Future** – Along with performing its mission, specific goals for the future include:

**1. Performance Outcome Data:**

- Collaborate with state agencies to increase access and analysis of local performance outcome data for review and comment by MHBs. (WIC 5604.2, Duty #7)
- Improve method by which local mental/behavioral health boards and commissions can comment on local performance outcome data to the CA Behavioral Health Planning Council.

**2. Issue Briefs** related to:

- Children and Youth
- Lanterman-Petris-Short Act

**3. In-Person Meetings:** Resume in-person meetings when health conditions permit.

**For Further Information, Contact:** Theresa Comstock, Executive Director, CALBHB/C  
717 K Street, Suite 427, Sacramento, CA 95814. 916-917-5444. [Theresa.Comstock@CALBHBC.com](mailto:Theresa.Comstock@CALBHBC.com)