



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

Annual Report to the MHSOAC

2022

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

www.calbhbc.org

**CA Association of Local Behavioral Health Boards & Commissions
2022 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); informational newsletters and social media; and regional & state-wide hybrid meetings and trainings.

Issue Advocacy: CALBHB/C advocates for the best system of behavioral health care, to include culturally relevant/responsive, evidence-based, recovery-focused treatment and services for all behavioral health consumers, including individuals who are 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 2022 advocacy and support included:

1. Access focusing on:
 - a. Unserved and Underserved Populations, including: Racial, Ethnic, Cultural, Linguistic, LGBTQ+ and Individuals with Disabilities
 - b. Individuals who are: gravely disabled; medically indigent; underinsured
 - c. Justice-Involved – Increase/improve resources to reduce arrest and recidivism:
 - i. Reduce 5150's
 - ii. Services Before and After Release (Multi-Disciplinary Teams that include Peer Support, BH/Forensic Team, MH & Drug Diversion Courts)
 - iii. Information sharing between counties/sectors
 - iv. Evaluation/accountability of outside contractors
 - d. Children & Transitional Age Youth:
 - i. School-based, integrated mental health programs, addressing: funding, performance outcomes, technical assistance and workforce
 - ii. Reduce hospitalization & recidivism – Resources for continued services
2. Community Engagement
 - a. Increase effectiveness of local community program planning processes
 - b. Increase effectiveness of MHBs to ensure community engagement
3. Housing/Homelessness
 - a. Supported Housing – Support advocacy for local projects.
 - b. Residential Care Facilities (ARF, RCFE) for those with SMI ("Board & Cares")
4. Workforce: Address CA's Workforce Shortage at all levels; Living Wage for contractors; Peer Support/adequacy of wages/funding

See page 5 for information on how CALBHB/C addressed issues in 2022.

State-wide collaboration included supporting, communicating, and establishing relationships among CA's 59 local mental health boards/commissions, state-wide organizations, public officials, state and local legislators, and stakeholder organizations to increase support for the work and interests of local mental/behavioral health boards and commissions. CALBHB/C connected with many organizations such as:

- African Communities Public Health Coalition
- CA Access Coalition
- CA Behavioral Health Planning Council
- CA Coalition for Mental Health
- CA Commission on Aging
- CA Department of Health Care Services
- CA Health & Human Services
- CA Mental Health Peer Run Organizations
- CA Mental Health Services Authority
- CA Pan-Ethnic Health Network (CPEHN)
- CA Reducing Disparities Project
- CA State Association of Counties
- CA Department of Rehabilitation
- Center for Sexuality & Gender Diversity
- County Behavioral Health Director's Association
- Licensed Adult Residential Care Association
- Mental Health Services Oversight & Accountability Commission
- Mental Health America of CA
- National Alliance on Mental Illness (NAMI) CA
- NAMI Greater Los Angeles
- Steinberg Institute
- United Parents

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 and commissions serve in an advisory capacity to local governing bodies and local mental/behavioral health directors per CA Welfare and Institutions Code 5604.2. They are responsible for ensuring citizen and professional involvement at all stages of the planning process and are responsible for reviewing community mental health needs, services, facilities and special problems. Link to 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. Additionally, each MHB is required to include one Board of Supervisor (or Governing Body) member. 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 in the past year included membership [dues](#) from CA's local mental/behavioral health boards and commissions (\$59,000 collected from 58 (of 59) jurisdictions in FY 2021-22), and a \$75,500 contract from the Mental Health Services Oversight & Accountability Commission.

III. SERVICE TO MENTAL HEALTH/BEHAVIORAL HEALTH BOARDS

1. Addressing Issues:

Listening: Through teleconferences, phone calls 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, and collaboration with state-wide partners.

CALBHB/C supported 9 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	Support for AB32: Telehealth PASSED! Support for SB 316 Same Day Access for 2 Visits Support: SB 1337 Coordinated Care 1st-Episode Psychosis Support for Medication Access Trailer Bill CARE Act Initiative: Facilitated feedback & communication
Children & Transitional Age Youth (TAY)	Support for AB 552: Integrated School-Based BH Support for SB 1229: Children & Youth BH Workforce Issue Brief: Children & Youth Issue Brief: Transitional Age Youth Web Pages: Children , TAY and Foster Youth
Homelessness/Housing	Adult Residential Facilities (ARFs) & Residential Care Facilities for the Elderly (RCFE) Issue Brief Teleconference Formed ARF/RCFE Core Group w/state-wide partners
Performance Outcome Data	Support for SB 970: MHSA Outcome Data
Workforce	Support for SB 964: BH Workforce Support for SB 1229: Children & Youth BH Workforce
Various (35 Issue Pages)	Website News/Issues

2. Meetings/Trainings

CALBHB/C conducted state-wide teleconference and hybrid meetings and trainings. Hybrid events were conducted in-person in: San Diego, Milpitas, Chico and Sacramento. Meeting presenters included MHSOAC Advocacy Stakeholder Contractors, state-wide organizations and experts.

Recordings:

Meeting recordings and materials are at: www.calbhbc.org/meetings

Training recordings and materials are at: www.calbhbc.org/training

Trainings

How to be an Effective Board/Commission	January 18
Ensuring Meaningful MHSA Community Program Planning	January 18
Community Engagement	April 8
Unconscious Bias	April 8
MH/BH Board/Commission	May 13
Chair Training	May 13
How to be an Effective Board/Commission	August 20
Unconscious Bias	January 6, 2023
Community Engagement	January 6, 2023
MH/BH Board/Commission Training	January 13, 2023
Chair & Admin Training	January 13, 2023

Quarterly Meetings/Trainings (Hybrid)

Southern/LA (San Diego & Zoom)	January 18
Bay Area (Milpitas & Zoom)	April 19
Superior August 20 (Chico & Zoom)	August 20
Central October 21 (Sacramento & Zoom)	October 21
Southern/LA (San Diego & Zoom)	January 20/21 2023

Teleconference Presentations

Behavioral Health Continuum	April 19
Cultural Requirements	June 10
Board & Cares (ARF & RCFE)	November 4
Behavioral Health Workforce	December 2

Board-Specific: Local board trainings or presentations were provided as requested, including Alameda, Orange, Sacramento, San Francisco, and San Joaquin counties. A presentation is scheduled for Placer County on January 23, 2023.

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 met individually with board/commission leadership around the state, both by teleconference and in-person.

Support resources found at www.calbhbc.org/resources include “Frequently Asked Questions”, templates/sample documents, handbooks, on-line trainings and more. Instructional materials are provided at www.calbhbc.org/training and technical questions from local board members are answered within 24 hours. New or updated resources include: “[Best Practices Handbook](#)”, [Brown Act Guide](#), and “[Review](#)”.

CALBHB/C also provided communication and support to local boards to facilitate completion and submission of a questionnaire requested by the CA Behavioral Health Planning Council: the “Data Notebook”.

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

The review and analysis of the MHSA 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. Ensure 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 fulfil MHSA-related duties, CALBHB/C focuses 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 MHSA Three-Year Plans, Annual Updates and Innovations Plans. Resources include:

1. [Review](#)
2. [“Best Practices 2022” Handbook](#), Pages 15-19.
3. [Frequently Asked Questions](#) (FAQs), #5, #6
4. On-line MHSA Training Module/Materials include:
 - [MHSA: Role of MHB \(15 Minutes\)](#)
 - [MHSA: Fiscal \(15 Minutes\)](#)
 - [MHSA CPP: Community Program Planning](#) (1 page PDF)
5. CALBHB/C included CPP training during all mental health board trainings.
6. Recorded [CPP Training](#) is available on our website.

B. Performance Outcome Data: To effectively review MHSA 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 MHSA 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 MHSA plans shall include reports on the achievement of performance outcomes, to be established jointly by: CA’s Department of Health Care Services (**DHCS**) and CA’s Mental Health Services Oversight & Accountability Commission (**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 MHSA performance outcome data points and continues to advocate for performance outcome data, providing input on related legislation and encouraging DHCS,

MHSOAC, the County BH Director's Association and the CA Behavioral Health Planning council to fulfil their performance outcome-related responsibilities so that CA's 59 boards and commissions can effectively comment on local performance outcome data.

2. **Provide Data:** CALBHB/C culls performance outcome data ([link to data input form](#)) from MHSOAC plans and updates for all counties, and provides links to "Promising Data" by category and for all 59 counties/jurisdictions for MHSOAC performance outcome data related to:

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

[CALBHB.org/performance](https://calbhbc.org/performance) provides MHSOAC 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.

Website: The CALBHB/C website, 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

Handbooks/Manuals: *Best Practices for Local Mental/Behavioral Health Boards & Commissions Handbook*

Resources

1. Advocacy
2. Brown Act (Open Meetings)
3. Community Program Planning
4. Conduct
5. Cultural Relevance
6. Data Notebooks
7. Duties (CA WIC 5604.2)
8. Evidence-Based Practices
9. Frequently Asked Questions "FAQs"
10. Handbook "Best Practices"
11. Hybrid Meetings
12. Legislation (MHSA, Laura's Law, 5150+)
13. Legislative Advocacy
14. MHSA 3-Year Plans/Updates: MHB/C Role, Components, Fiscal Information
15. Performance Outcome Data
16. Recommendations
17. Recruitment
18. Review **NEW!**
19. Reports (Local Annual Reports & Statewide Reports)
20. Templates/Sample Docs
21. Training (Online Modules, Materials & Recordings)
22. Welfare & Institutions Code for Local Boards & Commissions & Mental Health Divisions

Issue Briefs

1. Board & Care
2. Children & Youth
 - a. School-Based BH
 - b. Transition-Age Youth
3. Criminal Justice
4. Crisis Care Continuum
5. Disaster Prep/Recovery
6. Employment
7. LGBTQ+
8. Older Adults
9. Performance Outcome Data
10. Suicide Prevention

Templates/Sample Docs

1. Acronyms
 2. Ad Hocs
 3. Agendas
 4. Annual Goals (and Task List)
 5. Annual Reports
 6. Bylaws
 7. Member Orientation
 8. Recruitment (Application, Flyer, Interview, Policy, Resignation Letter)
 9. Site/Program Visit Forms/Procedures
- ... and more

News/Issues Full Listing

1. Board/Commission News
2. Children & Youth
3. Children's Issues
4. Foster Children
5. Transitional Age Youth
6. Co-Occurring
 - Dementia
 - Developmental Disabilities
 - Substance Use Disorder
 - Traumatic Brain Injury
7. Coordinated Care
8. Court-Ordered Services
9. Crisis Care Continuum
10. Cultural Issues
11. Disaster Recovery
12. Employment
13. Homeless/Housing
14. Jails/Prisons
15. Laura's Law
16. Law Enforcement
17. Legislation
18. LGBTQ
19. Lanterman-Petris-Short Act
20. Navigator Programs
21. Parity
22. Patients' Rights
23. Peer Supports
24. Psychiatric Advance Directives
25. Seniors
26. Stigma
27. Substance Use Disorder
28. Suicide
29. Veterans
30. Whole Person Care
31. Workforce

V. Training

1. **On-Line Modules:** On-line modules at www.calbhbc.org/training include:

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

Ethics Training (2-Hours)

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. **Offerings**

- **Recordings:** Training materials and recordings:
 - [Chair Training](#)
 - [Mental Health Board Training](#)
 - [Community Program Planning & Community Engagement](#)
 - [Cultural Requirements](#)
 - [Performance and Fiscal Training](#)
 - [Unconscious Bias Training](#)
- **State-wide:** Members and agency staff from all counties/jurisdictions are welcome to attend.
- **Individual** local trainings provided upon request
- **Expenses:** There is no fee to register for meetings/trainings. For in-person events, 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.
- **Plans for 2023:** Trainings will be provided at least quarterly. Upcoming trainings:

Community Engagement & Unconscious Bias Training

January 6th, 12 pm - 2:30 pm

Chair & Admin Training

January 13th, 11 am - 12:30 pm

Mental/Behavioral Health Board/Commission Training

January 21st (Saturday) 9am - 2 pm: includes:

1. How to Be an Effective MH/BH Board/Commission (Rules & Tools)
2. Behavioral Health Continuum: Foundational Elements & Sustainable Funding
3. Issue-Based Discussion

VI. REFLECTIONS & FUTURE GOALS: Progress, Challenges, Adaptation, Rationale & Goals for the Future

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

1. **Technical Assistance:** There continues to be a steady flow of inquiries from local boards and commissions regarding duties, reviewing/making recommendations, member recruitment, behavioral health director recruitment, open meeting rules, combining mental health & drug and alcohol boards, ad hoc committees, and more. CALBHB/C responds via phone and email, providing resources electronically, and by mail when requested.
2. **Training** additions include: [Cultural Requirements](#) and [Community Engagement](#)
3. **Resource** additions/updates include:
 - [Brown Act Guide](#) (Open Meeting Rules)
 - [Review](#)
 - [WIC for CA MH/BH Boards/Commissions](#)
4. **Issue Brief:**
 - [Adult Residential Facility/Residential Care Facility for the Elderly \(ARF/RCFE\)](#) - *Updated*
5. **Issue-based Advocacy:** CALBHB/C leadership provided support for new state and federal legislation and budget items related to behavioral health. See page 5 for more information on CALBHB/C 2022 issue advocacy.

Challenges/Adaptation/Rationale:

1. **Commenting on performance outcome data** - MHBs continue to need greater access to meaningful 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.

Prior Years:

- i. [2019 Letter](#) to CA Assembly Budget Subcommittee No. 1 on Health & Human Services;
- ii. [2020 Letter](#) to MHSOAC and DHCS;
- iii. [2021 Letter to MHSOAC](#)
- iv. [Performance Outcome Data Issue Brief](#)
- v. Communicating the enactment of related legislation: [SB 465](#) (2021)

Advocacy in 2022:

- i. Supporting related legislation ([SB 970](#))
 - ii. Prompting the CA Behavioral Health Planning Council's "Performance Outcome Committee" to focus on "performance outcomes" during committee meetings and within the "Data Notebook" questionnaire.
 - iii. 2022 Meeting with MHSOAC Research & Evaluation Committee Director
- B. Performance Outcome Data for all 59 counties/jurisdictions (MHSA, Medi-Cal and SAMHSA) are provided at www.calbhbc.org/performance. We continue to cull the MHSA performance outcome data from the most recent MHSA plans and updates. CALBHB/C provides this information in order to identify successful programs, gaps/needs, and to make this information more readily accessible to board/commission members.

2. **Public health** concerns continued to impact local board/commissions. (Note that CA's COVID-19 state of emergency ends on February 28, 2023.) CALBHB/C provided resources and updates, including:
- A. [Hybrid Meeting Guide](#)
 - B. [Brown Act Guide](#) (that includes sections on teleconferencing, public emergency allowances, "just cause" allowances, and "emergency" allowances for members)
 - C. Provided a hybrid format for CALBHB/C regional meetings and trainings in 2022 (accommodating both virtual and in-person attendees).
 - D. Mailing printed copies and binders as requested.

Goals for the Future – Along with performing its mission, the CALBHB/C Governing Board has identified the following top issues for support and advocacy in 2023:

2023 Top Issues for Support and Advocacy include:

- a. **Diversity, Equity & Inclusion** (including racial, ethnic, cultural, linguistic, LGBTQ+, as well as individuals with intellectual, developmental and physical disabilities) – Integrating on-going mechanisms throughout behavioral health operations to increase diversity, equity and inclusion (including: identification of barriers/gaps, identification of successes, program development, data analysis, stakeholder review, training, education, workforce and performance outcomes.)
- b. **Performance Outcomes identification, standardization and communication** to equip local mental/behavioral health boards and commissions to understand and comment on local performance outcomes (indicators of wellness) in a meaningful way. Collaborate with state agencies and advocate to the legislature for increased standardization, access and analysis of local performance outcome data for review and comment by MHBs (WIC 5604.2, Duty #7). This will include advocacy toward increasing the capacity of the CA Behavioral Health Planning Council to identify and focus on performance outcomes (within their Performance Outcome Committee, their other committees and within the "Data Notebook" questionnaire that is sent out for completion by the 59 local MHBs.)
- c. **Resources:** Top concerns include:
 - i. [Housing](#) for unserved/underserved individuals with SMI of all ages, who are experiencing homelessness or are at risk of homelessness, including Supportive Housing, Adult Residential Facilities (ARF) and Residential Care Facilities for the Elderly.
 - ii. [Crisis Care Continuum](#) – Providing a comprehensive BH crisis continuum for all ages, and addressing foundational elements that reduce the need for crisis services. Special focuses: Expanding Crisis Services; Reducing 5150's; Reducing law enforcement's involvement; Increased collaboration with criminal justice system; Implementation of the Care Act Initiative.
 - iii. [Workforce, Education & Training](#) – Address CA's behavioral health workforce shortage at all levels, to include:
 - i. Peer Supports integrated throughout the behavioral health workforce ("Peers" include individuals with lived experience and family members)
 - ii. Living Wages
 - iii. Education & Training that is: Trauma-Informed, Culturally Relevant & Recovery-Focused



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