



California Association of Local Behavioral Health Boards and Commissions

SUMMER 2019 Newsletter

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CALBHBC NEWSLETTER

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

“The way a team plays as a whole determines its success.” *Babe Ruth*

California’s behavioral health system is on the cusp of knowing and bringing to scale effective mental/behavioral health programs, facilities, prevention and integrated community solutions throughout the state.

We know that being on the cusp is not easy, and we encourage local board/commission leadership and staff liaisons to connect with us for resources, issue-based advice and requests for statewide advocacy.

Resources: CALBHB/C provides support and resources to help boards/commissions fulfill their vital role in reviewing and advising locally as part of a system that strongly values input from individuals with lived experience of mental illness, their family members, and stakeholders. See page 2 for a list of resources, visit www.calbhbc.com, contact us at info@calbhbc.com or use our [on-line form](#).

Advocacy: We are proud that we participated in our first-ever Capitol Day in April (in collaboration with NAMI, CA) with particular focus on **mental health workforce development**. We also participated in Mental Health Matters Day (organized by Mental Health America of CA) in May at the Capitol.



Our continued advocacy efforts focus on issues reported to us from CA’s 59 local MH/BH boards/commissions. We note promising statewide movement toward addressing integrated mental/behavioral health solutions for **Housing, Workforce, Employment, Education, Disaster Planning & more!**

MEETINGS / TRAINING

Southern/LA: June 21 & 22, Santa Ana
Superior: August 24, Chico
Central: October 19, Stockton

[Registration](#) at: www.calbhbc.com.

There is no fee for meetings or trainings. All MH/BH board/commission members are invited, and support staff. Travel expenses reimbursed for 1+ member /county in the region.

NEW REPORTS AND MORE

Disaster [MH Plan from Napa County](#)

MHSA Fiscal and Program Data
[MHSOAC Transparency Dashboard](#)

Older Adult DN Overview Report
[CA Behavioral Health Planning Council
Overview of 2017 Data Notebook](#)

TOP ISSUES

Top mental health issues reported by leadership (42 jurisdictions reporting)

- 1) Gaps in **Housing Continuum**, including Board & Cares for adults with severe mental illness.
- 2) Gaps in **Crisis Continuum** – Need for increased crisis stabilization services and crisis residential for children and adults.
- 3) **Workforce Shortage** – Psychiatrists and mental health professionals needed at all levels.
- 4) **Jails** – MH Services in question; Facilities inadequate; assaults on inmates and staff; not therapeutic.

Contact Us: info@calbhbc.com

Website: www.calbhbc.com

Facebook: [CALBHBC](#)

Resources ([link to website](#))

- [Best Practices Handbook:
for Mental/Behavioral Health Boards &
Commissions](#)
- [Brown Act \(Open Meeting Rules\)](#)
- [Data Notebooks](#)
- [Issue-Based Advocacy](#)
- [Mental Health Services Act *Plans/Innovations*](#)
- [Templates/Sample Docs](#)
- [Bylaws, Member Orientation, Site Visit, etc.](#)
- [Training \(Online and Handbooks\)](#)

Duties of Boards & Commissions

The local mental health board shall : ([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.

[5604.2\(b\)](#): ...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.

[5848](#): ...conducts a public hearing on the county's MHSA Three Year Program and Expenditure Plan and Annual Update.

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)

[MHSA On-Line Training](#)

Role of the Mental Health Board w/
MHSA Component Descriptions and Fiscal Info