California Association of Local Behavioral Health Boards and Commissions

How to be an

Effective Behavioral Health Advisory Board/Commission

Membership, Meeting Rules, Duties & Tools

Rev. 7/2026

The California Association of Local Behavioral Health Boards/Commissions supports the work of CA's 59 local behavioral health boards & commissions. www.calbhbc.org

Topics

Membership

Meeting Rules & Conduct

Duties & **Tools**

Behavioral Health Services Act (BHSA): Role of Boards/Commissions

Review & Evaluate

Membership

- **3 Year Terms** (Members are Appointed by the Governing Body, usually the Board of Supervisors.)
- **10 Member Minimum** (*or* **5 Member Minimum** in Counties with Population fewer than 80,000)
- **50% Consumers*** (individuals with lived experience) or **Family Members of Consumers**
  This must include at least: **20%** Consumers* **One (1)** who is 25 Years Of Age or Younger
  20% Family Members
- **One (1) Board of Supervisor Member**
- **One (1) Employee from a Local Education Agency**
- **One (1) Veteran or Veteran Advocate**
- **Reflect the DIVERSITY of the local client** population (Diverse membership includes ethnic, racial, cultural, LGBTQ+, age.)
- **Individuals with experience & knowledge of the MH system**, such as representatives of:
  - County Offices of Education
  - Hospitals, Hospital Districts
  - Physicians Practicing in Emergency Departments
  - Community and Nonprofit Service Providers
  - City Police Chiefs
  - County Sheriffs
  - Large and Small Businesses

* **Exceptions, WIC 5604 and a Summary are in the Best Practices Handbook, Pages 37-40**

** **A "consumer"** is defined as an individual who has received services for illnesses related to mental health or substance use (alcohol and drugs).

Meeting Rules

Brown Act Guide

Rev. 1/26

Open Meeting Rules *for* CA's Local Behavioral Health Boards/Commissions

1. **The Basics**
2. **Teleconference & *Alternative* Teleconference Rules**
3. **Frequently Asked Questions**
4. **Brown Act Government Code**

- The Brown Act Chapter of Government Code shall be given to all members of CA's local behavioral health boards/commissions (Per GOV 54952.7)

www.calbhbc.org/brown-act

Conduct

1. Active **Listening** www.calbhbc.org/conduct
2. Focus on **Issues**
3. **Person-First** Language
4. **No Swearing**
5. **No Personal** Attacks or Criticism (of self or others).
6. **One person** speaks at a time – No side bars.
7. Keep **Comments Short** if possible—Do not monopolize.
8. Limit **Acronyms** –"When in doubt, spell it out."
9. Silence **Cell Phones**

(1) REVIEW & EVALUATE the community's public behavioral health needs, services, facilities, and special problems in any facility within the county or jurisdiction where mental health or substance use disorder evaluations or services are being provided…

Review: Best Practices, Page 23
Recommendations: Best Practices, Page 19

Tools:

1. **Speakers / Panels / Community Forums**
   - Community organizations/agencies
   - Behavioral Health agency staff
2. **Liaisons** to other commissions/committees
3. **Site Visits** (p. 30 Best Practices)
4. **Ad Hoc Committees** (p. 3 Best Practices)
5. **Performance Outcome Data**

(2) REVIEW any county **AGREEMENT** entered into pursuant to Section 5650. The local behavioral health board may make **RECOMMENDATIONS** to the governing body regarding concerns identified within these agreements.

Review: Best Practices, Page 25

Recommendations: Best Practices, Page 21

Strategies:

1. **Staff Presentations & Reports**
   - **Medi-Cal** – Annual External Quality Review (EQRO Report): Review "Recommendations" and "Performance Improvement Plans" Sections.
   - **BHSA –** Behavioral Health Services Act Integrated Plan / Update
   - **SAMHSA –** Substance & Mental Health Services Admin Grants
     - PATH - Projects for Assistance in Transitions from Homelessness
     - Substance Use and Mental Health Grants
2. **RFPs/RFAs*:** Review new contract proposals
3. **Site Visits:** Review specific contract prior to visit

* **RFP**: Request for Proposal **RFA**: Request for Application

(3) **ADVISE** the Board of Supervisors and the local Behavioral Health Director regarding any aspect of the local behavioral health program.

1. Identify

- Public Comment
- Performance Outcome Data
- Presentations (by staff, patients rights advocates, contractors)
- Liaisons - BHB/C members can act as liaisons to other boards, commissions or committees.

2. Research

- Ad Hocs (short-term workgroups) to conduct research meetings – Page 3 of Best Practices
- Chair to meet regularly with Behavioral Health Director
- Site Visits

3. Advise

- Draft recommendations – Page 21 of Best Practices
- Vote on recommendations

(4) Review and approve the procedures used to **ENSURE CITIZEN** and **PROFESSIONAL INVOLVEMENT** at all stages of the planning process…

BH Board & Commission Meetings

- Publicize meetings and topics
- Public Comment – Encourage public comment.
- Accessible locations and times

Tools

- Staff presentations re: the planning process
- Staff reports and updates regarding plans and execution of BHSA Integrated Plan Planning, Cultural Plans and Performance Improvement Plans
- Attend Public Events – Board/Commission members may attend forums/events
- Liaison(s) – Board/Commission member liaisons to the local BH agency's Cultural Committee(s), Quality Improvement Committee
- Review *adopted* BHSA* Plans/Updates and Cultural Plans & Updates and make recommendations to ensure plans address the needs of the community.

Resources

- BHSA* Stakeholder Involvement Requirements, Best Practices, P. 16
- Cultural Requirements, Best Practices, Page 11

* **BHSA** = Behavioral Health Services Act

(5) Submit an **ANNUAL REPORT** to the Board of Supervisors on the needs and performance of the county's behavioral health system

Advise: Remember to Advise!

Resources:

- Best Practices, Page 5
- www.calbhbc.org/reports

(6) Review and make recommendations on applicants for the appointment of a local **BEHAVIORAL HEALTH DIRECTOR;** the Board shall be included in the selection process prior to the vote of the governing body.

- Review **Job Description** (Note: FAQs #10)
- Review **Applications**
- Participate on **Interview Panels**

More at FAQs #9:

www.calbhbc.org/faqs

(7) Review and comment on the county's **PERFORMANCE OUTCOME DATA** and communicate findings to the California Behavioral Health Planning Council (CBHPC)

Data Notebook (*from the* CA Behavioral Health Planning Council)

- www.calbhbc.org/data-notebooks

Performance Outcome Data– www.calbhbc.org/performance

- **CALBHB/C Issue Brief**
- **CALBHB/C Performance Compilation**

Tools for Staff & Stakeholders:
PERFORMANCE OUTCOME DATA

Children & Youth	Criminal Justice	Employment	Hospitalization	Housing

www.calbhbc.org/performance

Alameda	Humboldt	Merced	San Bernardino	Solano
Alpine	Imperial	Modoc	San Diego	Sonoma
Amador	Inyo	Mono	San Francisco	Stanislaus
City of Berkeley	Kern	Monterey	San Joaquin	Sutter-Yuba
Butte	Kings	Napa	San Luis Obispo	Tehama
Calaveras	Lake	Nevada	San Mateo	Tri-City
Colusa	Lassen	Orange	Santa Barbara	Trinity
Contra Costa	Los Angeles	Placer	Santa Clara	Tulare
Del Norte	Madera	Plumas	Santa Cruz	Tuolumne
El Dorado	Marin	Riverside	Shasta	Ventura
Fresno	Mariposa	Sacramento	Sierra	Yolo
Glenn	Mendocino	San Benito	Siskiyou	

(8) **ADDITIONAL** Duties or Authority & Assess **REALIGNMENT**

- The Board of Supervisors may transfer **additional duties or authority** to a Behavioral Health Board

- Assess the impact of the **REALIGNMENT** of services from the state to the county, to clients and on the local community

  Realignment (1991): The money distributed from the state to the county to meet the costs of mental health services

  Realignment (2011): The money distributed from the state to the county to meet the costs of Law Enforcement, Social Services and Behavioral Health

www.calbhbc.org/realignment

BHSA*: Role of the Behavioral Health Board

Best Practices, Page 17+

1. **Assure Citizen and Professional Involvement**

   BHSA* Integrated 3-Year Plans must be developed with local stakeholders. The BHB should review local staff's plans and execution throughout the process.

   Requirements - Best Practices, P. 18 or www.calbhbc.org/bhsasir

2. **Review & Advise**

   a) **Vote** on substantive recommendations

   b) A **response** is required from the behavioral health staff through:

   - Incorporating recommendations in the BHSA Integrated 3-Year Plan
   - Summary & analysis of recommendations that are not included in BHSA Plans/Updates.

3. **Conduct BHSA Public Hearings** at the close of 30-day public comment periods.

* **BHSA** = Behavioral Health Services Act

Review & Evaluate

Review: Best Practices, Page 25

1. **Accessibility**
   - Culturally Relevant
   - Scaled
   - Integrated
   - Communicated

2. **Recommended Practices:**
   - Client & Family Driven
     - **Peer Providers** are an essential component
     - **Clients and family members** are treated with dignity and respect and are included in decision-making
     - **Program leadership and staff** includes individuals with lived experience and family members (such as on non-profit boards and as employees)
   - Evidence-Based Practices: www.calbhbc.org/evidence-based-practices
   - Trauma-Informed Practices: www.calbhbc.org/evidence-based-practices
   - Community-Defined Evidence Practices: www.calbhbc.org/cultural-competence

3. **Sustainability**
   - Financially Viable
   - Workforce

   www.calbhbc.org/wf

4. **Performance**

   www.calbhbc.org/performance

CALBHB/C Resources

1. **Guide/Handbook:**
   - Best Practices: www.calbhbc.org/bestpractices
   - Member Guide (Sample): www.calbhbc.org/membership-guide
2. **News/Issues:** www.calbhbc.org
   - Issue Briefs (12) Issue Pages (31+)
   - Newsletters - www.calbhbc.org/newsletter
3. **Performance:** www.calbhbc.org/performance
4. **Resources:** www.calbhbc.org/resources
5. **Trainings:** www.calbhbc.org/training
   - Behavioral Health Board
   - Chair & Admin Training
   - Community Planning
   - Ethics (link to Department of Justice)
   - Unconscious Bias

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