



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



How to be an
**Effective Mental/Behavioral
Health Advisory Board/Commission**
Membership, Meeting Rules, Duties & Tools

2024

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

Topics

Membership

Meeting Rules & Conduct

Duties ([WIC 5604.2](#)) & Tools

Mental Health Services Act (MHSA): Role of Boards/Commissions

Review & Evaluate



Membership

- **50% Consumers** (individuals with lived experience) or **Family Members of Consumers**
This must include *at least*:
 - 20% Consumers
 - 20% Family Members of Consumers
- **One Board of Supervisor Member**
- **One Veteran or Veteran Advocate**
- **Reflect the **DIVERSITY*** of the local client population**
- **Individuals with experience & knowledge of the MH system, such as representatives of:**
 - County Offices of Education
 - Large and Small Businesses
 - Hospitals, Hospital Districts
 - Physicians Practicing in Emergency Departments
 - City Police Chiefs
 - County Sheriffs
 - Community and Nonprofit Service Providers
- **Diverse membership includes ethnic, racial, cultural, LGBTQ+, age.**
- **Additional Requirements:** [Best Practices Handbook](#), Pages 35 and 36

Meeting Rules

Brown Act Guide

Rev. 1/24

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

1. The Basics
2. Frequently Asked Questions
3. **Allowances:** *(In Effect 1/1/2023 - 1/1/2026)*
 - Member Emergency Allowances
 - Just Cause Allowances

([PDF](#)) ([Doc](#)) - 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 mental health needs, services, facilities, and special problems in any facility within the county or jurisdiction where mental health evaluations or services are being provided...

Review: [Best Practices](#), Page 24

Recommendations: [Best Practices](#), Page 20

Tools:

1. **Speakers / Panels / Community Forums**
 - Community organizations/agencies
 - Mental Health agency staff
2. **Liaisons** to other commissions/committees
3. **Site Visits** (p. 29 [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 mental health board may make **RECOMMENDATIONS** to the governing body regarding concerns identified within these agreements.

Review: [Best Practices](#), Page 24

Recommendations: [Best Practices](#), Page 20

Strategies:

1. Staff Presentations & Reports

- **Medi-Cal** – [Annual External Quality Review \(EQRO Report\)](#): Review “Recommendations” and “Performance Improvement Plans” Sections.
- **MHSA** - [Mental Health Services Act Plan / Update / INN](#)
- **SAMHSA Grants**
 - [PATH - Projects for Assistance in Transitions from Homelessness Grant](#)
 - SAMHSA Block Grant

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 Mental Health Director regarding any aspect of the local mental health program.

1. IDENTIFY

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

2. RESEARCH

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

3. ADVISE

- Draft recommendations – P. 20 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...

MH/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 MHSA Community Program Planning (CPP), Cultural Plans and Performance Improvement Plans
- Attend Public Events – Board/Commission members to attend MHSA CPP events
- Liaison(s) – Board/Commission member liaisons to the local BH/MH agency's Cultural Committees, SALTs, Quality Improvement Committee
- Review adopted MHSA Plans/Updates and Cultural Plans & Updates and make recommendations to ensure plans address the needs of the community.

Resources

- MHSA Community Program Planning (CPP) Requirements, Best Practices, P. 20
- Cultural Requirements, Best Practices, Page 11

(5) Submit an **ANNUAL REPORT** to the Board of Supervisors on the needs and performance of the county's mental 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 **MENTAL 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 (CA Behavioral Health Planning Council)**
 - [Examples](#)
- **PERFORMANCE OUTCOME DATA**
 - [CALBHB/C Issue Brief](#)
 - [CALBHB/C Performance Compilation](#)

Tools for Staff & Stakeholders:

PERFORMANCE OUTCOME DATA

9

Children & Youth

Criminal Justice

Employment

Hospitalization

Housing

www.calbhbc.org/performance

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

(8) ADDITIONAL Duties or Authority & Assess REALIGNMENT

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

MHSA: Role of the Mental Health Board

Best Practices, Page 15 & 16

1. **Assure Citizen and Professional Involvement**

MHSA Community Program Planning (CPP) is a state-mandated participatory process. Review local staff's plans and execution of this process.

CPP One-Pager includes: **Definition, Participants & Process**

2. **Review & Advise**

a) **Vote** on substantive recommendations

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

a) Incorporating recommendations in the MHSA Plan/Update

b) Summary & analysis of recommendations that are not included in MHSA Plans/Updates.

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

Review & Evaluate

Review: Best Practices, Page 24

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

4. Performance

CALBHB/C Resources

1. Resources

- [Brown Act \(Open Meetings\)](#)
- [Conduct](#)
- [Cultural Requirements](#)
- [Hybrid Meetings](#)
- [MHSA 3-Year Plans/Updates](#)
 - [Role, Components, Fiscal](#)
 - [Community Program Planning](#)
- [Performance Outcome Data](#)
- [Recommendations](#)
- [Review](#)
- [WIC: Duties, Membership](#)
.... [and more!](#)

2. News/Issues

- [Newsletters](#)
- [Issue Briefs](#) (11) [Issue Pages](#) (31+)

4. Trainings (Recorded)

- [Chair & Admin Training](#)
- [Mental Health Board](#)
- [MHSA Community Program Planning](#)
- [Performance & Fiscal](#)
- [Unconscious Bias](#)

5. Trainings (On-Line Modules)

- [Duties of local boards](#)
- [MHSA: Role of MHB](#)
- [MHSA: Fiscal](#)
- [MHSA: CPP](#)

6. Advocacy

- [Local](#)
- [State/Federal](#)

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