

The training will begin at 12:30 pm. Please remain on mute.



## **Training for Local Mental / Behavioral Health Boards & Commissions**

**October 2, 2020**

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

# TOPICS

- **Duties**
- **Mental Health Services Act**
- **Data:** Performance & Fiscal
- **Meetings**
- **Membership**



**(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...

- **Speakers / Panels / Community Forums**
  - Community organizations/agencies
  - Mental Health agency staff
- **Liaisons** to other commissions/committees
- **Site Visits** (p. 40 Best Practices)
- **Ad Hoc Committees** (p. 4 Best Practices)
- **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.

## Strategies:

- **Staff Presentations & Reports**
  - **Medi-Cal** – Annual External Quality Review (EQRO Report)
  - **MHSA** - Mental Health Services Act Plan / Update / INN
  - **SAMHSA Grants**
    - PATH - Projects for Assistance in Transitions from Homelessness Grant
    - SAMHSA Block Grant
- **RFPs:** Review new contract proposals
- **Site Visits:** Review specific contract prior to visit.

**(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)

## **2. RESEARCH**

- Ad Hocs (short-term workgroups) to conduct research meetings – P. 4 of Best Practices
- Chair to meet regularly with Mental Health Director
- Site Visits

## **3. ADVISE**

- Draft recommendations – P. 29 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...

### ▪ **MHB Meetings**

- Publicize meetings and topics
- Encourage public comment
- Accessible locations and times



### ▪ **MHSA Community Program Planning (Best Practices, P. 20)**

- Staff reports regarding plans and execution of MHSA Community Program Planning (CPP)
- Encourage board members to attend MHSA CPP events
- Review MHSA Plans & Updates to ensure plans address the needs of the community.

**(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 6
- [www.calbhbc.org/reports](http://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





**(7) Review and comment on the county's PERFORMANCE OUTCOME DATA and communicate its 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**

## (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: Definition

(Mental Health Services Act, Proposition 63 enacted in 2004)

- **PURPOSE:** To expand and improve public mental health services.
- **FUNDING:** CA public mental health funding was insufficient to meet the demand of 1/2 the population in need
- **DISPARITIES:** Cultural, racial and ethnic populations have been disproportionately affected
- **PLACEMENT:** “Safety net” of underfunded system had become the criminal justice system, courts, and emergency rooms

# MHSA: Role of the Mental Health Board

## Best Practices, Page 19 & 20

### 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 Public Hearing

# DATA: Performance Outcome Data

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

1. **EQRO** – External Quality Review Organization for Medi-Cal Specialty Mental Health
2. **SAMHSA PATH** – Substance Abuse Mental Health Services Administration
3. **MHSA** - Mental Health Services Act (MHSA)
  - a) **Performance Outcome Data**
  - b) **Program Information** (MHISOAC)

# DATA: Performance Outcome Data

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

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

# DATA: Performance Outcome Data

Full listing by topic: [www.calbhbc.org/performance](http://www.calbhbc.org/performance)

Children & Youth	Criminal Justice	Employment	Hospitalization	Housing
El Dorado	Berkeley (City)	<u>Alameda</u>	El Dorado	Alameda
Kings (a little)	Fresno	Butte	Fresno	Calaveras
<u>Nevada</u>	Humboldt	Calaveras	Humboldt	Contra Costa
Riverside	Kern	Contra Costa	Kern	Glenn (a little)
San Benito	<u>Los Angeles</u>	<u>Imperial</u>	<u>Los Angeles</u>	Humboldt
San Joaquin	Marin	Kings (a little)	<u>Merced</u>	<u>Los Angeles</u>
Tulare	<u>Merced</u>	<u>Los Angeles</u>	Nevada	<u>Merced</u>
Tuolumne	<u>San Mateo</u>	Marin	<u>Riverside</u>	<u>Placer</u>
	<u>Sonoma</u>	<u>Solano</u>	<u>Sacramento</u>	<u>Sonoma</u>

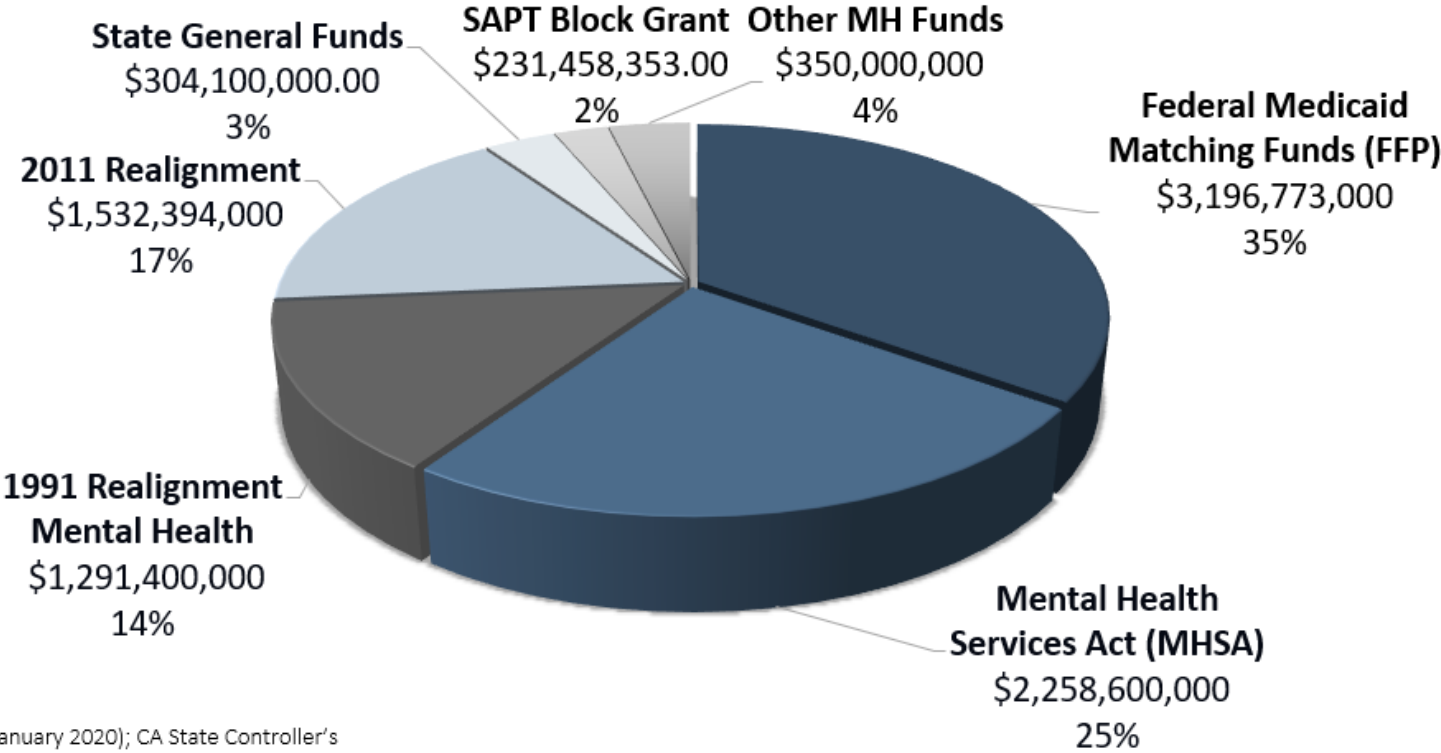
More counties are listed at: [www.calbhbc.org/performance](http://www.calbhbc.org/performance)

# DATA: Fiscal

## Funding Sources

**Total Medi-Cal:**  
\$105.2 billion  
\$23 billion GF

*Covers 13 million  
(1 in 3) Californians*



Sources: CA Governor's 2020-21 Budget (January 2020); CA State Controller's Office; and DHCS Medi-Cal Estimates



# DATA: Fiscal - MHSA

## 1. REPORTING TOOL (MHSEOAC)

## 2. TIMEFRAMES

- 3 Years:**
- Community Services and Supports (CSS)\*
  - Prevention & Early Intervention (PEI)
  - Innovations (INN) (**5 years** for INN for small counties)

- 10 Years:**
- Capital Facilities and Technological Needs (**CFTN**)
  - Workforce Education and Training (**WET**)

## 3. PERCENTAGES:

**5% - INN**

**19% - PEI**

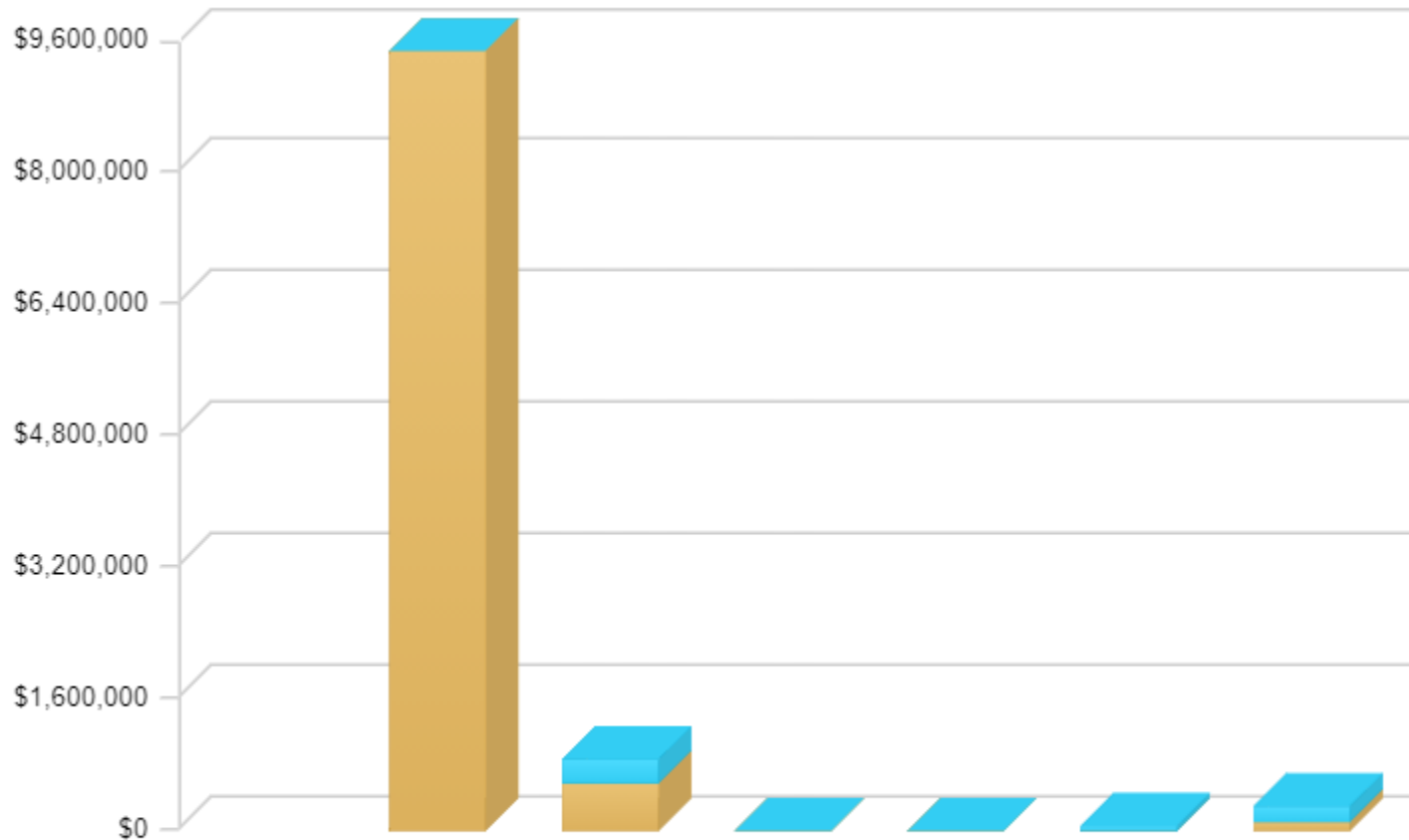
**76% - CSS\***



\*CSS funds include CFTN, WET and CPP\*\*

\*\*CPP: Community Program Planning can be up to 5% of MHSA funds.

# DATA: Fiscal – MHSA Example (Butte County)

MHSOAC Tool: [mhsoac.ca.gov/fiscal-reporting-tool](http://mhsoac.ca.gov/fiscal-reporting-tool)



Source Years of Funds		FY 16-17	FY 15-16	FY 14-15	FY 13-14	FY 12-13 and Prior	Interest
	Other MHSA	\$0	\$293,000	\$0	\$0	\$57,000	\$190,000
	CSS+PEI+INN	\$9,473,000	\$577,000	\$0	\$0	\$0	\$106,000

# MEETINGS: Brown Act Requirements

1. Agenda
  - [Best Practices, Page 33](#)
  - [calbhbc.org/brown-act](http://calbhbc.org/brown-act)
2. Documents
3. Meeting Notification
4. Public Comment
5. Serial Meetings
6. Standing Committees
7. Teleconferences

# MEETINGS: Motion

- **A Motion is a proposal by a member to take an action**
- **Procedure**
  - **Motion** (Chair: “Do I hear a motion?”)\*
  - **Second** (Chair: “Do I hear a second?”)
  - **Discussion** (Chair prompts for discussion.)
  - **Vote** (Must be Role Call vote if by teleconference)
    - **Yes** or **Aye** (if in favor)
    - **No** or **Nay** (if against)
    - **Abstain** (if not voting)

\*Chair makes sure that members know the motion.

# MEETINGS: Conduct

1. **Active Listening** [Best Practices, Page 15](#)
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 use of Acronyms –”When in doubt, spell it out.”**
9. **Silence Cell Phones**

# CALBHB/C Resources

**Member Orientation, Recruitment & *more***

**<https://www.calbhbc.org/resources.html>**

**On-line Training & Handbooks:**

**<https://www.calbhbc.org/training.html>**

**Frequently Asked Questions:**

**<https://www.calbhbc.org/faqs.html>**

**Issue Briefs and more:**

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

**CA Association of Local Behavioral Health Boards and Commissions supports the work of CA's 59 local mental/behavioral health boards and commissions.**