

California Behavioral Health Planning Council (CBHPC)
General Session Meeting Minutes
June 20-21, 2024

CBHPC Members Present Day 1:

Amanda Andrews	Don Morrison
Susie Baker	Dale Mueller
Karen Baylor	Jessica Ocean
John Black	Noel O'Neill
Stephanie Blake	Elizabeth Oseguera
Jason L. Bradley (for Sarah Poss)	Deborah Pitts
Monica Caffey	Daphne Shaw
Dave Cortright	Walter Shwe
Erin Franco	Maria Sierra
Jessica Grove	Deborah Starkey
Steve Leoni*	Bill Stewart
Lynne Martin Del Campo	Arden Tucker
Barbara Mitchell	Tony Vartan
Catherine Moore	Susan Wilson*
Javier Moreno	Uma Zykofsky

*=Remote Appearance

CBHPC Members Absent

Erika Cristo	Darlene Prettyman
Veronica Kelley	Karrie Sequeira
Marina Rangel	Ali Vangrow
Danielle Sena	

Staff Present: Jenny Bayardo, Naomi Ramirez, Justin Boese, Ashneek Nanua, Simon Vue

Welcoming and Introductions

Chairperson Deborah Starkey called the meeting to order. She welcomed Council Members and led self-introductions. A quorum was achieved with 30 of 37 Council Members present.

Approval of January Meeting Minutes (Action)

Chairperson-Elect Tony Vartan facilitated the review of the January 2024 meeting minutes. The minutes were accepted as written with no edits.

San Bernardino Behavioral Health Services Overview

Dr. Georgina Yoshioka, San Bernadino County Behavioral Health Director, shared her experience as a family member of individuals with behavioral health challenges. She introduced her Assistant Director Jennifer Alsina and Deputy Director Dr. Alyce Belford. Together they provided a brief overview of San Bernadino County's behavioral health services. They highlighted that in fiscal year 2022-23, their Department of Behavioral Health served approximately 43,639 unduplicated clients. They also highlighted that in fiscal year 2022-23 they served 14,716 adults with serious and persistent mental illness and children who have a serious emotional disturbance at their Community Mental Health Clinics. They have 6 community clinics, and all sites provide psychiatric and therapy services for adult and children.

Dr. Georgina shared about San Bernadino County's robust Hospital Aftercare Services, Children and Youth Continuum of Care, School Based Services, Transitional Age Youth (TAY) Programs, Adult Justice Involved Programs, Juvenile Justice Programs, Substance Use Disorder Services, Homeless and Supportive Housing Services, Clinic-Based Crisis Services, Field-Based Crisis Services, and Prevention and Early Intervention Services.

Dr. Georgina expressed her appreciation for the Mental Health Block Grant funds, which has contributed to funding for many programs and in some cases has fully funded programs. She highlighted their services paid for by the Mental Health Block Grant (MHBG) which include:

- First Episode Psychosis (FEP) Premier Program
- Juvenile Justice Community Reintegration
- Adult Continuing Care Program, Long Term Care
- Enhanced Board and Care Program
- Adult Forensic Program
- Housing Solutions Program
- Lakeside Special Care (Skilled Nursing Facility)
- Triage, Engagement, and Support Teams (TESTS)
- Placement After Stabilization
- Cedar House Residential Care
- Therapeutic Alliance Program

Dr. Georgina shared that the First Episode Psychosis (FEP) Premier Program serves consumers 18-30 years old experiencing first episode psychosis. This program served 8 clients in fiscal year 2022-23. She also reported that Cedar House Residential Care is a substance use residential care facility and the Therapeutic Alliance Program provides coordination with a contracted substance use residential treatment program to

addresses the needs of individuals with co-occurring substance use disorder and mental health challenges. These programs served 100 clients in fiscal year 2022-23.

Public Comment

Denise El Amin stressed the importance of providing demographics in reports and when discussing the number of individuals served by programs. She also urged the presenters to include information about whether the jail populations are increasing or decreasing as a result of their programs.

Theresa Comstock, California Association of Local Behavioral Health Boards and Commissions (CALBHB/C) thanked the presenters for their presentation. She shared that she reviewed their data dashboard and applauded them for being a good example of a county collecting data and reporting it. She echoed the importance demographics and stated that she hopes to see a requirement in the Behavioral Health Services Act accountability measures.

Stacy Dagleish expressed support for Denise El Amin's comments.

Steve McNally stated that addressing self-stigma is the first step to eliminating stigma, so he is appreciative of the presenters for sharing their personal stories.

Break

Committee Report-Outs

Performance Outcomes Committee: Chairperson Susan Wilson reported that Samantha Spangler discussed her contract to analyze and present key findings from the 5 years of data collected in Part 1 of the Data Notebook. The final report is expected to be complete between April and June of 2025. Susan Wilson shared that the data from the 2023 Data Notebook on Stakeholder Engagement is being analyzed and the 2024 Data Notebook related to housing is being developed. The committee will meet in August to discuss the recommendations and Executive Summary for the 2023 Data Notebook, finalize the 2024 Data Notebook, and discuss revisions to the committee Charter.

Patients' Rights Committee: Chairperson Daphne Shaw reported that the Patients' Rights Committee were updated on Senate Bill 43 and Senate Bill 1238 from Deb Roth of Disability Rights California. The committee also discussed Assembly Bill 2154, Assembly Bill 2352, Senate Bill 402, and Senate Bill 1184 and recommended positions to the Legislation and Public Policy Committee. Daphne also stated that she provided an update on the issue of Patients' Right Advocacy ratios. She shared that a study is currently in process with Legislative Analyst's Office. The committee will monitor the study to discuss the outcomes.

Executive Committee: Deborah Starkey, Chairperson of the Council, reported that members were updated on the Council's expenditures, budget, and Council Member appointments. Deborah highlighted that the Council currently has the least number of vacancies they have had during her time on the Council. She shared that staff host tables at conferences to assist with filling vacancies. Deborah also informed members that Proposition 1 Ad Hoc committee has been developed to assist with quickly reviewing information related to Proposition 1. The ad hoc committee includes Council Members Susan Wilson, Javier Moreno, and Barbara Mitchell.

Legislation and Public Policy Committee: Chairperson Barbara Mitchell reported that Gail Gronert from the County Behavioral Health Directors Association of California (CBHDA) provided an update on the State's budget. Chad Costello from the California Association of Local Rehabilitation Agencies (CASRA) shared his member's perspective on the Behavioral Health Services Act. This was followed by a discussion of the committee. The committee took a position on 10 pieces of legislative. The committee is in support of Assembly Bill 1470, Senate Bill 997, and Senate Bill 1397. The committee also supports Assembly Bill 2479, if amended. The committee opposed AB 2154, Senate Bill 26, Senate Bill 402, and SB 1184. The committee opposes Assembly Bill 2352, unless amended. Lastly, the committee decided to watch Senate Bill 1043. Barbara Mitchell shared that Theresa Comstock from the California Association of Local Behavioral Health Boards and Commissions (CALBHB/C) provided an update on Senate Bill 1082. The bill is not moving forward this legislative cycle, however Theresa requested the Council's support in moving it forward during the next legislative session.

Workforce and Employment Committee: Walter Shwe shared that the Workforce and Employment Committee was on understanding the difference between Medi-Cal Peer Specialists, Community Health Workers, and Certified Wellness Coaches. The committee had presentations from the Department of Health Care Services and the Department of Health Care Access and Information (HCAI) to gain a better understanding of the different provider types. The presentation was followed by a panel discussion about the differences and overlap between the provider types. The panel included both State departments, the Director of Government Affairs for Quality & Behavioral Health for Local Health Plans of California, and the Director of Project Return Peer Support Network. Walter also reported that Council staff Ashneek Nanua provided an update on workforce budget cuts included in the May Revise.

Housing and Homelessness Committee: Chairperson Monica Caffey reported that Marcus Dillard, Chief of San Bernardino County Office of Homeless Services, provided an overview of the San Bernardino County Homeless Partnership's (SBCHP) work and initiatives to address homelessness in the County. The committee also heard from Nichole Fiore, Principal Associate from Abt Global, about their Project Roomkey Evaluation Final Report. The purpose of this report was to understand Project Roomkey's successes and challenges, and the experiences and outcomes of Project Roomkey participants. Monica also shared that committee members reviewed and updated the committee's 2023-2024 Workplan.

Systems and Medicaid Committee: Chairperson Uma Zykofsky reported that the committee had a presentation on the last California External Quality Review Organization annual report. The report provides a good overview of the Mental Health and Substance Use Disorder services provided in the state. This information is very useful to the committee as they think about statewide issues. Los Angeles County and Imperial County's presented their perspective of EQRO data report utilization, including challenges and successes. Staffing shortages were highlighted as a key challenge. The committee is developing input to submit on the California Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment (BH-CONNECT) waiver.

Children/Youth Workgroup: Council Staff Ashneek Nanua reported that the workgroup discussed their thoughts on the *Hiding in Plain Sight* documentary viewed at the April 2024 meeting. The group decided to host a screening of the film with a panel presentation in San Diego in January. The members will continue to meet to plan the details of the event.

Reducing Disparities Workgroup: Workgroup leader Uma Zykofsky reported that Council Member Monica Caffey talked about her work with the Black Health Equity Advisory Group (BHEAG). The group also discussed the presentation they received at the April 2024 meeting from the Department of Public Health Office of Health Equity and brainstormed ways to take actions. Uma also shared that the workgroup developed questions focused on bringing attention to statewide and local efforts that highlight reducing inequities and disparities in behavioral health care to provide all Council presenters. The workgroup is currently restricting some of the questions and is hoping to have them approved by the Executive Committee over the course of the next two quarterly meetings so they can start being provided to presenters at the beginning of 2025.

Substance Use Disorder Workgroup: Workgroup leader Javier Moreno reported that the workgroup discussed some of the challenges in accessing substance use disorder services. These included barriers to accessing medication assisted treatment, lack of resources, and provider shortages. This conversation was followed by a discussion on strategies to connect individuals to treatment and support. The group also had a presentation from Tom Orrock from the Mental Health Services Oversight and Accountability Commission about a pilot program they are working on to expand the number of substance use disorder providers.

Break

Behavioral Health Transformation Discussion

Stephanie Welch, MSW, Deputy Secretary of Behavioral Health, California Health and Human Services Agency provided an overview of the Behavioral Health Services Act and the Infrastructure Bond. The presentation focused on the funding allocation changes, some of the elements around enhanced accountability, stakeholder

engagement, and how the Planning Council can assist with better community engagement opportunities.

Stephanie reported that the Behavioral Health Infrastructure Bond Act is the \$6.4 billion general obligation bond. The funding under this Act will be administered by the Department of Health Care Services and the Department of Housing and Community Development. Stephanie stated \$4.4 billion goes to the Department of Health Care Services for treatment sites that focus on expansion of residential services. Of those funds, \$1.5 billion is for counties and cities and there's a \$30 million set aside for tribal communities. Stephanie explained that this funding is essentially a continuation of funding for the current Behavioral Health Continuum Infrastructure Program (BCHIP) program. She then explained that BCHIP is a competitive grant program and a request for applications is on schedule to be released in July. Funds will start to be awarded in early 2025.

Stephanie reported that \$1.972 billion of the funding under the Act is for Supportive Housing. These funds will be managed by the Department of Housing and Community Development (HCD), modeled after Project Homekey grants for housing with supportive services. The funding is intended for housing for individuals with extremely low income and behavioral health challenges who are experiencing or at risk of homelessness.

Stephanie provided an overview of the Behavioral Health Services Act funding allocations. She highlighted that 90% of the total funds are allocated to the Counties according to the following breakdown: 30% for housing interventions, 35% for Full Service Partnerships, and 35% for Behavioral Health Services and Supports (BHSS). She clarified that the Behavioral Health Services and Supports portion includes outreach and engagement as allowable service and that at least 51% of the funds in this category shall be used for Early Intervention. Stephanie then explained that the remaining 10% of the total funds is allocated for State level funding as follows: 4% for Statewide Population-Based Prevention (CDPH), 3% for Statewide Workforce (HCAI), and the remaining 3% for State Administration. She highlighted that the State Administration funding is reduced from 5% obligating the state to be more efficient.

Stephanie highlighted the Council's role in several areas of the Behavioral Health Services Act as follows:

- County BH Advisory Boards are required to review and comment on the county's performance outcome data and communicate its findings to the Council.
- The Department of Health Care Services in consultation with the Council, among others, is to develop reporting requirements that each county Behavioral Health system shall comply with.
- The Department of Health Care Services and the California Health and Human Services Agency, in consultation with the Council, among others, shall develop uniform definitions and formats for statewide, nonduplicative, client-based information system.
- County Behavioral Health systems, in consultation with the Council, among others, shall provide reports and data to meet the information needs of the state.

- Members of the Behavioral Health Services Oversight and Accountability Commission are members of the Council.
- The Behavioral Health Services Oversight and Accountability Commission shall work in collaboration with the Department of Health Care Services and the Council, and in consultation with County Behavioral Health Directors Association, to write a report that includes recommendations for improving and standardizing practices for the Behavioral Health Services Act.

Stephanie urged members to think about how the Council can assist throughout the planning process if the Council has specific committees that are best suited to help.

Public Comment

Denise El Amin stated that she noticed there is not representation from Santa Barbara County on the Council. She asked questions about the length of Council member's appointment terms and urged councils, boards, and oversight committees to ensure there is a good balance of individuals represented on their bodies.

Steve McNally thanked Stephanie for her efforts and shared the importance of a true community engagement process.

Recess

CBHPC Members Present Day 2:

Amanda Andrews
Susie Baker
Karen Baylor
John Black
Stephanie Blake
Jason L. Bradley (for Sarah Poss)
Monica Caffey
Dave Cortright
Erin Franco
Jessica Grove
Ian Kemmer (for Veronica Kelley)
Steve Leoni*
Lynne Martin Del Campo
Barbara Mitchell
Catherine Moore
Javier Moreno*

Don Morrison
Dale Mueller
Jessica Ocean
Noel O'Neill
Elizabeth Oseguera
Deborah Pitts
Karrie Sequeira
Daphne Shaw
Walter Shwe
Maria Sierra
Deborah Starkey
Bill Stewart
Arden Tucker
Tony Vartan
Susan Wilson*
Uma Zykofsky

*=Remote Appearance

CBHPC Members Absent

Erika Cristo
Marina Rangel
Danielle Sena

Darlene Prettyman
Ali Vangrow

Staff Present: Jenny Bayardo, Naomi Ramirez, Justin Boese, Ashneek Nanua, Simon Vue

Welcome Back

Chairperson Deborah Starkey called the meeting to order. Deborah welcomed Council Members back and led self-introductions. A quorum was achieved with 32 of 37 Council Members present.

Mental Health Services Oversight and Accountability Commission Update

Tom Orrock, Deputy Director of Operations, Mental Health Services Oversight and Accountability Commission provided an overview of the Commission's current work around Children and Youth. Tom shared that the Commission has put in a significant amount of effort to start to build a continuum of care for children. They have done this through the Mental Health Student Services Act, the Alcove Youth Drop-in Center program, 0-5 Wellness, and the Early Psychosis Intervention Program to reduce the duration of untreated psychosis, which is critical for the state of California. Additionally,

Tom Orrock reported that the Commission has \$670,000 per year available for 9 specific populations. One of the populations is K12 students. The K12 Advocacy Project is the Commission's newest advocacy project which will enable young people to advocate for other young people. This project will launch through 3 to 4 statewide conferences over the next couple of years. The funding for this project is ongoing and will be distributed annually to support organizations who can help other youth get to the State Capitol to talk to their legislator or state senator and to the Board of Supervisors to talk to local decision makers to ensure that youth voice is current. Tom highlighted that this project provides an opportunity for collaboration between the Council and the Mental Health Services Oversight and Accountability Commission.

Senate Bill 43 Implementation Presentation & Discussion

Tony Vartan, Stanislaus County Behavioral Health Director and Dr. Gary Tsai, Director of Substance Use Prevention and Control for Los Angeles provided an overview of the Lanterman-Petris-Short (LPS) Act and Senate Bill 43. Tony Vartan and Gary Tsai shared that they co-chair a statewide work group that assists all behavioral health directors and medical directors work together to figure out the implementation of Senate Bill 43. The group works together to ensure there is consistency and standardization as much as possible across the various counties.

Dr. Tsai stated it is important to understand the Lanterman-Petris-Short (LPS) Act to understand Senate Bill 43. LPS was first enacted in 1967 due to a widespread use of institutionalization prior to the 1960s and a long history of abuse and patients' rights concerns in state hospitals across the country. The LPS established due process to avoid the widespread inappropriate application of involuntary psychiatric care. Dr. Tsai explained the difference between a 5150 involuntary hold, 5250 involuntary hold, temporary conservatorship, and a permanent LPS conservatorship.

Senate Bill 43 was signed into law by Governor Newsom in Oct 2023 and is the most significant reform to the LPS Act since it was enacted in 1967. This legislation significantly expands California's criteria for involuntary detention and conservatorship for adults by creating a new set of eligibility criteria that are based solely on a person's mental health disorder or "severe" substance use disorder (SUD), if that disorder will result in someone being unable to provide for their basic needs of food, clothing, shelter, adding personal safety or necessary medical care. Dr. Tsai highlighted that Senate Bill 43 does not apply to children and youth.

Tony Vartan and Dr. Tsai highlighted potential implications of Senate Bill 43, which include:

- More 5150s overall and longer-term involuntary holds (5250s, conservatorships)
- LPS capacity constraints
 - Currently, there are no locked facility types for the treatment of SUD only diagnoses.
 - Currently, there is no evidence based clinical model of care for involuntary SUD treatment.

- Few designated facilities have comprehensive integrated medical care.
- Fidelity challenges
 - Determinations of grave disability based on “severe” SUD diagnosis and necessary medical care.
 - Most LPS designated people who place holds are law enforcement (and not clinicians).

Public Comment about Senate Bill 43 Implementation

Mike Phillips expressed gratitude for the presentation and shared that his office is tasked with providing all trainings for the law enforcement providers, community, et cetera. He expressed concern that the new definition for gravely disabled would apply to minors after the first 72 hours and it will be used in ways it was not intended to be used which is an infringement on civil rights.

Denise El Amin expressed concern about patients’ rights, equity violations, and the demographic violations that will continue to happen because of SB 43.

Steve McNally expressed appreciation for the presentation and for the data Dr. Tsai provides in Los Angeles.

Break

Department of Health Care Services Update

Paula Wilhelm, Department of Health Care Services, Interim Deputy Director of Behavioral Health shared that she will transition from the interim Deputy Director of Behavioral Health into the permanent role in one week. Paula’s presentation focused on the Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment (BH-CONNECT) Demonstration amendment the Department is submitting.

In October 2023, the Department applied to the Centers for Medicare and Medicaid Services (CMS) for a new Section 1115 Demonstration to increase access to mental health services for Medi-Cal members living with significant behavioral health needs. BH-CONNECT takes advantage of CMS’s 2018 guidance that permits states to use 1115 waivers to receive federal matching funds for short-term care for members with a serious mental illness in Institutions for Mental Diseases (IMDs) if states establish a robust continuum of community-based care. Paula highlighted the BH-CONNECT will complement Behavioral Health Transformation and other ongoing behavioral health initiatives.

Through ongoing work with stakeholders, the Department identified additional gaps in the continuum of care for Medi-Cal members with significant behavioral health conditions who have long-term stays in institutions or need enhanced recovery-oriented care. As a result, the Department is proposing a BH-CONNECT amendment to be submitted in August 2024. As part of the amendment, DHCS is proposing to provide

community transition in-reach services to support individuals with significant behavioral health conditions with long-term stays who reside in institutions. The services provided will assist individuals with significant behavioral health conditions and specified risk factors in returning to the community, and/or room and board in enriched residential settings for up to six months.

Paula informed attendees that the draft BH-CONNECT Addendum application is available for public review with an opportunity to provide public comment period from June 14, 2024, through July 14, 2024.

Public Comment about DHCS Update

Steve McNally thanked Paula for her presentation and suggested that the Department of Healthcare Services look at the open data portal and consider creating county level reporting.

Barbara Wilson from Los Angeles County expressed concerns about not hearing any conversation about protecting people that live in congregate settings. She is happy to hear the Department is working to broaden funding for various types of residential community care facilities but urges DHCS to also think about what consumer protections will exist.

Aaron Bailey asked Paula about the best way to bring up and engage on issues with outpatient substance use disorder (SUD) licensing certification.

Theresa Comstock expressed appreciation for all the work the Department has done on BH-Connect and the information provided during the presentation. Theresa then shared that her association has been advocating for increasing the operating revenue for adult residential facilities and residential care facilities for the elderly with the ability to break the Medicare or medical funding. She asked that the Department and the Council on this topic.

2024 Conference Sharing

Walter Shwe reported on the California Association of Social Rehabilitation Agencies Spring Conference he attended in Sacramento representing the Workforce and Education committee. The main speaker was Bruce Anderson, Executive Director of Core Gift Institute. Walter found the presenter and workshops very interesting.

Public Comment

Denise El Amin requested that the Council consider her for appointment because there is currently no representation from Santa Barbara County.

Closing Remarks & Announcements

Deborah Starkey thanked Council staff for all their work preparing for the meetings and arranging for members arrival. She announced the next meeting will be in Milpitas in October.

Adjourn

Chairperson Deborah Starkey adjourned the meeting at 11:30 a.m.