

# MEETING SUMMARY

# BEHAVIORAL HEALTH TRANSFORMATION QUALITY AND EQUITY ADVISORY COMMITTEE MEETING #4

Date: Wednesday, March 19, 2025

**Time:** 1:00 p.m. – 3:00 p.m. (120 minutes)

**Meeting Format:** Virtual

#### **Presenters:**

Palav Babaria, MD, Deputy Director & Chief Quality and Medical Officer, Quality and Population Health Management

- Marlies Perez, Community Services Division Chief and BHT Project Executive, Behavioral Health
- » Anna Naify, PsyD, Consulting Psychologist, BHT Quality and Equity Workstream Lead, Quality and Population Health Management

**Number of Committee Members Present: 22** 

**Materials:** PowerPoint Slides

#### **Committee Membership Roll Call:**

- » Amie Miller; Present
- Anh Thu Bui: Present
- » Brenda Grealish; Present
- » Catherine Teare: Present
- » Elissa Feld; Present
- » Elizabeth Bromley; Present
- » Elizabeth Oseguera; Present
- » Jei Africa; Present
- Julie Seibert; Present
- » Kara Taguchi; Present

- » Karen Larsen; Present
- » Kenna Chic: Present
- » Kimberly Lewis; Present
- » Kiran Savage-Sangwan; Present
- » Kirsten Barlow; Present
- » Le Ondra Clark Harvey; Present
- » Lishaun Francis; Present
- » Lynn Thull; Present
- » Marina Toulou-Shams; Present
- » Mark Bontrager; Present



- » Noel J. O'Neill LMFT; Present
- Theresa Comstock; Present
- » Albert Senella: Not Present
- Jackie Pierson; Not Present

- » Melissa Martin-Mollard; Not Present
- » Nanette Star, Not Present
- » Samantha Spangler; Not Present
- Tom Insel; Not Present

### Agenda:

- Welcome and Introductions
- » Yolanda's Lived Experience
- » Recap of QEAC Meetings on January 9 & 15
- » Reminder: Population Health Approach & Measurement Phases
- » Phase 1: Review of Measure Set
- » Phase 2: Approach for Identifying Targeted Interventions & Developing Measures
- Advancing Health Equity
- » Discussion: Preliminary Measure Recommendations for Phase 2
- » Next Steps

#### **Welcome and Opening Remarks**

The meeting began with a welcome, DHCS introductions, and a QEAC member roll call, with the addition of new member Anh Thu Bui.

#### Person with Lived BH Experience - Yolanda Ramirez

Yolanda Ramirez, Family Education and Support Coordinator at San Mateo County, shared her lived behavioral health experience. Her journey with Behavioral Health and Recovery Services (BHRS) began 13 years ago after the traumatic experience of a suicide attempt by her child. Yolanda found support through San Mateo County's BHRS services; her children received mental health treatment, and she was connected to a Family Partner who guided her during this time. In 2015, she became a Health Ambassador and later a facilitator for several courses, striving to increase awareness and reduce stigma in her community.

#### Recap of QEAC Meetings on January 9 & 15

DHCS provided a brief recap for the topics covered in the Quality and Equity Advisory Committee (QEAC) meetings held on January 9 and 15, in which QEAC members provided feedback on the measure set for Phase 1.

#### Reminder: Population Health Approach & Measurement Phases

To ground the discussion, DHCS provided an overview of a population health approach for behavioral health, which emphasizes the importance of addressing the health needs



of the entire population. This approach is crucial for achieving the broad goals of BHT, which aims to improve health outcomes across all communities.

The reminder included a description of the distinction between measure selection in Phases 1 and 2. Phase 1 focused on identifying and selecting publicly available measures to support counties with system planning and resource allocation, while Phase 2 will identify desired outcomes, targeted interventions, and measures for performance measurement and accountability.

#### Phase 1: Review of Measure Set

DHCS reviewed the Phase 1 measure set, explaining how the QEAC started with a large inventory of measures and used a mixed methods approach to narrow the measure set to 37 measures.

For each of the 14 statewide behavioral health goals, the measures are organized in a framework of primary measures, which counties will use to compare their county to statewide rate in an effort to "know their community", and supplemental measures that provide additional context and inform planning. There are six priority goals that counties must include in their Integrated Plans, and eight additional goals, from which counties will select one "local" goal for their Integrated Plans.

## Phase 2: Approach for Identifying Targeted Interventions & Developing Measures

DHCS explained how a Theory of Change model will be used identify targeted interventions to advance the 14 statewide behavioral health goals and Phase 2 measures.

DHCS has organized the goals into three cohorts, and the QEAC will collaborate on these TOCs. DHCS will convene a new QEAC subcommittee on Theories of Change to work with DHCS on draft TOCs, and the QEAC will review draft outputs from the TOC Subcommittee. The Technical Subcommittee will reconvene after the first cohort of Theories of Change have been drafted to iterate on measure identification and recommendations.

Participants discussed the importance of being thoughtful and intentional in this process. They emphasized that Phase 2 measures should reflect the specific changes sought as a result of the specific interventions. Focusing on the right measures can ensure that efforts are directed towards achieving meaningful and sustainable improvements in behavioral health outcomes.

#### **Advancing Health Equity**



DHCS facilitated a discussion with the QEAC about how to advance health equity through the 14 statewide behavioral health goals and Phase 2 measures.

DHCS has adopted the National Standards for Culturally and Linguistically Appropriate Services (CLAS) and shared the ways in which these standards are currently integrated into Medi-Cal Managed Care Plans, County Behavioral Health, and a DHCS Health Equity Framework. Participants discussed how to leverage the CLAS Standards for Phase 2 measures, especially for stratifying measures by demographics to identify disparities and advance interventions to address them.

The discussion highlighted the importance of a diverse peer support team in communities. In culturally diverse areas like San Mateo County, having a team that reflects the community's diversity is crucial to bring different cultural perspectives and enhance connections with clients, helping to provide more effective and culturally-concordant care.

#### **Discussion: Preliminary Measure Recommendations for Phase 2**

Preliminary measure recommendations for Phase 2 were discussed in detail. Participants emphasized the need to balance the number of measures to avoid overwhelming counties with reporting burden while ensuring that the selected measures are meaningful and actionable.

For the cohort 1 goals of Homelessness, Institutionalization, Justice-Involvement, and Removal of Children from Home, members were asked if there are Phase 1 measures to be considered for Phase 2 and what new measures they would like to see in Phase 2.

Examples discussed in the meeting by the QEAC included:

- » Homelessness: PIT count and the connection to services
- Institutionalization: Crisis utilization, as it ties to hospital utilization
- » Justice-Involvement: IST counts as they touch many siloed systems. Arrests, rearrests and number of days people are incarcerated.
- » Removal of Children from Home: SMHS penetration rates, noting the Importance of intensive contact, not single penetration with the system

The discussion highlighted the importance of stakeholder engagement in this process. This collaborative approach helps to build consensus and support for the measures, increasing the likelihood of successful implementation.

#### **Next Steps**

The meeting concluded with a discussion on the next steps. Participants were informed that four different documents would be released in Module 3 in the coming weeks.



These documents will provide details on the measures for Phase 1, which will help counties develop their Integrated Plans. QEAC members can provide final feedback on Phase 1 measures through the Public Comment process at that time.

QEAC members will receive a survey via email through which they can provide initial ideas for Phase 2 Theories of Change and measures.

QEAC members were asked to express interest in joining the new QEAC Theory of Change Subcommittee via email.