

CBHPC Performance Outcomes Committee

Charter and Membership Roster 2024

The California Behavioral Health Planning Council is mandated by federal and state statutes to advocate for children with serious emotional disturbance and their families and for adults and older adults with serious mental illness; to review and report on outcomes for the public mental health system; and to advise the Department of Health Care Services and the Legislature on policies and priorities the state should pursue in developing its mental health and substance use disorder systems.

VISION

A behavioral health system that makes it possible for individuals to lead full and purposeful lives.

MISSION

To review, evaluate and advocate for an accessible and effective behavioral health system.

GUIDING PRINCIPLES

Wellness and Recovery: Wellness and recovery may be achieved through multiple pathways that support an individual to live a fulfilled life and reach their full potential.

Resiliency Across the lifespan: Resilience emerges when individuals of all ages are empowered and supported to cope with life events.

Advocacy and Education: Effective advocacy for policy change statewide starts with educating the public and decision makers on behavioral health issues.

Consumer and Family Voice: Individuals and family members are included in all aspects of policy development and system delivery.

Cultural Humility and Responsiveness: Services must be delivered in a way that is responsive to the needs of California's diverse populations and respects all aspects of an individual's culture.

Parity and System Accountability: A quality public behavioral health system includes stakeholder input, parity and performance measures that improve services and outcomes.

COMMITTEE OVERVIEW AND PURPOSE

The efforts and activities of the Performance Outcomes Committee (POC) will focus on the examination of data and performance outcomes for the public behavioral health system. The POC will lead activities of the Council to review and approve performance outcomes measures and to review and assess system performance. The Council is tasked with the responsibility to advise the Legislature and Department of Health Care Services on the issues, policies and priorities for California's publicly-funded behavioral health system. The POC will report findings and make recommendations that are based on and supported by the analysis of reliable and timely data.

Additionally, there are a number of other organizations, at the State level, who also have responsibility for review and reporting of outcomes of services to persons with serious mental illness. The POC identifies areas of commonality, seeks opportunities for collaboration and promotes the blending of actions among the organizations. These organizations include but are not limited to:

- Behavioral Health Concepts – CalEQRO
- Mental Health Services Oversight and Accountability Commission
- California Department of Rehabilitation

MANDATES

CA Welfare and Institutions Code

5772. (b) To review, assess, and make recommendations regarding all components of California's mental health and substance use disorder systems, and to report as necessary to the Legislature, the State Department of Health Care Services, local boards, and local programs.

(c) To review program performance in delivering mental health and substance use disorder services by annually reviewing performance outcome data as follows:

- (1) To review and approve the performance outcome measures.
- (2) To review the performance of mental health and substance use disorder programs based on performance outcome data and other reports from the State Department of Health Care Services and other sources.
- (3) To report findings and recommendations on the performance of programs annually to the Legislature, the State Department of Health Care Services, and the local boards, and to post those findings and recommendations annually on its Internet Web site.
- (4) To identify successful programs for recommendation and for consideration of replication in other areas. As data and technology are available, identify programs experiencing difficulties.

(d) When appropriate, make a finding pursuant to Section 5655 that a county's performance in delivering mental health services is failing in a substantive manner. The State Department of Health Care Services shall investigate and review the finding, and report the action taken to the Legislature.

(e) To advise the Legislature, the State Department of Health Care Services, and county boards on mental health and substance use disorder issues and the policies and priorities that this state should be pursuing in developing its mental health and substance use disorder health systems.

(f) To periodically review the state's data systems and paperwork requirements to ensure that they are reasonable and in compliance with state and federal law.

General committee operations

MEETING TIMES

The POC will meet in-person four times a year, rotating locations in conjunction with the Full Council meetings. At these meetings, the POC meets on Tuesday afternoon from 2:00pm to 5:00pm. Meetings by WebEx/conference call may occur in the months between in-person meetings, on an as needed basis.

PERFORMANCE OUTCOMES COMMITTEE MEMBER ROLES AND RESPONSIBILITIES

Regular attendance of committee members is expected in order for the Committee to function effectively. If the POC has difficulty achieving a quorum due to the continued absence of a committee member, the committee chairperson will discuss with the member the reasons for his or her absence. If the problem persists, the committee chairperson can request that the Officer Team remove the member from the committee.

The POC Chairperson and Chair-Elect will be nominated by the POC members and appointed by the CBHPC Officer Team. In the Chairperson's absence the Chair-Elect will serve as the Chairperson. The Chairperson and Chair-Elect serve on the Executive Committee which requires attendance and participation in those meetings in addition to WEC meetings. Terms will begin with the January in-person meeting and end with the last meeting of the calendar year.

Members are expected to serve as advocates for the Committee's charge, and as such, could include, but are not limited to:

- Attend meetings and provide input
- Review meeting materials prior to meetings in order to ensure effective meeting outcomes
- Speak at relevant conferences and summits when requested by the Committee leadership
- Develop products such as white papers, opinion papers, and other documents

- Distribute the Committee’s white papers and opinion papers to their represented communities and organizations
- Assist in identifying speakers for presentations

STAFF RESPONSIBILITIES

Staff will capture the POC members’ decisions and activities in a document, briefly summarizing the discussion and outlining key outcomes during the meeting. The meeting summary will be distributed prior to the next quarterly the meeting. Members will review and approve the previous meeting’s summary at the following meeting.

Staff will prepare the meeting agendas and materials, including coordinating presenters, at the direction of the POC Chairperson and members. The meeting agenda and materials will be made available, in hardcopy and/or electronically, not less than 10 days prior to the meeting.

GENERAL PRINCIPLES OF COLLABORATION

The following general operating principles are established to guide the Committee’s deliberations:

- The Committee’s purpose will be best achieved by relationships among the members characterized by mutual trust, responsiveness, flexibility, and open communication.
- It is the responsibility of all members to work toward the Council’s vision.
- To that end, members will:
 - Commit to expending the time, energy and organizational resources necessary to carry out the Committee’s Work Plan
 - Be prepared to listen intently to the concerns of others and identify the interests represented
 - Ask questions and seek clarification to ensure they fully understand other’s interests, concerns and comments
 - Regard disagreements as problems to be solved rather than battles to be won
 - Be prepared to “think outside the box” and develop creative solutions to address the many interests that will be raised throughout the Committee’s deliberations

Committee members will work to find common ground on issues and strive to seek consensus on all key issues. Every effort will be made to reach consensus, and opposing views will be explained. In situations where there are strongly divergent views, members may choose to present multiple recommendations on the same topic. If the

Committee is unable to reach consensus on key issues, decisions will be made by majority vote. Minority views will be included in the meeting summary.

MEMBERSHIP ROSTER

Susan Wilson, Chairperson

Noel O'Neill, Chair-Elect

Karen Baylor

Erin Franco

Steve Leoni

Catherine Moore

Walter Shwe

Uma Zykofsky

INVITED EXTERNAL PARTNERS

Theresa Comstock, CA Association of Local Behavioral Health Boards/Commissions

Samantha Spangler, Behavioral Health Data Project

STAFF

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