

California Behavioral Health Planning Council

Performance Outcomes Committee Agenda

Friday, August 9, 2024

Virtual Meeting

[Zoom Meeting Link](#)

Call-in #: 1-669-900-6833

Meeting ID: 853 5625 3641

Passcode: 916702

2:00 pm to 4:00 pm

- | | | |
|----------------|---|--------------|
| 2:00 pm | Welcome, Introductions, and Housekeeping <i>Susan Wilson, Chairperson</i> | |
| 2:05 pm | Review Final Draft of 2024 Data Notebook (Homelessness in the Public Behavioral Health System) <i>Susan Wilson, Chairperson</i> | Tab 1 |
| 2:15 pm | Committee Charter and Workplan Review (Action Item) <i>Susan Wilson and All</i> | Tab 2 |
| 2:35 pm | Public Comment | |
| 2:40 pm | Development of Recommendations for the 2023 Data Notebook on Stakeholder Engagement <i>Susan Wilson, Justin Boese and All</i> | Tab 3 |
| 4:50 pm | Public Comment | |
| 3:55 pm | Next Steps and Planning for Future Activities <i>Susan Wilson and All</i> | |
| 4:00 pm | Adjourn | |

The scheduled times on the agenda are estimates and subject to change.

Public Comment: Limited to a **2-minute maximum** to ensure all are heard

Performance Outcome Committee Members

Chairperson: Susan Morris Wilson

Chair-Elect: Noel O'Neill

Members:

Karen Baylor

Erin Franco

Steve Leoni

Catherine Moore

Don Morrison

Uma Zykofsky

If reasonable accommodations are required, please contact the Council at (916) 701-8211, not less than 5 working days prior to the meeting date.

Invited External Partners

Theresa Comstock, CA Association of Local Behavioral Health Boards/Commissions
Samantha Spangler, Behavioral Health Data Project

Council Staff

Justin Boese
Linda Dickerson

California Behavioral Health Planning Council
Performance Outcomes Committee
Friday, August 9, 2024

Agenda Item: Review Final Draft of 2024 Data Notebook (Homelessness in the Public Behavioral Health System)

Enclosure: Final draft of the 2024 Data Notebook survey document. For a copy of this document, please contact Justin Boese at justin.boese@cbhpc.dhcs.ca.gov

How This Agenda Item Relates to Council Mission

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

This agenda item is related to the evaluation of the behavioral health system through the Data Notebook project.

Background/Description:

Each year the Council releases a Data Notebook to the local mental/behavioral health boards and commissions to complete with their perspectives on focused areas of the system. In recent years, the Data Notebook was split into two parts. Part One contained standard questions that are included each year to obtain county-specific information on vulnerable populations for which there is no publicly available data. Part Two consists of questions focused on different aspects of the public behavioral health system, with the topic changing year to year.

At the January 2024 Quarterly Meeting, the committee decided to focus the 2024 Data Notebook on the topic of homelessness within the public behavioral health system. The Committee also decided to stop collecting the “Part I” data to lessen the burden on participating counties and make more room for other topics. The 2024 Data Notebook will also include a set of questions asking the local behavioral health boards and commissions what performance indicators they collect and which they would like to see the Performance Outcomes Committee focus on in upcoming Data Notebook projects.

The committee will review the final draft of the 2024 Data Notebook before it is approved for distribution to the behavioral health boards/commissions.

**California Behavioral Health Planning Council
Performance Outcomes Committee
Friday, August 9, 2024**

Agenda Item: Committee Charter and Workplan Review (Action Item)

Enclosures:

- Performance Outcomes Committee Charter
- Draft of the Performance Outcomes Committee 2024-2025 Work Plan.
- CBHPC Responsibilities in the BHS

How This Agenda Item Relates to Council Mission

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

This agenda item provides committee members the opportunity to review and update the work plan to ensure that committee activities are aligned with the Council's mission and vision.

Background/Description:

The purpose of the committee work plan is to establish the objectives and goals of the Performance Outcomes Committee, as well as to map out the necessary tasks to accomplish those goals.

Committee members will review and update the work plan to identify goals, objectives, roles, and timelines for the work of the committee in 2024 and beyond.

Motion: To approve the Committee Charter and 2024-2025 Work Plan with the edits discussed.

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:

- California Association of Local Behavioral Health Boards and Commissions
- 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 Zoom 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. 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
- Organize forums for the Council that are authorized by the Officer Team or the Executive Committee for the education of stakeholders.
- Learn from literature and guest speakers about behavioral health data and study the ways this data can measure the effectiveness of the Public BH System.

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

Catherine Moore

Uma Zykofsky

Don Morrison

Steve Leoni

INVITED EXTERNAL PARTNERS

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

Samantha Spangler, Behavioral Health Data Project

STAFF

Justin Boese

Justin.Boese@cbhpc.dhcs.ca.gov

(916) 750-3760

Linda Dickerson

Linda.Dickerson@cbhpc.dhcs.ca.gov

**California Behavioral Health Planning Council
Performance Outcomes Committee
Work Plan 2024-2025**

Revisions: Added text is designated with underline. Deleted language is designated a ~~strikethrough~~.

GOAL 1

Collect County-Specific Data to Evaluate the Public Behavioral Health System

Objective:

Identify Strategies to improve engagement with behavioral health boards to better utilize the data collected.

Target Audience: County Behavioral Health Boards/Commissions

Activities:

- Develop topic-specific questions for the annual Data Notebook project
- Discuss and select a topic for the Data Notebook on an annual basis
- Develop survey questions and background information for the Data Notebook survey, based on the topic selected
- Distribute the annual Data Notebook survey and collect responses
- Analyze the collected survey response and develop recommendations
- Publish the Data Notebook Overview Report and Executive Summary
- Consider ways to market the valuable information the committee generates so stakeholders are aware of how the Public BH System is providing service.

Timeline: Annual, Ongoing

Deliverables:

- 2023 (Stakeholder Engagement) Data Notebook Overview Report
- 2024 (Homelessness in the Public Behavioral Health System) Data Notebook Survey and Overview Report
- 2025 (Topic to be determined) Data Notebook Survey

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**California Behavioral Health Planning Council
Performance Outcomes Committee
Work Plan 2024-2025**

GOAL 2

**Review and Approve Performance Outcomes Measures for the
Public Behavioral Health System**

Objective: Identify key performance outcomes measures/indicators to be used in the evaluation of the public behavioral health system.

Target Audience: Department of Health Care Services (DHCS), State Legislature, Counties

Activities:

- Identify constituents and collect input on performance outcomes indicators
- Ask counties what outcomes/indicators they currently collect, and which they are most invested in
- Identify available data resources that correlate to existing performance indicators and compile into a document for committee review and discussion
- ~~Share findings with target audiences (DHCS, State Legislature, Counties, etc.)~~
- Explore options to present the committee's findings to stakeholders in engaging and accessible ways.

~~(Note: Work on this item is postponed due to emergent priorities re: CalAIM, budget, COVID-19.)~~

Timeline: To be determined

Deliverables: To be determined

GOAL 3

**Facilitate Regular Stakeholder Engagement on Behalf of the
Planning Council**

Objective: Assist in the planning and facilitation of stakeholder engagement events, such as public forums, especially as related to data requirements and other elements as required in Proposition 1.

Target Audience: Department of Health Care Services (DHCS), California Health and Human Services Agency (HHS), State Legislature, and all stakeholders.

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**California Behavioral Health Planning Council
Performance Outcomes Committee
Work Plan 2024-2025**

Activities:

- Identify important and timely topics to engage public stakeholders, particularly as referenced in Proposition 1.
- Work with the Executive Committee to plan stakeholder engagement events on identified topics
- Invite key speakers/panelists to participate in events
- Help facilitate panel discussions, public forums, and other event activities
- Report out to Planning Council after events to share stakeholder input

Timeline: To be determined

Deliverables: Provide event summaries that include stakeholder comments and brief the Planning Council on updates to data dashboards required by Proposition 1.

GOAL 4

Showcase effective programs that feature the guiding principles of the committee and the Planning Council that are successful in assisting consumers in their recovery.

Objective: To comply with WIC 5772 C-4, identify and highlight innovative and exciting programs that are addressing and promoting the values noted in the committee's charter.

Target Audience: Department of Health Care Services (DHCS), California Health and Human Services Agency (HHS), and State Legislature and County Agencies and Boards and commissions and other stakeholders.

Activities:

1. Identify responses from the Data Notebook that highlight programs that meet this goal.
2. Gather recommendations from other Planning Council committees for innovative programs counties are utilizing to serve consumers.
3. Visit suggested programs to meet with providers and other stakeholders and learn what efforts are being made to better serve consumers.
4. Generate a brief white paper of featured programs to highlight, without endorsing particular programs.

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California Behavioral Health Planning Council

ADVOCACY • EVALUATION • INCLUSION

Council Responsibilities Outlined in the Behavioral Health Services Act (BHSA)

SEC.19 is about the duties and responsibilities of the Behavioral Health Boards and Commissions. The boards report county performance outcome data to the Council.

Section 5604.2 (a) Review and comment on the county's performance outcome data and communicate its findings to the California Behavioral Health Planning Council.

SEC 25 is about reporting requirements. The BHSA mandates the Department to consult with the Council on reporting requirements for the counties and the development of client-based information system.

SEC 25 5610 (a) (1) Each county behavioral health system shall comply with reporting requirements developed by the State Department of Health Care Services, in consultation with the California Behavioral Health Planning Council and the Behavioral Health Services Oversight and Accountability Commission, which shall be uniform and simplified.

SEC 25 5610 (b) (1) The department and the California Health and Human Services Agency shall develop, in consultation with the Performance Outcome Committee, the California Behavioral Health Planning Council, and the Behavioral Health Services Oversight and Accountability Commission, pursuant to Section 5611, uniform definitions and formats for a statewide, nonduplicative, client-based information system that includes all information necessary to meet federal mental health grant requirements, state and federal Medicaid reporting requirements, and other state requirements established by law.

SEC 31 is about county behavioral health systems requirement to provide reports and data. The Council is one of the bodies identified in the list of bodies to be consulted.

5664. (a) In consultation with the County Behavioral Health Directors Association of California, the State Department of Health Care Services, the Behavioral Health Services Oversight and Accountability Commission, the California Behavioral Health Planning Council, and the California Health and Human Services Agency, county behavioral health systems shall provide reports and data to meet the information needs of the state, as necessary.

SEC 34 is about the Oversight and Accountability Commissions relationship to the California Behavioral Health Planning Council.

5771.1. (a) The members of the Behavioral Health Services Oversight and Accountability Commission established pursuant to Section 5845 are members of the California Behavioral Health Planning Council.

(b) These members serve in an ex officio capacity when the council is performing its statutory duties pursuant to Section 5772.

(c) This membership does not affect the composition requirements for the council specified in Section 5771.

SEC 58 is about the roles and responsibilities of the Behavioral Health Services Oversight and Accountability Commission (BHSOAC). The BHSOAC is mandated to work with DHCS and the Council on a written report with recommendations to improve and standardize BHSO promising practices every three years.

5845. (g) (1) (g) (1) The commission shall work in collaboration with the State Department of Health Care Services and the California Behavioral Health Planning Council, and in consultation with the County Behavioral Health Directors Association of California, to write a report that includes recommendations for improving and standardizing promising practices for Behavioral Health Services Act programs.

(2) The commission shall complete the report and provide a written report on its internet website no later than January 1, 2030, and every three years thereafter.

**California Behavioral Health Planning Council
Performance Outcomes Committee
Friday, August 9, 2023**

Agenda Item: Development of Recommendations for the 2023 Data Notebook on Stakeholder Engagement

Enclosures: Overview of survey results for the 2023 Data Notebook on Stakeholder Engagement. For a copy of this document, please contact Justin Boese at justin.boese@cbhpc.dhcs.ca.gov

How This Agenda Item Relates to Council Mission

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

This agenda item is related to the evaluation of the behavioral health system through the Data Notebook project.

Background/Description:

Each year the Council releases a Data Notebook to the local mental/behavioral health boards and commissions to complete with their perspectives on focused areas of the system. The 2023 Data Notebook has two parts. Part One contains standard questions that are included each year to obtain county-specific information on vulnerable populations for which there is no publicly available data. Part Two contains questions focused on stakeholder engagement in the public behavioral health system. The Data Notebook Overview Report provides background information on that year's topic, an in-depth analysis of the data collected from the survey, and a list of recommendations based on the analysis.

The committee members will discuss and develop recommendations for the 2023 Data Notebook on Stakeholder Engagement in the Public Behavioral Health System, based on survey analysis provided by Linda Dickerson.