



California Behavioral Health Planning Council

Advocacy • Evaluation • Inclusion



2020 Year-End Report

MS 2706 / P.O. Box 997413
Sacramento, CA 95899-7413
(916) 701-8211

Council website: <https://www.dhcs.ca.gov/services/MH/Pages/CBHPC-PlanningCouncilWelcome.aspx>

OVERVIEW

The California Behavioral Health Planning Council (Council) advocates for an accountable system of seamless, responsive services that are strength-based, consumer and family member driven, recovery oriented, culturally and linguistically responsive and cost effective. Council recommendations promote cross-system collaboration to address the issues of access and effective treatment for the recovery, resiliency and wellness of Californians living with severe mental illness and/or substance use disorders.



2020 ACCOMPLISHMENTS IN REVIEW

The year 2020 has been quite unusual. The onset and continuation of our nation's public health emergency has impacted the Council in a number of ways. The Council's normal quarterly face-to-face meetings in different locations around the state have given way to a virtual format. In 2020, the Council met in person only in January and the April meeting was canceled as it was set to occur just a few weeks after the stay-at-home order was issued. Council committees were able to schedule conference calls and virtual meetings to continue their work. Additionally, Council staff have been working remotely since late March and did not return to the office in the remainder of the year.

The lack of face-to-face contact did not slow the Council's efforts. The fact that the COVID-19 virus is affecting communities of color in much higher numbers and the national outcry over racial injustice is concerning to the Council. These issues of disparity and inequity affect the behavioral health community especially with significant existing disparities already occurring. Advocacy for barrier-free access and cultural responsiveness is essential and a significant piece of the Council's work.

Over the year, the Council had a number of accomplishments including:

- Adoption of the Council's Equity Statement,
- Release of the 2019 Data Notebook Report on Trauma-Informed Care,
- Participation in the first-ever virtual Mental Health Matters Day event.

A huge Thank You goes to the Council Officers, Committee leaders and to the staff for their tireless dedication to navigate this year's unprecedented challenges and ensuring the Council's ongoing successful operations. Their above-and-beyond efforts are acknowledged and appreciated.

AREAS OF FOCUS

The Council's mission-driven efforts have been focused in key areas including: Legislation, Housing/Homelessness, Systems and Medicaid, Workforce and Employment, Patients' Rights and Performance Outcomes.

Legislation Committee

The Legislation Committee's primary focus is to advocate on policies impacting the publicly-funded behavioral health system contained in proposed legislation, regulations and budget proposals. In 2020, despite a number of recesses by the Legislature due to the public health emergency, the committee members addressed 15 bills during this legislative session. The committee focused much of its resources in specific areas including SB 803 to establish a Peer Certification program, AB 1766 to secure timely and accurate data on licensed residential care facility closures, and AB 2112 to establish an Office of Suicide Prevention within the CA Department of Public Health in order to have a statewide coordinated effort to stop the rising number of deaths by suicide. The Council joined a number of its fellow advocacy organizations to address the negative fiscal impact of the COVID-19 outbreak on key funding sources for the county behavioral health system. This effort included urging the Governor to address the gap in resources needed to meet the growing need for services and the vigorous opposition to a bill that would allow the use of MHSA funds to be used for services in county correctional facilities.

Housing and Homelessness Committee

The Housing and Homelessness Committee continues its focus on the rapid loss of Adult Residential Facilities (ARFs) serving persons with serious mental illness. These licensed ARFs are an important segment on the continuum of housing and they are closing at an alarming rate which results in more persons with serious mental illness living on the streets. The Council united with the County Behavioral Health Directors Association in a budget proposal to the Governor to provide necessary support as part of the state's plan to address homelessness.

Unfortunately, initial funding proposed in the 2020-21 state budget to mitigate the financial discrepancy for facilities serving this population was cut in anticipation of a budget shortfall. The committee monitored the receipt and utilization of federal funding provided to states to address the need to house individuals living on the street as part of a coordinated effort to stop the spread of COVID-19. Some of that funding, such as Project Homekey, has been used to acquire properties that can be used beyond the pandemic as temporary and permanent housing for persons who are homeless. Advocacy to address the needs of persons with behavioral health needs who are homeless will continue into 2021.

Systems and Medicaid Committee

The Systems and Medicaid Committee has several goals centered around system reform as well as policy changes proposed to improve the state's publicly-funded behavioral health system. Early in 2020, committee members submitted policy recommendations on various proposals contained in the CalAIM Initiative including medical necessity, the administrative integration of behavioral health and substance use services, expansion of behavioral health providers, and the ongoing use of telehealth and telephonic services. Subsequently, further development of CalAIM was forced to be set aside due to immediate and evolving priorities for Medi-Cal beneficiaries and providers stemming from the public health emergency. A request to extend California's 1115 and 1915(b) Medicaid waivers through 2021 was approved by the Centers for Medicare and Medicaid Services. Throughout the remainder of 2020, the members continued to receive updates on the impact of the pandemic from various segments of the system in order to assess the impact of COVID-19 on behavioral health at the state, county and individual levels as well as to identify issues, successes and best practices for future recommendations. The committee continues to consider the impact of the pandemic to potentially make policy recommendations in 2021 for telehealth, best practices during a public health emergency, racial equity, and other emerging issues.

Workforce and Employment Committee

The Workforce and Employment Committee has two distinct goals. First, to provide leadership and collaborate with other stakeholders to support the growth and quality of California's behavioral health workforce, reduce the workforce shortage and build sustained mechanisms for ongoing workforce education and training to ensure a recovery-oriented workforce. Secondly, to ensure that any California mental health consumer who wants to work or be self-employed has minimal barriers and timely access to employment support services and pre-employment services across the lifespan to secure and retain a job or career of choice.

In fulfillment of statutory duties to advise the Office of Statewide Health Planning and Development, the committee members engaged in dialogue and provided recommendations regarding the implementation of the Workforce Education and Training (WET) Five-Year Plan and the design of the Plan Evaluation. Additionally, committee members engaged with other organizations to provide feedback and guidance on varying issues such as ensuring core MHPA values are taught and represented in Psychiatric Education Capacity Expansion grant awardee programs and exploring potential Substance Use Disorder (SUD) workforce funding by inviting CEO of the California Council of Community Behavioral Health Agencies (CBHA), Le Ondra Clark Harvey, to discuss current efforts to secure additional funding. Committee members presented their input on this topic and initiated a discussion on opportunities to increase SUD funding in the behavioral health system.

With the peer specialist certification signed into law during the last quarter of the year, committee members expressed interest in addressing peer specialist certification efforts in 2021. Activities will include inviting peer specialists to share their perspectives and hopes for the new program, committee participation in DHCS' workgroups pertaining to development of the policies and regulations for peer specialist certification, and providing DHCS with recommendations for implementation.

Patients' Rights Committee

The policies that affect the rights of inmates with mental illness are complex and in 2020 the Council's Patients' Rights Committee sought to identify avenues to address systemic issues in this area. The committee's strategic focus in 2020 was to promote accessible and effective mental health Patients' Rights Advocacy (PRA) services in California county jails.

To begin identifying best practices, the committee scheduled a presentation from the San Diego Public Defender's Office to hear about their Defense Transition Unit. The Unit was formed to connect clients to professionals that can evaluate their mental health needs soon after being charged with a crime, with the goal of getting clients into treatment and divert them from unnecessary incarceration. Additionally, due to the proliferation of the COVID virus through institutions, the committee sought updates from the California Office of Patient's Rights and Disability Rights California on the impact of the public health emergency on patients' rights advocacy work, with a focus on work in county jails. They found that the access and activity of patients' rights advocates has dropped considerably and the members will continue to monitor this into 2021.

A second objective was to survey local behavioral health boards and commissions on patients' rights advocacy in county jails and encourage discussion of PRA duties in county jails. The survey was distributed and focuses on identifying the level of familiarity that the boards/commissions have with patients' rights advocacy work in county jails. By the writing of this report, a total of 41 surveys had been received from a good mix of counties across the state. Analysis of the survey will be shared in an upcoming report, along with information and resources regarding the roles and duties of patients' rights advocates.

In accordance with the requirements set forth in state law, the Patients' Rights Committee continued the monitoring and tracking of county compliance to provide timely and appropriate training to newly hired patients' rights advocates.

Performance Outcomes Committee

The Performance Outcomes Committee seeks to assess and report on the publicly-funded behavioral health system for accessible and effective care by reviewing relevant and reliable data to inform Council recommendations.

The Data Notebook is an annual project that seeks information and reports on behavioral health services and needs in each county through a survey of the local behavioral health boards and commissions. Each year, the Data Notebook is directed at specific segments of the system. During the first half of 2020, committee members reviewed the staff analysis of the 2019 Data Notebook which focused on Trauma-Informed Care. The members generated recommendations to endorse the training of first responders in Adverse Childhood Experiences (ACEs) and trauma-informed care to improve officer and consumer safety and to provide for the direction of individuals experiencing a mental health crisis away from the judicial system and into the health care system. A second recommendation promotes the practice, and requests necessary ongoing resources, for the screening of all children and adults for the possibility of trauma-induced serious health conditions. The data collected will provide vital information to inform public health policy and programming.

In the second half of the year, the committee created the 2020 Data Notebook in response to DHCS' request to focus on the topic of Telehealth due to increased prevalence and importance during the COVID-19 public health emergency. The format was changed to use Survey Monkey and responses began arriving in late fall and through the end of the year. The subsequent report and recommendations will be available in early 2021.

Conclusion

In conclusion, while 2020 brought many unexpected twists and turns, it remained a busy and fruitful year for the Council. It must be acknowledged that two of the Council's staff team were re-directed to assist in the State's contact tracing

efforts. These two staff are providing an essential service to combat the virus and save numerous lives and the remaining staff stepped up to cover the workload for the second half of the year. It has been an extraordinary year. We have seen both unusual challenges as well as astonishing achievements. We are excited to see what 2021 has in store. The Council looks forward to sharing its accomplishments with you and invites you to join our efforts to achieve our vision of a behavioral health system that makes it possible for individuals to lead full and purposeful lives.

Contact Us]

For questions or more detailed information about any of the actions, projects or committees mentioned in this report, please contact us at 916-701-8211. You may also visit our website at:

<https://www.dhcs.ca.gov/services/MH/Pages/CBHPC-PlanningCouncilWelcome.aspx>

2021 Council Meeting Schedule

January 19-22, 2021

April 13-16, 2021

June 15-18, 2021

October 19-22, 2021