

California Behavioral Health Planning Council

Performance Outcomes Committee Agenda

Tuesday, October 19, 2021

Zoom Meeting

<https://us02web.zoom.us/j/83028334148?pwd=VURPd0hFNHJsMmNOeDZVRmhVU2NtZz09>

Meeting ID: 830 2833 4148 **Passcode:** 216670

Call-In #: +1 669 900 6833

2:00 pm - 3:30 pm

- | | | |
|----------------|---|--------------|
| 2:00 pm | Welcome and Introductions
<i>Susan Wilson, Chairperson</i> | |
| 2:05 pm | Approve June 2021 Meeting Minutes
<i>Susan Wilson, Chairperson</i> | Tab 1 |
| 2:10 pm | Setting the Stage for Today's Meeting
<i>Susan Wilson, Chairperson</i> | |
| 2:15 pm | 2021 Data Notebook Update
<i>Susan Wilson and Justin Boese</i> | Tab 2 |
| 2:25 pm | Public Comment | |
| 2:30 pm | 2022 Data Notebook Survey Discussion
<i>Susan Wilson and Justin Boese</i> | Tab 3 |
| 3:15 pm | Public Comment | |
| 3:20 pm | Wrap Up and Plan for Future Meeting
<i>Susan Wilson, Chairperson</i> | |
| 3:30 pm | Adjourn | |

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

Performance Outcome Committee Members

Susan Morris Wilson	Karen Baylor	Darlene Prettyman
Lorraine Flores	Walter Shwe	Jim Kooler
Noel O'Neill	Steve Leoni	Uma Zykofsky
Hector Ramirez		

Invited External Partners

Theresa Comstock, CA Association of Local Behavioral Health Boards/Commissions
Samantha Spangler, California Institute for Behavioral Health Strategies

Council Staff

Justin Boese

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

**California Behavioral Health Planning Council
Performance Outcomes Committee
Tuesday, October 19, 2021**

Agenda Item: Approve June 2021 Meeting Minutes

Enclosures: June 2021 Draft Meeting Minutes

Background/Description:

Committee members will review the draft meeting minutes for June 2021

Motion: Accept and approve the June 2021 meeting minutes.

California Behavioral Health Planning Council

Performance Outcomes Committee

June 15, 2021

Meeting Summary (DRAFT)

Members present:

Susan Wilson, Chairperson

Walter Shwe

Lorraine Flores

Noel O'Neill

Steve Leoni

Hector Ramirez

Jim Kooler

Uma Zykofsky

Darlene Prettyman

Invited External Partners present:

Theresa Comstock, CALBHBC

Samantha Spangler, CIBHS

Other Council Members Present:

Catherine Moore

Staff present:

Jane Adcock, Executive Officer

Justin Boese

Jenny Bayardo

Presenters:

Dawnte Early

Item #1 Approve April 2021 Meeting Minutes

A motion to accept the April 2021 meeting minutes was made by Steve Leoni and seconded by Noel O'Neil. The motion passed.

Item #2 Setting the Stage for Today's Meeting

Susan Wilson provided an overview of the goals for the meeting. The main objective was to discuss the draft of the survey questions for Part II of the 2021 data notebook.

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Meeting Summary (DRAFT)

Item #3 2021 Data Notebook Survey Development

Susan moved on to the discussion of the draft survey questions for part II of the 2021 Data Notebook. Justin Boese shared the document on the screen and gave an overview of draft, including the introduction, background information, and the data sources used for the charts and figures. The draft used Sacramento County as an example. Susan then asked for general feedback for the draft as a whole.

Theresa Comstock commented that the Department of Health Care Services (DHCS) External Quality Review Organization (EQRO) reports have more recent data compared to the data pulled from the Mental Health Services Oversight and Accountability Commission (MHSOAC) transparency suite. She said that more current data would be more useful to the counties. Noel O’Neil said that the data for Full Service Partnerships (FSPs) in Sacramento County looked promising, and was very diverse by race/ethnicity in terms of access.

Hector Ramirez said that he was thankful the committee was moving forward with this topic, and said that it was a great opportunity to gather more data for minority communities. He suggested using the term “inequities” instead of “disparities.” He said that it is a more modern term compared to “disparities” and puts more of the focus on bettering the system.

Uma Zykofsky said she wondered about data that counties might have that aren’t captured in the sources used in the draft, such as data on inpatients services and criminal justice. Jane Adcock commented that there are a wide array of areas that these inequities touch, and thus many potential sources that could be looked into. However, given the limited scope of the data notebook, the committee will need to decide which to focus on so that the survey doesn’t become too long.

Steve Leoni commented that some of the language felt outdated, such as the terms “American Indian” and “Hispanic.” Jane clarified that those terms appear in some of the charts and graphs because that is the terminology that is used in the original sources. Steve went on to express some concern over continued focus on “access” as a measure rather than other outcomes. Some of the outcomes he said he was interested in were rates of involuntary holds, arrests, diversion programs, voluntary treatment programs, rates of misdiagnosis, and positive behavioral health outcomes. Steve said that while sources may not exist for all of these issues, gaps in the data should be specifically called out in the report.

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Meeting Summary (DRAFT)

Susan wrapped up the general feedback discussion. The committee moved on to discuss each survey item individually. Feedback was collected for each of the ten draft questions and included comments on wording and terminology and the addition of more answer choices to questions. Comments are summarized below in bullet-point form for brevity.

Question 1. Based on the data provided for your county, do you feel that the racial/ethnic group(s) that needs services in your county is receiving adequate services? (Text Response)

Comments:

- Uma: Vague language could lead to overly biased responses. There is no clear definition of “Adequate”. Needs to be broken down by racial/ethnic group.
- Lorraine Flores: Suggested using a scale rather than an open-ended question.
- Hector: “Adequate” is relative. We have to think about what adequate means.
- Theresa: It would be helpful for the report to include resources after the notebook to help counties improve.

Question 2. What outreach efforts are being made to reach underserved racial/ethnic minority groups in your community? (Answer choices to be developed)

Comments:

- Hector: Expand ideas of outreach and engagement. Accommodations such as ADA, providing food at events, reimbursement or stipends for involvement and travel, diversity in boards/task forces. Who has been invited to the table?
- Uma: Consider broadening to “Outreach, community engagement, and/or education.”
- Lorraine: Have them answer for each race/ethnicity.

Question 3. What steps have been taken to encourage a culturally diverse behavioral health work force in your county? (Answer choices to be developed)

Comments:

- Walter Shwe + Steve Leoni: Ask whether they are hiring people of similar backgrounds to the people they are serving.

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Meeting Summary (DRAFT)

Question 4. Does your county provide cultural sensitivity training for behavioral health staff and providers?

- a. Yes (please describe):
- b. No

Comments:

- Hector: “Cultural proficiency” is a better term. It describes a newer model that is more proactive. Members of the community are involved in training. Provide examples in the answer choices.

Question 5. Which of the following does your county have difficulty with regarding providing culturally sensitive and accessible mental health services?

- a. Employing culturally diverse providers
- b. Translating written materials
- c. Providing live translation services
- d. Providing cultural competency training for staff and providers
- e. Outreach to racial/ethnic minority communities
- f. Other (please specify):

Comments:

- Uma: Add live/virtual interpretation (not translation). Add retention.

Question 6. What barriers to accessing mental health services do individuals from underserved communities face in your county? a. Language barriers

- b. Lack of culturally diverse/representative providers
- c. Distrust of mental health services
- d. Lack of information or awareness of services
- e. Difficulty securing transportation to services
- f. Difficulty accessing telehealth services
- g. Other (please specify):

Comments:

- Uma: Add stigma.
- Theresa: Are interpreters trained in the culture? What about security guards, desk staff, etc.?

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Meeting Summary (DRAFT)

- Noel: Front desk staff... are they welcoming? Part of reducing stigma.

Question 7. Do you feel that the COVID-19 pandemic has increased behavioral health disparities for racial/ethnic minority groups?

- a. Yes (please explain):
- b. No

Comments:

- Uma: Break answers down by cultural group.
- Hector: What about by age? This is an important question but it needs expansion.

Question 8. On a scale of 1-5 (1 being negative, 3 being neutral, and 5 being positive) please rate the impact of the use of telehealth services during Covid-19 for the following groups regarding access and utilization of behavioral health services.

- a. Alaskan Native / American Indian:
- b. Asian or Pacific Islander:
- c. Black:
- d. Hispanic:
- e. Other:
- f. Unknown:
- g. White:

Comments:

- Susan: Consider adding age categories here too.

Question 9. Has your county employed or utilized any of the following to engage or serve culturally diverse communities?

- a. Community Health Workers / Promotoras
- b. Community-accepted first responders
- c. Peer Support Specialists
- d. Community-based organizations
- e. Faith-based leaders/organizations
- f. Other (Please specify):

Comments:

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Meeting Summary (DRAFT)

- Hector: Additional categories to add: Homeless services, schools/higher education, SUD workers, grocery stores, food pantries, domestic violence programs, sports programs/teams, food trucks, immigration services, local tribal nations / NA communities.

Question 10. Do you have suggestions for improving outreach to and/or programs for underserved groups? (Text Response)

No comments.

Item #5 Public Comment

None.

Item #6 Wrap Up and Plan for Future Meeting

Susan Wilson encouraged committee members to send in further feedback and comments on the draft. Justin Boese will take the feedback and incorporate them into edits to the survey. The 2021 Data Notebook will be sent out to counties before the next committee meeting in October. Susan and Justin thanked the members for their engagement and input.

The meeting adjourned at 3:30pm.

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Tuesday, October 19, 2021**

Agenda Item: 2021 Data Notebook Update

Enclosures: Example of the 2021 Data Notebook document for Sacramento County, and a preview of the final SurveyMonkey Survey. For copies of these documents, 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 provides an update for committee members on the 2021 Data Notebook.

Background/Description:

Each year the Council releases a Data Notebook to the local mental/behavioral health boards and commissions to complete with their perspectives of focused areas of the system. The 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 different aspects of the public behavioral health system. In 2021 the committee decided to focus on racial/ethnic inequities in behavioral health.

In order to facilitate a timely collection and analysis of survey data, the 2021 Data Notebook was developed in an online format using SurveyMonkey. The Data Notebook was sent out in September 2021 with a requested return date of November 2021. The committee will be updated on the current status of the project.

**California Behavioral Health Planning Council
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Tuesday, October 19, 2021**

Agenda Item: 2022 Data Notebook Survey Development

Enclosures: None

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 the opportunity for committee members to select a topic for the 2022 Data Notebook and discuss the kinds of questions they would like to include in the survey.

Background/Description:

Each year the Council releases a Data Notebook to the local mental/behavioral health boards and commissions to complete with their perspectives of focused areas of the system. The 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 different aspects of the public behavioral health system.

A survey was sent out to committee members in September 2021 to gather input on potential topics for Part II of the 2022 Data Notebook survey. Based on the results of that input, the committee will discuss and select a topic.