

TO BE INCLUDED WITHIN THE 10/19/20 CORRESPONDENCE FILE:

Gov. Newsom signs series of behavioral health care bills

The Office of Gov. Gavin Newsom | Sep 25, 2020

<https://stateofreform.com/news/california/2020/09/gov-newsom-signs-series-of-behavioral-health-care-bills/>

Thank you,

Jerry Harris – Behavioral Health Advisory Board Chair

Poliquin, Victoria

From: CAL BHBC <cal@calbhbc.com>
Sent: Wednesday, October 14, 2020 2:37 PM
To: Pham, Edith; Poliquin, Victoria; Johnson, Sevet; Jerry
Subject: CALBHB/C October E-Update - Please Share with board/commission members and staff!

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E-Update, October 2020

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October is Disability
Employment Awareness Month

[CALBHB/C Employment Issue Brief](#)

EMPLOYMENT - Successful practices for adults with mental illness.

Work helps us feel well. Employment is a major therapeutic tool, improving quality of life and reducing symptoms in those with mild to moderate to severe mental illness. The following items are important for board/commission members to understand and consider as they advise locally and as they join with CALBHB/C for statewide advocacy:

Individual Placement & Support (IPS) is a successful Employment Practice as implemented in Alameda County, 25+ states and many countries.

What is IPS?
IPS is a model of supported employment for people with serious mental illness (for example, schizophrenia spectrum disorder, bipolar, depression.) IPS is based on eight principles:

1. Competitive Employment
2. Systematic Job Development
3. Rapid Job Search
4. Integrated Services
5. Benefits Planning
6. Zero Exclusion
7. Time-Unlimited Support
8. Worker Preferences

IPS Data

- In CA, only 12% of people in the public mental health system work
- IPS helps 82% or more of people get jobs. People are 2.3 times more likely to get a job with IPS vs. traditional rehab programs.
- People in IPS work longer shifts, earn more, and are more likely to become steady workers than people in traditional programs. See www.calbhb.org/employment.html

MHC Cooperative Programs
CA's Mental Health Cooperative programs are partnerships between County Mental Health agencies and the Department of Rehabilitation. These programs assist consumers find, get, and keep meaningful community employment. Programs serve over 7,000 consumers annually, resulting in over 750 successful closures annually. More than 82% of consumers with a mental health diagnosis receive vocational rehabilitation plan services while participating in the DOR Mental Health Cooperative programs. More at DOR.CA.GOV

Peer Provider Certification
With the passage of SB 823 (Beall), CA will implement a process for certification for peer support specialists (who have lived experience with the process of recovery from mental illness, substance use disorder, or both). This bill requires DMCS, by July 1, 2022, to establish requirements for certification of their representatives. See www.calbhb.org/peerprovidercert.html

CALBHB/C: A STATEWIDE ORGANIZATION SUPPORTING THE WORK OF CALIFORNIA LOCAL MENTAL & BEHAVIORAL HEALTH BOARDS AND COMMISSIONS.

Resources for Boards & Commissions

[Conduct Handbooks](#)
[Member Orientation](#)
[Mental Health Services Act](#)

- Role of MHB
- Fiscal
- [Community Program Planning](#)

[Training Modules](#)

- Duties
- Ethics Training
- Mental Health Services Act

[Training Recordings](#)

[Welfare & Institutions Code](#)

- Bylaw Requirements
- Duties
- Expenses
- Membership Criteria
- MHSA Community Planning

Legislation - A Historic Year!

CALBHB/C leadership proudly supported transformational bills that have been signed into law: SB 855, AB 1766 and AB 2377! Thank you to everyone who joined us in advocacy! These, along with additional new Mental/Behavioral Health legislation are summarized below:

Access & Parity

[SB 855](#) bridges gaps in CA's mental health parity law. The new state law requires commercial health plans and insurers outside of Medi-Cal (which is regulated by different standards) to provide full coverage for treatment of all mental health conditions and substance use disorders.

Adult Residential Facilities

[AB 1766](#) will provide data to policy makers to help counties identify housing options for Californians with severe mental illness by tracking closures of board-and-care homes that serve low income residents.

Crisis Care Continuum

[AB 1544](#) will expand the pilot projects by authorizing local EMS agencies to develop alternative destination programs (to include mental health treatment facility, hospital, crisis stabilization unit, authorized sobering center, federally qualified health center.) One of the intents is to improve coordination among providers of medical services, behavioral health services and social services.

[AB 1976](#) makes Laura's Law permanent and requires counties to participate unless they opt out. Laura's Law authorized counties to create community-based, intensive AOT (assisted outpatient treatment) programs for people with severe mental illness, who meet strict legal criteria, and enabled judges to order treatment if those offered services decline.

Substance Use Disorder

[AB 2265](#) by Assemblymember Sharon Quirk-Silva (D-Fullerton) will authorize counties to use Mental Health Services Act (MHSA) funds — historically limited to mental health services — to treat Californians with co-occurring mental health and substance use disorders.

[AB 1304](#) - Would establish [contingent upon a specified federal grant] the California MAT Re-Entry Incentive Program, which would make a person released from prison on parole, with specified exceptions, who has been enrolled in, or successfully completed, an institutional substance abuse program, eligible for a reduction in the period of parole if the person successfully participates in a substance abuse treatment program that employs a multifaceted approach to treatment, including medically assisted treatment (MAT).

Suicide Prevention

[AB 2112](#) [contingent upon appropriations] would establish a state Office of Suicide Prevention

Workforce

[AB 890](#) addresses the current shortage of primary care physicians in CA by expanding the ability of licensed nurse practitioners to treat patients - including those with mental illness - without a physician's supervision.

[SB 803](#) will create a system to certify peer support specialists, define their roles, and help to scale up the Medi-Cal workforce.

Recommended Reading / On-line Media

Children & Youth

[Stressors Take Toll on Students' Mental Health](#), CA Health Care Foundation

[Zero to Five: Building Connections for Lifelong Impact](#), October 15, 12 pm
[Considerations in Serving LGBTQ Adolescents](#), October 23, 11:30 am

Disasters

[Disasters Are Driving a Mental Health Crisis](#), CaliforniaHealth Report

Disparities

[Addressing Trauma, Racism and Bias in Behavioral Health Service Delivery](#)

[Addressing Systemic Racism in Action: Understanding the Mental Health Professionals' Tools for Change](#), Anxiety and Depression Association of America

Employment

[Ask Me Anything about Employment Series: A Q&A Webinar](#), October 19, 10:00 am

Mental Health First Aid

[A Primer for Public Health Professionals and Communities](#), October 22, 12 - 1 pm

Peer Support

[Implementation of SB 803: Peer Certification, Client Family Leadership Committee Meeting](#), MHSOAC, October 16, 2 - 4 pm

Substance Use Disorder

[COVID-19 Impact on Addiction Treatment](#), October 22, 8:00 am

Telehealth

[A Lesson in Quickly Responding to the Need for Telehealth](#), Providers Clinical Support System

[How the Pandemic Forced Mental Health Care to Change for the Better](#), VOX

Workforce

[Therapists Want to Provide Affordable Mental Health Care. Here's What's Stopping Them](#), CaliforniaHealth Report

Grants/Funding

Digital Technology

- [Individuals - Internet and Devices: www.digitalaccessproject.org](#)
- [Skilled Nursing Facilities+](#) for tablets and accessories

Housing/Board & Cares

[Project HomeKey](#) - Funding to rapidly sustain and expand housing (may be used for the acquisition of board and care facilities).

Children & Youth

[Investment in Mental Health Wellness Grant Program for Children and Youth](#) to improve access to MH services through: mobile crisis support teams (MCSTs), crisis stabilization, Children's Crisis Residential Program beds, and family respite care. Due 1/29/21

[CARES Act Provider Relief Fund](#), Deadline: November 6

Meetings (All Virtual)

[CASRA Fall Conference](#): October 15, October 22, October 29: A wealth of speakers addressing recovery-oriented practices, antiracism, incarceration, children and youth and more. (\$50 registration)

[MHSOAC Client Family Leadership Committee Meeting](#),

MHSOAC, October 16, 2:00 - 4:00 pm

[CA Youth Empowerment Network \(CAYEN\) and Muslim American Society - Social Services Foundation Town Hall](#),

October 19th, 5pm - 8 pm

[MHSOAC Commission Meeting](#), October 22, 9:00 am

CA Behavioral Health Planning Council Committee Meetings

- [Performance Outcomes Committee](#), October 20, 2:00 - 3:30 pm
- [Patients' Rights Committee](#), October 21, 10:30 am to 12:00 pm
- [Workforce and Employment Committee](#), October 21, 1:30 - 3:00 pm
- [Legislation Committee, October 22, 1:30 - 3:00 pm](#)
- [Housing & Homelessness Committee](#), October 22, 8:30 am - 10:00 am
- [Systems & Medicaid Committee](#), October 22, 10:30 am to 12:00 pm

[DHCS Behavioral Health Stakeholder Advisory Committee](#), October 28, 9:30 am

[Mental Health Matters Day, Mental Health America of CA](#), November 10, 10:00 am - 1:00 pm

Evaluate Us!

CALBHB/C is here to provide resources, support, training, communication and coordinate advocacy for statewide issues. We invite you to evaluate us by taking a few minutes to complete: [Evaluate CALBHB/C](#).

Report to Us!

Let us know your top issues and/or resource needs: [Report to CALBHB/C](#)

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