

BEHAVIORAL HEALTH ADVISORY BOARD
General Meeting
Monday, January 24, 2022, 1:00 – 3:30 PM
VIRTUAL MEETING VIA ZOOM

Zoom Participation

The following information referenced below and at the end of the agenda is provided to you in support of your attending the upcoming BHAB General Meeting via Zoom:

Join the Zoom meeting in the following way:

Join Zoom Meeting: <https://us02web.zoom.us/j/83332714732?pwd=bE43OUJqRHhHa0ExSIR5L1VLMWMyQT09>

Meeting ID: 833 3271 4732

Password: 149553

Dial-In: 669-900-9128

AGENDA

- I. Call to Order
- II. Board Member Roll Call
- III. Welcome and Introductions
- IV. Approval of the Agenda – **ACTION** (Roll Call)
- V. Approval of the December 20, 2021 Minutes – **ACTION** (Roll Call)
- VI. Public Comments (3 min. per speaker)
- VII. Recognition: Susan Luckey “Mental Health Professional” Award – Scott Walker, Program Assistant – Crisis Intervention Team (CIT)
- VIII. Chair Comments (5 min.)
- IX. Director’s Report – Dr. Sevet Johnson (10 min.)
- X. Board Member Comments and Announcements (10 min.)
- XI. Secretary’s Report – Janis Gardner (5 min.)
- XII. BHAB Committee Reports (5 min each)
 - A. Adult Services Committee (January 6 meeting) – Nancy Borchard and Gane Brooking, Co-Chairs.
 - B. Prevention Committee (January 11 meeting) – Janis Gardner, Chair
- XIII. Old Business
 - A. 2021 Data Notebook Workgroup Progress Discussion – Michael Rodriguez, Chair (5 min.)
 - B. BHAB Membership Identification Assessment Draft Survey Results Discussion – Michael Rodriguez, Chair (5 min.)
 - C. BHAB Bylaws Amendments – Confirming Approval by Board of Supervisors – Michael Rodriguez, Chair (5 min.)
 - D. Needs Assessment Board Letter – Update on Status to Board of Supervisors – Michael Rodriguez, Chair (5 min.)

Members of the public making oral presentations to the Board in connection with one or more agenda or non-agenda items at a single meeting are limited to a cumulative total time not to exceed (5) minutes for all of their oral presentations at such meeting unless otherwise provided. **Public comments on agenda items must be made prior to board member deliberations of agenda items.** The entire public comment period is limited to no more than (20) minutes total for all speakers. NOTE: The Chair may limit the number or duration of speakers on a matter. In compliance with the Americans With Disabilities Act, if you need special assistance to participate in this meeting, please contact Behavioral Health Administration at (805) 981-6830. Reasonable advance notification of the need for accommodation prior to the meeting (48 hours advance notice is preferable) will enable us to make reasonable arrangements to ensure accessibility to this meeting.

XIV. New Business

- A. Brown Act Public Emergency Allowances / Teleconferences – Requirements for Local Boards and Commissions – Michael Rodriguez, Chair – **ACTION** (Roll Call) (5 min.)
- B. Announcements – Janis Gardner (5 min.)
- C. Presentation Requests
- D. Recognition Award Recommendations

XV. Contracts

Board of Supervisors Approved Agreements – December 14, 2021

- 1. California Department of Health Care Services (DHCS) Crisis Care Mobile Units (CCMU) Program Grant.
- 2. Kids to Kids Short Term Residential Treatment Program (STRTP) Agreement.
- 3. Netsmart Technologies, Inc. (Netsmart) 1st Amendment.
- 4. California Department of Housing and Community Development (HCD) No Place Like Home (NPLH) Round 4 Competitive Funding Application.

XVI. Public Comments (3 min. per speaker)

XVII. Adjourn

Next Meeting: Monday, February 28, 2022
(4th Monday versus 3rd Monday due to February 21 Holiday)

All agenda reports and supporting data, including those filed in accordance with Government Code Section 54957.5 (b) (1) and (2) are available from the Behavioral Health Advisory Board Assistant at bhabadmin@ventura.org or in person at Ventura County Behavioral Health, 2nd Floor, 1911 Williams Drive, Oxnard, California. The same materials will be available and attached with each associated agenda item, when received, at the following website: www.vcbh.org/en/behavioral-health-advisory-board-meetings.

Welcome to the meeting of the Behavioral Health Advisory Board of the County of Ventura. The following information is provided to help you understand, follow, and participate in the Board meeting:

Join the Zoom meeting by clicking the link provided on the agenda at the scheduled time and date. Zoom will initially start with a **waiting room** — you will be admitted into the meeting room when the meeting starts. All participants are muted upon entry to minimize any unintended disruption of background sounds. Please keep yourself on mute unless you are speaking.

Note: The meeting is recorded.

Public Comments

- The Behavioral Health Advisory Board (BHAB) welcomes comments from the community, consumers and family members.
- The BHAB operates under the Brown Act. This requires that all meetings be open meetings, with the agenda and minutes posted. A public comment period will be provided on all meeting agendas.

Members of the public making oral presentations to the Board in connection with one or more agenda or non-agenda items at a single meeting are limited to a cumulative total time not to exceed (5) minutes for all of their oral presentations at such meeting unless otherwise provided. **Public comments on agenda items must be made prior to board member deliberations of agenda items.** The entire public comment period is limited to no more than (20) minutes total for all speakers. NOTE: The Chair may limit the number or duration of speakers on a matter. In compliance with the Americans With Disabilities Act, if you need special assistance to participate in this meeting, please contact Behavioral Health Administration at (805) 981-6830. Reasonable advance notification of the need for accommodation prior to the meeting (48 hours advance notice is preferable) will enable us to make reasonable arrangements to ensure accessibility to this meeting.

- Due to confidentiality laws, the Board is unable to respond directly to a public comment or to discuss client-specific issues without proper releases from the individuals concerned.
- At all BHAB meetings, the BHAB Assistant provides a Grievance Form for individuals who have concerns. The form is reviewed promptly by VCBH Quality Management. Individuals can also contact the BHAB Assistant to request a VCBH Grievance Form outside a BHAB meeting or call 1-888-567-2122.
- Individuals who have further concerns are welcome to return to the BHAB for assistance.

Public comments may be provided using one of the following options:

1. Email or Mail Public Comment in Advance of the Meeting

To make a written public comment, you must send an email to bhabadmin@ventura.org, with the specific agenda item or topic, if a general comment, by no later than 10:00 AM on the day of the BHAB meeting. Your written public comment may also be mailed to the following address and must be received by the BHAB Assistant no later than 10 AM on the day of the meeting:

BHAB Assistant
1911 Williams Drive, Suite 200
Oxnard, CA 93036

Please indicate in the subject line the agenda item number (e.g., Item No. 9) on which you are commenting. Your written public comment sent via email or regular mail will be distributed to the BHAB Members and placed into the item's record of the meeting.

Or

2. Video Public Comment using Zoom

You may use the raise hand feature when the Chair invites public comments in the following ways:

If you are running an older version of Zoom, you can raise your hand by clicking on the Participant button at the bottom of the Zoom screen and then click on the raise hand feature in that participant window.

If you are running the most current version of Zoom (5.4.9 and above) you can raise your hand by clicking on the Reactions button and then clicking on raise hand feature. Your hand will appear in the upper left-hand corner of your individual Zoom window as well as the participant window.

Call-In Public Comment using Zoom

If you are joining the meeting by telephone only, you can join the comment queue by pressing *9. When it is your turn to make your comment, press *6 to unmute and then again to mute yourself after speaking.

Note: Your raised hand will appear TO THE HOST in the order it was received.

Comments are taken in the order they are received in the queue/participant window. When it is your turn to make a comment, you will be asked to unmute yourself. **Public comments may be up to 3 minutes during the public comment periods, or before an agenda item, with a cumulative total time not to exceed 5 minutes.** The assigned timekeeper will track each public comment time as well as the total time per speaker. When your time is up, the timekeeper will interrupt to let you know that you have reached the 3-minute maximum as well as when you have reached your total allotted time. At the end of the three minutes and/or allotted time, the next person in the comment queue will be invited to speak.

REMINDER: In order to minimize distractions during public meetings, all personal communication devices should be turned off or put in a non-audible mode.

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Director's Update

BHAB General Meeting 1.24.22

January has the following days of significance to highlight:

January 18th, Dr. Martin Luther King Jr. Day

California Advancing and Innovating Medi-Cal:

CalAIM is a multi-year initiative by DHCS to improve the quality of life and health outcomes of our population by implementing broad delivery system, program and payment reform across the Medi-Cal program. The major components of CalAIM build upon the successful outcomes of various pilots (including but not limited to the Whole Person Care Pilots (WPC), Health Homes Program (HHP), and the Coordinated Care Initiative) from the previous federal waivers and will result in a better quality of life for Medi-Cal members as well as long-term cost savings/avoidance.

CalAIM has three primary goals:

1. Identify and manage member risk and need through whole person care approaches and addressing Social Determinants of Health;
2. Move Medi-Cal to a more consistent and seamless system by reducing complexity and increasing flexibility; and
3. Improve quality outcomes, reduce health disparities, and drive delivery system transformation and innovation through value-based initiatives, modernization of systems, and payment reform.

Regarding County Mental Health Plans, the primary focus areas are:

- Behavioral health payment reform
- Revisions to behavioral health inpatient and outpatient medical necessity criteria for children and adults
- Administrative behavioral health integration statewide
- Regional contracting
- Substance use disorder managed care program renewal and policy improvements

DHCS formally released the CalAIM proposal on October 29, 2019, at the [Stakeholder Advisory Committee \(SAC\)](#) and [Behavioral Health Stakeholder Advisory Committee \(BH-SAC\)](#) meetings. Between November 2019 and February 2020, DHCS conducted extensive stakeholder engagement for both CalAIM and the renewal of the federal authorities under which Medi-Cal operates (i.e. 1115 and 1915b waivers).

DHCS postponed the planned implementation of the CalAIM initiative, originally scheduled for January 1, 2021 so that both DHCS and all of our partners could focus their limited resources on the needs

arising from the public health emergency due to COVID-19.

DHCS released a revised CalAIM proposal on January 8, 2021. [Revised CalAIM Proposal](#).

General Updates:

- Once again since the start of the new year, clinic operations have had to be constrained due to the Omicron surge. Onsite staffing and in-person appointments have been reduced temporarily to limit opportunities for exposure and infection. The use of telehealth is being prioritized for at least two more weeks. The hope is to get back to “business as usual” which had been achieved before the recent surge while attending to precautions such as social distancing and mandatory masking.

Adult Services Division:

- We have seen the effect of Omicron on the availability of admissions/placements at different level of the continuum of care. Facilities such as HPC, CRT, and longer-term placements have experienced outbreaks that have caused a temporary suspension of admissions. Despite this set back happy to report Jackson House has been able to start admitting clients

Youth and Family (Y&F) Services Division:

Initiatives and Progress

- The Y&F Division is developing a Full-Service Partnership (FSP) for unserved or underserved youth that would benefit from an intensive wraparound service program as they seek to achieve their individualized treatment goals. The new FSP seeks to add to current services to further reduce psychiatric hospitalizations and serve youth that fail foster care placements, have juvenile justice involvement and/or have experienced homelessness. Estimated implementation is July 2022.

Collaborations

- VCBH Wellness Center staff in collaboration with VCBH front door programs (STAR, Logrando Bienestar), will be presenting to Santa Paula High School faculty on access and navigation to VCBH services and supports for students experiencing mild to severe mental health challenges. Tentative date is Feb. 7.
- In collaboration with VCOE, VCBH is organizing and participating in Virtual Agency 101 on February 16th from 3-4 pm.

Training & Conferences

- Our clinician and community services coordinator staff that support the Wellness Centers will be providing La Clave workshops for students at their school sites. La Clave workshops focus on early identification of psychosis and other mental health symptoms. Workshops will begin Feb. 28.
- CalWORKs Clinicians will be facilitating a Parenting Session at a SELPA Parent Support Conference in February to address self-care, parenting tips, coping skills and helpful resources in our community. Session will be facilitated in both English and Spanish.

Substance Use Services (SUS) Division:

Rx Drug and Heroin Workgroup –addressing the rise of Fentanyl

- This month the multi-agency “Rx Workgroup” re-convened virtually, with more than 20 agencies attending, including representatives from HCA Ambulatory Care, Medical Examiner’s Office, contracted treatment and prevention providers, Gold Coast Health Plan, the Hospital Council, Sheriff’s Office, Drug Enforcement Administration, Public Health, and various community stakeholders.
- Data was shared confirming that synthetic drugs—especially street Fentanyl and Methamphetamine—have substantially replaced other drugs (like heroin), and placed further strain on local resources, endangering residents. In response, VCBH and other County agencies have redoubled efforts with system changes, expanded OD rescue training, and media (*see below*).
- For Calendar Year 2021, there were 1,171 OD kits distributed to residents at high risk for overdose, and 244 documented opioid overdose reversals. That is, 244 local lives saved in 2021.

“Fentanyl is Forever” campaign launched

- As Board members are well-aware, the Opioid Epidemic continues on, and street Fentanyl is a major contributor to accidental overdose locally and statewide. While other agencies focus on supply-side strategies, VCBH has ramped up community awareness efforts.
- On November 15th, the Substance Use Services Division started the first phase of our Fentanyl community awareness effort, launching the “**Fentanyl is Forever**” campaign. Videos feature messages from the perspective of family members, friends, health professionals, and others. Community response have been very positive, and the **first 30-day period showed outstanding results**, with a combination of broadcast television spots, streaming video, and targeted website ads contributing to a **total of 1,370,005 total impressions**. To learn more and see the powerful PSAs, Board Members and the public can visit www.FentanylVenturaCounty.org.

Fentanyl Prevention Campaign Launch • Nov.-Dec. 2021

IMPRESSIONS	
Broadcast TV	971,000
Streaming Video	94,988
Targeted Website Ads	230,921
Online Video	168,084
TOTAL: 1,370,005	



*Perdimos a dos amigos ese día.
Había fentanilo en esas pastillas.
Nadie sabía.*

EL FENTANYL es para SIEMPRE

APRENDA MÁS



*Even if we get to them quickly,
people are hard to save.
I've been in the ER for 15 years,
but this scares me.*

FENTANYL IS FOREVER

LEARN MORE



the
Public Health
Administrator



the
Family

www.FentanylVenturaCounty.org

Collaboration with Law Enforcement:

- Our SUS team has worked closely with law enforcement to expand **Overdose Prevention efforts and Prevent DUI**. In November, we assisted Oxnard Police Department in launching their “leave-behind naloxone kit” program, where officers make OD reversal kits available to family members who are at a very high risk of opioid overdose.
- VCBH works closely with Ventura Police to help prevent and deter Impaired Driving. This is the time of year you will see more messaging in the community under the **tag line “Get a Ride. Not a DUI.”** To learn more, visit www.NotADUI.org.

MHSA:

Suicide Prevention Efforts and Resource:

- Conversations about Suicide: Help and Hope – The full version of the forum including each speaker is now available on our Wellness Everyday website. This is a great resource for support and education - <https://www.wellnesseveryday.org/>.
- Another new resource available on Wellness Everyday website is a Media Tool Kit and recommendations on how to report suicide - <https://www.wellnesseveryday.org/media-toolkit>.

MHSA Funded Innovations:

- MHSA funded Innovations programs and updates can be found on the Wellness Everyday web site including final evaluation reports for both the Bartenders as Gatekeepers and Push Technology - <https://www.wellnesseveryday.org/>.

Administration:

Overall Administration:

- Coordination of CalAIM (California Advancing and Innovating Medi-Cal) efforts is happening across the department. A VCBH task force has been established and is meeting weekly to implement a project plan and discuss project deadlines and updates. VCBH successfully implemented the CalAIM updated criteria for access to Specialty Mental Health Services that became effective on 1/1/22. Provider trainings and collaborations with contracted county partners helped facilitate the smooth transition, which included updated policies, referral forms, and EHR applications.

Safety and Facilities

- Ongoing monitoring and compliance with DCHS IN-043 that requires all healthcare staff to be vaccinated or have an approved exemption and be tested weekly continues. Employees not in compliance with either of those requirements were placed on leave effective 10-1-2021. They must come into compliance the requirements or may face further action related to continued employment. A new requirement was issued on 12/22/21 requiring Booster vaccines for all staff. If a staff member has not had their Booster, they are required to test weekly.

Contracts Team

- The Contracts Team has postponed conducting in-person desk audits and site reviews of contractors to review their adherence to the provisions in their contracts until the current COVID wave subsides. The Contracts Team is also preparing for the start of contract season which begins with the development of the FY 2022-23 Contracts Budget in February. Spring Provider meetings will be scheduled shortly to complete contract monitoring for the second portion of the fiscal year. These meetings will be held throughout March and April of this fiscal year.

Quality Assurance

- The Quality Assurance (QA) team is preparing an Implementation Plan to comply with the CalAIM Behavioral Health Quality Improvement Program (BHQIP), which will delineate specific action items to be completed to ensure implementation of required deliverables in the areas of Payment Reform, Policy Changes, and Data Exchange. QA is supporting the upcoming onboarding of four contracted Short Term Residential Treatment Programs (STRTPs) by facilitating Medi-Cal Site Certification, in collaboration with the Division Y&F Operations, Contracts, Fiscal and EHR teams. The QA Care Coordination team continues to facilitate all care coordination between VCBH and outside delivery systems and works to ensure beneficiary access to appropriate services within or outside the Network.

Quality Improvement:

- The External Quality Reviews (EQRO) for Mental Health is scheduled for the end of February 2022. The draft report from the DMC-ODS External Quality Review (EQRO) held the end of November/early December is pending.
- A Research Psychologist began working with the Quality Improvement team and will support department-wide research and evaluation projects.
- QI continues to implement 4 performance improvement projects (PIPs) that address areas for improvement such as no-show rates, initial and ongoing client engagement in services, and post-hospitalization follow-up, and recently received positive feedback on all PIPs from the state reviewers.
- QI is building out ongoing tracking and reporting of key performance metrics and are working with VC-Information Technology Services to design a public-facing data dashboard.
- QI continues to recruit consumer/family/peer and community stakeholders for the Quality Management Action Committee (QMAC). Names can be sent to vcbh.quality@ventura.org.

Electronic Health Record

- The initial round of CalAIM required Electronic Health Record (EHR) modifications have been implemented successfully. This group of changes involve the MH assessment forms and new definitions which qualify clients to receive treatment.
- Mandated changes required to capture Telehealth and Phone service delivery are effective as of January 1, 2022. These modifications were made per DHCS requirements to allow additional methods for tracking services delivered through these mediums.
- The team is working on the Quality Improvement Plan Implementation tool that is due the DHCS on 2/7/21. This includes specific deliverables along with due dates which will allow partial payment to counties of the costs associated with implementing these changes. Among the changes include in the QIP include Payment Reform, Standardized Client Screening for Services, Standardized Care Transition, and Data Exchange capabilities. Initial project estimates are due to DHCS in the coming weeks.

VENTURA COUNTY BEHAVIORAL HEALTH

Clients Served

Open episodes in December 2021 with billing activity in prior 12 months (methodology updated October 2021)

As of 1/5/2022

All VCBH SUS - County & Contractor MH Adult - County & Contractor MH Y&F - County & Contractor VCBH STAR Adult Crisis	VCBH Treatment Programs County & Contractor Includes outpatient and residential
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**VCBH enrolled clients only

	VCBH Program Group							
	All VCBH	SUS	MH Adult	MH Youth and Family	VCBH STAR	VCBH Crisis	CSU**	IPU**
Total Clients With Open Episode	11,193	1,167	5,540	3,853	858	610	17	58

**VCBH enrolled clients only

Total Clients With Open Episode Age Group *	VCBH Program Group							
	All VCBH	SUS	MH Adult	MH Youth and Family	VCBH STAR	VCBH Crisis	CSU**	IPU**
0-15	2,777	17		2,596	252	46		
16-25	2,167	200	736	1,134	206	121	2	10
26-59	5,003	894	3,715	123	359	343	14	44
60+	1,246	56	1,089		41	100	1	4
Grand Total	11,193	1,167	5,540	3,853	858	610	17	58

* Client age as of end of reporting period

**VCBH enrolled clients only

Total Clients With Open Episode Preferred Language	VCBH Program Group							
	All VCBH	SUS	MH Adult	MH Youth and Family	VCBH STAR	VCBH Crisis	CSU**	IPU**
English	9,788	1,099	4,856	3,304	711	562	17	56
Spanish	1,163	55	552	480	121	30		2
Mixteco	8	1	2	6	1			
Other	87	4	62	13	5	7		
Unknown / Not Reported	147	8	68	50	20	11		
Grand Total	11,193	1,167	5,540	3,853	858	610	17	58

**VCBH enrolled clients only

Total Clients With Open Episode	VCBH Program Group							
	All VCBH	SUS	MH Adult	MH Youth and Family	VCBH STAR	VCBH Crisis	CSU**	IPU**
Ethnicity								
Latinx	5,724	621	2,473	2,434	474	202	8	23
Non-Latinx	4,133	434	2,641	861	237	243	8	32
Unknown / Not Reported	1,336	112	426	558	147	165	1	3
Grand Total	11,193	1,167	5,540	3,853	858	610	17	58

**VCBH enrolled clients only

Total Clients Served At Each Location * Program Service Location	VCBH Program Group							
	All VCBH	SUS	MH Adult	MH Youth and Family	VCBH STAR	VCBH Crisis	CSU**	IPU**
CAMARILLO	485		94	391				
FILLMORE	150	47		104				
MOORPARK	10			10				
OXNARD	6,054	855	2,506	1,706	858	610		
SANTA PAULA	738		486	252				
SIMI VALLEY	1,216	63	718	454				
THOUSAND OAKS	1,192	45	835	320				
VENTURA	2,115	65	1,100	965			17	58
Outside Ventura County (Contractor)	271	249	22					
Grand Total	12,231	1,324	5,761	4,202	858	610	17	58

*** Clients may be counted under multiple locations

VENTURA COUNTY
BEHAVIORAL HEALTH ADVISORY BOARD
BYLAWS

ARTICLE I

NAME

The name of this board shall be the Behavioral Health Advisory Board, herein referred to as BHAB.

ARTICLE II

PURPOSE AND AUTHORITY

The BHAB exists under the authority of the California Legislature by its enactment of Section 5604 of the Welfare and Institutions Code. The BHAB, as provided in Welfare and Institutions Code Section 5604.2, shall do, but not be limited to, all of the following:

- A. Review and evaluate the community's public behavioral health needs, services, facilities, and special problems in any facility within Ventura County where mental health evaluations or services are being provided, including, but not limited to, schools, emergency departments, and psychiatric facilities.
- B. Review any Ventura County agreements entered into pursuant to Section 5650. The BHAB may make recommendations to the Ventura County Board of Supervisors (herein referred to as Board of Supervisors) regarding concerns identified within these agreements.
- C. Advise the Board of Supervisors and the Ventura County Behavioral Health Department Director (herein referred to as Director) as to any aspect of the local mental health program. The BHAB may request assistance from the local patients' rights advocates when reviewing and advising on mental health evaluations or services provided in public facilities with limited access.
- D. Review and approve the procedures used to ensure citizen and professional involvement at all stages of the planning process. Involvement shall include individuals with lived experience of

mental illness and their families, community members, advocacy organizations, and mental health professionals. It shall also include other professionals that interact with individuals living with mental illnesses on a daily basis, such as education, emergency services, employment, health care, housing, law enforcement, local business owners, social services, seniors, transportation, and veterans.

- E. Submit an annual report to the Board of Supervisors on the needs and performance of Ventura County's mental health system.
- F. Review and make recommendations on applicants for the appointment of the Behavioral Health Department Director. The BHAB shall be included in the selection process prior to the vote of the Board of Supervisors.
- G. Review and comment on Ventura County's performance outcome data and communicate its findings to the California Behavioral Health Planning Council.
- H. This article does not limit the ability of the Board of Supervisors to transfer additional duties or authority to the BHAB.
- I. As part of its duties pursuant to this Article, the BHAB shall assess the impact of the realignment of services from the state to Ventura County, on services delivered to clients and on the local community.
- J. Special MHSA Requirements. The BHAB shall conduct a public hearing on the draft three-year program and expenditure plan and annual updates at the close of the 30-day comment period required by Welfare and Institutions Code section 5848. The BHAB shall review the adopted plan or update and make recommendations to VCBH for revisions. VCBH shall provide an annual report of written explanations to the Board of Supervisors and the State Department of Health Care Services for any substantive recommendations made by the BHAB that are not included in the final plan or update.

For purposes of this section "Substantive recommendations made by the BHAB" means any recommendation that is brought before the board and approved by a majority vote of the membership present at a public hearing of the BHAB that has established its quorum.

ARTICLE III

MEMBERSHIP

- A. The current membership list with terms of office shall be a matter of public record. There shall be no less than fifteen (15) and no more than twenty-three (23) members of the BHAB.
- B. Each Supervisor may appoint three (3) mental health representatives and one (1) substance use disorder representative to the BHAB. Supervisors are encouraged to appoint individuals who have some experience and knowledge of the behavioral health system. The BHAB membership should reflect the ethnic diversity of the client population of Ventura County.
- C. One member shall be recommended to the Board of Supervisors by the Ventura County Sheriff to represent law enforcement. The Board of Supervisors will make the final appointment.
- D. One psychiatrist practicing in Ventura County shall be recommended to the Board of Supervisors by the Southern California Psychiatric Society. The Board of Supervisors may either approve or disapprove appointment of this optional position on the BHAB.
- E. The BHAB shall consist of the following:
Fifty percent (50%) or more should be consumers or the parents, spouses, siblings, or adult children of consumers who are receiving or have received mental health services. At least 20 percent of the membership (five members) shall be consumers and at least 20 percent of the membership (five members) shall be family members of consumers of mental health services.
- F. In addition to consumers and family members, the Board of Supervisors is encouraged to appoint individuals who have experience with and knowledge of the mental health system. This would include members of the community that engage with individuals living with mental illness in the course of daily operations, such as representatives of county offices of education, large and small businesses, hospitals, hospital districts, physicians practicing in emergency departments, city police chiefs, county sheriffs, and community and nonprofit service providers.
- G. The BHAB membership should reflect the diversity of the client population in the county to the extent possible.
- H. The term of each member shall be for three years, with appointments staggered over a three-year period.

- I. Any vacancy will be filled by a new member appointed by the Supervisor who appointed the vacating member. The appointing Supervisor can seek input from the Board of Supervisors in making the new appointment. The new member will hold a position on the BHAB for the remainder of the vacating member's unexpired term.
- J. Appointed members must commit to regular attendance at meetings and participation on one committee.
- K. One member of the BHAB shall be a member of the Board of Supervisors.
- L. All appointed members to the BHAB will have the authority to vote on all issues presented to the BHAB.
- M. After three unexcused absences of any member during a fiscal year, the BHAB Executive Committee will review the reasons for the absences and will, if warranted, notify the member in writing to inform it, in writing, within thirty (30) days, whether the member wishes to remain on the BHAB. Failure to respond timely to the notice or the continuation of absences may result in a recommendation by the Executive Committee to the BHAB that the Board of Supervisors be asked to remove and replace that member.
- N. Each member is required to join at least one of the following five standing committees: Youth and Family, Transitional Aged Youth, Adult Services, Prevention or Disparities Reduction.
- O. Pursuant to AB 1234, each member is required to complete ethics training and obtain a certificate of compliance. The ethics training must be completed within one year of being appointed and every two years thereafter. The certificate must be submitted to the VCBH administrative assistant and will be held by the Clerk of the Board of Supervisors.
- P. It is the responsibility of the VCBH administrative assistant to notify the Clerk of the Board of Supervisors in writing upon any unscheduled vacancy within ten days of the vacancy.

ARTICLE IV

MEETINGS

- A. Guidelines for Board Meetings
 - 1) All BHAB meetings and committee and workgroup meetings, with the exception of special meetings in the community, shall be conducted during regular business hours.
 - 2) The Brown Act: All meetings of the BHAB shall be subject to the provisions of Chapter 9

(commencing with Section 54950) of Part 1 of Division 2 of Title 5 of the Government Code relating to meetings of local agencies.

- 3) Regular Meetings: The regular meetings shall be held monthly. The date, time and location of each meeting shall be announced at the immediately preceding meeting. A regular meeting may, for cause, be rescheduled by the Chairperson with a 72-hour advance notice.
 - 4) Special Meetings: Special meetings may be called, consistent with the Brown Act, by the Chairperson or by a quorum of the BHAB. Notice of such special meeting shall conform to Government Code Section 54956.
 - 5) Cancellation: Any meeting which a quorum of the members cannot attend or at which there is no agenda item requiring action of the BHAB may be cancelled by the Chairperson with a 72-hour advance notice.
 - 6) Quorum: A quorum shall be defined as one person more than half of the appointed members. The definition of appointed members excludes all vacant positions. A quorum shall be required for any action of the BHAB.
- B. Procedures
- 1) The agendas for BHAB meetings shall be established by the Chairperson and discussed and reviewed at the monthly Executive Committee meetings.
 - 2) The agenda shall be posted in a manner consistent with Government Code Section 54954.2.
 - 3) Any member wishing to recommend an item for the BHAB agenda shall contact the Chairperson or Vice-Chairpersons at or prior to the Executive Committee meeting.
- C. Meeting and Agenda Format
- 1) BHAB regular meetings shall be conducted by the Chairperson.
 - a) The Chairperson shall ask for introductions of the members and confirm the existence of a quorum.
 - b) Approval of minutes of the previous meeting may be included.
 - c) Reports from officers and committees may be included.
 - d) Items identified as action items on the agenda by the Chairperson will be addressed and a vote will be taken.
 - 2) The agenda for regular meetings shall be distributed, with requisite informational material, to each member not later than 72 hours preceding the meeting at which the agenda is to be discussed.

- 3) The agenda shall be posted in the main lobby of VCBH at 1911 Williams Drive, Oxnard.

ARTICLE V

OFFICERS, MEMBER-AT-LARGE AND MEMBER EMERITUS

- A. Officers, Member-At-Large and Member Emeritus
 - 1) The officers of the BHAB shall be Chairperson, 1st Vice-Chairperson, 2nd Vice-Chairperson and Secretary.
 - 2) The officer and the Member Emeritus positions shall be voted upon at the June BHAB meeting. Elected officers and the Member Emeritus will serve for a term of one year or until their successors have been duly elected.
 - 3) No individual shall serve more than two consecutive years in any of the officer positions unless there are no other members elected to fill the position.
 - 4) One member shall serve as the Member-At-Large. The Member-At-Large will learn the process of BHAB leadership while attending Executive Committee and regular meetings. The Member-At-Large will be appointed by the Chairperson with the confirmation of the BHAB. The Member-At-Large must be a member of the BHAB. The Member-At-Large will serve on a six-month rotating basis.
 - 5) The immediate past Chairperson of the BHAB may continue to serve on the Executive Committee as a Member Emeritus, if elected. The position of Member Emeritus is intended to ensure continuity on the Executive Committee by assisting during the transition of the newly-elected Chairperson and provide for the sharing of experience and knowledge with the Executive Committee.
 - a) The Member Emeritus must be a current member in good standing of the BHAB. If the immediate past Chairperson's three-year term on the BHAB expires upon completion of his/her year as Chairperson, s/he will need to be reappointed to a new three-year term as a member of the BHAB before s/he can assume the role of Member Emeritus.
- B. Qualifications of Officers
 - 1) Must possess good leadership qualities.

- 2) Must be able to devote sufficient time to carry on the duties of their elected positions.
 - 3) The Chair must be elected by a majority of the votes of the members of the BHAB.
- C. Election of Officers
- 1) During the April meeting, the Chairperson shall appoint, and the BHAB shall confirm, a Nominating Committee of not less than three (3) BHAB members.
 - 2) At the May meeting, the Nominating Committee shall present a slate of candidates. Nominations from the floor also may be accepted.
 - 3) During the June meeting, the election shall be conducted by the Chair of the Nominating Committee in accordance with the Brown Act.
 - 4) The Officers elected at the June meeting will take their respective offices on July 1st.
 - 5) Notwithstanding the normal election process detailed in paragraphs C.1. through C.4. above, when circumstances warrant it, an election may be held at any time during the year. Circumstances which would warrant a special election include, but are not limited to: one or more of the officers wishing to resign as an officer; or the membership of one or more of the officers has terminated.
- D. Duties
- 1) Duties of the Chairperson shall include:
 - a) Administer operation of the BHAB and preside at all meetings.
 - b) Call special meetings as necessary.
 - c) Appoint committee and workgroup chairs from the ranks of the BHAD membership.
 - d) Establish meeting agendas.
 - e) Maintain consultation with the Director.
 - f) Produce and forward reports, including an annual report, to the County's Board of Supervisors.
 - g) Represent the BHAB and perform other duties ordinarily performed by a Chairperson.
 - 2) Duties of the 1st Vice-Chairperson shall include:
 - a) Exercise all the responsibilities of the Chairperson in the absence of the Chairperson.
 - b) Meet all responsibilities delegated by the Chairperson and mutually agreed upon.
 - 3) Duties of the 2nd Vice-Chairperson shall include:
 - a) Fulfill the responsibilities of the Chairperson or the 1st Vice-Chairperson due to absence as needed.

- 4) Duties of the Secretary shall include:
 - a) Perform the usual duties pertaining to secretaries.
 - b) Maintain a record of attendance of members, including unexcused absences and BHAB resignations, and promptly report this information to the Executive Committee.
 - c) Monitor and maintain a list of the members' dates of appointment and terms of expiration.
 - d) At the direction of the Executive Committee, draft letters to BHAB members who are in non-compliance of the attendance standard.

ARTICLE VI

COMMITTEES

All committees shall comply with the requirements of the Brown Act. Voting must be in public and notice of a committee meeting shall be given in accordance with the Brown Act. Members of the committee shall have one vote. A quorum shall be as defined under Article IV(A)(6).

A. Executive Committee

- 1) The Executive Committee shall be comprised of the Chairperson, 1st and 2nd Vice-Chairpersons, Secretary, Member-At-Large and Member Emeritus.
 - a) Each member is entitled to one vote.
 - b) Quorum for the Executive Committee shall be 50% of the members currently in office.
- 2) Duties of the Executive Committee
 - a) Carry out any responsibilities delegated by the BHAB.
 - b) Act in emergencies in any way it deems necessary when there is not time for the entire BHAB to act. Any such action taken will be consistent with the Brown Act.
 - c) Comply with the requirements of the Brown Act.
 - d) Assist the Chairperson in creating the BHAB regular meeting agenda.

B. Nominating Committee

- 1) The Chairperson shall appoint and the BHAB shall confirm a Nominating Committee of not less than three (3) BHAB members to serve on the Nominating Committee.
- 2) The Nominating Committee shall select a slate of officers for the coming year, secure the verbal consent of those selected, present the slate of officers, and conduct the elections.

- 3) Comply with the requirements of the Brown Act.

For the following committees, the Chairperson shall appoint a BHAB member as chair of the committee. It is at the discretion of the committee chair to determine who may be a member of the committee, who may vote, and how many individuals shall be on the committee.

C. Youth and Family Committee

Chaired by an appointed BHAB member, and reporting directly to the BHAB, this committee shall advocate for services and supports for youth with mental health and substance use disorders, including housing, and shall:

- 1) Advise and make recommendations to the BHAB regarding youth and family VCBH programs.
- 2) Comply with the requirements of the Brown Act.

D. Transitional Aged Youth (TAY) Committee

Chaired by an appointed BHAB member, and reporting directly to the BHAB, this committee shall advocate for the mental health, wellness and recovery of youth ages 16 through 25 and for other services and supports, including housing, and shall:

- 1) Advise and make recommendations to the BHAB regarding efforts to empower TAY to become healthy and productive adults.
- 2) Comply with the requirements of the Brown Act.

E. Adult Services Committee

Chaired by an appointed BHAB member, and reporting directly to the BHAB, this committee shall advocate for a full continuum of care that supports the wellness and recovery of individuals with mental health and substance use issues and for other supports, including housing, and shall:

- 1) Advise and make recommendations to the BHAB regarding services and supports for this population.
- 2) Comply with the requirements of the Brown Act.

F. Prevention Committee

Chaired by an appointed BHAB member, and reporting directly to the BHAB, this committee shall advocate for greater community awareness of behavioral health risks for individuals with mental illness, a dual diagnosis or substance use disorder and shall:

- 1) Advise and make recommendations to the BHAB regarding its efforts to prevent the onset

and exacerbation of behavioral health disorders.

2) Comply with the requirements of the Brown Act.

G. Disparities Reduction Committee

Chaired by an appointed BHAB member, and reporting directly to the BHAB, this committee shall advocate for improved access to appropriate mental health services, substance use disorder services and co-occurring disorder services by working towards and advocating for eliminating disparities in service delivery to and access by underrepresented and underserved communities, including but not limited to those based on race, ethnicity, language, age, gender, disability, gender identity and sexual identity.

ARTICLE VII

WORKGROUPS

The Chairperson appoints the chair of each workgroup. It is at the discretion of the chair of each workgroup to determine (1) who may become a member of the workgroup, (2) who on the workgroup may vote, and (3) how many members shall be on the workgroup. Each member on the workgroup shall have one vote. Workgroups are not required to comply with the Brown Act. Workgroups are not required to vote and can make recommendations to the BHAB without proceeding by way of a vote. However, to the extent that votes are taken, each member of the workgroup shall have one vote and votes are not required to be made in public. All workgroups are time-limited until the agreed-upon task is complete.

ARTICLE VIII

CONFLICT OF INTEREST

No member of the BHAB, or his or her spouse, shall be an employee or part-time employee of VCBH or the State Department of Health Care Services, or an employee or paid member of the governing body of any firm or agency contracting with VCBH unless the member is a consumer of mental health services who, or whose spouse, does not have any interest, influence, or authority over a financial or

contractual matter concerning his or her employer. Such consumer member must abstain from voting on any financial or contractual issue concerning his or her employer.

ARTICLE IX

PARLIAMENTARY AUTHORITY

Except where state law or regulations, County ordinances, County Counsel opinions or these bylaws apply, the current edition of Rosenberg's Rules of Order shall govern the procedures of the BHAB.

ARTICLE X

AMENDMENTS

Any proposed amendment to these bylaws must be approved at a regular meeting by a 2/3 vote of the membership existing at the time, provided that notice of the proposed amendment was given in advance, with the proposal to amend the bylaws to occur at a regular meeting. This would be accomplished by a two-thirds vote of those present at the meeting, provided that such proposed amendment has been properly noticed per the Brown Act. Should the proposed amendment be approved by BHAB members, it must be approved by the Board of Supervisors before it is in effect.

Approval by the Ventura County Board of Supervisors on January 11, 2022

Carmen Ramirez

Board of Supervisors, Chair

ATTEST: MICHAEL POWERS
Clerk of the Board of Supervisors
County of Ventura, State of California

By: Jon Key
Deputy Clerk of the Board



Ventura County Behavioral Health
Board Letter Summary of Contracts for December 2021

Board Date	Contractor	Amount	Term	Description
12/14/2021	California Department of Health Care Services	\$633,390	September 15, 2021 through June 30, 2025	California Department of Health Care Services (DHCS) Crisis Care Mobile Units (CCMU) Program Grant. VCBH submitted an application to DHCS in the amount of \$1,000,000 to expand its existing Crisis Team to establish the Transitional Age Youth Rapid Response Team (TAY-RRT). VCBH submitted a revised budget to DHCS in the amount of \$633,390 in accordance with DHCS updated requirements. The TAY-RRT is the County's second mobile crisis response team that specializes in responding to crises involving TAY. The TAY-RRT provides TAY (ages 16 - 25) with age-appropriate crisis intervention services for mental health emergencies. The team operates Monday - Friday (8am to 6pm) and serves youth and young adults throughout Ventura County. The experienced and trained team – a Behavioral Health Clinician, Community Service Coordinator, and Peer Specialist – assesses and responds accordingly, as clinically indicated, to TAY experiencing mental health crises. To carry out the grant funded activities, VCBH must hire the following three (3) positions: (1) Behavioral Health Clinician, (2) Community Service Coordinator, and (3) Peer Specialist. The grant agreement for these proposed services is pending from DHCS, however, once it is received it will be reviewed and approved by County Counsel before VCBH Director execution. Source of funding for these services is the Behavioral Health Continuum Infrastructure Program (BHCIP), Coronavirus Response and Relief Appropriations Act (CRRSAA), Short-Doyle Medi-Cal (SD/MC) Federal Financial Participation (FFP), and Proposition 63 Mental Health Services Act (MHSA) funds.
12/14/2021	Kids to Kids	\$256,272	January 1, 2022 through June 30, 2022	Kids to Kids Short Term Residential Treatment Program (STRTP) Agreement. The Continuum of Care Reform (CCR), signed into law in January 2017 as AB403, sought to transform foster care in California by strengthening and elevating family-based care. As part of CCR, group homes are replaced with Short Term Residential Therapeutic Programs (STRTP) intended to serve children and youth whose challenging behaviors and significant emotional and developmental needs created barriers to placement in family-based care. The STRTP license category requires providers to obtain national accreditation, meet DHCS mental health standards, procure a contract with a County Mental Health Plan (MHP), and implement trauma-informed care. Kids to Kids provides an integrated program of specialized, intensive care and supervision, transition support services, specialty mental health services, trauma informed care, culturally relevant mental health treatment, and short-term, 24-hour care and supervision to children in two 6-bed facilities for a total of 12 beds. This agreement is for a six-month term to cover the outpatient specialty mental health services. It is funded with SD/MC FFP and Realignment funding.
12/14/2021	Netsmart Technologies, Inc.	\$10,226,851	July 1, 2021 through June 30, 2026	Netsmart Technologies, Inc. (Netsmart) 1st Amendment. Netsmart provides VCBH's Electronic Health Record (EHR) system, also known as Avatar. VCBH has contracted with Netsmart for several years to help meet the federal and state requirements of an EHR system. The EHR is the foundation of an integrated systems infrastructure that provides a secure, real-time, point-of-care, client-centered information resource for service providers. The initial implementation was focused on Practice Management, including client demographics, admissions, diagnosis, services, and discharge. The current five-year Agreement with Netsmart covers the expansion of services in the areas of secure HIPAA compliant interoperability among other healthcare and business partners, direct client services using client portal web access, and ongoing planned staff expansion. The initial release contained enough licenses to be used by 50 VCBH staff, primarily front office staff and clinic administrators. Today, there are over 900 Avatar users. Clinicians, doctors, and quality analysts now also use Avatar, performing additional operations such as clinical data collection, medication management, document scanning and display, outcomes management, research analysis, and lab order administration. The First Amendment to the FY 2021-26 Agreement with Netsmart revises the Agreement to provide for: (1) additional Avatar RADplus licenses and maintenance (100 users), (2) diagnosis content on demand, (3) OrderConnect prescriber licenses (10), and (4) Avatar hosting with disaster recovery and perceptible hosting disaster recovery. These services are needed to support the expansion of the EHR user community as more of our contracted business partners choose to adopt our Netsmart Avatar system as their own clinical EHR. The revisions will increase the maximum contract amount from a total of \$9,583,535 to \$10,226,851 (an increase of \$643,316), and services related to this increase is effective January 1, 2022. The amount of the Agreement is to be allocated as follows: Year 1 - \$2,263,498; Year 2 - \$1,867,583; Year 3 - \$1,970,836; Year 4 - \$2,010,841; Year 5 - \$2,114,093. This Agreement is funded with SD/MC FFP, 2011 Realignment (Trust N520-719C), Proposition 63 MHSA, and Drug Medi-Cal (DMC) FFP funding.

Board Date	Contractor	Amount	Term	Description
12/14/2021	California Department of Housing and Community Development	N/A	N/A	<p>California Department of Housing and Community Development (HCD) No Place Like Home (NPLH) Round 4 Competitive Funding Application. All counties statewide may compete for post construction loans to develop permanent supportive housing for very low-income homeless persons who also have a serious mental illness. As eligible applicants, all counties may apply alone or choose to apply for NPLH funds with co-applicant development sponsors for NPLH funding. Where counties apply for NPLH funds with co-applicant development sponsors, funds will be paid directly to the development sponsor and may be used to acquire, design, construct, rehabilitate, or preserve a minimum of five (5) permanent supportive housing units and a maximum of 49% of the total units within a proposed project. The majority of units to be built in NPLH projects are not restricted to homeless and mentally ill residents and are considered simply affordable homes. Furthermore, the development sponsors are responsible for overseeing all regulatory and property management operations at the NPLH projects and to maintain the properties for 55 years. Pursuant to the NPLH legislation, VCBH will provide mental health supportive services to NPLH client tenants for up to 20 years. VCBH submitted Round 1 NPLH program applications to Housing and Community Development (HCD) in January 2019, and Round 2 NPLH program applications in January 2020, and Round 3 NPLH program applications in January 2021. VCBH is now submitting Round 4 NPLH program applications for three projects for a total of 180 units, of which 69 are NPLH units. These applicatons are due on January 19, 2022. This is funded with NPLH funding.</p>