



CALHHS BEHAVIORAL HEALTH AND TASK FORCE MEETING

Discussion Highlights

DRAFT

TUESDAY, MARCH 8, 2022, 10AM – 3PM

DISCUSSION HIGHLIGHTS PURPOSE

This document summarizes key highlights of Behavioral Health Task Force (BHTF) member discussions. A full meeting summary includes summarization of presentations and a more detailed summary of discussions and input.

THE BHTF ASSESSMENT PROCESS AND CHARTER

Orit Kalman, PhD. Senior Facilitator, California State University, Sacramento, Consensus and Collaboration Program, gave a presentation on the BHTF assessment process and charter development. BHTF members were invited to provide input on two key components of the charter: (a) commitments for engagement and (b) BHTF evaluation process.

COMMITMENTS FOR ENGAGEMENT

- **Relationships:** Support the relationships between agency staff and stakeholder members, as well as among stakeholder members.
- **Perspectives represented:** Provide opportunities for deeper engagement with public stakeholders – non-BHTF members who participate in BHTF meetings. Public stakeholders can bring valuable perspectives of the most impacted communities, including consumer and youth voices, and additional subject matter expertise.
- **Grounding BHTF work in impacts to those served:** Consider how the work of the BHTF centers impacts on consumers – those relying on these systems and services to improve their lives. The impact on those we serve should be a constant, fundamental focus, moving away from set stakeholder positions. Promote a person-centered and whole center approach and consider which people are or are not being included.
- **Accessible language:** Avoid abbreviations and make information accessible to promote dialogue.

EVALUATION AND ACCOUNTABILITY

Advancing BHTF Guiding Principles and Adhering to Commitments to Engagement: Are those impacted being served? Is equity being addressed/attained? Does the BHTF model a person-centered approach, uplifting communities that are disproportionately impacted or often not heard, as ideas are developed and implemented?

Working to achieve intended goals: Develop a “SMARTIE” approach to create action steps to achieve the four BHTF goals (strategic, measurable, ambitious, realistic, time-bound, inclusive, and equitable). Are BHTF goals being realized in implementation, and is the BHTF helping to modify direction when they are not?



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Identification of Impacts Realized from BHTF Input and Work: What tangible actions are being taken as a direct result of the input gained from the standing Youth Voices agenda item? Are the conveners – the Governor and CalHHS Secretary – gaining input from the BHTF that is helpful and impacting their decision-making? How is our work breaking down silos in the current system?

CHILDREN AND YOUTH BEHAVIORAL HEALTH INITIATIVE

Melissa Stafford Jones, Director of the CYBHI, gave three brief presentations on the CYBHI: a general CYBHI update; the children, youth, and family engagement approach; and defining CYBHI outcomes. BHTF members were asked to weigh in on the following questions:

WHAT ADDITIONAL QUESTIONS DO YOU HAVE ABOUT THE CYBHI'S PROGRESS?

- How will the CYBHI approach equity?
- How do we distinguish between trying to prevent children and youth from experiencing mental illness (which is not always possible) and trying to prevent avoidable bad outcomes connected to people's experience with mental illness?
- What is CYBHI's vision for an ideal future state that is fundamentally different from how current systems functions?
- How will data set the foundation for both the workstream-specific and Initiative-wide work?
- How will the CYBHI processes expand cultural proficiency, including disability culture?

CYBHI CHILDREN, YOUTH, AND FAMILY ENGAGEMENT - IN YOUR WORK RELATED TO ENGAGEMENT, WHAT HAVE YOU FOUND TO BE SUCCESSFUL AND/OR CHALLENGING?

- Include consideration for disability culture, challenging the idea that people are sick or need to be fixed.
- Ensure that identified interventions are community-defined and culturally responsive, as well as building flexibility in systems for the development, design, and implementation of such intervention efforts.
- Empowering parents is central to equity: Engage parents and youth when and where they are available. Empower parents and youth to lead discussions.
- Engage youth who are either at-risk (at-promise) or are involved with the justice system and consider their unique needs for additional, focused approaches and strategies that are not common knowledge.



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DEFINING CYBHI OUTCOMES

ASPIRATION STATEMENT: PICK ONE WORD IN THE CYBHI ASPIRATION STATEMENT AND SHARE HOW IT IS MEANINGFUL TO YOU

Reimagine behavioral health and emotional wellbeing for ALL children, youth, and families in California by delivering equitable, appropriate, timely, and accessible mental health and substance use services and supports from prevention to treatment to recovery in an innovative, up-stream focused, ecosystem

- **Accessible** – Promote a no wrong door approach, to ensure that youth can receive services regardless of insurance.
- **Appropriate** – We talk so much about availability and expanded coverage, but if people don't feel the services are appropriate, then they won't access them.
- **Ecosystem** – The notion of interconnected and coordinated systems, acknowledging that systems evolve.
- **Equity/equitable** – We need specifics on how the initiative will be addressing equity.
- **Innovative** – New ways of doing things with increased efficiency.
- **Prevention**
- **Reimagine** – 'Reimagine' is an invitation to do better.
- **SUD** - Uplift that this initiative is focused on mental health and substance use. We see more challenges and barriers to break down with youth who have SUD needs.
- **Timely** – We want to make sure that the end user's experience is seamless, and that services and referrals are accessible at critical moments.
- **Wellness**

Additions to the aspiration statement: Person centered; support parents in order to support children

CYBHI DRAFT OUTCOMES: IS THIS SET OF OUTCOMES COMPLETE TO FULLY REALIZE THE ASPIRATION? DO THESE OUTCOMES APPROPRIATELY REFLECT YOUR HOPES? ARE THERE ADDITIONAL OUTCOMES THAT SHOULD BE INCLUDED?



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Draft CYBHI Outcomes

1. **Eliminate stigma** related to behavioral health conditions and normalize help-seeking and wellness
2. Embed **preventive interventions and supports** throughout the ecosystem
3. **Improve accessibility** of services and supports across the continuum of care
4. **Equitably improve behavioral health outcomes** across the State
5. **Improve overall health, social outcomes, and emotional wellbeing** for children and youth
6. Ensure that positive outcomes are **sustainable**

An “ecosystem” of support for children and youth behavioral health: Create a culturally responsive behavioral health ecosystem of care that holds cross-system collaboration as an imperative. This must be a communal effort as we are standing on the brink of being able to do impactful things. Collaboration and learning are important outcomes for this process, especially as the CYBHI promotes the concept of ecosystems, connections, and breaking down of silos.

CYBHI funding: While acknowledging the significant investment and excitement about the initiative, it is important to look at how to best leverage resources, including avoiding duplicative spending. Sustainability of long-term funding, shared power, and shared agency are all needed to get the job done.

Eliminate stigma: Stigma is a complex issue and deserves greater attention. What does success at addressing stigma look like?

Measuring outcomes across sectors: Consider consumer satisfaction and hearing directly from those trying to access care. It is imperative to make sure that whatever system is in place is truly representative of the populations that we are serving. Communally define and establish metrics to measure outcomes – developed with, by, and for communities.

Equitable outcomes: A shared vision of equity is needed, with an approach to defining and measuring the success in this realm.

Additional suggested outcomes:

- One of the most important outcomes for young people who may end up living with a long-term mental health diagnosis is their own comfort level describing their condition and asking for accommodations at work and in other settings.
- Add an outcome about autonomy, self-determination, empowerment, and self-efficacy to highlight the importance of trusting that individuals to know what's best for them and empowering them.