

CALHHS BEHAVIORAL HEALTH AND TASK FORCE MEETING
MEETING SUMMARY

WEDNESDAY, OCTOBER 11, 2023, 10AM – 1PM

MEETING SUMMARY PURPOSE

This document provides a summary of the Behavioral Health Task Force (BHTF) quarterly meeting held on October 11, 2023. This summary is an accompaniment to the presentation slide deck and meeting recordings, both available for review on the [BHTF webpage](#) along with other meeting materials.

Appendix A of this summary lists BHTF member meeting attendees.

WELCOME & INTRODUCTIONS

Deputy Secretary of Behavioral Health Stephanie Welch, California Health and Human Services (CalHHS) opened the meeting. Deputy Secretary Welch expressed gratitude for the participants and highlighted the excitement about increased diversity and representation, both from new and returning members. She emphasized the importance of having dedicated individuals who can represent statewide interests and bring practical, on-the-ground experience to the table, contributing to transformative changes in behavioral health.

Deputy Secretary Welch shared that the Secretary's motivation for this Behavioral Health Task Force was to create a space where implementation partners, stakeholders, and advocates could provide feedback and enrich the work. The aim was to make policy an iterative process, responsive to real-world feedback and needs.

The Task Force was deemed essential for exchanging information and knowledge, as well as sharing personal and professional experiences that enrich the work. It was noted that several departments and offices at CalHHS were dedicated to their own behavioral health initiatives, making their involvement highly valuable.

Deputy Secretary Welch explained her motivation for being part of the Task Force as the need to bring diverse perspectives to the decision-making table. This body allows for ongoing adjustments and fine-tuning to policies and practices as necessary.

Deputy Secretary Welch called on Task Force Members to actively participate in shaping the agenda, particularly during Lunch and Learn sessions. These sessions aim to bring in fresh information, research perspectives, data evaluation, promising practices, and community-defined practices. Deputy Secretary Welch expressed hope that the Task Force could play a role in improving the alignment of priorities with community perspectives.

Deputy Secretary Welch highlighted the significance of diversity, hands-on experience, and policy adaptability within the BHTF and encouraged Members to actively contribute their insights and priorities.

Secretary Mark Ghaly, CalHHS, highlighted the broad spectrum of issues encompassed within this domain, from justice system involvement to public system reforms and the enhancement of private sector healthcare and behavioral health services.

Secretary Ghaly reflected on his personal experiences and interactions with a system that often fails people, especially those facing historic disparities. He emphasized the opportunity to make significant improvements and noted the commitment of the current administration, emphasizing that the Governor's involvement and a strong focus on these issues were evident.

He welcomed new Members to the BHTF and thanked those who have served previously for their dedication. Secretary Ghaly encouraged Members to continue shaping CalHHS and the State's direction in behavioral health, particularly in areas such as young people, older Californians, and addressing disparities. He highlighted the importance of Members' real-life experiences and the need to maintain relevance and focus on the big picture in California's behavioral health reform efforts.

Secretary Ghaly commended the idea behind the BHTF and the role of Director Baass in its creation. He emphasized the Task Force's role in elevating the voice of communities and provider networks to inform and enhance state-level reform.

Secretary Ghaly underscored that the real value of their work lies in improving the lives of those facing challenges and struggles in California. He expressed confidence in each Member's ability to contribute to this mission.

BHTF MEMBER INTRODUCTIONS AND ON-BOARDING

Martine Watkins, Lead Facilitator provided an overview of the Task Force's purpose and goals for new and returning BHTF Members, reviewing the BHTF charter. The Task Force primarily serves as an advisory group, working to improve and advance the agency's initiatives while providing valuable feedback on policies, practices, and strategies.

The Task Force's main objectives include grounding the state's behavioral health agenda in real-life experiences, promoting learning and understanding of behavioral health issues, and advancing creative, responsive, and coordinated approaches. Guiding principles include focusing on equity and active listening.

Ms. Watkins discussed the governance structure, emphasizing that the Task Force acts as a consultative body with influence and perspectives that inform decisions at the agency level. There are no formal recommendations or term limits for membership.

She stressed the importance of inclusivity, accessibility, and accommodation, encouraging public participation and feedback to create a space where all voices are heard. The Task Force aims for transparent communication, coordination, and accountability, with regular charter revisions to support its purpose. She noted the charter is currently being updated to incorporate the range of new member interests.

Members were asked to consent and commit to the charter, supporting the four stated goals outlined at the beginning of the presentation. The importance of adhering to guiding principles and actively engaging with the charter's requirements was highlighted.

For more information on current BHTF Membership and the charter, please visit the [BHTF website](#).

DISCUSSION

- My hope was for this body to serve as clearinghouse for multiple State departments, where some of those conversations can come together and wanted to confirm. It's no longer the Department of Mental Health, and Drug and Alcohol Programs – we are really spread across a variety of different State entities.
 - Deputy Secretary Welch confirmed, saying that the first part of meetings and occasional 1.5-hour Lunch and Learn presentations will focus on cross-departmental, cross-issue topics. She looks forward to member help in designing these. In addition she is looking at streamlined ways to use the listserv to inform members and others about efforts underway in various departments.
- The commitment to engage communities would be enhanced if there was language interpretation, as those speaking languages are often marginalized and don't have easy access to services. The need to request language interpretation 10 days in advance of the meeting is a barrier.
 - Deputy Secretary Welch said that is a great idea, and she can envision that with recorded Lunch and Learn presentations.

CHILDREN AND YOUTH BEHAVIORAL HEALTH INITIATIVE (CYBHI) UPDATE

Melissa Stafford-Jones, Director of CYBHI, CalHHS, and her team delivered an update on CYBHI's recent implementation efforts.

CYBHI OVERVIEW

Director Stafford-Jones provided an overview of the CYBHI in California, contextualizing its importance within the broader framework of the Governor's Master Plan for Kids' Mental Health.

CYBHI is a substantial five-year, \$4.7 billion initiative and its core objective is to reimagine and enhance the behavioral health system for children and youth aged 0 to 25 across California. Several key components of this initiative include:

- **System Change:** The CYBHI seeks to revolutionize the existing system by fostering a more coordinated and integrated approach. Presently, various components of the system often operate in silos, hindering effective care.
- **Youth-Centered Approach:** The initiative focuses on designing services and support that revolve around the specific needs and strengths of young people. It emphasizes the active participation of youth and families in the design and implementation of these services.
- **Equity:** A critical aspect is addressing disparities in access to mental health services. The CYBHI takes aim at reducing these disparities, focusing on groups disproportionately affected by mental health challenges.
- **Continuum of Care:** The initiative covers the entire spectrum of care, from early intervention and prevention to intensive support for youth with complex behavioral health needs. This comprehensive approach aims to catch issues early and create a more efficient system.

Director Stafford-Jones highlighted twenty work streams, each representing a policy change or specific budget investment to help implement these changes effectively. She delved into updates regarding the various work streams, showcasing multiple agencies and departments working in coordination to address the behavioral health needs of children and youth in California.

Director Stafford-Jones emphasized CYBHI's comprehensive and collaborative approach to meet the mental health requirements of children and youth in California.

DEPARTMENT OF HEALTH CARE SERVICES AND DEPARTMENT OF MANAGED HEALTH CARE

Autumn Boylan, Deputy Director for the Office of Strategic Partnerships at the Department of Health Care Services, provided an update on various initiatives under the CYBHI.

- **Fee Schedule Initiative:** This initiative aims to establish a reimbursement structure for local education agencies (LEAs) to receive standard rates for providing behavioral health services to students. It will be rolled out in three cohorts starting in January 2024, eventually covering all LEAs in California.
- **Student Behavioral Health Incentive Program (SBHIP):** This program was launched in November 2021, and all 58 counties participate. It focuses on expanding access to behavioral health services in schools. Many counties are using funds to develop wellness programs, build behavioral health capacity, and partner with community-based organizations.
- **CalHOPE Student Support Initiative:** A \$45 million investment over three years that supports students' emotional well-being. This initiative offers tools and resources for students and parents, including a toll-free telephone line for emotional support. Communities of practice for social and emotional learning are being established in all 58 counties.
- **Wellness and Mindfulness Grants Program:** This initiative, launched in fall 2023, provides funding for student-facing wellness and mindfulness programs in schools, with toolkits for parents, caregivers, and educators. It includes a curriculum created by the University of California, Berkeley.
- **Virtual Services Platforms:** Two platforms are set to launch in January 2024. One targets children aged 0-12 and their parents, while the other serves youth and young adults aged 13-25. These platforms will provide digital therapeutic support and coaching, focusing on various behavioral health issues.
- **Evidence-Based Practice Grant Program:** Six rounds of funding support evidence-based practices and programs in the field of behavioral health. Some rounds are open for applications, with opportunities for early childhood, early intervention, and other mental health programs.

Deputy Director Boylan mentioned her readiness to answer questions and provided contact information for further inquiries: CYBHI@dhcs.ca.gov.

DEPARTMENT OF HEALTHCARE ACCESS AND INFORMATION (HCAI)

Hovik Khosrovian, Policy Section Chief, Healthcare Workforce Development Division, HCAI, discussed several key initiatives related to the Department of Health, Care, Access, and Information.

Policy Section Chief Khosrovian began with Behavioral Health Programs:

- **Psychiatry and Social Work Programs:** The department launched programs in psychiatry and social work to expand education and opportunities within the behavioral health field.
- **Residency Program Expansion:** An impressive \$18.6 million was awarded to eight psychiatry Residency programs. This funding facilitated the expansion of five existing programs and the establishment of two new ones, along with a program for psychiatric mental health nurse practitioners.
- **Child and Adolescent Psychiatry Fellowships:** Notably, these programs included child and adolescent psychiatry fellowships, showing a commitment to addressing mental health needs for young people.
- **Workforce Pipeline:** The department has been actively working on expanding pathways for individuals, especially those from underserved and disadvantaged backgrounds to access careers in behavioral health. This included efforts to make sure there are sufficient providers in underserved communities.
- **Health Professions Pathway Program:** The department had an open application cycle for the Health Professions Pathway Program. This program aimed to support educational initiatives in behavioral health and other professions, providing flexibility and capacity building within communities.
- **Scholarship and Loan Programs:** These programs aimed to provide financial assistance to those pursuing education and careers in behavioral health, with an emphasis on individuals from disadvantaged backgrounds.
- **Community-Based Organizations:** Over 130 organizations received more than \$109 million to enhance the behavioral health workforce. This funding included scholarships and loan payment options and was primarily focused on underserved populations and communities.
- **Justice System Involvement:** A specific program targeting individuals from the justice system aimed to provide support for these individuals to enter the behavioral health workforce.
- **Substance Use Disorder Program:** A substantial \$23 million program was initiated to ensure an adequate supply of certified substance use counselors, particularly in underserved communities. It allowed individuals to learn on the job while earning an income.

Policy Section Chief Khosrovian continued with a presentation of the Wellness Coach Program:

- **Bridging the Gap:** The department introduced the Wellness Coach program to bridge the gap between entry-level behavioral health roles and licensed positions. This program aimed to create a career progression for individuals interested in behavioral health.
- **Progression Levels:** The wellness coach program established different levels, starting from an associate degree for certified wellness coaches, moving to bachelor's degree level wellness coaches, and potentially extending to master's and Ph.D. levels. The goal was to enable these individuals to gain experience and support children and youth in various settings, from schools to the broader community.
- **Timeline:** The timeline for this program included launching a marketing campaign to raise awareness, offering employer grants to promote employment opportunities for wellness coaches, certification of individuals with relevant experience and degrees, and the introduction of scholarships for students aiming to become wellness coaches. Ultimately, the aim was to have wellness coach roles reimbursable for medical and commercial insurance by early 2025.

These initiatives are part of a comprehensive effort to establish a diverse, well-prepared workforce in behavioral health. HCAI is actively working on funding, education, and certification programs to address critical gaps in the field and serve underserved communities effectively.

DEPARTMENT OF PUBLIC HEALTH

Ana Bolanos, Assistant Deputy Director of the Office of Health Equity at the California Department of Public Health (CDPH), highlighted three critical initiatives. These initiatives, in partnership with the Office of Suicide Prevention, are focused on reducing stigma and enhancing awareness of behavioral health, particularly among children and youth.

The primary objective of these initiatives is to normalize the act of seeking help and improve behavioral health literacy. They are designed with a strong emphasis on youth and are culturally sensitive, tailored for children, youth, caregivers, and families in historically underserved communities.

Assistant Deputy Director Bolanos provided an overview of the collaboration efforts at both state and local levels. The goal is to form a unified front against mental health stigma and create an environment where youth and communities can openly discuss their mental health needs.

One key milestone is the release of a statewide campaign solicitation, which was initiated on September 1st. The CDPH is currently reviewing four proposals and plans to award the contract on November 3rd, with execution set for December 2023.

At the local level, various organizations will develop micro-campaigns, focusing on youth-centered public education and behavior change. These initiatives will engage 25 to 30 community-based organizations (CBOs), with the release of Requests for Applications (RFAs) scheduled for November 2023. Contract execution for the CBOs is also set for December 2023.

Deputy Director Bolanos also introduced the Youth Co-Lab, a dedicated platform for youth engagement, collaboration, and resource sharing. Youth individuals can apply to join the initiative and promote mental, emotional, and behavioral health among their peers. The application process will close at the end of October 2023.

The Youth Co-Lab is expected to comprise 12 youth leaders and two senior leaders, ranging in age from 14 to 25. Key dates include contract execution for the statewide macro campaign and local micro campaigns in December 2023, with the application period for the Youth Co-Lab closing on October 31, 2023. The review, interview, and selection process for Youth Co-Lab members is scheduled for November and December 2023.

OFFICE OF SUICIDE PREVENTION

Ashley Mills, Assistant Deputy Director of Community Wellness at the California Department of Public Health (CDPH) shared two essential initiatives from the Office of Suicide Prevention. Ms. Mills began with a discussion of the "Suicide Prevention Media and Outreach Campaign." This collaborative campaign, created in partnership with youth disproportionately affected by suicide, focuses on communities including black African, Hispanic, Native American Indian/Alaskan Native youth, and those with intersecting identities or behavioral health challenges. Civilian, a media partner, has been actively engaging with over 300 youth from these priority populations for research and concept testing. The campaign is expected to be launched in the spring of 2024, aimed at raising awareness about suicide prevention. Furthermore, 34 community-based organizations were awarded grants to support suicide prevention activities that reinforce the campaign's message within these focus populations, adding a community-driven dimension to the initiative.

Assistant Deputy Director Mills then discussed the "Youth Suicide Reporting and Crisis Response Pilot Effort." The goal of this work stream is to pilot county-level approaches for making youth suicide and suicide attempts recordable events, leading to rapid and comprehensive responses.

Ten counties, including Los Angeles and Sacramento, are part of this pilot effort. These counties are finalizing their implementation plans, with activities that include developing asset maps, conducting gap analyses to identify local resources and partnerships that can facilitate crisis responses. Moreover, these activities will be informed by the results of the gap analysis.

Community and service provider education and training are also part of the initiative, with evaluation and support from UCLA and the Center for Applied Research Solutions (CARS).

OFFICE OF THE CALIFORNIA SURGEON GENERAL

Julie Rooney, Communications Director for the Office of the California Surgeon General, presented two significant initiatives, beginning with Trauma-Informed Training for Educators and Early Care Personnel.

This training program, known as "Spaces: Foundations of Trauma-Informed Practice for Educational and Care Settings," was rolled out in July 2023. It's designed to be flexible, self-paced, and available in both English and Spanish. The program consists of three modules, each lasting two hours, targeting different age groups: 0-5, 5-11, and 12-18. Communications Director Rooney emphasized that this training received highly positive feedback during evaluation by over 200 educators and early care providers.

Additionally, the training includes a discussion guide for educators and early care providers who wish to participate in this learning community. The Office of the California Surgeon General is actively engaging with education and care-focused groups, including superintendents, teachers, early care providers, and education organizations. This engagement involves visiting schools and care facilities to understand how well the training works for them and sharing their experiences with others.

Communications Director Rooney also showcased the training on their website, providing an overview, a [two-minute introductory video](#), and bios of the expert panel that informed the training content. This user-friendly platform encourages participants to explore and access the training.

Communications Director Rooney continued with a discussion of the Aces and Toxic Stress Public Awareness Campaign and Healing Centered Effort. This initiative aims to increase public awareness about Adverse Childhood Experiences (ACEs) and toxic stress, with a primary target audience of youth aged 16 to 25. Caregivers are the secondary audience, while healthcare providers, educators, and early care providers are the tertiary audience.

Throughout the summer, the focus has been on formative research and listening sessions. The Office of the California Surgeon General completed the formative research and listening sessions recently, and they plan to share the reports in November. Currently, the team is working on developing and testing creative concepts for the campaign. They have also conducted a baseline survey in collaboration with an external evaluator. The campaign is scheduled for launch in the spring of 2024.

Communications Director Rooney highlighted these essential initiatives and their progress, emphasizing their commitment to addressing trauma and adverse experiences in educational and care settings while raising public awareness of these critical issues.

CYBHI CONTACT INFORMATION AND NEXT STEPS

In her closing remarks, CYBHI Director Stafford-Jones, provided information on how to stay informed about their work:

- Website: The CYBHI has a website where you can find more details and updates on their initiatives. You can visit this website for valuable information.
- Monthly Written Updates: They publish monthly written updates about their ongoing work. You can subscribe to receive these updates through their website.
- Quarterly Public Webinars: They host quarterly public webinars to provide comprehensive updates on all their work streams. These webinars dive deep into specific projects. The next webinar is scheduled for December 7th at 3 PM.

Director Stafford-Jones also mentioned specific web pages and email contact points for different departments related to their work streams. If you have specific questions or inquiries about a particular work stream, you can reach out to the relevant department directly.

- To provide input on initiative-wide topics or sign up to receive regular updates about the CYBHI, please email CYBHI@chhs.ca.gov
- To engage on work stream-specific topics, please use the following contact information and resources:
 - Department of Health Care Services:
 - Contact information for questions/feedback: CYBHI@dhcs.ca.gov
 - Children & Youth Behavioral Health Initiative [Webpage](#)
 - Student Behavioral Health Incentive Program (SBHIP) [Webpage](#)
 - Behavioral Health Continuum Infrastructure Program (BHCIP) [Webpage](#)
 - CalHOPE Student Support [Webpage](#)
 - Department of Health Care Access and Information (HCAI): CYBHI@hcai.ca.gov
 - Department of Managed Health Care: CYBHI@dmhc.ca.gov
 - California Department of Public Health: CYBHI@cdph.ca.gov
 - Office of the California Surgeon General: info@osg.ca.gov

988 CRISIS SYSTEM PLANNING UPDATE

Deputy Secretary Welch, CalHHS, expressed profound gratitude to all participants. She emphasized the excitement surrounding the increased diversity and representation among

both new and returning Members. In her view, dedicated individuals capable of advocating for statewide interests and bringing practical, on-the-ground experience are crucial drivers of transformative changes in the behavioral health field.

Deputy Secretary Welch delved into the origins of the BHTF and its conception as a platform for implementation partners, stakeholders, and advocates to provide feedback and enrich their work. Its primary goal is to ensure that policy development is a responsive, iterative process that addresses real-world feedback and evolving community needs.

The discussion then shifted to crisis system planning. Deputy Secretary Welch highlighted the progress made in the Crisis Care Continuum Plan, emphasizing its instrumental role in shaping the direction of their initiatives.

Deputy Secretary Welch detailed the extensive conversations about crisis system planning, spanning nearly two years, commencing in late 2020, coinciding with the launch of the Federal 988 initiatives. She emphasized the pivotal role of the 988/Crisis Policy and Advisory Group, in which CalHHS plays a leading role. This group collaborates closely with the California Office of Emergency Services (CalOES) as part of the 988/Crisis Technical Advisory Group.

Deputy Secretary Welch provided insights into national opportunities, particularly the shift to designate 988 as the easily remembered number for behavioral health crisis support, akin to 911 for emergencies. This move aimed to offer a single point of contact for individuals in behavioral health crises, including suicidal crises. She also highlighted the availability of enhanced federal medical assistance percentages, offering financial support for qualifying mobile crisis response services. Key to this support is guidance from the Centers for Medicare and Medicaid Services for qualifying services to receive enhanced federal reimbursement, representing an exciting prospect for California. Deputy Secretary Welch noted substantial federal investments aimed at supporting the expansion of certified community behavioral health centers, underscoring their crucial role in providing crisis response services.

Shifting focus to California's historical leadership in the field, Deputy Secretary Welch highlighted the State's pioneering role. She noted that the very first suicide prevention center in the United States was established in Los Angeles and emphasized the significance of dedicated partners, such as the renowned Didi Hirsch organization. Additionally, she highlighted the first suicide hotline in the U.S., founded in San Francisco, underscoring California's enduring commitment to addressing behavioral health crises.

Deputy Secretary Welch acknowledged the unique challenges posed by diversity, encompassing demographics, geography, and culture. She stressed the need for creative planning to ensure that all Californians can effectively benefit from the crisis response system.

Regarding the demand for enhanced coordination and expansion of crisis care services, Deputy Secretary Welch shared concerning statistics. One in five adults in the United States lives with a mental illness, and over one-third of all inpatient hospitalizations in California are attributed to individuals with behavioral health diagnoses. Her definition of behavioral health includes primary substance use disorders and individuals experiencing substance misuse crises. Additionally, she noted that over twenty thousand Californians had died by suicide in recent years.

Deputy Secretary Welch spoke about the necessity of proactive crisis prevention, driven by factors including cost-effectiveness and the emotional toll on individuals. She underscored the importance of keeping crisis prevention at the forefront of all planning efforts.

She concluded by outlining the strategic priorities for their upcoming planning efforts. These include establishing consistent statewide access to crisis services, enhancing coordination among various stakeholders, and designing and delivering a high-quality, equitable system addressing the diverse needs of all Californians.

Deputy Secretary Welch shared that they issued a Request for Proposals (RFP) and swiftly selected Health Management Associates (HMA) as the vendor to support their 988 Policy Advisory Group. HMA's responsibilities encompass strategies for meaningful collaboration with technical and subject matter experts and stakeholders, as well as facilitation and convening of the 988 Policy Advisory Group. Deputy Secretary Welch emphasized the need for inclusive conversations with subject matter experts and stakeholders who may not have the capacity to participate in the advisory group, expressing her determination to ensure comprehensive planning efforts.

988 POLICY ADVISORY GROUP - HMA

Suzanne Rabideau, Project Director, HMA, presented key updates regarding HMA's role with respect to the 988 Policy Advisory Group. Their mission is to gather diverse stakeholder voices and create consensus on recommendations to establish an integrated crisis continuum of care, encompassing all Californians. This plan will be presented to the state legislature.

Ms. Rabideau provided insights into HMA's team, which reflects extensive experience in various aspects of crisis systems across California. This expertise ranges from mature crisis systems to regions just starting to explore crisis care. Their goal is to garner recommendations and cultivate consensus on the future of crisis services.

HMA's approach includes establishing a 988 Policy Advisory Group, forming workgroups, extensive stakeholder outreach and in reach, as well as conducting research and data analysis.

A strong focus is on ensuring diverse representation. The topics the advisory group will delve into include crisis call centers, mobile response units, crisis walk-in services, and the roles of certified community behavioral health centers, among others.

Ms. Rabideau elaborated on the selection criteria for advisory group members, emphasizing the importance of professional expertise, community perspectives, collaboration, and diversity. They're targeting a collaborative and diverse group of around 40 participants.

The proposed timeline involves launching the advisory group in December 2023 and hosting meetings in February, April, August, and September of 2024. Throughout the next year, research, outreach, and data collection will inform the advisory group. A draft report is expected in September 2023, with the final report due by December 31, 2024.

Public outreach will be initiated to engage additional stakeholders interested in participating in workgroups. Notably, the development of an interoperability plan is slated for completion by June 2025. The next steps are focused on finalizing the advisory group's membership, sending out invitations, and commencing the first policy advisory group meeting in December. This comprehensive approach will ensure a holistic representation of Californians' perspectives in shaping the state's crisis continuum of care.

BHTF MEMBER COMMENTS

BHTF Members were asked to provide comments in response to two questions:

1. *Based on what you know about California's crisis systems and the plan's requirements, what do you see as the most critical area for the Implementation Plan to address?*
 2. *Where are the greatest opportunities for engagement and collaboration as part of the planning process?*
- County behavioral health agencies have a critical role in establishing the crisis benefit. These agencies have significant responsibilities, including operating 24/7 access lines for individuals, with some counties even managing 988 call centers. Many counties also provide funding and support to these call centers across the state. There is a critical gap in building out the statewide plan: ensuring engagement of commercial plans and their provider networks in these efforts. This engagement would cover everything from prevention to crisis care and beyond. Currently, crisis services supported by counties largely serve as public safety net services, available to the community regardless of insurance. However, counties often face challenges in obtaining adequate reimbursement from commercial plan beneficiaries, which causes hardship to both individuals with private insurance and county systems. Without access to necessary

outpatient services, those with private commercial insurance are more likely to end up in crisis, further burdening the public safety net, so we need to try to avoid that as much as possible. There is an opportunity to align with other state initiatives and address this issue in the broader context of the state's crisis care plan.

- Deputy Secretary Welch said supporting commercial partners to intervene earlier can prevent crisis and potentially affect their bottom lines, so a potential win-win.
- Almost all 988 call centers are run by Community-Based Organizations (CBOs), with some county collaboration, which is positive. The Certified Community Behavioral Health Center (CCBHC) model is a very important one nationwide, and has newly established criteria: CCBHC grantees are now required to collaborate with 988 call centers in their respective states. This is a natural opportunity for CCBHCs and call centers to come together. There needs to be attention to CCBHCs, which have not received much focus in California, especially considering their mandated collaboration with 988 call centers. The Task Force is a great opportunity to have discussions on how to accomplish this integration in a smart and coordinated approach, avoiding duplication of efforts or re-creating the wheel and lift up what is working, connect the pieces of the system together.
- I appreciate in the effort to design the advisory group, you mentioned those with lived experience, and people who are diverse, and defining what you find is diverse, and that advisory group members have multiple levels of expertise. What is missing is youth, specifically transition-age youth. Given the prevalence of mental health crises during the transition to college and in one's early twenties, multiple advisory roles should be reserved for youth voices. I would love to see a youth representative with lived experience who represents the perspectives of diverse communities.

LUNCH AND LEARN TOPICS – MEMBER POLL

BHTF Members were invited to provide input regarding topics for upcoming Lunch and Learn sessions to help inform planning for future sessions. Members were provided with three topic choices and asked to rank them in order of preference. All three topics presented for input originated from Member suggestions in prior BHTF meetings and discussions.

The final ranking results:

- First Choice: Mental Health Parity
- Second Choice: Supportive Employment

- Third Choice: Street Medicine

PUBLIC COMMENT

Members of the public were invited to share comments and questions.

- Esperanza Ocegueda brought up recommendations regarding the wellness coach role, particularly inspired by input from family agencies. They suggested a key improvement for the wellness coach certification and training process: establishing a system for ongoing legacy participation. Esperanza proposed moving away from the terms "grandparenting" or "grandfathering" and instead embracing the word "legacy" as a more positive and uplifting alternative. This change, Esperanza believed, would better reflect the concept of ongoing involvement and transition into the certification process.

NEXT STEPS & CLOSING

Deputy Secretary Welch thanked BHTF Members and stakeholders for joining the meetings and for sharing their valuable input. With respect to the upcoming hybrid quarterly meeting, she acknowledged the pros and cons of in-person and hybrid meetings, encouraging attendees to participate in person if possible. The meetings will be ideally planned for Wednesdays. Additionally, the structure of these meetings will be reminiscent of the old 10 a.m. to 3 p.m. format, with a lunch break that allows participants to network and interact over a meal. Deputy Secretary Welch looked forward to connecting with both familiar and new faces during these occasions.

She also mentioned plans to organize a Lunch and Learn session and indicated changes in the context and new federal activities to be discussed. Stephanie assured attendees that more updates and information would be forthcoming. Deputy Secretary Welch expressed her excitement about working with the Task Force and collaborating with Members.

Upcoming meeting dates:

- Lunch and Learn – December 11, 2023
- Quarterly Task Force Meeting (Hybrid) - January 17, 2024 from 10:00 am – 3:00 pm

To register for upcoming meetings please visit the [BHTF website](#).

APPENDIX A. MEETING ATTENDEES

STATE REPRESENTATIVES AND BHTF MEMBERS

Chair: Mark Ghaly, Secretary, CalHHS	Steve Dilley, Veterans Art Project
Dr. Tomas Aragon, CDPH	Michelle Doty Cabrera, CBHDAC
Michelle Baass, DHCS	Vitka Eisen, HealthRIGHT 360
Nancy Bargmann, DDS	Ruby Fierro, CPOC
Jenny Bayardo, BHPC	Anita Fisher, NAMI California
Susan DeMarois, Aging	Lisa Fortuna, Psy/Neuro, UC Riverside
Brenda Grealish, CCJBH	Lishaun Francis, Children Now
Kim Johnson, DSS	Leticia Galyean, Seneca Family of Agencies
Elizabeth Landsberg, HCAI	Avery Hulog-Vicente, CAMHPRO
Meghan Marshall, CIC Homelessness	Cynthia Jackson Kelartinian, Heritage Clinic
Rebecca Ruan-O'Shaughnessy, CCC	Carmen Katsarov, CalOptima Health
Kim Rutledge, DOR	Karen Larsen, Steinberg Institute
Dr. Sohil Sud, CYBHI	Michael Lombardo, CalHHS Advisor
Mary Watanabe, DMHC	Stephanie Moon, LACDHS Housing/Health
Virginia Wimmer, CaVet	Elizabeth Oseguera, CPCA
Jackie Wong, First 5	Justin Peglowski, Indian Health Services
Sonya Aadam, CBWHP	Paul Rains, CommonSpirit Health System
Marcy Adelman, Comm on Aging	Evangelina Ramirez, Promotoras con Alma
Alfredo Aguirre, LBHC	Allison Rodriguez, CommuniCare Health Cen
Laura Arnold, SBC Public Defender	Albert M. Senella, Tarzana Treatment Cen
William Arroyo, MCHAP	Miguel Serricchio, Didi Hirsch
Charles Bacchi, CAHP	Christine Stoner-Mertz, CACFS
Kirsten Barlow, CHA	Zofia Trexler, Disability Rights California
Phebe Bell, Nevada County BH Dept	Gary Tsai, LAC DPH SA Prevention/Control
Grant Boyken, Shatterproof	Dawan Utecht, Telecare Corporation
Dannie Ceseña, CA LGBTQ HHSN	Jasmine Young, National Health Law
Le Ondra Clark Harvey, CCCBHA	Program
Theresa Comstock, CALBHB/C	Shaina Zurlin, CCAH

CALHHS AND FACILITATION TEAM

Stephanie Welch, MSW. Deputy Secretary of Behavioral Health, CalHHS
Josephine Baca, CalHHS
Martine Watkins, CSU Sacramento
Julia Csernansky, CSU Sacramento