



Mental Health Commission
Module I: Introduction to the MHC

Contra Costa County

Commissioners evaluating and advising on the public mental health system



Included in this Training Module:

- Establishment and role
- Mission, mandated duties and scope
- Commitments
- Membership
- Structure
- By-Laws
- Meetings, motions and further action
- Active advocacy
- Collaboration with partners
- Generally-accepted rules and guidelines
- Conduct
- List of County trainings

Establishment

- Established by the Board of Supervisors on June 22, 1993, following passage of the California Bronzan McCorquodale Act
- Landmark public mental health legislation that defines who should be served, what services should be provided, how services should be organized and funded, and how counties should be advised by the public
- Part of the California Welfare and Institutions Code: Legislation that addresses services relating to welfare, dependent children, mental health, disabilities, needs of the elderly, delinquency, foster care, Medi-Cal, food stamps, rehabilitation, long-term care, etc.
- Derived from policy of 1800's, encoded in 1932, updated in 1992 and 2019

Role

- To advise the Board of Supervisors on all matters related to public mental health in the County
- To advise the Mental Health Director on public mental health matters
- Note "advise" (not "suggest")
- Note "on all matters" (e.g. evaluation, treatment, supportive housing, policies, wait times, budgets, contracts, conservatorships)

Dual Mission

- To influence the County's Mental Health System to ensure the delivery of quality services which are effective, efficient, culturally relevant and responsive to the needs and desires of the clients it serves with dignity and respect; and
- To be the advocate with the Board of Supervisors, the Mental Health Division, and the community on behalf of all Contra Costa County residents who are in need of mental health services.

The Heart of It: WIC 5604.2 Duties

- **1. Review and evaluate the community's public mental health needs, services, facilities, and special problems in any facility within the county or jurisdiction where mental health evaluations or services are being provided, including, but not limited to, schools, emergency departments, and psychiatric facilities.**
- **2. Review any county agreements entered into pursuant to Section 5650.** The local mental health board may make recommendations to the governing body regarding concerns identified within these agreements.

The Heart of It: WIC 5604.2 Duties

- **3. Advise the governing body and the local mental health director as to any aspect of the local mental health program.** Local mental health boards 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.
- **4. 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.

The Heart of It: WIC 5604.2 Duties

- 5. **Submit an annual report to the governing body** on the needs and performance of the county's mental health system .
- 6. Review and make recommendations on applicants for the appointment of a local director of mental health services. The board shall be included in the selection process prior to the vote of the governing body.
- 7. Review and comment on the county's performance outcome data and communicate its findings to the California Behavioral Health Planning Council.

The Heart of It: WIC 5604.2 Duties

- 8. **This part does not** limit the ability of the governing body to transfer additional duties or authority to a mental health board.
(b) It is the intent of the Legislature that, as part of its duties pursuant to subdivision (a), the board shall assess the impact of the realignment of services from the state to the county, on services delivered to clients and on the local community.

The Heart of It: WIC 5848(b)(f) MHSA Duties

- 8. (b) The mental health board established pursuant to Section 5604 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 subdivision (a). Each adopted three-year program and expenditure plan and update shall include any substantive written recommendations for revisions. The adopted three-year program and expenditure plan or update shall summarize and analyze the recommended revisions. The mental health board shall review the adopted plan or update and make recommendations to the local mental health agency or local behavioral health agency, as applicable, for revisions. The local mental health agency or local behavioral health agency, as applicable, shall provide an annual report of written explanations to the local governing body and the State Department of Health Care Services for any substantive [see (f) below] recommendations made by the local mental health board that are not included in the final plan or update.

The Heart of It: WIC 5848(b)(f) MHSA Duties

- 8. (f) For purposes of this section “Substantive recommendations made by the local mental health board” 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 local mental health board that has established its quorum.

Scope

- Our focus has typically been Behavioral Health Services and Psychiatric Emergency Services (PES) but in fact our scope is much broader: “Any facility within the county or jurisdiction where mental health evaluations or services are being provided, including, but not limited to, schools, emergency departments, and psychiatric facilities.”
- We need to put more attention on detention mental health and 4C and 4D psychiatric units in the county hospital (CCRMC)
- We need to broaden to include schools and other psychiatric facilities beyond CCRMC

Commissioner Commitments

- Attend all monthly full Commission meetings (3 unexcused absences max within 12 consecutive months)
- Membership to one standing Committee (3 unexcused absences max) within 12 consecutive months; Note that Executive Committee members must belong to one additional standing Committee
- Perform two mental health facility site visits per year
- Attend mandatory County trainings
- Three year term

Commission Membership

- 16 members in total
- Each of our five districts appoints three Commissioners to represent their constituency
- One member must be a “family member” -- related to someone with a mental illness
- One member must be a “consumer” -- someone with a mental illness
- One member must be a “member-at-large” -- someone from the district who has experience working or volunteering in the mental health-related field
- One member must be a member of the Board of Supervisors

Commission Structure

- Full Commission - sixteen members including an elected Chair and Vice Chair
- Four standing Committees: Executive, Quality of Care, Finance/MHSA, Justice
- A minimum of three members per Committee; a maximum of five
- Executive Committee members include the Chair, Vice Chair, and one to three elected members
- Each of the Committees has an elected Chair and potentially a Vice Chair
- There may be temporary Task Forces formed for a limited period of time and for a specific purpose, typically issue-related, e.g. creation of the Assisted Outpatient Treatment program
- There may be temporary Ad Hoc Committees for carrying out Commission responsibilities, e.g. overseeing annual office elections
- There may be Liasons elected or appointed to other organizations

Finance Committee

- **Purpose:** Research, review and make recommendations regarding the financial aspects of mental health programs, services and policies, including those funded by the Mental Health Services Act (MHSA)
- **Examples of efforts:**
 - Teamed up with MHSA staff to develop a program and fiscal review process for evaluating the performance of MHSA programs and services
 - Leads the Commission's review of Behavioral Health Services and MHSA budgets
 - Currently evaluating the cost of providing mental health services to the Incompetent to Stand Trial (IST) population that is moving from state to county care

Justice Committee

- Purpose: Assess and recommend improvements to programs, services, policies and issues that impact people with a serious mental illness who encounter the county judicial system
- Examples of efforts:
 - Advocated for enhanced mental health services for the new West County Detention facility
 - Currently analyzing the county Conservatorship program to identify the holes and barriers in the system that can lead to disastrous outcomes
 - Currently facilitating discussion on how to better support detainees with a mental illness in finding housing/placement upon release

Quality of Care Committee

- **Purpose:** Assess and recommend improvements to programs, services, policies and issues that impact the quality of care of people with a serious mental illness
- **Examples of efforts:**
 - Currently assessing the flow of patients in and out of treatment beds and supportive housing
 - Launching a Site Visit program
 - Advocated for shorter wait times for psychiatric appointments (wait times from more than three months to the max number of days allowed by state)
 - Advocated for a PES and crisis residential program for children and adolescents (a crisis stabilization facility is now under design)

Executive Committee

- **Purpose:** Support the Chair and Vice Chair managing day-to-day Commission operations, recommending policy to the full Commission, and setting Commission monthly meeting agendas
- **Examples of work:**
 - Discuss and propose potential by-law changes
 - Discuss potential Commission-wide goals
 - Track on progress of Commission-wide projects, like the roll-out of the Site Visit program

Commission By-Laws

- The Commission By-Laws govern the function, duties, scope, membership, attendance, terms, vacancies and recruitment, Committees, officer elections, and staff support of the Commission
- They may be amended by the Commission through a majority vote; proposed amendments must be reviewed by County Counsel and approved by the Board of Supervisors
- This is truly a living document, with several updates over the past five years

Meetings, Motions and Further Action

- The work of the Commission is conducted primarily through public meetings involving discussion and analysis of issues and interviews with subject experts
- Issues researched, evaluated and targeted for action may result in a motion for action
- Motions may be proposed by Committees for review and approval by the the entire Commission or proposed at the Commission level
- Motions may be directed to the Board of Supervisors, the Behavioral Health Services Director, a different County body, or an external organization

Defining Active Advocacy

- Identify issue
- Research background
- Converse with subject experts, program experts, and front-line staff
- Analyze and draw conclusions
- Propose action and approve through motions
- Communicate recommended action
- Follow up on action

Collaborating With Partners

- The Commission partners with Behavioral Health Services, CCRMC and other mental health providers
- Partnership involves achieving a shared understanding of an issue or problem and working together to investigate and reach a solution
- This is a collaborative approach rather than adversarial, e.g. Hope House
- Sometimes this doesn't happen and more unilateral action is required, e.g. White Paper

Questions and Answers

Thank you for participating!

Questions, comments or feedback?
Contact:

Angela Beck, MHC Executive Assistant
AngelaBeck@ccchealth.org

Barbara Serwin, MCH 2022 Chair
serwinfamily@hotmail.com