

# Behavioral Health Advisory Board

## Mental Health Services Act

Community Program Planning FY 2022-2023

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# What is Community Program Planning (CPP)

Community Program Planning (CPP) provides a structured process that the County uses in partnership with stakeholders in determining how best to serve communities through the programs contained in the development of the MHSA Three-Year Program and Expenditure Plan and Annual Updates.

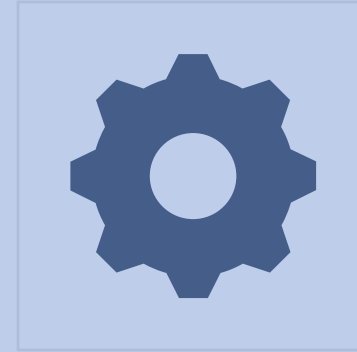
- Allows continuous communication between the agency and our stakeholders regarding our services, outcomes, and other information related to the public behavioral health system.
- Helps identify community issues related to mental illness, including challenges identified during implementation of MHSA programs/services.
- Analyze mental health needs in the community.
- Identify and re-evaluate priorities and strategies to meet those mental health needs.



# Community Program Planning (CPP)



This required part of MHSa encourages community contribution to improve behavioral health outcomes. CPP efforts include informing stakeholders of fiscal trends, evaluation, and program improvement activities, as well as obtaining feedback. CPP is an evolving practice. MHSa consistently evaluates the CPP process and makes adjustments accordingly.



Title 9 CCR- Section 3300

- Must involve clients & family
- Provide training about MHSa and CPP
- Involve identified stakeholder groups
- 30 Day Public Posting and Comment
- Public Hearing
- BOS Approval

# Who are stakeholders?

WIC §5848 identifies the following as stakeholders:

- Adults and seniors living with severe mental illness,
- Families of children, adults, and seniors living with severe mental illness,
- Providers of services,
- Law Enforcement/criminal justice agencies,
- Education, social services agencies,
- Veterans, representatives from Veterans organizations,
- Providers of alcohol and drug services,
- Health care organizations, and
- Other important interests.



# What Else is Required?

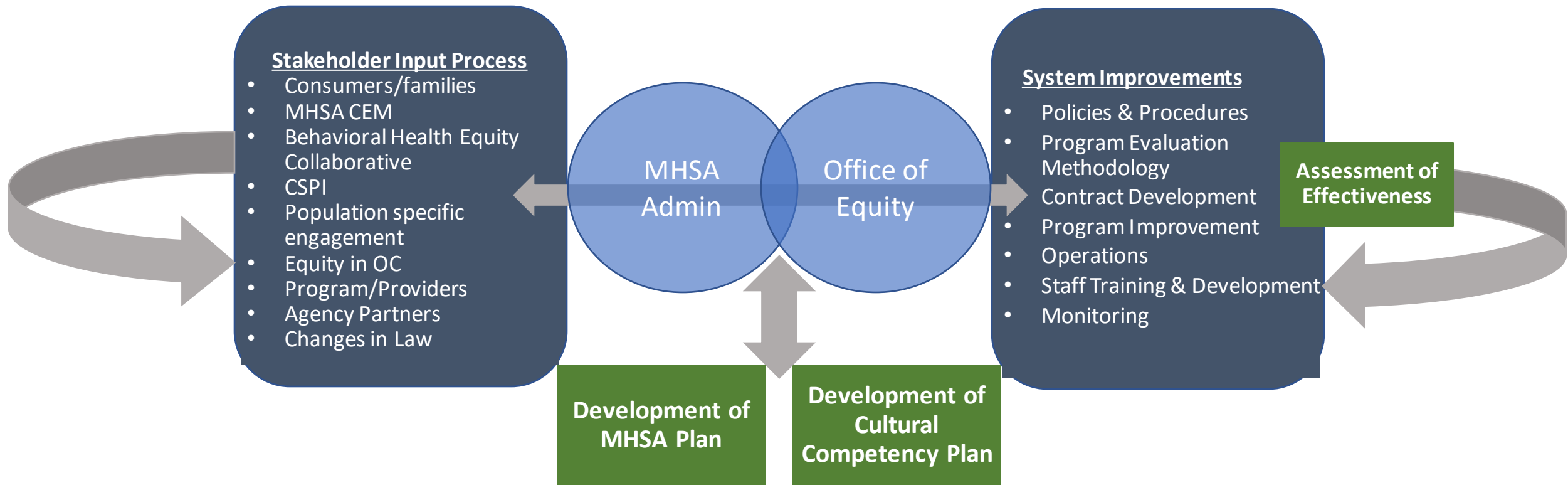
Stakeholders should reflect the diversity of the demographics of the County, including but not limited to:

- Geographic location
- Age
- Gender
- Race/ethnicity

Consistency with recovery philosophy, principles, and practices

- Hope, respect, and self-determination
- Personal Empowerment
- Social Connections and self-responsibility

# Stakeholder Process Framework



# Examples of Ways We Connect

<b>Meetings</b>	<b>Population Health</b>	<b>Consumer/Family</b>	<b>Systems</b>
Events	X	X	X
Equity in OC	X		X
MHSA Community Engagement Meetings	X	X	X
Behavioral Health Equity Collaborative (BHEC)		X	X
Community Suicide Prevention Initiative (CSPI)	X	X	X
Population Specific Engagement Meetings		X	X
Systems Engagement		X	X
Surveys	X	X	
Listserv	X	X	X



# Opportunities



Effective community planning requires informed stakeholders and collaboration.

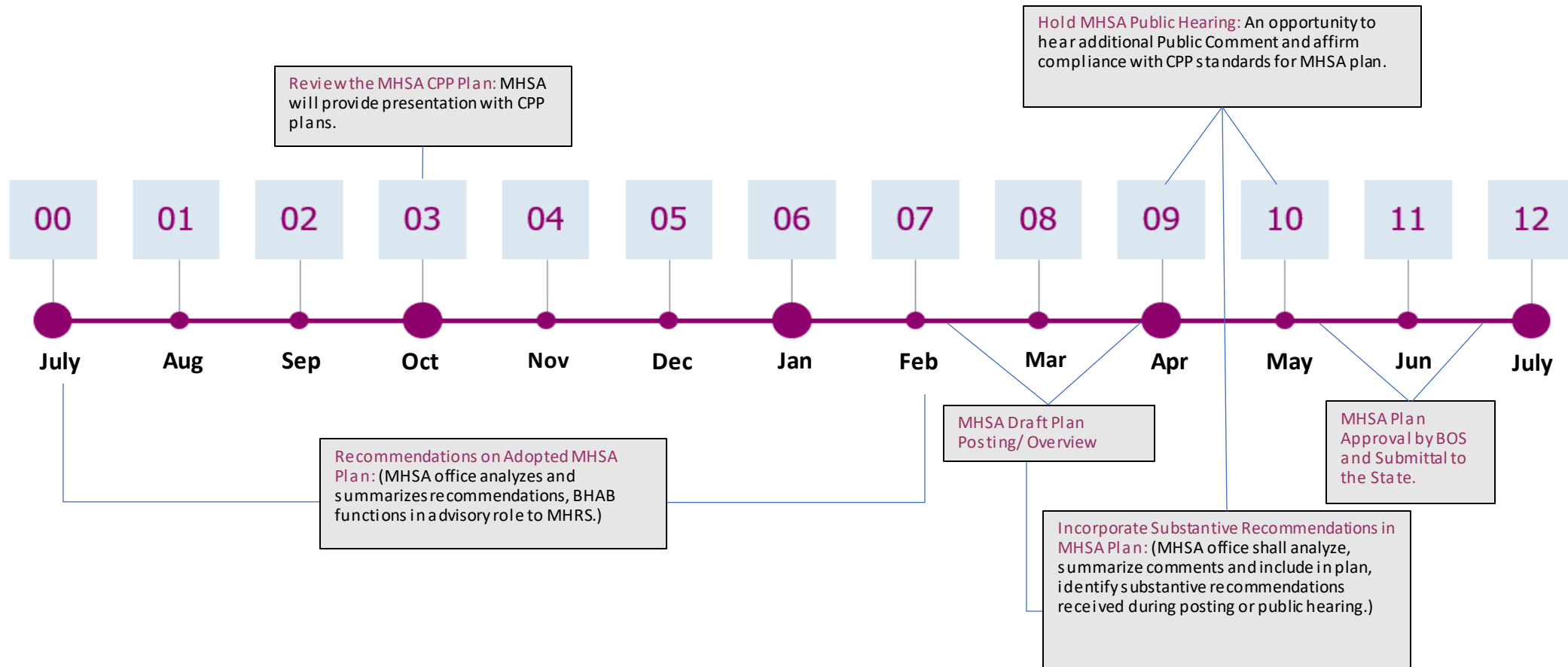
- No single path nor single strategy.
- Individuals with lived experience integral to the process.
- Alignment between strategy and the intention of the engagement.
- Offered in places and in ways that work for community.
- Not one size fits all.
- Continue to build on use of technology.
- Monitoring effectiveness of CPP strategies.
- Identifying prioritized outcomes for reporting measurable human gain.
- Make the information in the Plan more accessible.



# Roles and Responsibilities

Entity	Statute	
Behavioral Health Advisory Board (BHAB)	WIC 5604.2(a)(4): The local mental health board shall: review and approve the procedures used to ensure citizen and professional involvement in all stages of the planning process.	
	Host Public Hearing	
Board Of Supervisors (BOS)	The local BOS maintains approval of the plan as codified in statute via AB 100 (2011).	
Mental Health & Recovery Services (MHRS)	Adopt the MHSA General Standards in planning, implementing, and evaluating the programs and/or services provided with MHSA funds.	
	<ul style="list-style-type: none"> <li>▪ Community Collaboration (9 CCR § 3200.060)</li> <li>▪ Cultural Competence (9 CCR § 3200.100)</li> <li>▪ Client-Driven (9 CCR § 3200.050)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Family-Driven (9 CCR § 3200.120)</li> <li>▪ Wellness, Recovery, and Resiliency (WIC § 5813.5(d))</li> <li>▪ Integrated Service Experience (9 CCR § 3200.190)</li> </ul>
	Title 9 CCR- Section 3300 Must involve clients & family, provide training about MHSA and CPP, involve identified stakeholder groups, 30-day Public Posting and Comment, Public Hearing, BOS Approval	
DHCS	Compliance with Performance Contract, Conduct Program & Fiscal audits.	
MHSAOAC	Receive MHSA Plans, Approve INN projects.	

# BHAB Timeline for MHSA Related Items (Draft)



# How we can Support Each Other

- While stakeholder engagement is a continuous process, this year the CPP process for the development and review of the Three Year Plan will be between November 2022 through April 2023.
  - Save the Date for MHSА Summit November 10, 2022.
- CPP meetings will be provided both in-person and virtually.
- Include all geographic regions of the county.
- Will be scheduled at all of MHRС' regular CPP Stakeholder meetings (СЕМ, ВНЕС, workgroups, etc.).
- Work in partnership with contracted provider agencies, wellness centers, community partners.
- Public Posting and Comment Period concurrent with continued CPP meetings.
- Public Hearing recommended to be hosted by ВНAB in April 2023.
- Tentatively scheduled to present the Plan to the Board of Supervisors for approval in May/June 2023.

# Discussion

For questions or input, please contact  
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