



Responses to Written Public Comments on the January 2020 Proposed Amendments to the Rules of Procedure

Table 1: Mission Statement

Mission Statement	
<p>The January 2020 proposed amendments to the Rules of Procedure incorporated the Mission Statement that was adopted by the Commission as part of the Strategic Plan following extensive public outreach. The Mission Statement is intended to be read in conjunction with the Vision Statement (“Wellbeing for All Californians”) and the Commission’s Core Principles (Wellness and Recovery; Client-Consumer and Family-Driven; Community Collaboration; Cultural Competency; and Integrated Service Delivery), both of which were also adopted as part of the Strategic Plan.</p> <p><u>The new Mission Statement:</u> “The Mental Health Services Oversight and Accountability Commission works through partnerships to catalyze transformational change across systems and ensure everyone who needs mental health care has access to and receives effective and culturally competent care.”</p> <p><u>The former Mission Statement:</u> “The MHSOAC provides the vision and leadership, in collaboration with clients, their family members and underserved communities, to ensure an enhanced continuum of care for individuals at risk for and living with serious mental illness and their families by holding public systems accountable and by providing oversight, eliminating disparities, promoting mental wellness, supporting recovery and resiliency resulting in positive outcomes in California’s community based mental health system.</p>	
Public Comments Summary	Response
<p>#1: PEERS in its April 3, 2020 letter, contends that:</p> <ul style="list-style-type: none"> • The deleted language is fundamental to the promise of transforming the mental health system that is at the core of the MHSA • The deleted language emerged from collaborative work of many stakeholders, and reflects the broad and hard-won consensus among consumers, family members, providers, and policymakers 	<p>Response to Comment #1 PEERS: The Commission is committed to the core values of the MHSA and the critical partnership with consumers, their family members, and underserved communities. The concepts in the former Mission Statement are fundamental to the Commission’s operation and are Core Principles in the Commission’s Strategic Plan which includes consumer and family driven, wellness and recovery, and community collaboration, and cultural competency.</p>

<ul style="list-style-type: none"> • The new Mission Statement does not ensure people with mental health challenges, family members, and underserved communities will be among the partnerships working with the OAC • The deletion of “eliminating disparities” represents backsliding in this key area • “Promoting mental wellness, supporting recovery and resiliency” should not be deleted because this is a critical part of the transformational change promised by the MHSA. 	<p>The new Mission Statement was adopted in January 2020 after an 18-month public strategic planning process and thus it is not recommended to be changed now. However, the former Mission Statement contains principles important to the Commission and therefore, it is recommended that language from the former Mission Statement be added to the Governance Philosophy section of the Rules of Procedure. This preserves the critical components of the former Mission Statement and keeps the new Mission Statement adopted in the Strategic Plan.</p>
<p>#2: NAMI in its May 5, 2020 letter states:</p> <ul style="list-style-type: none"> • NAMI opposes the deletion of the specific mention of clients and family members • The MHSA is client and family driven and the Commission should uphold this value of the Act and never alienate the individuals it serves. 	<p>Response to Comment #2 NAMI:</p> <ul style="list-style-type: none"> • Same response as to Comments #1 and #2. • The Commission includes two clients and two family members as members.
<p>#3: REMHDCO in its undated letter states:</p> <ul style="list-style-type: none"> • NAMI opposes the deletion of the phrase, “in collaboration with clients, their family members and underserved communities” because the phrase is paramount to the purpose and operation of the Commission. 	<p>Response to Comment #3 REMHDCO:</p> <ul style="list-style-type: none"> • Same response as to Comment #1.
<p>#4: CalVoices in its September 11, 2020 letter states:</p> <ul style="list-style-type: none"> • The original phrase, “in collaboration with clients, their family members and underserved communities” is vital to the Commission’s purpose and operation as set forth in Welfare and Institutions Code §5846(d) and should be kept • The new Mission Statement does not accurately detail the statutory role of the Commission, which is to “provide oversight and accountability” and “not necessarily to catalyze transformational change” • The new Mission Statement does not uphold the General Standards in 9 CCR §3320. 	<p>Response to Comment #4 CalVoices:</p> <ul style="list-style-type: none"> • Same response as to Comment #1. • Transforming change in the mental health system is a fundamental promise and premise of the MHSA. Working through partnerships to catalyze that transformational change is one of several ways the Commission fulfills its statutory role. • The General Standards in 9 CCR §3320 apply to counties and not to the Commission, however, they are included in the Commission’s Strategic Plan as core principles.

<p>#5: Californians advocating for the Seriously Mentally Ill (SMI) in its October 20, 2020 letter states:</p> <ul style="list-style-type: none">• The changes completely eliminate collaboration and removes the intent of MHSA funding for those with serious mental illness. The new mission statement omits the only groups eligible for MHSA services, and substitutes people who are not eligible for MHSA services, contrary to the intent of the voters in Proposition 63/MHSA.	<p>Response to Comment #5 California advocating for the Seriously Mentally Ill (SMI):</p> <ul style="list-style-type: none">• Same response as to Comments #1 and #2.• The Mission Statement does not change the funding or the eligibility for services under the MHSA. The new Mission Statement states the Commission’s commitment to ensuring everyone, including individuals with serious mental illness, have access to and receive effective and culturally competent care, consistent with the Commission’s responsibility to provide oversight and accountability for the community mental health system as a whole. WIC section 5845 gives the Commission a wide range of authorities beyond the specific scope of the MHSA.
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Table 2: Governance Philosophy

January 2020 Proposal & December 2020 Recommendation	
<p>The January 2020 amendments propose changes to the Governance Philosophy by streamlining the language and making it action oriented. As part of streamlining, the examples of the Governance Philosophy in the current Rules of Procedure are proposed to be deleted. Below is the proposed Governance Philosophy.</p> <p>“Integrity and sound stewardship are paramount in the governance of all Commission activities. The Commission will govern itself with an emphasis on the following:</p> <ul style="list-style-type: none"> a.) Being <u>Advancing an objective understanding and incorporating diverse</u> diversity in viewpoints b.) Making decisions in a <u>transparent, responsive</u> an efficient and timely manner c.) Striving <u>to improve</u> for results and outcomes d.) <u>Elevating a transformative</u> Focusing on outward vision and strategic leadership and less on administrative detail e.) <u>Working</u> Using <u>collaboratively to drive system-scale improvements</u> rather than individual decisions making processes f.) Being proactive rather than reactive” Specifically, ... <p>December 2020 Recommendation: Add the language from the former Mission Statement and revise the Governance Philosophy section to read:</p> <p>“Integrity and sound stewardship <u>in adherence to the Commission’s Mission, Vision, and Core Principles</u> are paramount in the governance of all Commission activities. The Commission will govern itself with an emphasis on the following:</p> <ul style="list-style-type: none"> a) <u>Collaborating with clients, their families, and underserved communities</u> b) <u>Advancing health equity and strategies to eliminate disparities</u> c) <u>Promoting mental wellness and supporting recovery and resiliency</u> d) Advancing an objective understanding and incorporating diverse viewpoints e) Making decisions in a transparent, responsive and timely manner f) Striving to improve results and outcomes g) Elevating a transformative vision and strategic leadership h) Working collaboratively to drive system-scale improvements i) Being proactive 	
Public Comments Summary	Response

Table 2: Governance Philosophy

<p>#1: CalVoices in its September 11, 2020 letter states the current section documents key elements of the Commission’s governance philosophy and should be retained.</p>	<p>Response to Comment #1 CalVoices:</p> <ul style="list-style-type: none"> • The list of specifics is not necessary as they do not add substantive elements to the governance philosophy.
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Table 3: Rule 1.1 Terms of Commissioners

<p>January 2020 Proposal & December 2020 Recommendation</p>	
<p>The January 2020 amendments propose to delete the following paragraph from Rule 1.1.</p> <p>“If a Commissioner cannot attend a Commission meeting, he or she will notify the Chair and the Executive Director of such absence in advance of the Commission meeting. If a Commissioner misses one (1) Commission meeting without notice or three (3) Commission meetings in a calendar year with notice the Chair shall notify the Commissioner and that Commissioner’s appointing power in writing that the attendance record of the Commissioner be improved or that the Commissioner be replaced.”</p> <p>December 2020 Recommendation: No change to the January 2020 proposal</p>	
<p>Public Comments Summary</p>	<p>Response</p>
<p>#1: CalVoices in its September 11, 2020 letter opposes the deletion of the paragraph because:</p> <ul style="list-style-type: none"> • Full Commissioner participation for each entire meeting is an essential element of the Commission’s success because when Commissioners are absent they miss public input on items and the lack of diversity of Commissioner input is contrary to the statutory mandate of the different seats on the Commission. 	<p>Response to Comment #1 CalVoices:</p> <ul style="list-style-type: none"> • The paragraph is proposed to be deleted because it is contrary to Commissioners’ statutory term appointment set forth in WIC §5845. Per §5845 Commissioners are appointed for a term of three years. The purpose of a statutory specific term appointment is to provide independence and protect the appointee from possible political pressure from the appointing power.

Table 4: Rule 1.2 The Role of Commissioners

January 2020 Proposal & December 2020 Recommendation	
<p>The January 2020 amendments propose to delete the following paragraph from Rule 1.2.</p> <p>“The best decisions come out of unpressured collegial deliberations. The Commission seeks to maintain an atmosphere where the Commissioners can speak freely, explore ideas before becoming committed to positions and seek information from staff and other members. To the extent possible the Commission encourages members to come to meetings without having fixed or committed their positions in advance.”</p> <p>December 2020 Recommendation: No change to the January 2020 proposal</p>	
Public Comment Summary	Response
<p>#1: REMHDCO in its undated letter opposes the deletion, stating:</p> <ul style="list-style-type: none"> • “Collegial deliberations (any deliberations) have been greatly reduced in recent years” and REMHDCO would like more dialogue and deliberations at either Committee meetings or Commission meetings. 	<p>Response to Comment #1 REMHDCO:</p> <ul style="list-style-type: none"> • The paragraph was proposed to be deleted because it did not fit in a rule dealing with the “role” of Commissioners and the concepts are reflected in the Governance Philosophy. • Staff strongly disagrees with the comment regarding collegial deliberations. The MHSA sets an expectation that the Commission meet four times per year. The Commission in fact has been meeting 10 or more times per year for years. Due to COVID-19 and the need to meet via Zoom, the Commission’s monthly meetings are shorter in length than the in-person meetings. Even in these shorter meetings there is a lot of collegial deliberations. A review of the minutes of the Commission meetings clearly show the deliberation among Commissioners are collegial and professional.
<p>#2: CalVoices in its September 11, 2020 letter opposes the deletion because:</p> <ul style="list-style-type: none"> • Commissioners are expected to attend meetings with open mind and without having pre-determined opinions. Collaboration necessitates meeting environment where collegial deliberations 	<p>Response to Comment #2 CalVoices:</p> <ul style="list-style-type: none"> • Same as response to comment #1.

Table 4: Rule 1.2 The Role of Commissioners

<p>take place and community input is meaningfully incorporated into decisions.</p>	
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Table 5: Rule 1.3B Duties of the Chair

<p>January 2020 Proposal & December 2020 Recommendation</p>	
<p>The January 2020 amendments propose to add the following paragraph regarding the duties of the Chair. This language is not in the current Rule 1.3.</p> <p>“B. Duties of the Chair “The Chair, with input from Commissioners and staff, sets the Commission’s meeting agenda, prioritizing and scheduling agenda items as appropriate, and conducts the meetings.”</p> <p>December 2020 Recommendation: No change to the January 2020 proposal</p>	
<p>Public Comment Summary</p>	<p>Response</p>
<p>#1: REMHDCO in its undated letter proposes adding the following sentence to the end of the paragraph: “The Chair should also consider agenda items proposed by members of the public.”</p>	<p>Response to Comment #1 REMHDCO:</p> <ul style="list-style-type: none"> • The Chair already has discretion to consider any agenda items and this sentence proposed in the comment is not necessary.

Table 6: Rule 1.7A Training and Orientation

January 2020 Proposal & December 2020 Recommendation	
<p>The January amendments propose the following non-substantive edits to paragraph A:</p> <p>“A. New <u>Commissioners</u> members shall within 30 days of being appointed receive training and orientation in: (1) Commission governance, policies and procedures; (2) Commission strategic directives; (3) <u>Mental Health Services Act</u> (MHSA) programs and issues; and (4) relevant laws and statutes.”</p> <p>December 2020 Recommendation: Change the title of Rule 1.7 to “Commissioner Orientation” and revise paragraph A to read as follows:</p> <p>“A. New Commissioners shall within 30 days of being appointed receive orientation in: (1) Commission governance, policies and procedures, <u>including the Commission’s Strategic Plan, Mission Statement, Vision Statement, Core Principles, and governance philosophy</u>; (2) Commission strategic directives; (3) Mental Health Services Act (MHSA) programs and issues, <u>including the principles of recovery, consumer and family-driven decision-making, community collaboration, meaningful stakeholder outreach and engagement, cultural competence, and the imperative to reduce disparities</u>; and (4) relevant laws and statutes.”</p>	
Public Comment Summary	Response
<p>#1: REMHDCO in its undated letter proposes adding the following language to the end of paragraph A:</p> <p>“In addition, the new Commissioners will receive training on the important principles of the MHSA including but not limited to:</p> <ul style="list-style-type: none"> • Recovery • Consumer and family driven; community collaboration • Meaningful stakeholder outreach and engagement • Cultural competence and reducing disparities • Prevention and Innovation.” 	<p>Response to Comment #1 REMHDCO:</p> <ul style="list-style-type: none"> • Staff recommends amending the rule consistent with the recommendation in the comment.
<p>#2: CalVoices in its September 11, 2020 letter proposes adding the words, “General Standards” to item number 3.</p>	<p>Response to Comment #2 CalVoices:</p> <ul style="list-style-type: none"> • The General Standards, regulations issued by the former Department of Mental Health apply to counties in their implementation of the MHSA. These standards, which are “community collaboration, cultural competence, client and family

Table 6: Rule 1.7A Training and Orientation

	<p>driven, wellness, recovery and resilience focused, and integrated services experiences for clients and their families” are already covered in the orientation under number 3 because they are core principles of the Strategic Plan. They are also covered in item number 4, relevant laws and statutes.</p>
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Table 7: Rule 1.9 Conflict of Interest

<p>January 2020 Proposal & December 2020 Recommendation</p>	
<p>The January amendments propose to delete the following sentence in Rule 1.9:</p> <p>“The Commission will adopt for itself and adhere to an Incompatible Activities Policy.”</p> <p>December 2020 Recommendation: No change to the January 2020 proposal</p>	
<p>Public Comment Summary</p>	<p>Response</p>
<p>#1: CalVoices in its September 11, 2020 letter states:</p> <ul style="list-style-type: none"> It is “essential that public entities have a Conflict of Interest (or Incompatible Activities Policy) to protect the public’s trust and inform Commissioners of activities or interests that may constitute a conflict of interest and compromise professional judgment.” 	<p>Response to Comment #1 CalVoices:</p> <ul style="list-style-type: none"> The Commission has a Conflict of Interest Code and the Rules of Procedure do not propose to eliminate or change that Code. Contrary to the commenter’s uses of the term, “Incompatible Activities Policy” interchangeably with “Conflict of Interest” policy, these are two different things. The appointing power already requires Commissioners to sign an Incompatible Activities Policy. The requirement in the Rules of Procedure for an Incompatible Activities Policy was proposed to be deleted because it is duplicative.

Table 8: Rule 2.1 Duties of the Executive Director

January 2020 Proposal & December 2020 Recommendation	
<p>The January amendments propose to change Rule 2.1 in relevant part as follows:</p> <p>“A. The Executive Director is appointed and discharged by the <u>MHSOAC Commission</u>. The Executive Director acts under the authority of, and in accordance with direction from the <u>MHSOAC Commission</u>. Commissioners should direct their requests for information or assistance from staff to the Executive Director.</p> <p><u>B. The Executive Director represents the Commission and advances its goals by working with California’s constitutional officers, federal, state, and local agencies, national and international organizations, private sector leaders, and other stakeholders.”</u></p> <p>The Executive Director also services as the Commission’s liaison with, county commissions, other mental health associations and stakeholder groups. ...</p> <p>December 2020 Recommendation: Amend paragraph B to add, “consumers, families, and diverse community stakeholders” to read as follows:</p> <p>“B. The Executive Director represents the Commission and advances its goals by working with California’s constitutional officers, federal, state, and local agencies, national and international organizations, private sector leaders, and other stakeholders, <u>including but not limited to consumers, families, and representatives of diverse communities.</u>”</p>	
Public Comment Summary	Response
<p>#1: REMHDCO in its undated letter proposes to revise paragraph B to read:</p> <p>“B. The Executive Director represents the Commission and advances its <u>publicly approved</u> goals by working with California’s constitutional officers, federal, state, and local agencies, national and international organizations, private sector leaders, and <u>especially community</u> other stakeholders.”</p>	<p>Response to Comment #1 REMHDCO:</p> <ul style="list-style-type: none"> • See recommended change listed above.

<p>#2: CalVoices in its September 11, 2020 letter states it does not support the proposed changes for the following reasons:</p> <ul style="list-style-type: none"> • Replacing the word, “liaison” with the new language “contravenes the Bagley-Keene Act because the new language authorizes the Executive Director to bypass the public meeting process to effectuate policy” • Allowing the Executive Director to advance the Commission’s goals “grants the Executive Director potentially unlimited power ... without any Commission or public oversight.” 	<p>Response to Comment #2 CalVoices:</p> <ul style="list-style-type: none"> • The Bagley-Keene Act does not limit the role of staff to represent and implement the decisions of the state body. Contrary to the comment, Rule 2.1 does not authorize the Executive Director to bypass the public meeting process to effectuate policy: Paragraph B states the Executive Director “represents” the Commission. • Paragraph A of Rule 2.1 clearly states that the Executive Director “acts under the authority of and in accordance with direction from the Commission.” Reading both Paragraphs A and B together it is clear that when the Executive Director “represents” the Commission per Paragraph B, the Executive Director does so under the limitations of Paragraph A. The Rule does not, as the comment contends, grant the Executive Director potentially unlimited power.
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Table 9: Rule 2.4 Contract Authority

January 2020 Proposal & December 2020 Recommendation	
<p>The January amendments propose to make the following changes to Rule 2.4:</p> <p>A. The Executive Director has the authority to take all actions necessary to enter into contracts on the Commission’s behalf in the amount of \$100,000 <u>\$200,000</u> or less and to enter into Interagency Agreements in the amount of \$200,000 <u>\$400,000</u> or less.</p> <p>B. <u>The Executive Director, with the consent of the Chair and Vice Chair, has the authority to take all actions necessary to enter into contracts on the Commission’s behalf in the amount of \$500,000 or less and to enter into Interagency Agreements in the amount of \$750,000 or less.</u></p> <p>December 2020 Recommendation: Add a new paragraph C to read as follows:</p> <p><u>“C. The Executive Director shall ensure that information on all contracts that the Commission has entered into, including contracts under this Rule 2.4, is included will be included in the Commission’s publicly reported budget information.”</u></p>	
Public Comment Summary	Response

Table 9: Rule 2.4 Contract Authority

<p>#1: CASRA in its March 1, 2020 letter states it does not support the change because:</p> <ul style="list-style-type: none"> • Authorizing the Executive Director to enter into contracts up to \$750,000 without approval by the Commission or notice to the public reduces transparency and allows the Executive Director too much discretion on funding projects. 	<p>Response to Comment #1 CASRA:</p> <ul style="list-style-type: none"> • There are two tiers of delegated authority and only the first tier (contracts of \$200,000 or less and interagency agreements of \$400,000 or less) provides the Executive Director sole delegated authority. • The second tier is a joint delegated authority with two Commissioners (the Chair and Vice Chair) and the Executive Director. Under this tier both the Chair and Vice Chair must consent before the Executive Director can enter into a contract of between \$200,001 and \$500,000 and Interagency Agreements of between \$400,001 and \$750,000. This requirement of consent from both the Chair and Vice Chair limits the Executive Director’s discretion. • The above recommended change to this Rule will increase transparency and accountability by making information on all the contracts part of publicly reported budget information on the Commission’s website.
<p>#2: PEERS in its April 3, 2020 letter states it does not support the change because:</p> <ul style="list-style-type: none"> • Doubling the dollar amount of contracts and Interagency Agreements reduces transparency and decreases opportunities for the public, consumers, family members, members of underserved communities, and Commissioners other than the Chair and Vice Chair to comment on and inform the decisions. 	<p>Response to Comment #2 PEERS:</p> <ul style="list-style-type: none"> • Same as response to Comment #1
<p>#3: NAMI in its May 5, 2020 letter states it opposes the increased authority of the Executive Director because:</p> <ul style="list-style-type: none"> • It is unclear why it is necessary at this time to double the Executive Director’s authority to make large financial commitments after only consulting the Chair and Vice Chair and it is unclear whether or how the proposed increase in the Executive 	<p>Response to Comment #3 NAMI:</p> <ul style="list-style-type: none"> • Same as response to Comment #1 • The changes were made to correspond to the increased delegated authority that the Department of General Services (DGS) provided to other state entities, including boards and commissions.

Table 9: Rule 2.4 Contract Authority

<p>Director’s authority reflect the rules of other boards and commissions</p> <ul style="list-style-type: none"> • The Commission should uphold its value of engaging consumers and family members in its decisions regarding such a large amount of taxpayer funds 	
<p>#4: REMHDCO in its undated letter states opposes the increase in the authority because:</p> <ul style="list-style-type: none"> • The Commissioners and the public must be allowed to review and comment on what the Commission funds over \$100,000 • The change reduces transparency and allows the Executive Director too much discretion on funding projects that do not necessarily have the support of the Commissioners or public stakeholders. This lack of transparency is not in line with the principles of the MHSA. 	<p>Response to Comment #4 REMHDCO:</p> <ul style="list-style-type: none"> • Same as response to Comment #1
<p>#5: CalVoices in its September 11, 2020 letter states it opposes the increased authority because:</p> <ul style="list-style-type: none"> • Allowing the Executive Director to enter into contracts goes against the Bagley-Keene Act by allowing for actions to be taken outside of the public view. • It also goes against WIC 5846(d) that requires the Commission to ensure the perspective and participation of diverse community members is a significant factor in its decision because the rule allows the Executive Director to “unilaterally” enter into significant contrast “without participation by stakeholders”. Also, the majority of the Commissioners will not be informed about the money they are required to oversee. 	<p>Response to Comment #5 CalVoices:</p> <ul style="list-style-type: none"> • Same as response to Comment #1 • The comment implies that the Executive Director would not be authorized to enter into any contracts no matter the dollar amount. The Bagley-Keene Act does not limit the role of staff to represent and implement the decisions of the state body. The law recognizes there is a difference between the multi-member body and administrative staff of that body: The Attorney General has interpreted that a report drafted by staff is not the work of the multi-member body for purposes of the Public Records Act unless the draft is distributed to a majority of the multi-member body. It is unreasonable to argue that the administrative staff cannot act on behalf of the multi-member body.
<p>#5: Californians Advocating for the Seriously Mentally Ill in its October 20, 2020 letter states:</p>	<p>Response to Californians advocating for the Seriously Mentally Ill:</p> <ul style="list-style-type: none"> • Same as response to Comment #1

Table 9: Rule 2.4 Contract Authority

<ul style="list-style-type: none"> Increasing Executive Director authorization over contracts undermines the transparency of the Commission’s actions and minimizes stakeholder collaboration. The voice of individuals living with severe mental illness and their family members must continue to be considered when making decisions regarding the taxpayer revenues provided from the MHSA 	
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Table 10: Rule 2.5 Authority to Advocate on Legislation

January 2020 Proposal & December 2020 Recommendation
<p>The January amendments propose to amend Rule 2.5 as follows:</p> <p>A. <u>The Commission is authorized to advise the Governor and Legislature regarding actions the State may take to improve the mental health care and services of Californians. As part of this authority, the Commission may advocate on legislation.</u></p> <p>B. The Executive Director, or his or her <u>the Executive Director’s designee</u>, is authorized on behalf of the <u>MHSOAC Commission</u> to advocate on legislation: (1) when the legislation is consistent with <u>advances a formally established</u> an officially approved position of the Commission; or (2) <u>when the legislation advances an informal or emerging position of the Commission after consultation with the Chair and Vice Chair</u> at the direction of the Chair and when the legislation furthers the interest of the Commission.</p> <p>C. The Executive Director shall give an update of all advocacy efforts, <u>except confidential budget proposals</u>, taken on behalf of the Commission at the next Commission meeting following the advocacy efforts.</p> <p>December 2020 Recommendations: Keep the original language of paragraph B (2) which was proposed to be revised in January and add the following language to paragraph B to read:</p> <p>B. The Executive Director, or the Executive Director’s designee, is authorized on behalf of the Commission to advocate on legislation: (1) when the legislation advances a formally established position of the Commission; (2) at the direction of the Chair and when the legislation furthers the interest of the Commission; <u>or (3) after full discussion with and at the direction from the full Commission.</u></p>

Table 10: Rule 2.5 Authority to Advocate on Legislation

Public Comment Summary	Response
<p>#1: CASRA in its March 1, 2020 letter states it would support the change to allow the Executive Director to advocate on “informal or emerging positions” at the Legislature if the Commission adopts a statement of values and principles to guide any such position.</p>	<p>Response to Comment #1 CASRA:</p> <ul style="list-style-type: none"> • See the recommendation above that removes the proposal authorizing the Executive Director to advocate on “informal or emerging positions.”
<p>#2: PEERS in its April 3, 2020 letter states it does not support the change because:</p> <ul style="list-style-type: none"> • “Increasing” Executive Director’s authority to advocate on legislation when “legislation advances an informal or emerging position after consultation with only the Chair and Vice Chair disempowers other members of the Commission...decreases transparency, and eliminates the public’s opportunity to comment on these positions.” 	<p>Response to Comment #2 PEERS:</p> <ul style="list-style-type: none"> • Same response as to Comment #1
<p>#3: NAMI in its May 5, 2020 letter states it opposes the change because:</p> <ul style="list-style-type: none"> • Allowing the Executive Director authority to advocate on legislation without prior vetting by stakeholders lacks the value of transparency that the Commission holds as a top priority. 	<p>Response to Comment #3 NAMI:</p> <ul style="list-style-type: none"> • Same response as to Comment #1
<p>#4: REMHDCO in its undated letter states it opposes the change because:</p> <ul style="list-style-type: none"> • “There should not be advocacy allowed by MHSOAC staff unless the public is allowed to comment on the legislation before the full Commission and the Commission votes on the legislation. It is not sufficient that only the Chair and Vice Chair are consulted.” • In addition, REMHDCO opposes the addition of the language regarding “confidential budget proposal” stating, that the Executive Director “should not be commenting on budget proposals (e.g. WET funding) without Commission approval and 	<p>Response to Comment #4 REMHDCO:</p> <ul style="list-style-type: none"> • Same response as to Comment #1 • The proposed change to this rule regarding confidential budget proposal is required to comply with orders from the Department of Finance. Budget proposals are considered integral part of the Governor’s deliberation process and state agencies are required to keep them confidential until and unless the Governor releases the proposal to the Legislature as part of the Governor’s budget. Once the Governor releases the Governor’s budget that includes the specific budget proposal the proposal is no longer confidential.

Table 10: Rule 2.5 Authority to Advocate on Legislation

<p>the Executive Director should give an update on all of his/her advocacy efforts.”</p>	<ul style="list-style-type: none"> • Current Rule 2.5 already requires the Executive Director to give an update on all advocacy efforts at the next Commission meeting following the advocacy efforts.
<p>#5: CalVoices in its September 11, 2020 letter states it opposes the proposed changes that allow the Executive Director to advocate on legislation that the Commission has not publicly and officially adopted a position because:</p> <ul style="list-style-type: none"> • It “contravenes the Bagley-Keene Act” because the “public has a right to participate and public comment in all decisions of the Commission.” • The law mandates a diverse Commission of 16 appointed members to make formal decisions with public input. The Executive Director’s role is to assist the Commission in accomplishing their formal positions, not in establishing his or her own positions.” • Delete the exception for confidential budget proposals unless they are exempt from the Bagley-Keene Act. 	<p>Response to Comment #5 CalVoices:</p> <ul style="list-style-type: none"> • Same response as to Comment #1 • See response in Table 9 regarding the Bagley-Keene Act not limiting the role of staff to represent and implement the decisions of the state body. • The Bagley-Keene Act exempts disclosure of information that is exempted by the Public Records Act (Gov Code §11125.1). Budget proposals fit under several sections of the Public Records Act §6254, which exempts disclosure of information that is protected under federal or state law, correspondence to Governor or employees of the Governor, and draft interagency memorandum. Budget proposals are considered draft interagency memorandum until and unless the Governor releases the proposal to the Legislature as part of the Governor’s budget.

Table 11: Rule 2.6 Authority to Approve Innovation Projects

<p>January 2020 Proposal & December 2020 Recommendation</p>
<p>The January amendments propose to amend Rule 2.6 to incorporate the language the Commission adopted at the May 2019 meeting. The only changes to the May 2019 version proposed in January 2020 is to paragraph B to read:</p> <p>B. The Executive Director shall publicly report to the Commission <u>at the next Commission meeting</u> at the first available opportunity any county Innovation plan approved by the Executive Director on behalf of the Commission under this delegated authority.</p> <p>December 2020 Recommendations: No change to the January 2020 proposal</p>

Table 11: Rule 2.6 Authority to Approve Innovation Projects

Public Comment Summary	Response
<p>#1: REMHDCO in its undated letter states it opposes Rule 2.6 because:</p> <ul style="list-style-type: none"> • “This ‘secret approval’ does not allow community stakeholders from individual counties the opportunity to comment on their county’s Innovation Plan.” • Commissioners and public stakeholders should be allowed to be aware of and comment on programs or program changes of \$1,000,000. • “Innovation Programs were not supposed to be considered ‘innovative’ if they were being implemented or administered in another county (unless there was a substantial difference in the new proposed plan.)” 	<p>Response to Comment #1 REMHDCO:</p> <ul style="list-style-type: none"> • Community stakeholders from individual counties and from state level advocacy groups have multiple opportunities to comment on individual county Innovation plans. <ul style="list-style-type: none"> ○ First, under the MHSA and regulations counties are required to engage community stakeholders in a local program planning process (CPP). ○ Second, the Innovation plan is required to go through a 30-day public comment period at the local level. ○ Third, the Innovation plan is required to be reviewed at a hearing before the local mental health board and another hearing at the county Board of Supervisors. By the time the Innovation plan is presented to the Commission local community stakeholders have had months and sometimes years to review and comment on it. ○ Fourth, the Commission sends each Innovation plan to its stakeholder contractors and on its listserv twice for public comment: once when the Innovation plan is in draft and/or going through the local 30-day public comment period and a second time when the Innovation plan is final and submitted to the Commission for approval. • Neither the MHSA nor the Innovation regulations prohibit multiple counties from piloting an Innovation project. Under the Innovation regulations, projects are not eligible for Innovation funding if the approach has “already demonstrated its effectiveness.” (9 CCR Section 3910)

Table 11: Rule 2.6 Authority to Approve Innovation Projects

<p>#2: CalVoices in its September 11, 2020 letter states it opposes Rule 2.6 because:</p> <ul style="list-style-type: none"> • The MHSAs requires community collaboration and meaningful stakeholder input. Approval of any MHSAs spending without public discourse and stakeholder input runs contrary to the MHSAs. • Key statutory role of the Commission is approval of Innovation plans. The MHSAs requires diverse Commission made up of 16 members with varied knowledge and different perspective. The decision making should not be delegated to a single person, especially one who is not a Commissioner. 	<p>Response to Comment #2 CalVoices:</p> <ul style="list-style-type: none"> • Same response as to Comment #1 • The rule provides for a joint delegation to the Chair and the Executive Director. Contrary to the comment, the rule does not delegate to a single person who is not a Commissioner. The Chair, who was elected by the Commission, as chair, is required to consent to the Innovation approval.
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Table 12: Rule 4.3 Open Meeting

January 2020 Proposal & December 2020 Recommendation	
<p>The January amendments propose clarifying language and consolidates two rules into Rule 4.3. The relevant language is as follows:</p> <p>A. <u>Commission meetings are subject to the Bagley-Keene Open Meeting Act set forth in Government Code Sections 11120 et seq.</u> The principal law that governs the meetings of the MHSOAC and its Committees is the Bagley-Keene Open Meeting Act which is set forth in Government Code Section 11120 et seq.</p> <p>December 2020 Recommendation: No change to the January 2020 proposal</p>	
Public Comment Summary	Response
<p>#1: REMHDCO in its undated letter propose additional language to Rule 4.3 because it claims that the Commission “has sponsored events that included all Commissioners but was “invitation only” to the public and allowed only a limited number of public members chosen by staff to attend. The letter proposes the following new paragraph:</p>	<p>Response to Comment #1 REMHDCO:</p> <ul style="list-style-type: none"> • The rules were re-organized and the new Rule 6.2 specifically provides that meetings of a committee, subcommittee and multi-member body are subject to the Bagley-Keene Open Meeting Act.

<p>“All committee meetings of the MHSOAC whether those of a standing committee, special project, or ad-hoc committee are also subject to the Bagley-Keen (sic) Open Meeting Act. The MHSOAC shall not sponsor “invitation only” events that limit participation by public members to those chosen by the MHSOAC staff.”</p>	<ul style="list-style-type: none"> • The comment does not provide specific information about the “invitation only” event, however, the Commission follows the Bagley-Keene Act, which permits such events under specified circumstances. For example, the Innovation Fest at the Google campus was permitted under the Bagley-Keene Act because it was not a meeting as defined by the Act because less than a majority of Commissioners were present. (Govt. Code §11122.5)
<p>#2: CalVoices in its September 11, 2020 letter “proposes additions to Rule 4.3 to comply with law” because it contends that in the past the Commission has hosted meetings which included Commissioners, but were “invitation only” to the public. The example cited is the meeting at Google to discuss the Innovation Incubator. The proposed language is:</p> <p>“A meeting occurs when a quorum of a body convenes, either serially or all together, in one place, to address issues under the body’s jurisdiction. (§11122.5.) Obviously, a meeting would include a gathering where members were debating issues or voting on them. But a meeting also includes situations in which the body is merely receiving information. To the extent that a body received information under circumstances where the public is deprived of the opportunity to monitor the information provided, and either agree with it or challenge it, the open-meeting process is deficient.”</p>	<p>Response to Comment #2 CalVoices:</p> <ul style="list-style-type: none"> • Same response as to Comment #1

Table 13: Rule 4.4 Agenda Items

January 2020 Proposal & December 2020 Recommendation	
<p>The January amendments propose to delete the following paragraph from Rule 4.4:</p> <p>“Staff prepares briefing materials on each agenda item and provides Commissioners with those materials in advance of the meeting. These materials provide Commissioners with a detailed description of a proposed course of action, background information, fiscal impact, the pros and cons of taking the action, and similar information for alternative actions.”</p> <p>December 2020 Recommendation: Do not delete the language</p>	
Public Comment Summary	Response
<p>#1: CalVoices in its September 11, 2020 letter states it opposes the deletion of the paragraph because there is no reason to remove the language and the Commissioners should receive meeting materials in advance of the meeting including all the items in the paragraph.</p>	<p>Response to Comment #1 CalVoices:</p> <ul style="list-style-type: none"> • See the recommendation above.

Table 14: Rule 4.5 Request for Items to be Placed on the Agenda

January 2020 Proposal & December 2020 Recommendation
<p>The January amendments propose the following changes to Rule 4.5:</p> <ul style="list-style-type: none"> A. <u>Agenda items are placed on the Commission’s meeting agenda with the approval of the Chair and Executive Director. The final meeting agenda is approved by the Chair and the Executive Director after consultation with the Chief Counsel.</u> B. <u>Individual Commissioners wishing to place items on the agenda should contact the Chair or the Executive Director.</u> C. <u>Members of the public wishing to place items on the agenda should contact Commission staff.</u>

Table 14: Rule 4.5 Request for Items to be Placed on the Agenda

<p>Agenda items shall only be placed on the Commission’s agenda at the request of (1) a Committee of the MHSOAC; (2) a member of the MHSOAC; or (3) MHSOAC staff with the approval of the Executive Director. Members of the public wishing to place items on the agenda must go through one of the above.</p> <p>Before agenda and meeting packets are finalized, they shall be reviewed by the Chair of the Commission, the Executive Director, Chief Counsel. The Chair of the Commission, the Executive Director, and the Operations Committee shall work together to develop and set the Commission agenda.</p> <p>December 2020 Recommendation: No changes to the January 2020 proposal</p>	
Public Comment Summary	Response
<p>#1: REMHDCO in its undated letter opposes the change and argues that:</p> <ul style="list-style-type: none"> • A committee of the MHSOAC should be able to request that an item be put on the agenda. • A member of the public should be able to go to either any Commissioner or Commission staff (not just Commission staff) in order to get something placed on the agenda 	<p>Response to Comment #1 REMHDCO:</p> <ul style="list-style-type: none"> • The rule does not change the public’s access to the Commissioners, including the Chair. A committee member or a member of the public can still contact any Commissioner with a request.
<p>#2: CalVoices in its September 11, 2020 letter states it opposes the language change contending:</p> <ul style="list-style-type: none"> • The 16 member Commission should be responsible for determining the agenda items that Commission wishes to discuss. The role of the Executive Director should not be to determine agenda items, it should be to assist the 16 member Commission in reaching its own goals. • The public should be able to propose agenda items to be allowed or disallowed with a decision made by the full 16 member Commission because WIC 5846(d) requires the Commission to ensure the perspective and participation of diverse community members is a significant factor in all its decisions and recommendations. 	<p>Response to Comment #2 CalVoices:</p> <ul style="list-style-type: none"> • Same response as to Comment #1 • Per Rules of Procedure, Rule 1.3B, the Chair, who is elected by the Commission, is the person who sets the agenda with input from Commissioners and staff. The Commission elects a Chair to take on certain responsibilities, including setting the agenda. This rule is consistent with Rule 1.3B. • It is unreasonable and inefficient to require the full Commission to decide on whether an item should be placed on the meeting agenda. The time spent on such deliberations could instead be spent on priorities, such as strategies to reduce disparities or improve outcomes for individuals with mental health needs.

Table 15: Rule 4.11 Quorum

January 2020 Proposal & December 2020 Recommendation	
<p>The January amendments proposed the following changes to Rule 4.11:</p> <ul style="list-style-type: none"> A. A simple majority <u>of the Commission’s statutory membership</u> shall constitute a quorum for the transaction of business. <u>The Commission’s statutory membership is 16 members making nine members a quorum. A majority of the quorum (i.e. five members) may act to bind the Commission.</u> B. <u>A meeting at which a quorum is initially present may continue, notwithstanding the withdrawal of Commissioners and the absence of a quorum. The only action that may be taken in the absence of a quorum is to fix the time in which to adjourn, recess, or take measures to obtain a quorum.</u> <p>Every act or decision done or made by a majority of the Commissioners present at the meeting duly held at which a quorum is present, shall be regarded as binding. A meeting at which a quorum is initially present may continue to transact business, notwithstanding the withdrawal of Commissioners below a quorum, if any action taken is approved by at least a majority of the required quorum for the meeting.</p> <p>December 2020 Recommendation: Add the following clarify language:</p> <ul style="list-style-type: none"> A. A simple majority of the Commission’s statutory membership shall constitute a quorum for the transaction of business. The Commission’s statutory membership is 16 members making nine members a quorum. <u>When a quorum is present, a simple majority of those present and voting may act to bind the Commission.</u> B. A meeting at which a quorum is initially present may continue, notwithstanding the withdrawal of Commissioners and the absence of a quorum. The only action that may be taken in the absence of a quorum is to fix the time to adjourn, recess, or take measures to obtain a quorum. 	
Public Comment Summary	Response
<p>#1: REMHDCO in its undated letter states it supports the new rule.</p>	<p>In response to Commissioners’ discussion at the January 2020 meeting staff recommends the above clarifying language.</p>

Table 16: Rule 4.12 Voting

January 2020 Proposal & December 2020 Recommendation	
<p>The January amendments propose the following relevant changes to Rule 4.12:</p> <p>The following paragraph D was proposed to be added:</p> <p><u>“D. Prior to voting on a policy project report, the Commission shall consider the report in at least one meeting prior to the meeting at which the motion to approve is considered. This requirement shall not apply if the report was previously discussed in a public meeting of a Commission subcommittee and the subcommittee recommended Commission adoption of the report.”</u></p> <p>The following paragraphs were proposed to be deleted:</p> <p>“Any proposed policy item on the agenda, along with its corresponding language/documents, shall be presented for discussion at a Commission meeting at least one (1) meeting prior to the meeting at which the vote on the issue is taken.</p> <p>The Commission may take action, by a simple majority, on an agenda item at the same meeting that the item is presented if the Commission deems that there exists a need to take action.”</p> <p>December 2020 Recommendation: Revise paragraph D of Rule 4.12 by deleting the last sentence and adding two new paragraphs as follows:</p> <p>D. Prior to voting on a policy project report, the Commission shall consider the report in at least one meeting prior to the meeting at which the motion to approve is considered. This requirement shall not apply if the report was previously discussed in a public meeting of a Commission subcommittee and the subcommittee recommended Commission adoption of the report.</p> <p>E. <u>Approval of a policy project report by a subcommittee of the Commission constitutes the “first reading” of a policy project report.</u></p> <p>F. <u>The Commission may determine that the timely release of a policy project report is in the public interest and may vote to suspend this rule in order to approve a policy report in a single meeting.</u></p>	
Public Comment Summary	Response
<p>#1: REMHDCO in its undated letter states it opposes the new paragraph especially the second sentence and opposes the deletion of the first paragraph. The letter contends that:</p>	<p>Response to Comment #1 REMHDCO:</p> <ul style="list-style-type: none"> The term, “policy item” is too vague and ambiguous and could result in every agenda item requiring at least one meeting prior

Table 16: Rule 4.12 Voting

<ul style="list-style-type: none"> • Any policy item and not just policy project report should be subject to at least one meeting prior to the meeting at which it is voted. • Subcommittee meetings are not sufficient because some Subcommittee meetings have been held in places that are not easily accessible to a large number of members of the public and state level advocates (e.g. Redding, Riverside, Monterey). 	<p>to the meeting at which the motion to approve is considered (first and second read).</p> <ul style="list-style-type: none"> • Subcommittee meetings are held in different regions of California to give local stakeholders, a majority of whom cannot travel to Sacramento, the opportunity to provide input to the Commission’s work.
<p>#2: CalVoices in its September 11, 2020 letter states it opposes the language change because:</p> <ul style="list-style-type: none"> • “All” items, not just “policy” items unless “truly urgent” should be presented during at least two Commission meetings to allow for full discussion and public input. • The change limits the role of the 16 member Commission by leaving them out of valuable discussion and public input. Under WIC 5846(d) which requires the Commission to ensure the perspective and participation of diverse community members is a significant factor in all if its decision, requires the 16 member Commission hear the public comment and incorporate it into their decision. • Client stakeholders have transportation barriers which limit their travel to OAC subcommittee meetings. Discussion at subcommittees should not take the place of public discussion at two meetings of the full 16 member Commission. 	<p>Response to Comment #2 CalVoices:</p> <ul style="list-style-type: none"> • Same response as to Comment #1 • It is not reasonable for “all” items to be discussed at two Commission meetings. The proposed changes to the rule do not limit the role of the Commission nor limit consideration of public comment from diverse communities. The Commission can and does have valuable discussion in a single meeting in which it considers the public input.

Table 17: Rule 4.13 Public Comment

January 2020 Proposal & December 2020 Recommendation	
<p>The January amendment proposes the following relevant change to Rule 4.13:</p> <p>The following paragraph is proposed to be deleted:</p> <p>It is the policy of the Commission to vet issues as much as practical through the MHSOAC standing committees before those issues are brought to the full Commission. It is the responsibility of the committee chair to engage stakeholder participation at the committee level and to report back to the full Commission. Public comment and stakeholder involvement at the committee level does not replace public comment at the Commission meeting.</p> <p>The following changes were proposed to paragraph B:</p> <p>B. If the agenda item has already been considered by a <u>subcommittee or</u> committee composed exclusively of members of the Commission at a public meeting where interested members of the public were afforded the opportunity to address the <u>subcommittee or</u> committee on the item, additional public comment opportunity at the Commission need not be provided unless the item has been substantially changed since the <u>subcommittee or</u> committee heard the item (Government Code Section 11125.7)</p> <p>December 2020 Recommendation: No change to the January 2020 proposal</p>	
Public Comment Summary	Response
<p>#1: CASRA in its March 1, 2020 letter states it opposes the paragraph B that allows the Commission to vote on an agenda item without public comment (if that item was considered at a prior committee meeting) because:</p> <ul style="list-style-type: none"> There are serious challenges to stakeholder involvement in decision-making and stakeholders should be offered the opportunity to comment prior to any vote on a substantive issue. 	<p>Response to Comment #1CASRA:</p> <ul style="list-style-type: none"> Paragraph B in Rule 4.13 conforms to the Bagley-Keene Open Meeting Act. The rationale for this provision of the Bagley-Keene Act is that the public had an opportunity to comment on the issue and the issue was not substantially changed therefore there was nothing new to comment on.

Table 17: Rule 4.13 Public Comment

<p>#2: REMHDCO in its undated letter states it opposes the deletion of the paragraph because:</p> <ul style="list-style-type: none"> • The deleted language reflects the “heart and soul of the MHSA stakeholder engagement and participation in all the Commission activities and decisions.” • The standing committees served as a place for important issues to be discussed in dialogue with Commissioners instead of 2-3 minute one-way public comments at the Commission meetings. Removing the language removes the underlying protection for meaningful stakeholder involvement with the MHSOAC. 	<p>Response to Comment #2 REMHDCO:</p> <ul style="list-style-type: none"> • Committee discussion is important, but it is not sufficient for meaningful stakeholder engagement in Commission decisions. The January 2020 version proposes a new rule, Rule 5.1 that provides much broader and more inclusive strategies of public outreach and engagement, which includes committee meetings as well as community forums and listening sessions, etc.
<p>#3: CalVoices in its September 11, 2020 letter states it opposes the language in paragraph B because:</p> <ul style="list-style-type: none"> • The change limits the role of the 16 member Commission by leaving them out of valuable discussion and public input. Under WIC 5846(d) which requires the Commission to ensure the perspective and participation of diverse community members is a significant factor in all its decision, requires the 16 member Commission hear the public comment and incorporate it into their decision. • The proposed changes to paragraph B to add, “subcommittee” is not in accordance with Government Code 11125.7 because the Government Code uses the term “committee” only. • The deleted text should remain a foundation of the Commission’s procedure. Public comment and stakeholder involvement at the committee level should provide an additional level of public comment but not lessen the amount of public comment at the 16 member Commission meeting. 	<p>Response to Comment #3 CalVoices:</p> <ul style="list-style-type: none"> • Same response as for Comment #1 and the same responses to the comments on Rule 4.12. • The key operative part of section Government Code section 11125.7 is that the subgroup is “composed exclusively by members” of the state body. The label on the multi-member group is not dispositive. The dispositive component is that the group is composed exclusively by Commissioners, which under this rule it is.

Table 18: Rule 5.1 Public Outreach and Engagement

January 2020 Proposal & December 2020 Recommendation

The January amendments proposed to add a new Rule 5.1 to read as follows:

The Commission seeks to ensure the perspective and participation of diverse community members and others with mental health challenges and their families are a significant factor in the Commission’s decisions and recommendations. The Commission ensures this through:

- Public hearings that have open, informed, and transparent deliberation
- Committee and subcommittee meetings that hear from community members and other subject matter experts to develop a shared understanding of the challenges and opportunities of topics specified by the Commission
- Community forums and listening sessions that are organized to highlight and understand topics specified by the Commission
- Site visits that are organized to acquire first-hand knowledge and understanding of the challenges of specific topics and the existing efforts to address those challenges.

December 2020 Recommendation: Revise the language to read:

“The Commission ~~seeks~~ is committed to ensure the perspective and participation of diverse community members – those with lived experiences and their family members, community and advocacy organizations, county behavioral health agencies - ~~and others with mental health challenges and their families~~ are a significant factor in the Commission’s understanding, actions, decisions and recommendations. The Commission ensures broad and inclusive community outreach and engagement through the following actions and other opportunities that may be identified going forward:

- Public ~~hearings~~ meetings that have with open, informed, and transparent deliberation
- Committee and subcommittee meetings that hear from community members and other subject matter experts to develop a shared understanding of the challenges and opportunities of topics specified by the Commission
- Community forums that are organized to highlight and understand topics specified by the Commission and of concern to the community
- Small group listening sessions to hear from individuals with lived experience on sensitive topics
- Site visits that are organized to acquire first-hand knowledge and understanding of the challenges of specific topics and the existing efforts to address those challenges
- Convening advisory bodies with expertise on topics specified by the Commission
- Meetings with community-based organizations and local leaders
- Use of surveys

Table 18: Rule 5.1 Public Outreach and Engagement

Public Comment Summary	Response
<p>#1 REMHDCO in its undated letter proposes adding the following additional language: “Testimony from state level mental health advocates, including recipients of stakeholder advocacy grants administered by the MHSOAC, who are encouraged to attend all Commission meetings to give voice to their respective communities.”</p>	<p>Response to Comment #1 REMHDCO:</p> <ul style="list-style-type: none"> The language proposed by the comment is already covered in the Rule.
<p>#2: CalVoices in its September 11, 2020 letter states it would support this rule with the following changes:</p> <ul style="list-style-type: none"> Replacing “the Commission’s” with, “all of its” referring to the Commission’s decisions in the first sentence Replacing the word, “hearing” with the word, “meeting” in the first bullet. 	<p>Response to Comment #2 CalVoices:</p> <ul style="list-style-type: none"> See the above recommendations

Table 19: Rule 6.1 Committee/Subcommittee/Other Multi-member Body Structure

January 2020 Proposal & December 2020 Recommendation
<p>The January amendments propose the following relevant changes to Rule 6.1:</p> <p>A. The MHSOAC <u>Commission shall may</u> establish one or more standing committees as necessary to provide technical and professional expertise pursuant to Welfare and Institutions Code Section 5845(d)(3) ...</p> <p>A.2. Ideally Each standing committee shall have a maximum of 15 members and shall may include public membership. <u>Public membership of each committee shall be selected by the committee Chair and Vice Chair for a one-year term. Of this public membership, the committee Chair and Vice Chair shall seek individuals with the desired expertise who are consumers, family members or care givers of consumers, and members of underserved ethnic and cultural communities. at least two shall be consumers, at least two shall be family members or care givers of consumers, and at least two shall be members of underserved ethnic and cultural communities. Public membership of each committee shall be selected by the committee Chair and Vice Chair.</u> In their recruitment and appointment of committee members,</p>

Table 19: Rule 6.1 Committee/Subcommittee/Other Multi-member Body Structure

committee Chair and Vice Chair shall pay special attention to issues related to cultural diversity and competency and the needed expertise to support the committee’s goals. Commission staff and/or consultants will staff each committee.

December 2020 Recommendation: Change paragraph 2A to read:

A.2. “Each committee should have a maximum of 15 members. The committee chair and vice chair select committee members who have the desired expertise and experiences to advance the committee’s goals. Committee members serve a one-year term unless that term is extended by the appointing authority. Each committee should include at least two consumers, two family members or care givers of consumers, and two experts on reducing disparities. The Commission shall strive to ensure committee membership reflects the demographic diversity, including race, ethnicity, sexual orientation, and gender identity of California; the geographic diversity of California; and includes members with lived experience with mental health and/or the mental health system of care.”

Public Comment Summary	Response
<p>#1: CASRA in its March 1, 2020 letter states it oppose the changes to paragraphs A and A.2.</p> <ul style="list-style-type: none"> • Comment on paragraph A: CASRA states it does not support the removal of the requirement of the Commission to establish committees because it believes a robust committee structure is the key to ensuring that policy issues and decision are made based on full exploration and discussion of the topic. • Comment on paragraph A.2A, CASRA states: <ul style="list-style-type: none"> ○ it does not support the removal of the requirement for public members to be appointed to Commission committees stating the MHSA is very explicit about the need for government to collaborate and consult with community stakeholders and the most effective strategy to support such involvement is through participation in committees. ○ it opposes the removal of the requirement for consumers, family members, and members of racial, ethnic and cultural communities be appointed to committees because it is imperative that a significant effort be made to include representatives of these constituencies. The letter 	<p>Response to Comment #1 CASRA:</p> <ul style="list-style-type: none"> • The change in paragraph A from “shall” to “may” conforms with the language in WIC 5845(d)(3) which authorizes the Commission to establish committees but does not require it. Committees are one of many effective means to ensure policy issues and decisions are made based on full exploration and discussion. The Commission is committed to support community stakeholder involvement and the new Rule 5.1 specifies all the many ways the Commission ensures robust stakeholder involvement, including committee meetings and public membership in committees. • The Commission is committed to broad, diverse, and inclusive engagement and consultation with community stakeholders. The Commission collaborates and consults with community stakeholders in many ways: Committee membership is only one of those ways. One of the most effective ways to engage and obtain community input is to go to the community. In addition, to having committee meetings, the Commission is engaging with consumers, family members, and members of racial, ethnic and

Table 19: Rule 6.1 Committee/Subcommittee/Other Multi-member Body Structure

<p>acknowledges that it is sometimes very difficult as many potential participants do not have the time and/or support to attend meetings.</p>	<p>cultural communities through focus groups, community forums, site visits, and listening sessions in their communities.</p> <ul style="list-style-type: none"> • See the above recommendation regarding the committee membership including consumers, family members, and members of diverse racial, ethnic and cultural communities.
<p>#2: PEERS in its April 3, 2020 letter states it opposes the changes to both paragraphs A and A.2.</p> <ul style="list-style-type: none"> • Comment on paragraph A: PEERS states that eliminating the requirement to establish committees reduces opportunities for the public to influence the Commission’s decisions. The letter also states that PEERS believes the involvement of a wide range of stakeholders increases the quality of decision making and committee meetings that allow for an open exchange of ideas is an important mechanism for increasing the quality of decisions. • Comment on paragraph A2: PEERS states the removing of the requirement for public membership and the requirement of at least two consumers, at least two family members or caregivers, and at least two members of underserved ethnic and cultural communities is a major step backwards in the MHSA promise of transforming California’s mental health system to one that supports the wellness, recovery, and resilience of all Californians 	<p>Response to Comment #2 PEERS:</p> <ul style="list-style-type: none"> • Same response as to Comment #1
<p>#3: NAMI in its May 5, 2020 letter states it opposes the changes to both paragraphs A and A.2:</p> <ul style="list-style-type: none"> • Comment on paragraph A: NAMI states that this change will reduce public participation and transparency. The letter states NAMI is concerned that it will reduce opportunities for stakeholders to provide timely input to the Commission staff and members. The letter further states that committees play an important function to any board or commission and participants are able to lend important expertise in a more rich and meaningful way than what is usually afforded during “public comment” periods at formal commission meetings. 	<p>Response to Comment #3 NAMI:</p> <ul style="list-style-type: none"> • Same response as to Comment #1 • The rule does not change the access to staff or to Commissioners. The Commission has expanded the opportunities for stakeholders to provide timely input through the changes reflected in the new Rule 5.1 that expands the types of strategies the Commission is using to obtain input including community forums, listening sessions, site visits in addition to committee meetings. • People with lived experiences come from all walks of life. Mental health needs touches people from every profession, every social-economic background, every age, and every education level.

Table 19: Rule 6.1 Committee/Subcommittee/Other Multi-member Body Structure

<ul style="list-style-type: none"> • Comment on paragraph A.2: NAMI states in its letter that requiring “needed expertise” “devalues the expertise and contributions that can be made from people with lived experience who may not possess formal education, training, or degrees in the behavioral health field.” 	<p>Having committee members who have the desired expertise for the committee acknowledges this important fact and helps reduce stigma associated with mental illness. The desired expertise will defer with the committee.</p>
<p>#4: REMHDCO in its undated letter states it opposes the changes to both paragraphs A and A2.</p> <ul style="list-style-type: none"> • Comment on paragraph A: The letter contends the most effective way for the Commission to engage community stakeholders is through regular and ad-hoc committee meetings that allow robust and open dialogue with knowledgeable and diverse stakeholders. • Comment on paragraph A.2: The letter contends that the MHSA is very explicit about being consumer and family driven and for government to collaborate and consult with community stakeholders. It further states that having a committee with no community members is not in line with the most important principles of the MHSA and is like having a recovery team without having the consumer or family member on it. As to the minimum number of consumers, family members, members of underserved racial and cultural communities was instituted as a safeguard to ensure the work and decisions of the committee would be consumer and family driven and culturally competent. 	<p>Response to Comment #4 REMHDCO:</p> <ul style="list-style-type: none"> • Same response as to Comments #1 and #3
<p>#5: CalVoices in its September 11, 2020 letter opposes the changes to paragraph A.2, stating:</p> <ul style="list-style-type: none"> • The MHSA requires 16 member Commission to accomplish a lot of work on a volunteer basis and for this reason the committees comprised of the public and commissioners have historically been highly utilized by the Commission to assist the Commission meet 	<p>Response to Comment #5 CalVoices:</p> <ul style="list-style-type: none"> • Same response as to Comments #1 and #3

Table 19: Rule 6.1 Committee/Subcommittee/Other Multi-member Body Structure

<p>its goals. Public members have the unique expertise and time to commit to meetings.</p> <ul style="list-style-type: none">• Committees are an effective way for the Commission to engage a broad range of community stakeholders• The requirement for specific committee membership ensures committees are client and family driven and culturally competent in accordance with the MHSA General Standards (9 CCR §3320)	
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