



BHA Advisory Council

August 18, 2022



1



Welcome & Overview

2



What is the BHA?

The Behavioral Health Administration (BHA) is a new cabinet member-led agency within the State of Colorado, housed within the Department of Human Services and is designed to be the single entity responsible for driving coordination and collaboration across state agencies to address behavioral health needs.

3



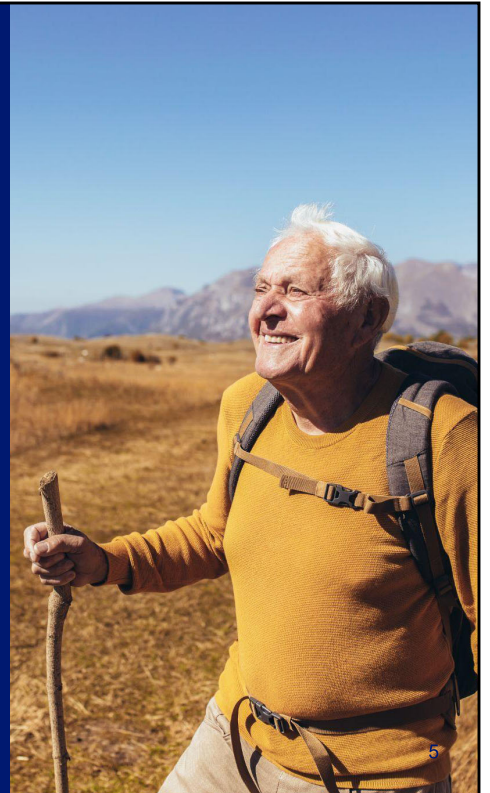
Because we believe all people in Colorado deserve to experience whole-person health, we envision a world in which behavioral health services in Colorado are accessible, meaningful, and trusted. Therefore we have made it our mission to co-create a people-first behavioral health system that meets the needs of *all* people in Colorado.



Behavioral Health for the People

The people of Colorado called for this vision and the BHA was conceived by the community.

5



Community Partnership

Together, we will do the important work of being innovative change-makers, setting a new standard for comprehensive, equitable, and effective behavioral health care across our state.

6



Public Comment

7



Housekeeping Items

- All Council Members are able to unmute; please raise hand to be acknowledged
- Prior to speaking, please identify yourself
- Chat feature is open for all attendees - however, substantive comments/questions may not be addressed in real time
 - Council will determine how to address any public comments/questions we do not get to today
- Recording is in progress for note-taking purposes and for any Council Members not in attendance
- All future meeting dates, agendas, and minutes will be posted to the BHA website
- Any questions or comments regarding the Council or BHA can be submitted via the "Contact Us" section of the BHA website

Agenda

Meeting Agenda	
Welcome and Overview	10 minutes
Member Introductions	10 minutes
Group Agreements	10 minutes
BHAAC Context & Vision	15 minutes
Council Business	
Year 1 Priorities Vision for the future of BHAAC	45 minutes
Briefing from the Commissioner	25 minutes
Vote & Closing Activity	5 minutes



Council Member Introductions

Name, Pronouns, Role & Affiliations



Additional Membership

Judicial Branch (1 seat): To be selected in consultation with the State Court Administrator's Office

11



Baseline Group Agreements

- Listen and engage respectfully
- Differences of opinion are natural and useful
- Have an open mind, be curious and be bold
- Everyone has equal voice and valuable contribution - take space, make space
- Keep to time and agenda, start and end meetings on time

What Else?



BHAAC Role & Requirements

What is the role of BHAAC?

- Make recommendations to the Commissioner and the State Board of Human Services to improve the behavioral health system for children, youth, and adults throughout Colorado
- Ensure that the BHA is guided by the “lived experiences” of people within the behavioral health community
- BHAAC as a reflection of the demographic and geographic populations of this state, including:
 - Rural communities
 - Tribal governments
 - Counties
 - Persons with disabilities
 - Racial and ethnic diversity
 - LGBTQIA+ community
 - Judicial branch
 - Safety net providers
 - Children & youth expertise
 - Criminal justice involvement
 - Populations with health disparities



What is the role of BHAAC?

Primary Duties in Statute:

- 1) Provide diverse community input on challenges, gaps, and potential solutions to inform the BHA's vision and strategic plan
- 2) Establish working groups to support the BHA in problem solving and developing solutions [focused on topics of need as determined by the Council in collaboration with the BHA]
- 3) Ensure there is public accountability and transparency through reviewing the BHA's public-facing transparency activities, including performance data



What is the role of BHAAC?

- The Council will receive routine briefings from the Commissioner on the progress of the BHA and behavioral health reform efforts to ensure accountability and transparency
- The Council will prepare an annual report of recommendations and submit it to the BHA by September 1 of each year - Council report will be included in the BHA's annual report to the General Assembly



What is the role of BHAAC?

In Collaboration with others:

- Help establish and routinely assess what types of behavioral health services are provided on a community, regional, and statewide basis
- Assist in identifying underserved populations
- Help develop a process for addressing individual grievances when traditional grievance programs fail
- Advise on minimum performance standards for behavioral health providers and behavioral health administrative services organizations



Council Business & Priorities

1. Governance

Bylaw Development - Key Features:

Needed Bylaw Sections	Details
Creation	Statutory citation (could include how appointments are made, membership, and duties)
Organization	Officers, committees, meetings, quorum, compensation
Procedures and Rules of Order	Who presides, agenda, minutes, votes
General Policies	Act only by resolution at a duly called meeting (no individual member shall exercise individually administrative authority), no individual policy statements, conflict of interest
Administrative Directives	BHA staff attendance, Council administrator, Minutes/posting, Process for keeping Council informed, Calendar
Bylaws	How to amend, bylaw copy distribution, effective date

Suggested Timeline: Complete by end of 2nd Meeting

Approach: Identify a group to focus on Governance/Bylaw development; elect co-chair from this group



19

2. Public Engagement & Guidance Development

- Establish guidance for engaging with the public, including:
 - Participation in Council meetings (e.g. public testimony, addressing chat, any parameters, etc)
 - Receiving and responding to proposed agenda items, comments or questions in writing
- Examples from other boards; weighing requirements vs values of transparency and accountability

Suggested Timeline: Complete by end of 2nd Meeting

Approach: Identify a group to focus on guidance development (same as bylaws group?); revisit and update annually



20

3. Meeting Schedule and Timing

- For both the full Council and working groups: Establish meeting cadence and structure, including frequency, format/location, timing, length, and considerations to meet the needs of all Members
- Considerations:
 - Virtual vs In Person
 - Accommodating different schedules: rotating meeting times for each Council meeting (e.g. 9-5, after 5, weekends)
 - Establish working groups & meeting schedule, which also need to be public

Suggested Timeline: Complete by end of 1st / 2nd Meeting

Approach: Establish through bylaws groups; Consider Council meeting bi-monthly; poll for dates/times



21

4. Working Groups & Relationship to Existing Groups

- Working Groups vs Committees (vs. Relationship/Communication)
 - Council authority to create **workgroups** focused on **topics of need**, in collaboration with the BHA
 - The BHA can create **committees** within the Council to **meet requirements**
- Some existing groups:
 - Behavioral Health Planning & Advisory Council (BHPAC)
 - Mental Health Advisory Board for Service Standards and Rules
 - Child and Youth Mental Health Services Standards Advisory Board
 - Administrative Burden Work Group
 - Request to become a formal working group of the BHAAC
- Behavioral Health providers
 - Provider launch event
- Regional subcommittees of the Advisory Council



22

4. Working Groups & Relationship to Existing Groups

Recommended Work Groups for this year:

- Governance & Public Engagement - Develop bylaws & public engagement guidance; lead activities related to strategic planning and General Assembly reporting
- Collaboration - Determine connection points to councils/boards/commissions facilitated by the BHA and those hosted by other agencies; establish communication with providers, community organizations, etc.
- Capacity Building - Develop capacity building plans for the Council AND BHA staff; identify and select contractors/consultants/groups to provide training/technical assistance/coaching/mentorship



23

5. Involvement in BHA Strategic Planning

- BHA Strategic Vision and Plan by December 31, 2022
- Considerations:
 - Council involvement in developing desired behavioral health outcomes for strategic plan
 - Join an upcoming monthly BHPAC meeting? (First Thursday)
 - Council representative (co-chair) on the BHA's strategic planning committee



24

6. Approach to General Assembly Annual Report

Submission of Report: October 1, 2022

*Should contain: **Report from the Council**, BH system plan, BHA vision and strategy, update on standards, report on grievances, report on formal agreements and collaboration with other state agencies, reimbursement strategy for BH, update on care coordination*

Presentation of Report: January 2023

BHAAC Co-chair/Members invited to attend and share power with Commissioner



25

7. Council Member Compensation & Appointment Term

Process: Submit I-9 and signed copy of Scope of Work to Donda and Yumiko

Total Compensation not to exceed \$600 for the fiscal year for tax purposes

Meeting stipends are based on BHAAC Meeting Cadence in the Scope of Work
Suggested cadence of bi-monthly meetings and \$100 per meeting stipend

If your employer or organization has rules around outside employment and compensation, please adhere to those rules when seeking compensation for your service on BHAAC.

Term: Initial 2-year appointment, may discuss extension/transition during 3rd year



26



Briefing from the Commissioner

27



Nothing for us without us

A Reflection on Trust-Building

28



SHARING POWER, MAKING HISTORY

The impact for “us” (Colorado) depends on the wellbeing of “us” (BHA Advisory Council, BHA Team)

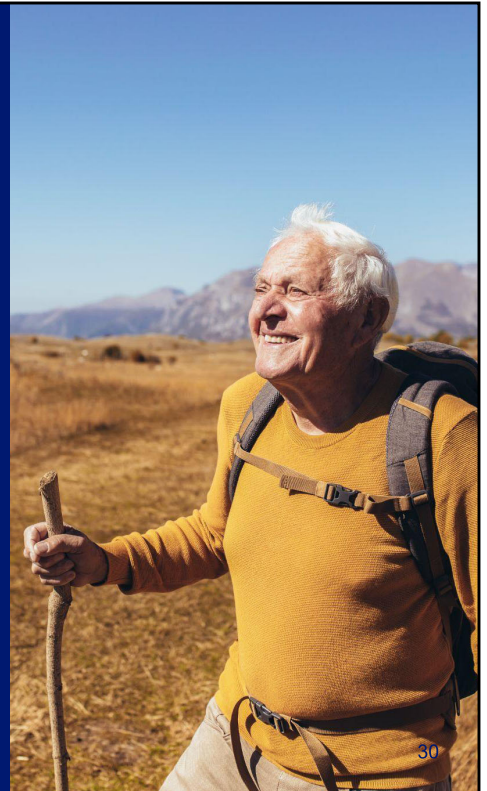
29



Behavioral Health for the People

The people of Colorado called for this vision and the BHA was conceived by the community.

30





The Urgency of this Moment

1 in 3 adults had symptoms of anxiety or depression in June 2022

In 2019, 33.8% of high school students in Colorado felt sad or hopeless; 7% attempted suicide

In 2020, 24.8 Coloradans died for every 100K residents from drug poisoning or overdose deaths

Even before the pandemic, Colorado residents had higher rates of mental illness than the rest of the country

Sources: CDC, CDPHE, KFF



Values Commitment

Our Values



COLLABORATION

Working in partnership to realize a holistic behavioral health vision

COMMUNITY-INFORMED PRACTICE

Integrating evidence-based guidance with lived expertise

EQUITY

Naming root causes of injustices and allocating the necessary resources to support desired outcomes

GENERATIONAL IMPACT

Engaging in meaningful and thoughtful action to create a new legacy

TRUTH

Being transparent and accurate when addressing the people of Colorado



Truth

Most Likely to Be Treated
INCARCERATED

African
Americans

Mental
Health

Substance
Use Disorder



Equity

Drug Use in
the 1980s

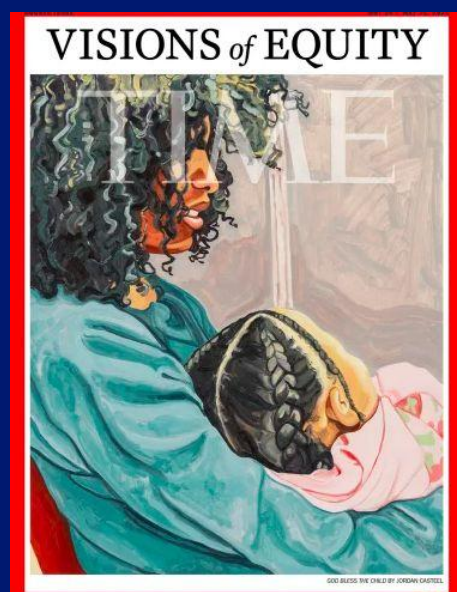
Character flaw
Criminalization
Sentencing disparities
Punishment

Drug Use in
the 2010s

Disease model
Decriminalization
Sentencing reform
Treatment



Meaningful COLLABORATION includes an acknowledgment of harm done by past practice and policies.



Generational Impact

Meaningful and thoughtful action to create a new legacy

To heal and recover,
we must believe that
our communities have **strengths**.



37

Bring solutions to.

Capacity-building requires
relinquishing deficit-based
models of community.



Bring solutions with.

Our communities exist in a
system where their strengths
have not been highlighted or
uplifted.

Psychological Safety *in community*

- A shared belief that the relationship/team is safe for interpersonal risk taking
- A condition in which you feel included, safe to learn, safe to contribute and safe to challenge the status quo
 - All without fear of being embarrassed, marginalized, or punished in some way
- An ability for team to have healthy conflict and debate



39

What Psychological Safety is NOT

An individual experience
A personality trait
A lowering of standards

Rather it is

A group commitment
A stretching of our natural traits
Necessary for elevating standards



It is our aim to operate as a community anchor, supporting your efforts while elevating our collective cause.



41

Authentic Partnership

- Acting responsibly and in the best interests of all people in Colorado
- Acknowledging when harm has been done and taking purposeful action towards meaningful remedies
- Upholding our shared ideals and values to function as a conduit of change, not a source of conflict
- Disclosing all relevant data and metrics, holding ourselves accountable to agreed-upon measurements of success and effectiveness
- Embracing openness to create efficiencies and expand possibilities





Leadership Commitment

- Trauma-informed communication
- Inclusive leadership
- Mindfulness and reflection
- Complexity
- Radical inquiry
- Relational leadership

43

Priorities



44

Getting Focused: What is 20% Operational?

ACCESS

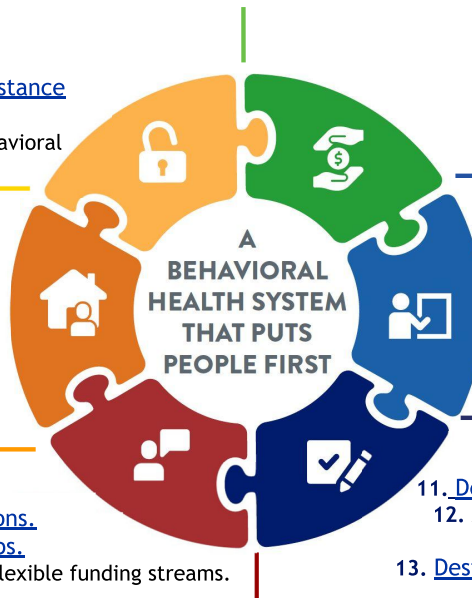
1. [No wrong door](#)
2. [Expand crisis services](#)
3. [Integrate mental health and substance use disorder services.](#)
4. Build a complete continuum of behavioral health services.

WHOLE PERSON CARE

17. Offer care coordination services.
18. Expand high-intensity case management.
19. [Create planned and facilitated education partners.](#)

LOCAL & CONSUMER GUIDANCE

14. [Identify service gaps and solutions.](#)
15. [Form and engage advisory groups.](#)
16. Identify and provide sustainable, flexible funding streams.



AFFORDABILITY

5. [Ensure adequate rates of payments and reimbursement.](#)
6. Streamline funding streams.
7. Prioritize the community funding.

WORKFORCE & SUPPORT

8. Expand the capacity for a culturally competent workforce.
9. [Fund use of non-traditional workforce, especially peers.](#)
10. [Reduce the administrative burden.](#)

ACCOUNTABILITY

11. [Develop population-specific standards of care.](#)
12. Address high suicide incidences and disparities in marginalized populations.
13. [Designate a single fiscal management system for all publicly funded services.](#)



45

<https://bha.colorado.gov/>
A fully accessible user experience



Visit ["Where can I get vaccinated?"](#) or call 1-877-COVAXCO (1-877-268-2926) for vaccine information.

COLORADO
Behavioral Health Administration

Search

Get Help > Community Programs > Resources > About Us > Our Partners > Data & Performance > Media & Publications > Contact >

Sign Up for the BHA Newsletter

Subscribe to our BHA newsletter for updates on Colorado's behavioral health reform efforts.

[Read More](#)

Select Language

Powered by Google Translate

Colorado's Behavioral Health Administration

With over one million people in Colorado in need of behavioral health services, we must strengthen our system—from prevention to recovery and beyond. The Behavioral Health Administration (BHA) represents one of Colorado's many steps towards strategic investments in improving the behavioral health system. The BHA is a new cabinet member-led agency, housed within the

Accessibility Menu (CTRL+U)

How UserWay Works

XL Oversized widget

Contrast +

Highlight Links

Bigger Text

Text Spacing

Pause Animations

Dyslexia Friendly

Cursor

Tooltips

Line Height

Text Align

Report a Problem

USERWAY
Accessibility by UserWay.org

Public dashboards

Accountability & transparency

BHA Implementation Monitoring

[View](#) [Edit](#) [Delete](#) [Revisions](#) [Clone](#) [Usage](#)

2022 has seen great progress for the Behavioral Health Administration (BHA) as we work toward creating a coordinated, cohesive, and effective behavioral health system in the state. We have been working tirelessly to create a system that truly and compassionately puts people first. With Truth as one of our [BHA values](#), we are dedicated to being transparent and accurate when addressing the people of Colorado and will continue to provide updates on implementation efforts.



Click here for an overview of BHA WINS and implementation progress!

[Per legislation](#), the BHA has two years to build full functional capacity and operations. There is much work to be done to make the BHA vision a reality. Please continue to visit this page for updates on implementation priorities and how our work is progressing.



47



OwnPath

Connecting people looking for behavioral health care
with services around Colorado



“This gives you information to get through a bad situation and doesn’t make you feel ashamed.”



by



COLORADO
Behavioral Health
Administration

English: <https://ownpath.co>

Spanish: <https://mipropiasenda.co>

49

OwnPath Features

- English & Spanish sites
- Location-based search
- Guided experience search
- Colorado resource access points
- Privacy commitment
- Feedback form

<https://ownpath.co>

50



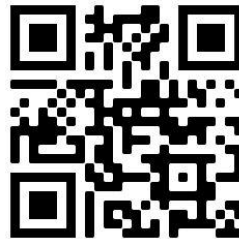
English

<https://ownpath.co>



Español

<https://mipropiasenda.co>



51



We invite a people-first mindset.
We invite systems thinking.
We invite proactivity.
We invite boldness.
We invite truth-telling.

52



Nothing for us without us

We need to listen to the people of Colorado first.
We need to establish processes that support people.
We need to thoughtfully systematize the ways our people engage in
our state processes.

53



VOTE

Poll: Hold an election for Co-Chair?

54

54

Co-Chair Election

- Poll: consensus from Council on holding an election for Co-Chair
- If Affirmative: request for nominations & vote
- If Negative: plan for the election of co-chair



Closing: Check-Out Activity

Chat: What is one thing that has your attention?

Thank You!

Next Meeting:
TBD

bha.colorado.gov
[@BHACConnect](https://twitter.com/BHACConnect)



COLORADO
Behavioral Health
Administration