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History of the Behavioral Health Advisory Council

Historically and by federal guidance, the Mental Health Policy Advisory Council (MHPAC) annually reviewed the Mental Health Block Grant (MHBG) State Plan submitted with the Community Mental Health Block Grant application. In Washington, although not required, the MHPAC reviewed individual Regional Support Network Plans (based on MHBG requirements) to ensure the plans supported the MHBG and made recommendations and/or suggestions for any changes.

Also, while not required by the Substance Abuse Prevention and Treatment (SAPT) block grant guidelines, DBHR solicited citizen input related to the block grant plan. The substance use disorder expertise of the Citizens Advisory Council on Alcoholism and Drug Addiction (CAC) had been a forum to discuss related issues from the consumer perspective. However, in the 2010 state legislative session, many boards and commissions were eliminated, including the CAC, and limited the activities of others.

When the Division of Mental Health and the Division of Alcohol and Substance Abuse merged to become the Division of Behavioral Health and Recovery (DBHR), the new Division established an integrated Behavioral Health Advisory Committee (BHAC). The chairs from both the MHPAC and CAC, and 2 additional members from each council, participated in planning the direction of BHAC.

BHAC advises and educates DBHR on planning and implementing effective, integrated behavioral health services by promoting individual choice, prevention, and recovery in Washington State.

BHAC membership continues to be represented by at least 51% of consumers, who equally represent services for mental health and substance use disorders. Members also include representatives from state agencies including the Office of the Insurance Commissioner, Department of Health, DSHS' Juvenile Rehabilitation Administration, Vocational Rehabilitation, Developmental Disabilities and Home and Community Services; the Health Care Authority; Dept. of Early Learning; Dept. of Corrections; Office of the Superintendent of Public Instruction; and the Gambling Commission. There are also tribal representatives and behavioral health providers.

The BHAC became operational in March 2012. Since then BHAC has:

- Created a mission statement;
- Developed new bylaws;
- Developed a strategic plan;
- Attended the Behavioral Health Conference and the Co-Occurring Disorders Conferences;
- Become more knowledgeable in mental health conditions, substance use disorders, pathological and problem gambling, and recreational marijuana laws
- Reviewed the combined application for Mental Health Block Grant and the Substance Abuse Prevention and Treatment Block Grant;
- Oversaw the peer review process;
- Provided feedback about Evidence-Based Practices and Programs; and
- Provided input on the PORCH Grant.

For more information about BHAC, contact Melissa Clarey at clarey.com.