



Community Behavioral Health Promotion and Prevention Commission



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October 20, 2022
3:00-4:30 pm

Zoom



Agenda



- 1. Welcome**
- 2. Approval of Meeting Minutes**
- 3. Overview and Discussion of Statutory Changes within
Chapter 177 of the Acts of 2022**
- 4. Commission Recommendations**



Chapter 177, Section 1



SECTION 1. Subsection (d) of section 219 of chapter 6 of the General Laws, as appearing in the 2020 Official Edition, is hereby amended by striking out clauses (5) and (6)

(5) hold public hearings and meetings to accept comment from the general public and to seek advice from experts, including, but not limited to, those in the fields of neuroscience, public health, behavioral health, education and prevention science; and

(6) submit an annual report to the legislature as provided in subsection (e) on the state of preventing substance use disorder and promoting behavioral health in the commonwealth.



Chapter 177, Section 1 (1/3)



... and inserting in place thereof the following 8 clauses:

(5) facilitate the development of interagency initiatives that: (i) are informed by the science of promotion and prevention; (ii) advance health equity and trauma-responsive care; and (iii) address the social determinants of health;

(6) develop and implement a comprehensive plan to strengthen community and state-level promotion programming and infrastructure through training, technical assistance, resource development and dissemination and other initiatives;

(7) advance the identification and dissemination of evidence-based practices designed to further promote behavioral health and the provision of supportive behavioral health services and programming to address substance use conditions and to prevent violence through trauma-responsive intervention and rehabilitation;



Chapter 177, Section 1 (2/3)



... and inserting in place thereof the following 8 clauses:

(8) collect and analyze data measuring population-based indicators of behavioral health from existing data sources, track changes over time and make programming and policy recommendations to address the needs of populations at greatest risk;

(9) coordinate behavioral health promotion and wellness programs, campaigns and initiatives;

(10) hold public hearings and meetings to accept comment from the public and to seek advice from experts, including, but not limited to, those in the fields of neuroscience, public health, behavioral health, education and prevention science;



Chapter 177, Section 1 (3/3)



... and inserting in place thereof the following 8 clauses:

(11) serve as an advisory board to the office of behavioral health promotion established in section 16DD of chapter 6A; and

(12) submit an annual report to the legislature as provided in subsection (e) on the state of preventing substance use and promoting behavioral health in the Commonwealth.

Section 16DD:

There shall be an office of behavioral health promotion within the executive office of health and human services. The office shall be under the supervision and control of a director of behavioral health promotion who shall be appointed by and shall report to the secretary. The commission on community behavioral health promotion established in section 219 of chapter 6 shall serve as an advisory board to the office.



Appendix: Current enabling statute



Chapter 6, Section 219.

(a) There shall be a commission on community behavioral health promotion and prevention located within, but not subject to the control of, the executive office of health and human services. The commission shall work to promote positive mental, emotional and behavioral health and early intervention for persons with a mental illness, and to prevent substance use disorders among residents of the commonwealth. . . .

(d) The commission shall:

(1) promote an understanding of: (i) the science of prevention; (ii) population health; (iii) risk and protective factors; (iv) social determinants of health; (v) evidence-based programming and policymaking; (vi) health equity; and (vii) trauma-informed care; provided that the commission may use, as a guide for its work, the recommendations of the report of the special commission on behavioral health promotion and upstream prevention established pursuant to section 193 of chapter 133 of the acts of 2016;

(2) consult with the secretary of health and human services on grants from the community behavioral health promotion and prevention trust fund established in section 35EEE of chapter 10;

(3) collaborate, as appropriate, with other active state commissions, including but not limited to the safe and supportive schools commission, the Ellen Story commission on postpartum depression and the commission on autism;

(4) make recommendations to the legislature that: (i) promote behavioral health and prevention issues at the universal, selective and indicated levels; (ii) strengthen community or state-level promotion and prevention systems; advance the identification, selection and funding of evidence-based programs, practices or systems designed to promote behavioral health and early intervention for persons with a mental illness and to prevent substance use disorders; and (iv) reduce healthcare and other public costs through evidence-based promotion and prevention; provided that the commission may use state and local prevalence and cost data to ensure commission recommendations are data-informed and address risks at the universal, selective and indicated levels of prevention;