GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2009

H HOUSE DRH50140-LN-93A (2/25)

Short Title: Consumer & Family Advisory Comm/Reports. (Public)

Sponsors: Representative Insko.

Referred to:

A BILL TO BE ENTITLED

AN ACT TO CLARIFY THE ROLE AND REPORTING REQUIREMENTS OF THE LOCAL AND STATE CONSUMER AND FAMILY ADVISORY COMMITTEES.

The General Assembly of North Carolina enacts:

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SECTION 1. G.S. 122C-170 reads as rewritten:

"§ 122C-170. Local Consumer and Family Advisory Committees.

(a1) Area authorities and county programs shall establish committees made up of consumers and family members to be known as Consumer and Family Advisory Committees (CFACS). A local CFAC shall be a self-governing and a self-directed organization that advises the area authority or county program in its catchment area on the planning and management of the local public mental health, developmental disabilities, and substance abuse services system.

Purpose. – A local Consumer and Family Advisory Committee (CFAC) shall exist in each LME catchment area to provide advice and feedback on a regular basis to the Director of the LME. In addition, the local CFAC shall report at least annually to the LME governing board. The advice and feedback shall include recommendations that advance the services of the local public mental health, developmental disabilities, and substance abuse services systems.

- (a2) <u>Definitions. As used in this section, the terms listed are defined as follows:</u>
 - (1) Local Consumer and Family Advisory Committees (CFACs). Independent advisory committees established to advise each LME.
 - (2) Self-directed. The agenda and goals of the CFAC shall be set by the CFAC within the scope of its duties.
 - (3) Self-governing. Each CFAC shall adopt its own bylaws and conduct its meetings as an advisory body to the LME.
- Establishment. LMEs shall establish committees made up of consumers and family members to be known as local CFACs. Once established, a local CFAC shall thereafter be a self-governing and self-directed organization that advises the LME and its governing board in its catchment area on the planning and management of the local public mental health, developmental disabilities, and substance abuse services systems. Each CFAC shall adopt bylaws to govern the selection and appointment of its members, their terms of service, the number of members, and other procedural matters. At the request of either the Each CFAC or and the governing board of the area authority or county program, the CFAC and the governing board of the LME shall execute an agreement that encourages dialogue between the CFAC and the LME and its governing board and identifies the roles and responsibilities of each party, channels of communication between the parties, and a process for resolving disputes between the parties.



- (b) <u>Membership.</u> Each of the disability groups shall be equally represented on the CFAC, and the CFAC shall reflect as closely as possible the racial and ethnic racial, ethnic, and geographic composition of the catchment area. The terms of members shall be three years, and no member may serve more than two consecutive terms. The CFAC shall be composed exclusively of:
 - (1) Adult consumers of mental health, developmental disabilities, and substance abuse services.
 - (2) Family members of consumers of mental health, developmental disabilities, and substance abuse services.
 - (3) In order to ensure self-governance by the local CFAC while also allowing for LME input, one member of the LME governing board may serve on the CFAC if that individual is an adult consumer or a family member of a consumer of mental health, developmental disabilities, and substance abuse services.
- (c) The <u>Duties. As a self-directed and self-governing body, the CFAC</u> shall undertake all of the following:
 - (1) Review, comment on, and monitor the implementation of the local business plan.
 - (2) Identify service gaps and underserved populations.
 - (3) Make recommendations regarding the service array and monitor the development of additional services.
 - (4) Review and comment on the area authority or county program budget.
 - (5) Participate in quality improvement measures and performance indicators. processes that relate to the overall progress and performance of the LMG, such as the scope and quality of its provider network.
 - (6) Submit to the State Consumer and Family Advisory Committee findings and recommendations regarding ways to improve the delivery of mental health, developmental disabilities, and substance abuse services. on an annual basis. The report shall include:
 - a. An assessment of the community needs and service gaps in the mental health, developmental disabilities, and substance abuse services (MH/DD/SA) delivery system.
 - b. Priorities within the community related to MH/DD/SA service needs.
 - c. A description of services or programs in the catchment area that may be considered a model for the State.
 - (7) Report on a regular basis to the LME governing board on the implementation of subdivisions (1) through (5) of this subsection.
- (d) <u>Assistance.</u>—The director of the area authority or county program <u>LME</u> shall provide sufficient staff to assist the CFAC in implementing its duties under subsection (c) of this section. The assistance shall include data for the identification of service gaps and underserved populations, training to review and comment on business plans and budgets, procedures to allow participation in quality monitoring, and technical advice on rules of procedure and applicable laws."

SECTION 2. G.S. 122C-171(c) reads as rewritten:

- "(c) The State CFAC shall undertake all of the following:
 - (1) Review, comment on, and monitor the implementation of the State Plan for Mental Health, Developmental Disabilities, and Substance Abuse Services.
 - (2) Identify service gaps and underserved populations.
 - (3) Make recommendations regarding the service array and monitor the development of additional services.

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1	(4)	Review and comment on the State budget for mental health, developmental
2		disabilities, and substance abuse services.
3	(5)	Participate in all quality improvement measures and performance indicators.
4	(6)	Receive the findings and recommendations by local CFACs regarding ways
5		to improve the delivery of mental health, developmental disabilities, and
6		substance abuse services services and report these findings and
7		recommendations to the Joint Legislative Oversight Committee on Mental
8		Health, Developmental Disabilities, and Substance Abuse Services.
9	(7)	Provide technical assistance to local CFACs in implementing their duties.
10	<u>(8)</u>	Report at least annually to the Joint Legislative Oversight Committee on
11		Mental Health, Developmental Disabilities, and Substance Abuse Services
12		on its findings and recommendations with respect to the requirements of this
13		subsection."
14	SEC	FION 3. This act is effective when it becomes law.

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