

GENERAL ASSEMBLY OF NORTH CAROLINA
SESSION 2009

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HOUSE BILL 933

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

Sponsors: Representative Insko.

Referred to: Mental Health Reform, if favorable, Health.

April 1, 2009

1 A BILL TO BE ENTITLED
2 AN ACT TO CLARIFY THE ROLE AND REPORTING REQUIREMENTS OF THE
3 LOCAL AND STATE CONSUMER AND FAMILY ADVISORY COMMITTEES.

4 The General Assembly of North Carolina enacts:

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

6 "**§ 122C-170. Local Consumer and Family Advisory Committees.**

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

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

17 (a2) Definitions. – As used in this section, the terms listed are defined as follows:

18 (1) Local Consumer and Family Advisory Committees (CFACs). – Independent
19 advisory committees established to advise each LME.

20 (2) Self-directed. – The agenda and goals of the CFAC shall be set by the CFAC
21 within the scope of its duties.

22 (3) Self-governing. – Each CFAC shall adopt its own bylaws and conduct its
23 meetings as an advisory body to the LME.

24 (a3) Establishment. – LMEs shall establish committees made up of consumers and
25 family members to be known as local CFACs. Once established, a local CFAC shall thereafter
26 be a self-governing and self-directed organization that advises the LME and its governing
27 board in its catchment area on the planning and management of the local public mental health,
28 developmental disabilities, and substance abuse services systems. Each CFAC shall adopt
29 bylaws to govern the selection and appointment of its members, their terms of service, the
30 number of members, and other procedural matters. At the request of either the Each CFAC or
31 and the governing board of the area authority or county program, the CFAC and the governing
32 board of the LME shall execute an agreement that encourages dialogue between the CFAC and
33 the LME and its governing board and identifies the roles and responsibilities of each party,
34 channels of communication between the parties, and a process for resolving disputes between
35 the parties.

36 (b) Membership. – Each of the disability groups shall be equally represented on the
37 CFAC, and the CFAC shall reflect as closely as possible the racial and ethnic racial, ethnic,



1 and geographic composition of the catchment area. The terms of members shall be three years,
 2 and no member may serve more than two consecutive terms. The CFAC shall be composed
 3 exclusively of:

- 4 (1) Adult consumers of mental health, developmental disabilities, and substance
 5 abuse services.
- 6 (2) Family members of consumers of mental health, developmental disabilities,
 7 and substance abuse services.
- 8 (3) In order to ensure self-governance by the local CFAC while also allowing
 9 for LME input, one member of the LME governing board may serve on the
 10 CFAC if that individual is an adult consumer or a family member of a
 11 consumer of mental health, developmental disabilities, and substance abuse
 12 services.

13 (c) ~~The Duties.~~ – As a self-directed and self-governing body, the CFAC shall undertake
 14 all of the following:

- 15 (1) Review, comment on, and monitor the implementation of the local business
 16 plan.
- 17 (2) Identify service gaps and underserved populations.
- 18 (3) Make recommendations regarding the service array and monitor the
 19 development of additional services.
- 20 (4) Review and comment on the area authority or county program budget.
- 21 (5) Participate in quality improvement ~~measures and performance indicators.~~
 22 processes that relate to the overall progress and performance of the LMG,
 23 such as the scope and quality of its provider network.
- 24 (6) Submit to the State Consumer and Family Advisory Committee findings and
 25 recommendations ~~regarding ways to improve the delivery of mental health,~~
 26 ~~developmental disabilities, and substance abuse services.~~ on an annual basis.
 27 The report shall include:
 - 28 a. An assessment of the community needs and service gaps in the
 29 mental health, developmental disabilities, and substance abuse
 30 services (MH/DD/SA) delivery system.
 - 31 b. Priorities within the community related to MH/DD/SA service needs.
 - 32 c. A description of services or programs in the catchment area that may
 33 be considered a model for the State.
- 34 (7) Report on a regular basis to the LME governing board on the
 35 implementation of subdivisions (1) through (5) of this subsection.

36 (d) ~~Assistance.~~ – ~~The director of the area authority or county program LME shall~~
 37 provide sufficient staff to assist the CFAC in implementing its duties under subsection (c) of
 38 this section. The assistance shall include data for the identification of service gaps and
 39 underserved populations, training to review and comment on business plans and budgets,
 40 procedures to allow participation in quality monitoring, and technical advice on rules of
 41 procedure and applicable laws."

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

43 "(c) The State CFAC shall undertake all of the following:

- 44 (1) Review, comment on, and monitor the implementation of the State Plan for
 45 Mental Health, Developmental Disabilities, and Substance Abuse Services.
- 46 (2) Identify service gaps and underserved populations.
- 47 (3) Make recommendations regarding the service array and monitor the
 48 development of additional services.
- 49 (4) Review and comment on the State budget for mental health, developmental
 50 disabilities, and substance abuse services.
- 51 (5) Participate in all quality improvement measures and performance indicators.

- 1 (6) Receive the findings and recommendations by local CFACs regarding ways
2 to improve the delivery of mental health, developmental disabilities, and
3 substance abuse ~~services~~.services and report these findings and
4 recommendations to the Joint Legislative Oversight Committee on Mental
5 Health, Developmental Disabilities, and Substance Abuse Services.
6 (7) Provide technical assistance to local CFACs in implementing their duties.
7 (8) Report at least annually to the Joint Legislative Oversight Committee on
8 Mental Health, Developmental Disabilities, and Substance Abuse Services
9 on its findings and recommendations with respect to the requirements of this
10 subsection."

11 **SECTION 3.** This act is effective when it becomes law.