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POLICY

Application

This policy shall apply to The Right Door for Hope, Recovery and Wellness and its contracted providers.

1.0 Intent

The intent of this policy is to further integrate consumerism into The Right Door for Hope, Recovery and Wellness policy development, service delivery provision, service delivery system evaluation and quality assurance/performance improvement. The service delivery system includes The Right Door for Hope, Recovery and Wellness and its provider network.

2.0 Consumer Advisory Council Purpose and Description

- 2.1 Definitions
 - 2.1.1 <u>Primary Consumer</u>: Refers to those persons who are eligible to receive The Right Door for Hope, Recovery and Wellness services, as well as those currently receiving or previously received services from The Right Door for Hope, Recovery and Wellness.
 - 2.1.2 <u>Secondary Consumer</u>: Refers to the families, guardians, and other legal responsible parties of individuals that are eligible for agency services as well as those currently receiving or previously received services.
 - 2.1.3 <u>Consumer Advisory Council (CAC)</u>: Advisory group of primary or secondary consumers of The Right Door for Hope, Recovery and Wellness services.
- 2.2 Purpose

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- 2.2.1 The Right Door for Hope, Recovery and Wellness CAC is an advisory group of primary and secondary consumers. This group assists The Right Door for Hope, Recovery and Wellness in identifying issues and areas of concern related to service delivery. It is the primary source of consumer input into the development and evaluation of The Right Door for Hope, Recovery and Wellness policies, procedures and operations.
- 2.2.2 The Right Door for Hope, Recovery and Wellness CAC focuses on political and advocacy issues to ensure the public basis for management of the behavioral health delivery system.
- 2.2.3 The Right Door for Hope, Recovery and Wellness CAC will also focus on opportunities for stigma reduction related to behavioral health.
- 2.3 Membership
 - 2.3.1 The Right Door for Hope, Recovery and Wellness CAC membership will consist of at least 51% primary consumers, at least 51% of whom are currently open to The Right Door for Hope, Recovery and Wellness for services.
 - 2.3.2 The CAC will have a diverse and proportional membership representing the following populations, with a maximum of 12 members as well as staff liaisons (one liaison from the agency is assigned as the standing liaison, other staff liaisons may be invited as appropriate to council discussions): adults with mental illness, adults with intellectual disabilities, children with mental illness, children with intellectual disabilities, and individuals with a substance use disorder or co-occurring disorder along with substance use disorder.
 - 2.3.2.1 Adult and/or child mental illness Three primary or secondary consumers

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- 2.3.2.2 Adult and/or child intellectual disabilities Three primary or secondary consumers
- 2.3.2.3 Serious emotional disturbance Three primary or secondary consumers
- 2.3.2.4 Substance use or co-occurring Substance Use Disorder – Three primary or secondary consumers
- 2.3.3 Term limits
 - 2.3.3.1 The term of office for a CAC member shall be three
 (3) years from May 1st of the year of appointment. There are no term limits. The initial Council appointments will be staggered into one (1) year, two (2) year and three (3) year terms.
 - 2.3.3.2 A CAC member may resign at any time by providing notification to the assigned staff liaison. The resignation will be effective upon receipt of the notice by or at a later time as designated in the notice.
 - 2.3.3.3 Regular attendance is required.
 - 2.3.3.3.1 If there are three unexcused absences in a row, the council member will be removed from the CAC.
 - 2.3.3.3.2 If there are three excused absences in a row, the staff liaison will meet with the council member to explore their ability to effectively serve on the CAC.
 - 2.3.3.3.3 CAC members are required to contact the staff liaison when requesting excused absences and in working out any requests for exceptions.

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- 2.3.4 For issues requiring a vote, each voting member will have one vote. The outcome of the vote is determined by the majority.
- 2.3.5 The CAC members will be involved in the development of the agenda and facilitation of meetings. This will be supported by non-voting staff liaisons.
- 2.3.6 The CAC will report through the performance improvement process structure.
- 2.3.7 The CAC will have representation on the Mid-State Health Network (MSHN), the Pre-Paid Inpatient Health Plan (PIHP) to which The Right Door for Hope, Recovery and Wellness belongs, Regional Consumer Advisory Council. The role is to provide information and feedback between MSHN and The Right Door for Hope, Recovery and Wellness related to local needs identified by primary and secondary consumers.
- 2.4 Responsibilities
 - 2.4.1 Members will regularly attend meetings to be held at least quarterly.
 - 2.4.2 Members will be reimbursed a reasonable stipend for meeting attendance and will reimbursed pre-approved travel expenses for each meeting attended according to protocols developed by The Right Door for Hope, Recovery and Wellness.
 - 2.4.3 Members will actively participate in CAC discussions.
 - 2.4.4 Members will provide input and make informed decisions as a representative of all people served by the agency rather than act as a representative of themselves.
 - 2.4.5 Review aggregate reports received from the Quality Improvement Program and Council and provide

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recommendations, guidance and suggestions regarding consumer related processes including, but not limited to:

- 2.4.5.1 Access to Services
- 2.4.5.2 Customer Service
- 2.4.5.3 Customer Satisfaction
- 2.4.5.4 Service Delivery (gaps, strengths, areas for improvement)
- 2.4.5.5 Literature and materials
- 2.4.5.6 Federal, state, and/or local performance indicators
- 2.4.5.7 Grievance and Appeal
- 2.4.5.8 Provider Network configuration and management
- 2.4.6 Serve as review process for the agency initiatives designed to encourage person centered planning, self-determination, recovery, peer support, anti-stigma initiatives, community integration, and other consumer directed goals.
- 2.4.7 Review and provide process and service recommendations related to the Michigan Department of Health and Human Services (MDHHS) procurement and survey processes, customer satisfaction and outcome management activities.
- 2.4.8 Provide consultation to The Right Door for Hope, Recovery and Wellness related to state, local, and federal government issues and local human service agency collaboration issues impacting the public mental health system. Engage in advocacy efforts if individually chosen.

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- 2.4.9 Offer guidance relative to The Right Door for Hope, Recovery and Wellness priorities and service initiatives.
- 2.5 Committee Process
 - 2.5.1 The CAC will receive and review reports from the assigned staff on a regular basis structured to accomplish different objectives.
 - 2.5.2 The CAC will report at least quarterly through the performance improvement process and identify any recommendations for further consideration. Such recommendations will be based on a simple majority vote of CAC members.
 - 2.5.3 The Right Door for Hope Recovery and Wellness performance improvement process will provide the status of CAC recommendations on at least a quarterly basis.
- 2.6 Per Diems
 - 2.6.1 Please refer to Policy F-231, Board Member Per Diems. CAC members will get reimbursed the same way as board members.
 - 2.6.2 CAC members will be required to complete all required paperwork before receiving their per diem.

References:

- Michigan Department of Health and Human Services Medicaid Specialty Supports and Services Concurrent 1915 (b)/(c) Waiver program FY17, including the "Consumerism Practice Guideline".
- MDHHS/CMHSP Managed Mental Health Supports and Services contract FY17, including the "Consumerism Practice" Guideline.
- Michigan Mental Health Code
- Mid-State Health Network (MSHN) Policy: Customer Service Regional CAC

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Nancy Patera, Board Chairperson	Date		