



Consumer and Family Advisory Committees as Advisory Boards to LME MCO's



Department of Health and Human Services
DMH DD SAS Community Engagement & Empowerment Team



What is a Consumer and Family Advisory Committee

- CFACs are organized under the law, N.C.G.S. Chapter 122 C-170.
- Legally mandated, CFACs exist to provide the unique perspective and advice of individuals and families who access the public Mental Health, Developmental Disability and Substance Abuse Service system.
- CFACs are self governing and self directed.



What is a CFAC?

- CFACs are *advisory* committees to the LME MCO Governing Boards and assist the LME/MCOs and their staff in identifying gaps and needs in the service array or when there are issue of quality with existing services.
- CFACs are most effective when the LME/MCO partners with them to provide the CFAC with data, training, administrative support and also demonstrates a willingness and openness to utilize their input.



Who are CFAC members?

- Adult Citizens ages 18 and over of North Carolina who are consumers of services for Mental Health, Developmental Disabilities, and Substance Abuse Services and their family members.
- Dedicated people who are willing and committed to improving the system of delivery and the quality of services for consumers.



Who are CFAC members?

- People with lived experience accessing services. Due to their unique perspective they can expertly advise the system on matters of access to and the quality of available services and point out the gaps and needs of the system.
- People involved with the system who are trained on an ongoing basis to understand the complexities of the system and to understand how and why there are underserved populations and gaps and needs within services.



Who are CFAC members?

- Volunteers who are persistent in their efforts to represent people with disabilities and to collaborate with the LME/MCO [Local Management Entity / Managed Care Organization] to provide high quality services with limited available resources.
- CFACs usually have somewhere between 12 and 24 members and have memberships in multiples of 3's such as (12, 15, 18, 21, or 24) so as to strive for equal representation among the three service categories of Mental Health, Developmental Disabilities, and Substance Use Disorders.



Advisory Role of CFACs

- CFACs are advisory committees and do not speak for the Governing Board or the LME/MCO. They speak to and with them. In their advisory role, these committees have the opportunity to provide the invaluable perspective of those who use and navigate the system of services.
- CFACs advise and suggest possible courses of action to influence those who have the responsibility of making these decisions. In some instances, CFACs may not have an actual proposed solution but may want to point out a particular area of concern.



Advocacy Roles vs. Advisory Roles

Advisory

Merriam-Webster definition of an Advisor

- A person who gives a recommendation about what should be done *<advise on legal matters>*
- 2 : to talk with someone in order to decide what should be done : consult *<advise with friends>*

Advocacy

Merriam-Webster definition of an Advocate

- a person who argues for or supports a cause or policy
- : a person who works for a cause or group
- : a person who argues for the cause *of another person* in a court of law



Advisory Role of CFACs

As can be seen in the slide above, there are distinctions between working as an advisor and as an advocate.

Though subtle, the differences are important for CFAC members to understand.

Where an advocacy organization may choose the issue or issues which they will address from a very wide range of topics, a CFACs mission is defined by statute and much narrower in its scope.

Specifically, a CFAC should focus on its six statutory responsibilities.



Advisory Role of CFACs

- Another distinction, though subtle, is who the advice or advocacy product is being directed to. In the case of CFAC's, their statutory duty is clearly defined to advise the LME MCO Governing Board and the State CFAC.
- Advocacy organizations however, generally have no statutory duty or responsibility regarding who or what organization they will address with their advocacy messages.



CFAC's Legislative Mandate

- Review, comment on and monitor the implementation of the local business plan.
- Identify service gaps and underserved populations.
- Make recommendations regarding the service array and monitor the development of additional services.
- Review and comment on the area authority or county program budget.
- Participate in all quality improvement measures and performance indicators.
- 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.



Examples of CFACs providing advice to their LME /MCO

1. Cardinal Innovations (example 1)
2. Sandhill's Center (example 2)
3. Are there other examples that audience members can provide? What has worked? What hasn't worked?



Communication is Key

- As an advisory committee of the LME MCO, the CFAC may develop a relational agreement that (among other things) identifies a communication protocol with the Governing Board of the LME MCO. A well defined communication protocol can greatly aid in the clarity and cohesiveness of the partnership between the CFAC and the Governing Board.
- Whether or not a Relational Agreement exists, it is essential that formal communications to the Governing Board are packaged in a user friendly and (if possible) agreed upon format.



Communication is Key

- The addition of CFAC members to the Governing Board has greatly increased the ability of CFACs to communicate with and participate in Governing Board decisions.
- Are there other communication methods or practices that audience members can share that have positively contributed to the cohesiveness of the partnership between the CFAC and the LME MCO Governing Board?



Communication is Key

- Improvement in local CFACs ability to communicate with the SCFAC has been noted since the establishment of monthly conference calls between the State and Local CFACs.
- In addition to the monthly phone conferences local CFACs may communicate in writing or in person with the State CFAC. All State CFAC meetings are open public meetings and local CFACs have been encouraged to send representative to take advantage of the public comment time on each SCFAC Agenda.



Communication Methods

A diverse variety of communication methods between CFACs and Governing Boards exist.

These include:

- The CFAC Chairperson provides an oral and/or written report at each Governing Board meeting.
- The CFAC produces an annual report.
- CFAC members serve on internal committees of the LME MCO and make recommendations related to their work on those committees.



Support and Assistance to Local CFACs

- In addition to the assistance provided by LME/MCOs the Community Engagement and Empowerment Team (CEET) of the NC Division of Mental Health Developmental Disabilities and Substance Abuse Services stands ready to assist the Local CFAC's to meet their statutory responsibilities.
- A number of trainings designed to assist the CFACs have been developed by the CEET. Additional training and technical assistance can be developed to meet a local CFAC's specific requests.
- CEET staff regularly attend local CFAC meetings to serve as a Liaison for the Division.



Support and Assistance to Local CFACs

- To request technical assistance from the CEET please contact the staff person assigned to your LME/MCO.
- Your LME/MCO CFAC Liaison can provide you with contact information for the CEET staff person assigned to your area or you may contact Kerry Lynn Fraser by phone at 919-715-3197 or by email at kerry.lynn.fraser@dhhs.nc.gov





Presenters contact information

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