

OMHSAS Behavioral Health
Mental Health Planning Council
Advisory Structure
Overview
Orientation for
Advisory Committee Members

Purpose of OMHSAS Advisory Structure

The purpose of the OMHSAS Advisory Committees shall be to provide counsel and guidance to the Office of Mental Health and Substance Abuse Services, Department of Public Welfare of the Commonwealth of Pennsylvania, in order to ensure an infrastructure and a full array of mental health, substance abuse, and behavioral health services which comply with the Mission, Vision, and Guiding Principles of OMHSAS, as well as core principles of the Community Support Program (CSP), Child and Adolescent Service System Program (CASSP), Cultural Competency, and Bureau of Drug and Alcohol Programs.

Federally Mandated Role of MHPC

- To review Mental Health Block grant plan and to submit to the State any recommendations of the Council for modifications to the plan;
- To serve as an advocate for adults with serious mental illness, children with a severe emotional disturbance, and other individuals with mental illnesses or emotional problems; and
- To monitor, review, and evaluate, not less than once each year, the allocation and adequacy of mental health services within the State.

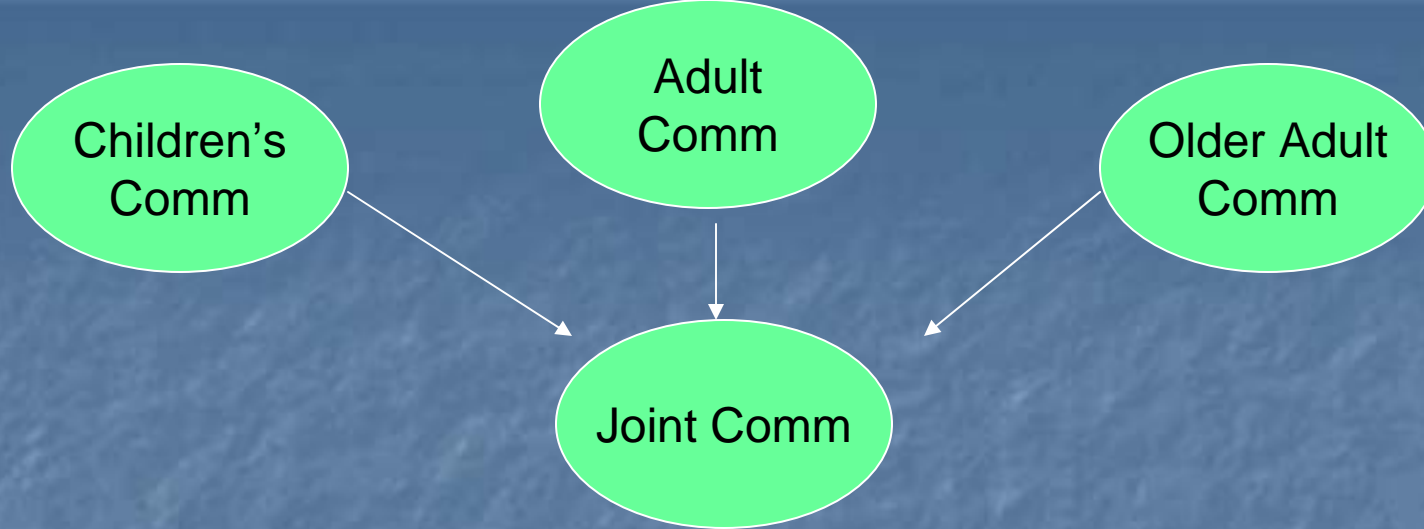
Stakeholder Goals of Advisory Structure

- Increase meaningful, effective participation of consumers, family members, and other stakeholders in advising.
- Improve timely flow and broad distribution of information from OMHSAS to stake-holders and from stakeholders to OMHSAS.
- Allow for valuable networking opportunities among stakeholders.
- Productive partnering between OMHSAS and the Advisory Committees.

Committee

Philosophy/Fidelity/Inclusion

- Committees guided by
 - Resiliency & Recovery Vision
 - OMHSAS Guiding Principles
 - CSP Principles
 - CASSP Principles
 - BDAP & Other Service System Principles
- Incorporate
 - Broad Behavioral Mandate
 - Cultural Competency
 - Cross-Disability, System Partners
 - MH & Deaf and Hard of Hearing
 - Broad scope – MH, D&A, Co-Occurring Policy/Program Development, HealthChoices, Medicaid FFS, Block Grant



- Joint Committee meets mandated role of Mental Health Planning Council.
- Committees meet same day, first Thursday every other month.
- Consistent committee management:
 - Executive Committee meets month prior to scheduled Advisory Meetings to establish individual and joint agendas
 - Feedback welcomed and requested from members at any time prior to Executive Committee meeting.
 - Chairs lead meetings – OMHSAS provides support, technical assistance.

Membership

- 30 members each committee
- Diverse – rural, minority, disability, cultural
- 51% consumers, family members, and advocates
- D&A representation
- Represent constituency, not personal agendas
- CSP/CASSP – consumers, family members, professionals
- Include county, MCO representation

Communication

- Written communication
 - Among committees and workgroups
- Activity of committees accessible
 - Use technology – website, e-mail, list-serves, etc.
- Agendas allow for “hot topics”
- Communication through various means
 - Drop-in Centers, Clubhouses, counties, providers, constituency organizations, etc.

Committee Workgroups

- Ability to address broad range of issues cross-systems
 - Allow broadening of input/knowledge
 - Include broader range of stakeholders, based on issue
- Solicit workgroup members from committee membership as well as non-committee members with issue expertise
- Time-limited, task-focused

**OMHSAS Vision and
Guiding Principles**



**Priorities/Objectives
Supporting Projects**

Priority objectives and supporting projects driven by stakeholder input, county, and service area plans.



Review & Advocacy



Block Grant



Training Activities

Quality Management

**Are We Meeting Vision? Are Priorities/Objectives/Supporting Projects
Making a Difference for the Individuals OMHSAS serves?**

Reimbursement Protocol

- Travel, meal and lodging reimbursement is provided for consumer/family members/ persons in recovery for committee and workgroup activity.
 - If individuals are members based on organization nomination/representation, the member organizations are expected to pay for attending members' expenses, if it is within the budget capacity of the organization.
- Must use appropriate voucher forms
 - Submission of all reimbursement requests must occur within 60 days after a meeting.

Reimbursement Protocol

- OMHSAS has a limited amount of funds available for reimbursement expenses. Members are asked to use funds responsibly:
 - Car pools, shared room accommodations are encouraged.
 - Maximum meal costs (*per Commonwealth guidelines*) allowable: Breakfast - \$8.60 Lunch - \$8.60 Dinner – \$23.80 (includes tip)
 - OMHSAS will not reimburse for alcohol, phone calls made from room, room service or movies/games purchased.
 - Lodging requests and Advance requests must be submitted before or at the same time as the RSVP for that meeting unless otherwise noted.