

The Guilford Center Consumer and Family Advisory Committee (CFAC)

Annual Report from Committee for 2004-2005

The Guilford Center Consumer and Family Advisory Committee (CFAC) met monthly except July and December. A detailed description of CFAC activities has been outlined in the four quarterly implementation reports previously submitted to the State.

Highlights of the year included the following:

- Recognition of Guilford Center's CFAC as the Guilford County Volunteer of the Year.
- Formalized a new category for CFAC participation called CFAC Associates. These are not official Members but consumers or family members who have expressed interest in participating on Guilford Center committees or work groups. CFAC Associates must meet the same criteria as official members. Four individuals have joined CFAC as Associates. Recruitment efforts continue with consumer advocacy groups and other community groups to recruit more CFAC Associates, in order to increase consumer involvement.
- Developed and distributed a CFAC newsletter, which was mailed to all Guilford Center's Community Partners as well as to advocacy groups within the community. It is also prominently displayed in the Guilford Center's waiting areas.
- Revised and approved CFAC Standing Rules to continue to guide activities of the Committee.
- Participated in the Request for Proposal (RFP) processes for selection of new contract providers. This involved serving on the initial groups to develop criteria for services, reviewing and evaluating contract proposals, interviews with contractors and final selection of providers who received the contracts.

CFAC representatives participated on the following RFP processes:

- Respite services (CFAC Representative: Libby Jones)
- Substance abuse treatment services (CFAC Representative: Pamela Moye)
- Substance abuse prevention services (CFAC Representatives: Rick Hylton, Carla Steiner)
- Vocational services for individuals with developmental disabilities (CFAC Representatives: Carla Steiner, Kim Gromko)
- Crisis bed facility services (CFAC Representative: Ray Pysher)
- Multi-systemic therapy (MST) (CFAC Representative: Libby Jones)
- Participated in various Guilford Center Committees including:
 - Quality Council
 - Guilford Community Collaborative (System of Care)
 - CAP services evaluation committees, to assess service needs and make recommendations for funding allocations.
- Attended the presentation to Guilford Center staff and consumers by Mike Moseley.
- Reviewed and approved changes to Guilford Center's Divestiture Plan.

Highlights, continued:

- Reviewed and approved the budget proposal prepared by the Guilford Center to send to the County Commissioners for final approval.
- Began to develop CFAC work plan for 2005-06, to identify specific goals and projects and projected expenses for these.
- Developed, with Guilford Center Budget Manager, the CFAC budget for FY 2005-2006. The total budget of \$34,504 includes funds for dependent care, transportation, meals, training, staff support, supplies and other needs. It also includes costs for further development of the Consumer Section of the Guilford Center website.
Again this year the County Budget Office will issue a separate CFAC cost code, which will allow the group to track expenses more effectively.
- Attended a number of statewide training events including the following:
 - National NAMI Conference (October)
 - "Identifying Effective Community Resources" (October)
 - "Ticket to Work Conference" (November)
 - NC Council training "Overview of Evidence Based Practices for Adult Mental Health" (November).
 - Two-day program, "Building Bridges--System of Care for Children's Services" (December).
 - Mental Health Association's Conference on Aging (December)
 - "All-Aboard to the Future" Conference (February)
 - "Crisis Prevention and Management" (April)
 - "Creating a Peer Workforce" (April)
 - CFAC Regional Meeting (April)
 - 2004 Best Practices for Development Disabilities (April).
 - Annual NAMI Conference (May).
 - NC Council Spring Forum (May)
 - "Personal Outcomes" (June)
 - "Person-Centered Planning" (June)
- Held a series of membership training sessions, including information on system of care, on quality monitoring, and on person-centered planning.
- Received/reviewed quarterly reports which detail activities of Guilford Center toward implementation of mental health reform:
 - Quarterly Implementation Report which goes to the State each quarter to report on progress toward implementation of Local Business Plan.
 - Quarterly Report required by Session Law 2001-437 to be presented to Division Secretary, County Commissioners, Board, CFAC.
 - Quality Improvement Department Quarterly Report.
- Established a Nominating Committee to develop recommendations for a slate of officers for 2005-06. Voted in June to approve the slate of officers presented at the May meeting.
- CFAC's subcommittee continues to work on the Consumer Section of Guilford Center Web site. This group will also begin planning for a CFAC brochure.

The Guilford Center CFAC Goals for Fiscal Year 2005-2006

The Guilford Center CFAC has established the following goals for FY 2005-2006:

- Establish a Legislative Subcommittee with representation from the three disability areas.
- Implement activities to increase consumer and community awareness of the role of the CFAC and to solicit further consumer and family involvement. Examples include:
 - Participation in development of a Consumer Section on the Guilford Center Web site.
 - Development and distribution of a CFAC brochure.
 - Production of a newsletter insert about the Guilford Center CFAC, including information about how to get involved, which will be distributed through newsletters of the Mental Health Associations of Greensboro and High Point, the ARCs of Greensboro and High Point, the Guilford County NAMI and other consumer organizations. The first was published during Fiscal Year 2004-2005.
 - Efforts to obtain local media coverage for CFAC activities.
- Continue series of presentations to educate CFAC members on Best Practices, Quality Monitoring and understanding different disability areas.
- Develop activities to solicit consumer, family and community input to identify needs or gaps in services and programs (including support services such as transportation, housing, supported employment, etc.).
- Work with The Guilford Center staff to develop strategies and activities to increase awareness of available services and programs and to make sure people know how to access these.

Needs/Gaps Identified by CFAC

During the past year, The Guilford Center CFAC has identified several gaps in services which the State needs to address. The CFAC recommends to the State that the following areas need to be improved or expanded, either by necessary policy changes, allocation of additional funding or adding staff resources:

- Maintenance of and increased funding is needed for Medicaid and Medicare.
- Personalized treatment programs are needed that include adequate time for stabilization prior to discharge.
- More affordable and accessible housing options are needed for people with disabilities.
- More supports are needed to maintain housing for people with disabilities, e.g., peer support, chore services, other supports.
- More transportation services are needed for people with disabilities.
- Services and assistance need to be available to help those individuals who are transitioning from government assistance to independent living (when they lose their benefits).
- More services are needed for people who have hearing impairment and also have a mental illness or developmental disability.
- Further work is needed on diverting mentally ill persons (both children and adults) who are sent to jails or other correctional facilities to the appropriate treatment facilities which can meet their needs.
- Additional beds for long-term treatment are needed for people with disabilities.
- More independent living options as well as group homes are needed for adult consumers.
- Group homes are needed for higher functioning consumers as well as more seriously disabled consumers.
- Funding is needed for early identification and intervention for children with problems, to provide help before their situations get more serious.
- Services are needed to educate parents to recognize when their children are having problems and to seek appropriate treatment for these problems.
- There is a need to promote cooperation between the school system and mental health in dealing with children with problems.
- Respite services are needed for children with mental illness. These providers need to be trained specifically to work with children with mental illness.
- Adequate funding is needed to implement the programs listed above, as well as other services and programs identified in the State Plan.