

SANILAC COUNTY COMMUNITY MENTAL HEALTH AUTHORITY

ADMINISTRATIVE POLICY

NUMBER: BA037

NAME: POLICY ON INPUT FROM THOSE SERVED

INITIAL APPROVAL DATE:	06/20/1996	BY: Administrative Committee
STAKEHOLDER REVIEW:	03/02/2022	BY: Consumer Advisory Board
(LAST) REVISION DATE:	02/13/2024	BY: CIO
(LAST) REVIEW DATE:	02/15/2024	BY: Policy Committee
DISCONTINUED DATE:	N/A	REPLACED BY: N/A

I. PURPOSE

II. APPLICATION

Populations: **NA**
Programs: **Direct - ALL**
Contracted - ALL

III. POLICY

The Sanilac CMH Board and staff shall seek input from those served in the development of their person-centered plans as well as in the development of policies, processes, staffing and program service needs; and utilize such information in its review and revision of the overall system of service provision to persons served.

IV. DEFINITIONS

V. STANDARDS

- A. Organizational goals and objectives shall be based on a periodic and systematic analysis of the needs of current and potential individuals needing services.
- B. Organizational planning shall involve cooperative interagency planning whenever possible, especially for those programs serving persons who may need long-term financial support and/or long-term supportive services.
- C. Personnel shall actively participate in local community planning activities related to the persons served and the mission of the organization.
- D. A Community Needs Assessment shall be performed every three years to assess the organization's services and capabilities.
- E. As part of the Community Needs Assessment, changes and trends shall be described that may affect planning and that may have an impact upon the future. These may include, but are not limited to, changes in the community, government, economy, labor market, consumer needs, current practices, the service area, services offered, and reimbursement sources and practices.

- F. A written plan shall be produced based on the results of the organization's needs analysis and its mission in the community that guides program responsiveness to its individuals served. The written plan shall also provide guidance for the organization's staffing and training plan.
- G. Provision shall be made for the inclusion of persons served and their personal representative in their person-centered planning process.
- H. Management personnel shall solicit input from individuals at least annually to gain input on needed program improvements.
- I. Self-advocacy groups shall be encouraged by Agency personnel to provide formal structured input into the organization.
- J. The Sanilac CMH Board shall seek persons with disabilities and/or mental health conditions to serve on its Board, on sub-committees of the Board and as staff members and volunteers.
- K. An ongoing system of satisfaction surveys for individuals served shall be implemented to provide input to the organization on an ongoing basis. Results will be incorporated into the program evaluation system and management reporting system.
- L. The Sanilac CMH Board shall hold open public meetings that are accessible and encourage the input of persons served.
- M. The organization shall portray itself and its services in an accurate manner based on results shown in the program evaluation system.
- N. Persons served have the right to utilize the Agency's formal grievance procedure and appeals process as outlined in the Recipient Rights Policy and the Grievance and Appeals Policy.

OUTLINE OF AVENUES OF INPUT FOR PERSONS SERVED:

- 1. Direct involvement of the person served and their personal representative (if applicable) in their Person-Centered Planning (PCP) Meeting.
- 2. Face-to-face contacts with persons served by the care manager for the purpose of monitoring the provision of services.
- 3. Direct involvement of the person served and their guardian (if applicable) in the periodic review of their PCP.
- 4. Monthly self-advocacy groups such as: People First, Parent Advisory Council and Consumer Advisory Board.
- 5. Annual satisfaction surveys from persons served and their guardian (if applicable).
- 6. Annual Accessibility Survey focus groups from persons served.

7. Satisfaction surveys from persons served at 1 month after termination.
8. Community Needs Assessment focus groups and surveys from persons served every three years.
9. Direct representation of persons served on the Recipient Rights Advisory Committee, Consumer Advisory Board, Parent Advisory Council, CCBHC Committee, and Health and Safety Committee.
10. Monthly Board meetings that are open to the public and provide time for public comments.
11. Testimony at the annual public hearing.
12. Participation on Agency committees and work teams.

VI. ATTACHMENTS

None

VII. REFERENCES

None