

PLANNING COUNCILS 101

**An overview of the federal laws
relevant to mental health
planning and advisory councils**

National Association of Mental Health Planning and Advisory Councils
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MENTAL HEALTH PLANNING AND ADVISORY COUNCILS (PAC)

KEY REQUIREMENTS OF PUBLIC LAW 102-321 (1992)

Membership Composition

Planning councils must contain the following people:

- Representatives from the following State agencies: Mental Health, Education, Vocational Rehabilitation, Criminal Justice, Housing, Social Services, and the State Medicaid Agency.
- Representatives from public and private entities concerned with the need, planning, operation, funding and use of mental health services and related support services.
- Adults with serious mental illness who are receiving (or have received) mental health services.
- Families of such adults and families of children with emotional disturbance
 - The ratio of parents of children with serious emotional disturbance to other members of the council must be sufficient to provide adequate representation of such children.
- Not less than fifty percent of the members are not State employees or providers of services.

Duties of the Membership

- To review the Mental Health Block Grant Plan to make recommendations.
- To serve as an advocate for adults with a serious mental illness, children with a severe emotional disturbance and other individuals with mental illnesses.
- To monitor, review, and evaluate - not less than once each year - the allocation and adequacy of mental health services within the state.

REQUIRED PLAN CRITERIA

PUBLIC LAW 106-310 (2000)

Criterion 1: Comprehensive Community-Based Mental Health Service Systems

- Provides for the establishment and implementation of an organized community-based system of care for individuals with mental illness.
- Describes available services and resources in a comprehensive system of care, including services for dually diagnosed individuals. The description of the services in the comprehensive system of care to be provided with Federal, State and other local public and private resources to enable such individuals to function outside of inpatient or residential institutions to the maximum extent of their capacities shall include:
 - Health and mental health services,
 - Rehabilitation services;
 - Employment services;
 - Housing services;
 - Educational services;
 - Substance abuse services;
 - Medical and dental care;
 - Support services;
 - Services to be provided by local school systems under the Individuals with Disabilities Education Act;
 - Case management services; and other
 - Activities leading to reduction of hospitalization

Criterion 2. Mental Health System Epidemiology

- Contains an estimate of the incidence and prevalence in the State of serious illness among adults and serious emotional disturbance among children; and
- Presents quantitative targets to be achieved in the implementation of the system of care described under criterion (1).

Criterion 3. Children's Services

- Provides for a system of integrated services appropriate for the multiple needs of children... Examples of integrated services include:
 - Social services;
 - Educational services, including services provided under IDEA;
 - Juvenile services;
 - Substance abuse services; and
 - Health and mental health services.

Criterion 4. Targeted Services to Rural and Homeless Populations

- Describes State's outreach to and service for individuals who are homeless;
- Describes how community-based services will be provided to individuals residing in rural areas.

Criteria 5. Management Systems

- Describes financial resources, staffing and training for mental health service providers that are necessary for the implementation of the plan;

- Provides for the training of providers of emergency services regarding mental health; and
- Describes the manner in which the state intends to expend the grant under Section 1911 for the fiscal year involved.

Note: Criteria 1,2,4 and 5 should be addressed for adults with SMI and Criteria 1-5 should be addressed for children with SED.

Planning Council - Functions

Planning Councils are charged with:

- Reviewing the adequacy of the mental health system;
- Reviewing and providing comments on the State Plan and its implementation;
- Advocating for individuals who have a mental illness;

and

- Providing reports to the Governor and the federal government

Derivation of Goals and Objectives

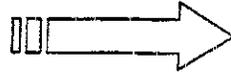
- Twelve Requirements (Criterion) of Public Law 102-321
- Input from field (Program Managers and supervisors as identified through their local advisory groups)
- Ongoing feedback from Planning Council
- Jeff D. requirements
- Strategic Planning Process (by Division)

Block Grant Process Overview

- P.L. 102-321 outlines requirements for states receiving federal block grant monies.
- Substance Abuse Mental Health Services Administrations (SAMHSA) administers the mental health portion of the block grant through its Center for Mental Health Services (CMHS).
- The Public Law requires states to have Planning Councils.
- States submit mental health plans as one requirement for the block grant funds. These plans must address 12 Criteria as outlined in the public law.
- Once SAMSHA reviews and approves Plan(s) the state is awarded its block grant, based on predetermined formula.
- States submit an annual progress report demonstrating compliance toward implementing previous year's Plan.

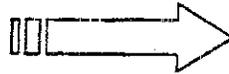
PUBLIC MENTAL HEALTH SERVICES
"SHIFTING THE PARDIGM"

UNIVERSE



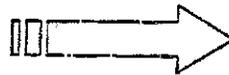
SERIOUSLY
MENTALLY ILL

MEDICAL MODEL



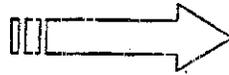
CONSUMER
GUIDED

CUSTODIAL



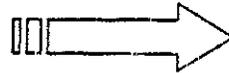
ALTERNATIVES TO
HOSPITALIZATION

PSYCHOTHERAPY



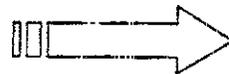
PSYCHOSOCIAL
REHABILITATION

CLINIC/OFFICE
BASED



COMMUNITY
BASED

UNLIMITED ACCESS



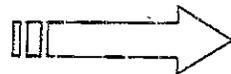
MANAGED CARE

DISABILITY



RECOVERY

ARTIFICIAL
SUPPORTS



NATURAL
SUPPORTS
