



Draft

Client and Family Leadership Committee

2012 Charter

Purpose:

Ensure the perspective and participation of people with lived experience of severe mental health issues, including their parents/caregivers and family members, is a significant factor in all MHSOAC decisions and recommendations.

Objectives

1. Review MHSOAC processes and make recommendations on how the Commission can more effectively ensure that the perspective and participation of individuals suffering from severe mental illness and their family members, including those from unserved and underserved communities, is a significant factor in all of the Commission's decisions and recommendations.
2. Advise MHSOAC regarding its policies and provide recommendations to ensure meaningful client and parent/caregiver/family participation in MHSOAC activities (WIC Section 5846(c)).
3. Ensure the MHSOAC's policies and activities are consistent with the philosophy, principles and practices of the Recovery Vision. (MHSA Sections 2(e); WIC Section 5813.5(d)).
4. Ensure the MHSOAC's policies and activities reflect client and family values and increase the effectiveness of client and parent/caregiver/family involvement in planning for California's mental health system. (WIC Section 5813.5(d); WIC Section 5892(c)).

Guiding Principles

Committee policy and strategy recommendations to the MHSOAC will reflect and strive to address the following MHSA-identified priorities:

1. Culturally and linguistically competent
2. Promotes a client/family/parent driven system
3. Reduces stigma and discrimination
4. Fully informed via a robust stakeholder process
5. Best practices and continuous improvement
6. Emphasize the inclusion of all ages across the live-span
7. Aimed to reduce mental health disparities

Activities:

1. Distribute the Commission's paper entitled: "Client-driven, Family-focused Transformation of the Mental Health System Through the California Mental Health Services Act."
2. Take lead, working with CLCC, to schedule and conduct quarterly community outreach forums. (April 4, June 27, September 13, and early November or December)
 - a. Develop summary reports on each community forum for posting on MHSOAC website and provide final report to the Commission on the Forums conducted at the end of the calendar year.
3. Develop guidance document for clarifying consumer-run, consumer-directed programs, peer support and peer specialization for purposes of MHSOAC programs.
4. Develop strategies for promotion of client and family employment in the mental health system.
5. Develop survey for counties on status of Crisis Intervention Team (CIT) training in individual counties.
6. Continue deliberation and provide recommendations regarding accessibility of MHSOAC meetings for clients, family members and the public.
7. Research and promote current best practice services that utilize a recovery-scale model and show successful outcomes with persons on the lower end of the recovery scale.
8. Continue efforts to support public awareness/education by maximizing communication via MHSOAC website:
 - a. Connect with communities throughout the state by placing videos and success stories on the MHSOAC website.
 - b. Provide information regarding community events for posting on website calendar.
9. Conduct Commission orientation with stakeholders.
10. Participate in workgroup developing reducing disparities project guidelines with Services Committee as the lead and CFLC and CLCC participating.
11. Participate in a workgroup convened by the Services Committee to provide input to develop and implement the Integrated Plan.

Date	January 2012
Leadership	Eduardo Vega, M.A., Chair Ralph Nelson Jr., M.D., Vice-Chair
Staff	Matt Lieberman, Dee Lemonds
Composition	<ol style="list-style-type: none">1. Khatera Aslami2. Donna Barry3. Kathleen Casela4. Carmen Diaz5. Shannon Jaccard6. Jennifer Jones7. Richard Krzyzanowski8. Steve Leoni9. Abby Lubowe10. Darlene Prettyman, R.N11. Ruth Tiscareno12. Jorge Wong PhD13. Gregory Wright14. Sally Zinman