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| <b>WCHO</b>   |                          | <i>Policy and Procedure</i>                   |  |
|   |                          | <i>Governing Body &amp; Director's Office</i> |  |
| Department:<br>Author: Steve Shelton & Kathy Reynolds |                          | Local Policy Number (if used)                 |  |
| Revision Date   | Approval Date<br>2/20/07 | Implementation Date<br>3/20/07                |  |
| <b>Archive Information</b>                            |                          |   |  |
| Date:   |                          |   |  |
| Reason:   |                          |   |  |

Washtenaw Community Health Organization (WCHO) is a governmental entity created by the Regents of the University of Michigan and the Washtenaw County Board of Commissioners to manage the mental health, substance abuse and primary health care benefit for Medicaid and indigent consumers. It functions under policy set by the Washtenaw Community Health Organization Board.

The WCHO Board has a variety of responsibilities pertaining to the oversight and operation of programs. Duties of the Board range from the evaluation of mental health and substance abuse service needs to approving an annual budget and securing funds to help support programming.

The Board is also responsible for establishing the mission of the WCHO and hiring an Executive Director who is responsible for the over-all operation of the WCHO. The Executive Director, in collaboration with the Board, develops policies regarding provider network operations. Additionally, the Executive Director is responsible for reporting to the Board with information on finances, program planning, and evaluation of the effectiveness and efficiency of services programming.

Washtenaw Community Health Organization operates within Washtenaw Community Health Organization, State of Michigan Department of Community Health guidelines and provides a comprehensive range of public services in all major mental health service areas.

- APPENDIX A: Washtenaw Community Health Organization Bylaws**
- APPENDIX B: Washtenaw Community Health Organization Mission, Vision, Values**
- APPENDIX C: Washtenaw Community Health Organization Roster of Board Members**
- APPENDIX D: Consumer Advisory Councils**
- APPENDIX E: Washtenaw County Job Description: WCHO Executive Director**

SOME APPENDICES ARE LOCATED IN THE HARD COPY OF THE POLICY AND PROCEDURE MANUAL ONLY

Washtenaw Community Health Organization

**Bylaws**

**ARTICLE I PURPOSE**

Section I.1 The Washtenaw Community Health Organization was created by an interlocal public agency agreement according to the Urban Cooperation Act of 1967. The creating entities are the County of Washtenaw (County) a Michigan Municipal Corporation and the Regents of the University of Michigan and its University of Michigan Health System (UMHS), a Michigan Constitutional Corporation.

Section I.2 The purpose of the Organization is to establish an integrated health care delivery system to provide mental health, substance abuse and primary specialty health care and health education to Medicaid, low income and indigent consumers as defined by the Mental Health Code and Medicaid eligibility guidelines.

**ARTICLE II DUTIES AND RESPONSIBILITIES**

Section II.1: The Board shall perform all functions expressly granted to it by the creating entities, its contracts and the Urban Cooperation Act (MCLA 125.501 and 507) including, but not limited to:

- a. Enter into contracts;
- b. Apply for, receive, and administer grants, gifts, bequests, or assistance funds;
- c. Approve the Organization's annual budget;
- d. Employ, engage, compensate, transfer or discharge personnel of the Organization as necessary;
- e. Construct, acquire, manage, own, use, operate, maintain, lease or sell real or personal property.
- f. Dispose, divide or distribute any property acquired through the execution of this agreement;
- g. Obtain insurance coverage for the Organization;
- h. Manage all mental health and substance abuse funds provided to the Organization either directly or via contract;
- i. Manage the primary and specialty medical care dollars that come to the University of Michigan Hospital and Health Centers (UMHHC) from M-CARE, for Medicaid consumers in Washtenaw County, and such other programs as determined by the entities;
- j. Create and approve policies and procedures for the Organization.

Section II.2: The Board shall not have the authority to bind, commit or encumber funds of the creating parties.

Section II.3: The creating parties reserve to themselves the powers delineated below:

- a. Approve, prior to any changes taking effect, changes to the membership, Articles of Incorporation or bylaws of the Organization;
- b. Receive and advise the Organization, in advance of implementation, on the Organization's needs assessment, annual plan, budget and external requests for funds;
- c. Review and advise the Organization on executive director candidates prior to appointment of an executive director by the Board.

### **ARTICLE III APPOINTMENT AND MEMBERSHIP PROVISIONS**

Section III.1: Six persons shall be appointed to the Board of Directors by the Washtenaw County Board of Commissioners, and six persons shall be appointed by the Regents of The University of Michigan, in accordance with the Urban Cooperation Act. Such members shall serve at the will of the entity that appoints them.

Section III.2: Each party shall appoint and maintain the appointment to the Board of at least one primary consumer (an individual who has received or is receiving services from that party or services from the private sector equivalent to those offered by the parties) and one secondary consumer (the family member of an individual receiving services from one of the parties to this agreement). A vacancy shall be filled for an unexpired term in the same manner as the original appointment.

Section III.3: The initial appointment of the twelve Board members shall be for staggered terms with four members appointed for one year terms, four members appointed for two year terms and four members appointed for three year terms. Each party shall appoint two members for each of the said initial terms. All subsequent appointments shall be for three year terms commencing on April 1 of each year.

Section III.4: Board members shall be paid a per diem at a rate of \$25 per meeting for a maximum of two meetings a month and shall be reimbursed for necessary travel expenses for each meeting attended. The mileage expense fixed by the county Board of Commissioners shall be the mileage reimbursement rate.

Section III.5: A member may be removed from the Board by the appointing party at any time. Non-attendance by a board member at three regular Board meetings consecutively or four or more meetings throughout the calendar year without just cause will result in removal from the Board. Replacement for a Board member will be by the party who appointed the member.

### **ARTICLE IV OFFICERS**

Section IV.1: The officers of the Board shall be a Chair, a Vice-Chair, a Secretary and a Treasurer. The officers shall be elected by a majority vote of the total members of the Board at the first meeting of the Board. Subsequent election of officers shall occur on an annual basis. Nominations for such positions shall be received from the floor and the election shall thereafter be held. The officers shall take office upon election.

Section IV.2: After the initial year of operation, a Board member must have served not less than one year on the Board before being eligible for election as chairperson. The officers elected under these provisions may be reelected for consecutive terms.

Section IV.3: Terms of Office – The officers shall be elected to serve for one year or until their successors are elected, whichever is later, and their term of office shall begin at the time of the election.

Section IV.4: The Board Chair shall preside over Board meetings and is authorized to sign documents.

Section IV.5 The Vice-Chair will carry out the duties of the Chair in the event the Chair is absent and/or unable to carry out his/her duties and responsibilities. The Vice-Chair will also perform such duties as may be designated by the Chair.

Section IV.6: The Secretary will ensure that minutes of the meetings are taken, maintained and distributed to all Board members. The Secretary shall review the Board minutes each month before they are included in the Board packet and sign off on the minutes after they are approved by the Board.

Section IV.7: The Treasurer shall be responsible for the review of the finances of the Organization and the presentation of the monthly revenue and expenditure reports of the Organization. The Treasurer shall meet with the Finance Officer of the Organization to periodically review budget detail and finance policy and procedure. The Treasurer shall also participate in the Organization's annual audit.

Section IV.8: In the absence of both the Chair and the Vice-Chair the meeting will be conducted by the Secretary; and in the absence of the all three, the meeting shall be conducted by the Treasurer.

## **ARTICLE V EXECUTIVE DIRECTOR**

The Board shall appoint an Executive Director to conduct the daily activities of the Organization.

The Executive Director of the Organization is directly responsible to the Board for implementing policies and procedures adopted by the Board, and other duties as directed by the Board.

## **ARTICLE VI            MEETINGS**

Section VI.1: The Board shall meet monthly. The annual meeting for election of officers shall occur at the first full Board meeting in April of each year. The annual plan and budget shall occur in September. The Board may meet more frequently as needed. The Board shall establish a regular schedule and agenda for each meeting of the Board and for Board committees. Board members may participate by phone in meetings called and convened in compliance with the Open Meetings Act.

Section VI.2: The Board may utilize an Executive Committee to oversee WCHO activities and prepare material and recommendations for the Board between meetings. The Executive Committee shall consist of the elected officers of the Board, Chair(s) of all standing committees, and the Executive Director of the Organization as an ex officio member.

Section VI.3: Quorum – The Board shall not take action except at a properly convened meeting in compliance with the Open Meetings Act, at which a quorum is present. A quorum is defined as nine members. Action is to be taken by the affirmative vote of at least nine of the Board members participating in the meeting. Each Board member shall have one vote and proxy voting is not permitted.

Section VI.4: Minutes - Minutes shall be maintained for all meetings of the Board. Such minutes shall include at least the following:

- The date of the meeting;
- The names of the members who attended;
- The topics discussed;
- The decisions reached and actions taken;
- The dates for implementation of recommendations; and
- The reports of the Executive Director and others.

## **ARTICLE VII            COMMITTEES**

There shall be such other standing or special committees as may be authorized by resolution passed by a majority of the Board of Directors.

Committees shall have such name or names as may be determined from time to time by resolution adopted by the Board of Directors. Each shall elect a chairperson if one is not named by the Board of Directors. The powers conferred upon any committee shall be as determined by the Board of Directors.

## **ARTICLE VIII            FISCAL MANAGEMENT**

Section VIII.1: The Board of Directors shall assume the responsibility for all fiscal functions of the Organization.

Section VIII.2: Fiscal Agent: Washtenaw County will act as fiscal agent for the Organization.

Section VIII.3: Bank Accounts: The funds of the Organization shall be deposited in the name of the Washtenaw Community Health Organization and shall be subject to checks drawn as authorized by resolution of the Board of Directors.

Section VIII.4: Fiscal Year The budget year shall be October 1 through September 30.

## **ARTICLE IX            PARLIAMENTARY AUTHORITY**

The rules contained in the current edition of Robert's Rules of Order Newly Revised shall govern the Board in all cases to which they are applicable and in which they are not inconsistent with these bylaws and any special rules of order the Board may adopt.

## **ARTICLE X            CONFLICT OF INTEREST**

The Board shall establish a conflict of interest policy assuring separation between member interests and action of the Board.

## **ARTICLE XI           INDEMNIFICATION**

The members of the Board shall be indemnified to the extent allowed by law.

## **ARTICLE XII           NONDISCRIMINATION**

The Organization shall not discriminate against any individual in hiring or promotion, election or appointment to office or directorship, on the basis of race, creed, color, religion, sexual orientation, age or national origin.

## **ARTICLE XIII        DISSOLUTION/DISTRIBUTION OF ASSETS**

In the event that this entity is dissolved then capital assets and liabilities shall be distributed proportionally according to the amounts contributed by the parties.

## **ARTICLE XIV        REVIEW AND AMENDMENT OF BYLAWS**

Any part or all of these by-laws may be amended from time to time at any meeting of the Board of Directors, provided that notice of the meeting described the substance of the proposed

amendment. Amendments to these by-laws shall be effective only when approved by an affirmative vote of at least nine (9) members of the Board of Directors and after approval by the creating entities.

## APPENDIX B

### WASHTENAW COMMUNITY HEALTH ORGANIZATION

#### STATEMENT OF VISION, MISSION AND PRINCIPLES

**VISION:** Individuals of all ages have universal access to high quality, integrated healthcare.

**MISSION:** To provide leadership for the development and implementation of unique, effective models of integrated (mental health, substance abuse and physical health) healthcare that creates medical homes for all Medicaid and indigent consumers.

#### **PRINCIPLES:**

##### **Consumer and Family Involvement**

We support the involvement of consumers and family members in the policy making process of the project. We support the use of person centered processes which honor the individual's preferences, choices, abilities and needs in developing individualized plans of service and support.

##### **Comprehensive, Quality Services**

We believe that children and adolescents with serious emotional disorders, adults with severe and persistent mental illnesses and persons with developmental disabilities should have access to a comprehensive range of high quality mental health, substance abuse and primary and specialty care services.

##### **Community Based Services**

We believe that persons in need of health care services should be served in the community based setting which is most appropriate.

##### **Public Accountability**

We support the accountability of publicly funded systems to publicly accountable boards including the Washtenaw County Commissioners and the Regents of the University of Michigan.

##### **Integrated Care**

We support the "carve out" of funding at the State level for mental health, substance abuse and developmental disabilities. We also support the development of local integration models that demonstrate community benefit and improve the quality, access and scope of service available.

##### **Research and Medical Education**

We value and support the role of research and medical education in the provision of service to the public consumer.

##### **Adaptability**

The WCHO believes that the Organization must be flexible and able to change direction quickly to meet the challenges of today's service environment.

**WCHO BOARD OF DIRECTORS – 2006**

Linda King, Board Chair  
Diane Davidson, Board Vice-Chair  
Leila Bauer, Board Secretary  
Saul Cooper, Board Treasurer

Barbara Bergman, Community Member  
Gene Brown, Community Member  
Barbara Chesney, Community Member  
Michael Dabbs, Community Member  
Virginia Harmon, Community Member  
Pat Hickmott, Community Member  
Cassandra St. Clair, Community Member  
Jerry Walden, Community Member

Kathy Reynolds, WCHO Executive Director  
Karen Milner, Associate Director/Medical Director

**ADVISORY COUNCILS:**

Washtenaw Community Health Organization supports five committees that are designed to provide advice and consultation to the WCHO Board of Directors and the WCHO staff on a variety of significant mental health issues. The membership of these committees is exclusively primary and secondary recipients of mental health services and is chaired by recipients of service selected by committee members.

1. WCHO Consumer Advisory Council: This group has a membership of twelve (12) individuals and WCHO staff who attend the monthly meetings. The group focuses on issues pertaining to severe and persistent mental illness in Washtenaw County.
2. WCHO Consumer Advisory Panel: This group has a membership of sixteen (16) individuals and WCHO and CSTS staff who attend the monthly meetings. This group focuses on issues pertaining to developmental disabilities in Washtenaw County.
3. CMH partnership of Southeastern Michigan Consumer Advisory Council: This group has a membership of twenty (20) individuals and focuses attention on issues in the region pertaining to children and families, adults with severe and persistent mental illness and services to the Developmentally Disabled. This Regional Advisory Council meets once a month and staff from the four CMH programs attend.
4. The Recipient Rights Advisory Committee (RRAC) acts as a consumer rights advisory body to the WCHO Board. The major responsibilities of the RRAC include: (a) protecting the WCHO Office of Recipient Rights from pressure that could interfere with the impartial, even handed and thorough performance of its duties; (b) advising the WCHO Board and Office of Recipient Rights on right-related matters; (c) making recommendations to the WCHO Executive Director regarding staffing and funding of the Office of Recipient Rights; and (d) reviewing and providing comment on the Office of Recipient Rights Annual Report before it is submitted to the Department of Community Health. The RRAC also serves as the Recipient Rights Appeals Committee to hear appeals brought by or on behalf of a WCHO recipient regarding a Rights investigation. The RRAC does not have By-Laws as the committee functions and responsibilities are contained in the Michigan Mental Health Code.
5. Substance Abuse Advisory Council: The Washtenaw Community Health Organization also supports the Livingston/Washtenaw Substance Abuse Advisory Council. This committee meets monthly, as required by law. The Substance Abuse Advisory council has twelve (12) members, eight (8) appointed by the WCHO Board of Directors and four (4) appointed by the Livingston County Board of Commissioners. The committee is not exclusively recipient of services but may include recipients. Michigan law identifies several responsibilities for this committee, including providing advice and consultation to the WCHO Board of Directors and WCHO staff.

Washtenaw Community Health Organization

**CONSUMER ADVISORY COUNCIL BY-LAWS**

I. Authorization

The Washtenaw Consumer Advisory Council is an advisory group that is established by the Washtenaw Community Health Organization to provide advocacy and advice on important issues and decisions affecting those with a severe Mental Illness. The Consumer Advisory Council provides advice to the WCHO staff, the CSTS staff, the WCHO Board of Directors, and provider agencies that provide services through a contract with the WCHO.

II. Membership

The Consumer Advisory Council shall be comprised of no more than 12 voting members who are current or former primary recipients of mental health services provided by the WCHO. Potential members may nominate themselves or be nominated by a current member of the Advisory Panel. Nominees are selected by a majority vote of the active voting membership present at the meeting where a vote on Membership occurs. There is no limit on the length of the term of membership.

A Primary Consumer is defined as an individual who directly receives services from Community Support and Treatment Services.

The Consumer Advisory Council shall make a good faith effort to ensure that Members are representative of the diversity of the community with respect to race, age, gender, types of WCHO services received, and other characteristics.

By accepting membership on the Council, the Members consent to the public use of their full names for the following purposes: written documents such as public event programs, newsletters, display boards, or brochures. Members will be informed in advance of the various uses of this information. No clinical information will be divulged in any way. Phone numbers and addresses will remain confidential and private, unless a Member chooses to let his or her specific contact information be made available.

The Consumer Advisory Council may have non-voting members representing the Washtenaw Community Health Organization, Community Support and Treatment Services, or other provider agencies that provide services in the WCHO system.

III. Officers

The Council will elect a Chairperson to facilitate the meetings and serve as the primary spokesperson for the Panel to WCHO and CSTS staff, the WCHO Board of Directors, and to other groups and organizations. The Chairperson shall serve a one year term.

The Council will elect a Secretary to assure that minutes are taken for each meeting and that an agenda and minutes from the previous meeting are available for each scheduled meeting of the Council. The Secretary shall serve a one year term.

Election of officers shall be by a majority vote of the Members in attendance at the December meeting prior to the expiration of a term of office.

#### IV. Goals of the Consumer Advisory Council

- a. The Consumer Advisory Council Members work as advocates to promote services, support, communication, opportunities, and legislation for individuals receiving supports and services from the WCHO due to severe mental illness.
- b. The Council works to create an awareness of issues for all people who have disabilities. Through education and advocacy, the Council combats stigma.
- c. The Council also solicits input and feedback on services by way of focus groups and provides testimony at public hearings on relevant issues.

#### V. Meetings

The Consumer Advisory Council shall meet once per month or more often if needed for special projects. The date, place, and time of meetings shall be determined by the Membership.

#### VI. Removal of Members

If a Member is not present for three (3) consecutive meetings without an excused absence, a letter will be sent to the individual asking if the individual would like to continue being a Member. If the answer is yes, the individual will be asked to state why they should continue serving on the Council. The Council will then make a decision as to whether or not they will support the ongoing membership of the Member. In the event of the dismissal of the Member from the Council, a special election will be held to appoint a new member.

#### VII. By-Laws

The By-Laws of the Council must be approved by the WCHO Board of Directors. The By-Laws can be amended by a two-thirds vote of the membership in attendance, with at least two weeks written notice prior to action. By-Law amendments must also be approved by the WCHO Board of Directors.

#### VIII. Approval

These By-Laws were approved by the Washtenaw Consumer Advisory Council on \_\_\_\_\_, 2004 and by the Washtenaw Community Health Organization Board of Directors on \_\_\_\_\_, 2004.

Washtenaw Community Health Organization

**CONSUMER ADVISORY PANEL BY-LAWS**

I. Authorization

The Washtenaw Consumer Advisory Panel is an advisory group that is established by the Washtenaw Community Health Organization and reports to the WCHO Board of Directors. The purpose of the Panel is to provide advocacy and advice on important issues and decisions affecting those with a developmental disability. The Consumer Advisory Panel provides advice to the WCHO staff, the CSTS staff, the WCHO Board of Directors, and provider agencies that provide services through a contract with the WCHO.

II. Membership

The Consumer Advisory Panel shall be comprised of no more than 16 voting members who are current primary or secondary recipients of developmental disability services provided by the WCHO. At least six (6) of the members must be primary or secondary consumers. Potential members may nominate themselves or be nominated by a current member of the Advisory Panel. Nominees are selected by a majority vote of the active voting membership present at the meeting where a vote on Membership occurs. There is no limit on the length of the term of membership.

A Primary Consumer is defined as an individual who directly receives services from Community Support and Treatment Services. A Secondary Consumer is defined as a family member or person serving in the role of a natural support person that assists a Primary Consumer with the services they received from Community Support and Treatment Services. A stakeholder is defined as a person who is associated with an organization that assists Primary Consumers or is a primary or secondary consumer who formerly received services from the WCHO.

The Consumer Advisory Panel shall make a good faith effort to ensure that Members are representative of the diversity of the community with respect to race, age, gender, types of WCHO services received, and other characteristics.

By accepting membership on the Panel, all Members consent to the public use of their full names for the following purposes: written documents such as public event programs, newsletters, display boards, or brochures. Members will be informed in advance of the various uses of this information. No clinical information will be divulged in any way. Phone numbers and addresses will remain confidential and private, unless a Member chooses to let his or her specific contact information be made available.

The Consumer Advisory Panel shall have non-voting advisors representing agencies such as, but not limited to, the Washtenaw Community Health Organization, Community Support and Treatment Services, and the Washtenaw Association for Community Advocacy. The role of the non-voting members is to provide assistance to Panel members on projects and tasks of the Panel.

### III. Officers

The Panel will elect a Chairperson to facilitate the meetings and serve as the primary spokesperson for the Panel to WCHO and CSTS staff, the WCHO Board of Directors, and to other groups and organizations. The Chairperson shall serve a one year term. Only primary or secondary consumers are eligible to be elected Chairperson. If the Chairperson is unable to attend a meeting, the Chairperson shall appoint a voting member to preside over that meeting.

The Panel will elect a Secretary to assure that minutes are taken for each meeting and that an agenda and minutes from the previous meeting are available for each scheduled meeting of the Panel. The Secretary shall serve a one year term.

Election of officers shall be by a majority vote of the Members in attendance at the December meeting prior to the expiration of a term of office.

### IV. Goals of the Consumer Advisory Panel

- a. The Consumer Advisory Panel Members work as advocates to promote services, support, communication, opportunities, and legislation for individuals receiving supports and services from the WCHO due to developmental disabilities.
- b. The Panel works to create an awareness of issues for all people who have disabilities. Through education and advocacy, the Panel combats stigma.
- c. The Panel also solicits input and feedback on services by way of focus groups and provides testimony at public hearings on relevant issues.

### VII. Meetings

The Consumer Advisory Panel shall meet once per month or more often if needed for special projects. The date, place, and time of meetings shall be determined by the Membership.

### VIII. Removal of Members

If a Member is not present for three (3) consecutive meetings without an excused absence, a letter will be sent to the individual asking if the individual would like to continue being a Member. If the answer is yes, the individual will be asked to state why they should continue serving on the Panel. The Panel will then make a decision as to whether or not they will support the ongoing membership of the Member. In the event of

the dismissal of the Member from the Panel, a special election will be held to appoint a new member.

VII. By-Laws

The By-Laws of the Panel must be approved by the WCHO Board of Directors. The By-Laws can be amended by a two-thirds vote of the membership in attendance. By-Law amendments must also be approved by the WCHO Board of Directors.

IX. Approval

These By-Laws were approved by the Washtenaw Consumer Advisory Panel on August 18, 2004 and by the Washtenaw Community Health Organization Board of Directors on \_\_\_\_\_, 2004.

# Operating Guidelines

Revised July 2005

## REGIONAL CONSUMER ADVISORY COUNCIL

### PARTNERSHIP MISSIONS

To provide Leadership in the development of integrated care through partnerships with the consumers and the community to assure consumers achieve their desired outcomes.

### PARTNERSHIP VISION

Recognition by our customers as a model of excellence for a regional system of care.

### VALUES

Consumer Focused: We adhere to the principles of person centered planning, self-determination, and consumer involvement and consumer satisfaction to guide affiliation decision-making.

Diversity: We respect that strength comes from embracing and building on unique qualities of individuals and their communities.

Partnership: We believe that by working together we can build an excellent system of care that strengthens each of our communities.

Accountability: We answer to the community and our costumers for our actions and results.

Access to Care: We are committed to providing services that are available and easily accessible.

Quality: We pursue excellence by using nationally recognized standards to improve our performance.

### PURPOSE

- To provide a consistent and meaningful opportunity for consumer “voice” across the affiliation region.
- To review and provide input including diverse opinions into proposed policies, procedures, and practices referred to the Council by the Affiliation Executive Committee.
- To review the implementation of policy, procedure and practice which have implications for consumers to assure that implementation remains “consumer friendly”.
- To provide an opportunity for consumer leadership development.

### MEMBERSHIP

Four consumer representatives shall be appointed by each local Board representing the three priority populations plus a consumer member “at large”.

- MI adult services
- DD service
- MI child
- At-large
- One (1) alternate person may be appointed by each county to represent any of the above regular members due to absence.

Representatives may be either primary or secondary consumers (parents or guardian of a consumer).

All committee members will serve three-year terms beginning July 2002. Initially half of each county's allotment of 4 representatives will be appointed for a 2-year term and the others for 3 years. This is for the purpose of getting the committee off to a successful start. All subsequent appointments will be for 3 years. Membership can be renewed once.

The membership term limit can be waived under the following conditions:

- There is less representation/ capacity of the individual board.
- If the individual board was at full representation and no new consumers from that board wished to serve.

Each county may send an alternate representative. The alternate can participate in the discussions but will vote only in the event that a member from his/her county is absent.

Active participation is expected. If a member misses 2 consecutive meetings the Council may recommend their dismissal from the council to the CMHSP Board that appointed them. It would then be up to that person's county to approve that dismissal and/or appoint another member. Due to the inability to attend meetings, a committee member may resign from the committee.

Vacancies will be filled maintaining the above population requirements.

Council chairperson, Chairperson-elect, and secretary will be elected by the Council members subject to the approval of the Affiliation Executive Committee.

## RESPONSIBILITIES

### MEMBERS:

- If a member is unable to attend a meeting, the member should call their staff support person for their county.
- Represent consumers in their identified population.
- Serve on work groups of the committee as needed.
- Full voting rights.

### COMMITTEE CHAIRPERSON

(The Chairperson shall be elected by the Council.)

- Can be a primary or secondary consumer.
- Cannot be from the same county as the chairperson-elect.

- Preside over all meetings.
- Appoint work group chairs.
- Prepare and assure distribution of the agenda (with the secretarial staff).

#### CHAIRPERSON-ELECT

(The Chairperson-Elect shall be elected by the Council.)

- Can be a primary or secondary consumer.
- Cannot be from the same county as the chairperson.
- Assume chairperson responsibilities should the chairperson not be available.
- Perform other duties as assigned by the chairperson.
- Will be monitored by the Chairperson so as to succeed the Chairperson when the chairperson's term expires or the Chairperson steps down.

#### SECRETARY

(The secretary shall be elected by the Council.)

- Prepare and distribute the minutes of each meeting at least a week prior to the next regularly scheduled meeting.
- Prepare and distribute the agenda at least a week prior to the next regularly scheduled meeting.
- Provide adequate notice of meetings to the entire membership.
- Notify chairperson at least 24 hours in advance if there will not be a quorum or enough people to hold the meeting.
- Follow the direction of the chairperson.
- The minutes will reflect the attendance of all members (both present and absent).

#### LOCAL CMHSP:

- Maintain members for the regional committee.
- Pay related expenses for their representatives as determined by local Board policy.
- Host at least 1 meeting at each location every year at the spoke CMHSP in a given calendar year. The meetings hosted at Livingston, Monroe, and Lenawee will be attempted to be scheduled in the late spring, summer, or early fall months due to weather/travel conditions. The remainder of the meetings will be located at a central local of Washtenaw. Facilitation and host duties with the exception of providing coffee will be rotated among all counties on a rotation basis when meetings are held in Washtenaw. In an emergency we will teleconference with other members when that service is possible.
- Inform the chairperson of members unable to attend a meeting.
- Provide a Recording Secretary if needed:
  - The Recording Secretary shall be an RCAC staff support person from the hosting county or may be a single support person regardless of which county is hosting the meeting.
  - Duties:

- Assist the Secretary to prepare and distribute the minutes of each meeting at least a week prior to the next regularly scheduled meeting.
- Record the minutes of the meeting.
- The minutes will reflect the attendance of all members (both present and absent).
- Notify the Chairperson at least 24 hours in advance if there will not be a quorum or enough people to hold a meeting.
- Follow the direction of the chairperson.

## CONDUCTING BUSINESS

If neither the committee chairperson nor chairperson-elect can attend a particular meeting, that meeting will be rescheduled.

Meetings will be conducted using guidelines agreed to by the Council. These guidelines include but are not limited to: a printed agenda, ability to adjust (add or subtract) an agenda by making a motion, amend a motion, engage in discussion, table motions, and adjourn/open a meeting. Voting will occur if consensus cannot be reached. Public comment space will be provided on the agenda.

Work groups will be formed and disbanded as needed.

**Quorum:** The minimum number of members present to conduct business will be 51% of the **current** membership.

**Voting:** If consensus cannot be reached voting may take place. Voting will occur with a majority present after all discussion has taken place providing a quorum (as defined above) is present. In addition, one final opportunity for discussion will be offered after the motion and the second have taken place but before the final vote. If voting is used, the Affiliation Executive Committee will be looking for substantial support (75% or above) to consider an action of the Council as approved. The Affiliation values a strong, clear voice from its consumers. A vote of less than 75% approval would not be viewed as consistent with that strong, clear voice.

## AMENDMENTS

These operating guidelines may be amended with a 2/3 vote of the members in attendance. Proposed amendments will be read at a regular meeting of the committee. Voting on the proposed amendment will take place at the following regularly scheduled meeting of the committee. The proposed amendment will be forwarded to the Affiliation Executive Committee for review and approval.

## **BY-LAWS**

### **LIVINGSTON-WASHTENAW SUBSTANCE ABUSE**

#### **ADVISORY COUNCIL**

#### **ARTICLE I – Name**

As mandated by P.A. 368 of 1978 of the State of Michigan, there shall be a local advisory council for Washtenaw and Livingston Counties. This advisory council shall be named the Livingston/Washtenaw Substance Abuse Advisory Council, hereafter called the Council.

#### **ARTICLE II – Objectives of the Council**

To assist the Coordinating Agency Governing Board by:

- A. Providing an opportunity for individuals within the applicant's service delivery area to comment upon the issuance of a substance abuse services license.
- B. Assisting in the development of a comprehensive substance abuse service delivery plan.
- C. Providing review and recommendations to the Governing Board of the progress and effectiveness of services delivered in accordance with the plan.
- D. Assuring that a mechanism exists for community input on substance abuse needs and services throughout the region.
- E. Providing such other assistance to the Coordinating Agency as necessary.

#### **ARTICLE III – Membership of the Council**

- A. The council shall be made up of twelve (12) members:
  - 1. Eight (8) representatives from Washtenaw County, appointed by the Coordinating Agency Governing Board and four (4) representatives from Livingston County, appointed by the Livingston County Board of Commissioners, with recommendations from the Council.

2. Each county shall have a majority of community representatives over licensed program representatives.
  3. Community representatives shall reside in the county represented, and shall not be employees of a licensed program in either county.
- B. Vacancies During Term of Office:
1. All vacancies shall be filled by the Washtenaw Community Health Organization Board and/or the Livingston County Board of Commissioners.
  2. All vacancies shall be filled only until expiration of the term.
- C. Length of Term:
1. All representatives shall serve three-year terms, starting January 1, of the year appointed.
  2. Appointments shall be effective upon approval of the respective Board.
  3. Terms shall be staggered to ensure that no more than 30% of council members turn over each year
- D. Termination and Resignation:
1. A member must resign in writing to the appointing body and to the Coordinating Agency.
  2. In the absence of a written resignation, three (3) consecutive absences from regularly scheduled meetings without prior notification or four (4) consecutive absences regardless of notification would require a request for reappointment.

#### **ARTICLE IV – Meetings**

- A. Regular meetings shall be scheduled at least six times per year, at least once each quarter, with each county being the site for at least three meetings during the calendar year.
- B. Written notification and agenda shall be made at least one week in advance of all regularly scheduled meetings.
- C. Special meetings may be called by the Chairperson or Acting Chairperson of the Council or by four (4) members of the Council.

- D. Council members must receive prior notification of special meetings.
- E. Seven (7) active members of the Council shall constitute a quorum, *with* representation from both counties.
- F. Motions shall be passed by a majority vote of those present.
- G. All regular and special meetings are open to the public. Minutes will be made available.

## **ARTICLE V – Officers**

- A. The Chairperson, Vice-Chairperson, and Secretary shall be elected by the Council. Elections shall be held annually in October.
- B. Duties and Responsibilities:
  - 1. The Chairperson shall:
    - a. Call meetings.
    - b. Preside over meetings.
    - c. Appoint special committees as deemed necessary.
    - d. Serve ex-officio on all committees with the right to vote.
    - e. Make appointments as necessary.
  - 2. The Vice-Chairperson shall, in the absence of the Chairperson, assume the duties of the Chairperson.
  - 3. The Secretary shall:
    - a. Assure that minutes are kept and distributed
    - b. Keep attendance of members at meetings.
  - 4. The Officers shall serve one year.

## **ARTICLE VI – Amendments**

- A. The By-laws may be amended by a majority vote of the total membership of the Council, provided that notice of proposed amendments is made available in writing to members at least two weeks in advance.
- B. Amendments shall not become effective until they have been reviewed and accepted by the Livingston County Board of Commissioners and approved by the Governing Board of the Coordinating Agency, Washtenaw Community Health Organization.

## **ARTICLE VII – Committees**

- A. Ad Hoc Committees may be formed by the Council at any time and shall act only on the direction of the council.
- B. Committee membership may include individuals other than Council Members, but each Committee must have a least one Council member appointed to it.

## **ARTICLE VIII**

For all items not otherwise covered in the By-Laws, Roberts Rules of Order shall apply.

Council Adopted Revised By-Laws 12/02/02  
Revised 10/27/03  
Revised 8/19/04

## APPENDIX E

# Washtenaw County

## JOB DESCRIPTION

**Position Code: 3414**  
**Employee Group: 32**  
Administrative Action – 4/2000

**CLASS TITLE: EXECUTIVE DIRECTOR OF WASHTENAW COMMUNITY  
HEALTH ORGANIZATION**  
**DEPARTMENT: WCHO**  
**FLSA STATUS: Exempt**

### **JOB SUMMARY**

Under the general direction of the Washtenaw Community Health Organization Board, conducts the daily activities of the Organization in accordance with the mission statement. Plans, develops, implements and administers activities of the Organization through subordinate supervisors to provide an integrated health care delivery system to Medicaid, low income and indigent consumers as defined by the Mental Health Code and Medicaid eligibility guidelines. Leads employees in adherence to the core competencies and guiding principles recognized by Washtenaw County and the University of Michigan Health System.

The Executive Director of the Organization is directly responsible to the Board for implementing policies and procedures adopted by the Board and other duties as directed by the Board; and in addition, serve, as the principal spokesperson for the Board.

### **EXAMPLE OF DUTIES**

1. Oversees establishment and implementation of personnel policies and business procedures for the organization.
2. Regularly meets with subordinate supervisors and other appropriate administrative staff to review activities, coordinate work effort, resolve problems and assure adherence to the Organization's goals, objectives and policies.
3. Directs and participates in various personnel activities of the Organization; assists supervisors with the evaluation and solution of personnel problems.

4. Monitors service planning and subsequent evaluation to insure that a high level of quality is maintained

## **EXECUTIVE DIRECTOR OF WASHTENAW COMMUNITY HEALTH ORGANIZATION**

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5. Monitors the flow of all mental health, developmental disability, substance abuse, primary and specialty medical care dollars funds provided to the Organization either directly or via contract for Washtenaw County consumers.
6. Oversees contractual relationships with WCHO providers
7. With the assistance of appropriate staff, prepares a preliminary budget and supporting data. Presents and justifies a proposed annual budget to the Washtenaw Community Health Board. Maintains and monitors revenue and expenditures throughout the year to assure that expenditures are within budget guidelines.
8. Directs the development, implementation and monitoring of an annual quality improvement plan.
9. Oversees establishment of and changes in organizational structure and technical infrastructure.
10. Sets a constructive and collegial tone which supports team work and creative problem solving and encourages mutual respect and diversity.
11. Communicates regularly with the County Commissioners and the Regents of the University of Michigan as the creating entities of the Washtenaw Community Health Organization.
12. Regularly meets with federal, state and local officials to become aware of changing requirements and to position the Organization for a competitive mental health environment.
13. Maintains a favorable public relations posture for the Washtenaw Community Health Organization, speaking to various groups, receiving news media representatives and writing on a variety of subjects relating to the Organization's mission.
14. Reads extensively and attends seminars and conferences to keep current with trends, experiments, and successful new programs focused on integrating behavioral health and

primary care services, serving the Medicaid population, and other interests of the Organization.

The above statements are intended to describe the general nature and level of work to be performed and are not to be construed as an exhaustive list of all job duties.

## **EXECUTIVE DIRECTOR OF WASHTENAW COMMUNITY HEALTH ORGANIZATION**

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#### **EMPLOYMENT QUALIFICATIONS**

##### **Knowledge of:**

Principles and practice of public administration specific to the delivery of Mental Health Services.

Basic knowledge of the needs and strengths of individuals with a severe and persistent mental illness and/or developmental disability.

Applicable federal, state and local laws and regulations including but not limited to the Michigan Mental Health Code, CARF Accreditation Standards, Department of Community Health Rules.

Principles and practice of employee supervision.

Research, data analysis and report preparation techniques.

Managed Care methodologies and programmatic options.

Computer applications related to the work.

Excellent oral and written English Usage.

Standard office practices, including the operation of standard office equipment.

##### **Skill in:**

Performing complex and sensitive professional level analytical and operations support work.

Planning, directing and reviewing the work of others and training others in work procedures.

Collecting, analyzing and evaluating varied information and data.

Interpreting, applying and explaining complex laws, policies and regulations.

Setting priorities, coordinating multiple projects and meeting critical deadlines.

Using sound, independent judgment within established policy and procedural guidelines.

Preparing clear, concise and effective written materials.

Representing the County effectively in meetings with others.

Establishing and maintaining effective working relationships with those contacted in the course of the work.

#### **PHYSICAL DEMANDS**

Duties require sufficient mobility to work in a normal office setting and use standard office equipment including a computer, vision to read printed materials and a computer screen and hearing and speech sufficient to communicate in person or over the telephone.

These requirements may be accommodated for otherwise qualified individuals requiring and requesting such accommodation.

**EDUCATION**

Master's degree or equivalent in Social Work, Clinical Psychology, Psychiatric Nursing, or other related Behavioral or Medical Science.

**EXPERIENCE**

Seven years experience related to the delivery of Professional Mental Health Care Services, some of which shall have been in an administrative/managerial capacity.

The qualifications listed above are guidelines. Other combinations of education and experience which could provide the necessary knowledge, skills and abilities to perform the job should be considered.

