

# Behavioral Health Planning Council Bylaws

State of Minnesota

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# BYLAWS

Approved Date: February 4, 2019

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## ARTICLE I: BEHAVIORAL HEALTH PLANNING COUNCIL

### Overview

Minnesota DHS Behavioral Health Planning Council (Council) is an integrated mental health and substance use disorder Council that advises the Minnesota Department of Human Services, Behavioral Health Division regarding Minnesota's combined Mental Health and Substance Abuse Federal Block Grant.

## ARTICLE II: PURPOSE AND RESPONSIBILITIES

### Section 1. Purpose

The purpose of the Minnesota Behavioral Health Planning Council (Council) is to assess the allocation and adequacy of services funded through Minnesota's combined Mental Health Federal Block Grant (MHBG) and Substance Abuse Block Grant (SABG).

[Title 42 - THE PUBLIC HEALTH AND WELFARE CHAPTER 6A – PUBLIC HEALTH SERVICE SUBCHAPTER XVII-BLOCK GRANTS \(42 U.S.C., Chapter 6A, Part B, Subpart I, §300x-3. State Mental Health Planning Council\)](#)

mandates that all states establish a State Mental Health Planning Council (referred to as Behavioral Health Planning Council). :

- A. Service needs of individuals with mental health and substance use disorders, issues, and concerns.
- B. Services delivered to those individuals at the program, service, and client level.
- C. Service gaps that must be filled to meet the needs of those who need behavioral health care.
- D. The effectiveness and efficiency of all services, especially those funded by MHBG and SABG programs.

### Section 2. Responsibilities

The Council may exercise the following responsibilities:

- A. Review plans provided to the Council by the state ([pursuant to 42 U.S.C., Chapter 6A, Part B, Subpart I, §300x-4.\(a\) Review of State Plan by Mental Health Planning Council](#)) and submit to the State any recommendations of the Council for modifications to the plans;

- B. Serve as an advocate for adults with serious mental illness, children with severe emotional disturbance, other individuals with mental illnesses, and people experiencing or at risk of experiencing substance use disorder;
- C. Monitor, review and evaluate not less than once each year, the allocation and adequacy of mental health and substance use disorder programs and services within the state.
- D. Establish Council bylaws, including group norms/values, leadership and decision-making structures.
- E. Represent Council activities under the direction of the Minnesota Department of Human Services, Behavioral Health Division, as needed.

In addition, the Minnesota Department of Human Services, Behavioral Health Division (DHS) will look to the Council to:

- A. Inform DHS about issues at the local level.
- B. Point out structural gaps in the system and identify barriers in the delivery of services to communities.
- C. Consult on policy development: DHS will share what they are planning and ask for the Council's feedback.

Offer insights for consideration on effective measures and themes/issues DHS should consider in its work.

### ARTICLE III: MEMBERSHIP AND REPRESENTATION

The Minnesota Behavioral Health Planning Council (COUNCIL) shall have a membership composition that meets the minimum standards defined by federal statute [Title 42 - THE PUBLIC HEALTH AND WELFARE CHAPTER 6A – PUBLIC HEALTH SERVICE SUBCHAPTER XVII-BLOCK GRANTS \(42 U.S.C., Chapter 6A, Part B, Subpart I, §300x-3. State Mental Health Planning Council\)](#) (See Appendix A: Statutes) and guidance from the federal Substance Abuse and Mental Health Administration (SAMHSA). In addition, the COUNCIL shall have additional standards defined by the COUNCIL in consultation with the Minnesota Department of Human Services, Behavioral Health Division (DHS).

#### Section 1. Minimum Standards

- A. Federal minimum standards for membership and representation in Council require:
  - 1. In general:
    - a. The Council be composed of residents of the State of Minnesota, including representatives of the principle State agencies with respect to: mental health, education, vocational rehabilitation, criminal justice, housing, and social services, and the development of the plan submitted to title XIX of the Social Security Act [42 U.S.C. 1396 et seq.];

- b. Public and private entities concerned with the need, planning, operation, funding and use of mental health services and related support services;
    - c. Adults with serious mental illnesses who are receiving (or have received) mental health services; and
    - d. The families of such adults or families of children with emotional disturbance.
2. Certain requirements:
  - a. Not less than 50% of Council members shall consist of people who are not State employees or providers of mental health services;
  - b. The ratio of parents of children with serious emotional disturbance to other members of the Council is sufficient to provide adequate representation of such children in the deliberations of the BHCP.
3. According to further guideline suggestions by Substance Abuse and Mental Health Administration (SAMHSA), membership should be comprised of one representative of the following groups while also ensuring geographic representation from across the state:
  - Adults with lived Experience of Mental Health
  - Adults in recovery from or at risk of Substance Use Disorder
  - Adults in Recovery from or at risk of Substance Use Disorder
  - Youth/Young Adults with lived Experience of Mental Health
  - Youth/Young Adults in recovery from or at Risk of Substance Use Disorder
  - Family Members of an Adult with lived Experience of Mental Health
  - Family Members of an Adult with Lived Experience of Mental Health
  - Family Members of an Adult in Recovery from or at risk of Substance Use Disorder
  - Family Members of an Adult in Recovery from or at risk of Substance Use Disorder
  - Parents/Guardians of a child/youth/young adult with lived experience of Serious Emotional Disturbances (SED)
  - Parents/Guardians of a child/youth/young adult with lived experience of Serious Emotional Disturbances (SED)
  - Parents/Guardians of a child/youth/young adult in recovery from or at risk of Substance Use Disorder

- Parents/Guardians of a child/youth/young adult in recovery from or at risk of Substance Use Disorder
- Mental Health Advocacy Organizations
- Substance Use Disorder Advocacy Organizations
- Representative of Peer-Led Mental Health Consumer/Survivor Organizations
- Representative of Peer-Led Substance Use Recovery Community Organizations (RCOs)
- Community Prevention Coalitions or Advocacy Organizations
- Mental Health Providers
- Mental Health Promotion Providers
- Substance Use Disorder Providers
- Substance Use Prevention Providers
- Culturally Specific Mental Health Providers or Organizations
- Providers of Mental Health Services to the LGBTQ and/or Underserved Communities
- Culturally Specific Substance Use Providers or Organizations
- Providers of Substance Use Disorder to the LGBTQ and/or Underserved Communities
- Federally Recognized Tribal - Mental Health
- Federally Recognized Tribal - Substance Use Disorder
- Minnesota Department of Employment and Economic Development
- Minnesota Housing Finance Agency
- Minnesota Department of Corrections
- Minnesota Department of Health
- Minnesota Department of Education
- Minnesota Department of Human Services

B. Minnesota minimum standards include:

1. There will be balanced representation for mental health and substance use/misuse experiences by designating one mental health and one substance use/misuse representative for each federally required seat in the Council.

2. Recognizing that Minnesota has 11 federally recognized tribes from Dakota and Ojibwe nations, the Council tribal appointment seat shall be a minimum of two seats, with one representative from a Dakota nation and one representative from an Ojibwe nation.
- C. Members of the Council are appointed by, and serve at the discretion of, Minnesota Department of Human Services, Behavioral Health Division.

## Section 2. Membership Terms

### A. Term Lengths

1. Beginning in September 2019, currently active Council members shall be appointed to a one-year additional term (approximately one half of the Council) and the other one-half of the Council shall be vacant seats for new members who, once selected, will be appointed to two-year terms through the open appointments application system. This is to build stratification of Council terms into the overall Council model. Beginning in the fall of 2020, vacant Council seats will open annually for appointments to a two-year term through the Secretary of State Open Appointments system. Council members may serve up to three terms. State agency and tribal representatives are appointed by the agency they represent and are exempt from the maximum length of service.
2. Prior to the completion of an existing member's two year term:
  - a. DHS staff must send the member an email notification and form three months in advance notifying the member of the upcoming completion of the member's current term.
  - b. DHS staff will notify the member that the form must be completed and returned to DHS within 14 days if the member would like to apply for re-appointment for the upcoming term.
  - c. Replies will be forwarded to the Executive Committee for review of attendance.
  - d. DHS staff will follow-up with a confirmation email indicating whether the individual has been appointed for the upcoming term.
3. The Council members will assist in nominating potential new Council members to fill vacant seats on the Council.
4. Members may serve until their successors are appointed and qualify.

### B. Compensation

#### Section 1. Reimbursable Expenses

##### Travel

Auto Mileage (at the current IRS reimbursement rate)

##### Child Care



Reasonable child care expense reimbursement for parents, family members and consumers, when necessary to attend meetings.

### **Lodging**

Should be a reasonable rate. An original copy of the receipt must be included with the vendor's invoice. It is suggested that members utilize hotels with which the Council has a negotiated rate, or a similarly priced hotel.

### **Meals**

Members shall be reimbursed for meals under the following conditions:

- Breakfast reimbursements may be claimed if the member leaves home before 6:00 a.m. or is away from home overnight.
- Lunch reimbursements may be claimed if the member is in travel status more than 35 miles away from his/her normal office or is away from home overnight.
- Dinner reimbursements may be claimed if the member cannot return home until after 7:00 p.m. or is away from home overnight.
- Current maximums: \$9 for breakfast, \$11 for lunch, \$16 for dinner (including tips).

Meals can be combined to the maximum qualified per day (for example, if you qualify for lunch and dinner, you can get reimbursed for \$27 by any combination such as \$10 for lunch and \$17 for dinner).

Receipts are not needed for meals.

Vendor's invoices are available at each Council meeting or from Council staff. The state fiscal year runs from July 1 to June 30. All claims within that time are due by the following July 15.

### **Per Diem Policy**

Members of the Council may receive a \$55 per diem for:

1. Behavioral Health Planning Council meetings.
2. Behavioral Health Planning Council committee or work group meetings on days other than Behavioral Health Planning Council meeting days.
3. Meetings where the Behavioral Health Planning Council member(s) has been specifically requested to have representation or where members would be presenting on behalf of the Behavioral Health Planning Council committees or a work group, subject to pre-approval by the Chairs and Council staff .
4. The meeting must be at least two hours including travel time. This includes videoconferences that require at least two hours away from home or place of business.

In all cases per diems are not allowed for individuals who are otherwise compensated for their time.

Members who are state employees or employees of political subdivisions must not receive the daily compensation for activities that occur during working hours for which they are compensated by the state or political subdivision.

However, a state or political subdivision employee may receive the daily payment if the employee uses vacation time or compensatory time accumulated in accordance with a collective bargaining agreement or compensation plan for Council or committee activity. Members who are state employees or employees of the political subdivisions of the state may receive the expenses provided for in this section unless the expenses are reimbursed by another source. Members who are state employees or employees of political subdivisions of the state may be reimbursed for child care expenses only for time spent on board activities that are outside their working hours.

## ARTICLE IV: MEETINGS

### Section 1. Meetings

- A. The Council shall meet at least four times annually. Meetings are held approximately quarterly or as needed, determined by the Council.
- B. Meeting notices and agendas will be posted on the Minnesota Department of Human Services website and sent out via email at least five calendar days prior to the meeting.
- C. Council members may not designate an alternate to attend meetings in their place unless the member is a representative from a designated agency and appointed to represent that agency. State employees and members of advocacy organizations who are designated as members by virtue of their office or advocacy organization representation, may appoint a designated alternate to attend meetings and provide a proxy vote in their stead.
- D. All meetings of the Council shall be open to the public. Members of the public shall be permitted to comment in the meeting, based on meeting guidelines, at the discretion of the co-chairs.

### Section 2. Quorum

A quorum of the Council for the purposes of voting shall be constituted of a majority (51%) proportioned to membership guidelines (Article III, Section 1, 2, 3) of the voting membership being present (in-person or via other approved virtual means). Co-chairs will follow guidance documents developed by the Council to ensure quorum meets Council guidelines for balanced representation for people with lived experience, advocacy organizations, provider and government.

### Section 3. Decision-making Framework

- A. The Council's Decision-making Framework reflects the Council's core values of inclusion and fostering authentic relationships. Therefore the Council uses consensus as a decision-making framework so that Council decisions and policy recommendations better address a variety of concerns through a process that includes and respects all parties and that builds a cooperative and collaborative group atmosphere.

- B. In seeking consensus, the exploration of the issues through dialogue is fostered.
- C. If any persons are not fully in agreement, they will be asked to express their concerns and/or objections. Co-Chairs and Council members will work together to address concerns and/or objections with a focus on incorporating ideas expressed by members so that all Council members are represented in Council policy recommendations and decisions. Co-chairs and Council members will work to address concerns and/or objections before moving toward a vote.
- D. If a Council member(s) has an objection that they feel is strong enough to request greater time for decision-making, the Council member(s) may request that a vote be tabled. If a vote is tabled due to an objection, the co-Chairs and Council members will work to gather information about the objection (including gathering data or background on a policy issue or community experience) so that a revised decision can be developed.
- E. Council members may abstain from voting. Abstentions will be recorded in meeting minutes and Council members may state the reason for their abstention and have it recorded in meeting minutes if they wish for their abstention to be recorded in detail.
- F. Members must be present to vote (in-person or via other approved virtual means) to vote, unless otherwise specified.
- G. There must be a quorum for decisions.

#### **Section 4. Rules of Order**

- A. The Council Co-Chairs are responsible for facilitation of Council meetings. To ensure equitable participation, members are asked to wait until they are recognized by the Co-Chair(s) before addressing the Council.
- B. The DHS staff will document any motions made by Council members attending by phone or other virtual presence.
- C. Motions require a second in order to proceed to voting.
- D. After a motion is seconded, the Co-Chairs will facilitate discussion regarding the proposed motion.
- E. Amendments to the motion may be offered during discussion.
- F. For additional rule of order guidance visit the web link below or see Appendix C: Simplified Roberts Rules of Order guidance

[http://intelec.org/public\\_docs/intSimplifiedRobertsRulesofOrder.pdf](http://intelec.org/public_docs/intSimplifiedRobertsRulesofOrder.pdf)

#### **Section 5. Alternatives; Voting**

There shall be no voting proxies for meetings of the Council unless the Council member is a representative from a designated agency. State employees and members of advocacy organizations who are designated as members by virtue of their office or advocacy organization representation may appoint a designated alternate to attend meetings and provide a proxy vote in their stead.

## Section 6. Policies

The Council shall have the power to establish policies for operation, guidelines for meetings, and other activities, provided they are not superseded by these bylaws.

## ARTICLE V: EXPECTATIONS OF MEMBERS

### Section 1. Meeting Expectations

Council members are expected to participate in at least one work group (as work groups become available) of their choice. Work groups will meet on a schedule determined by the work group. Meeting attendance may be in-person, via phone and/or other available technology.

All members of the Council act as individuals in the deliberation of issues. Although members bring expertise and insight from their organizations, they are not required to make decisions on issues based on the position of their organization, unless they are appointed as a designated representative of their organization or state agency.

Members from an organization or state agency are there to represent their organization or state agency. If a member is appointed to the council to represent a particular organization or state agency, that member is expected to speak on behalf of the organization of which they are appointed to the council.

Facilitator must ensure and manage everyone to have a chance to speak. Facilitators must include people who are participating virtually and should ensure all members have an opportunity to participate.

Members should be open to serving in a leadership capacity in the future. Any member may be co-chair other than State employees. It is encouraged but not mandated that each work group include individuals with a lived experience or family member. Co-Chairs should not represent the same agency/organization.

When sharing one's position on an issue to an outside organization or individual (such as to a legislator), unless the position has been adopted by the Council, members must state that it is their individual position.

Members should make every effort to inform themselves of current issues by reading e-mails from the Council staff and other communications, such as legislative updates from other organizations. New members will receive an orientation which will include descriptions of activities and functions of the Council, legislature, and the Department of Human Services.

Occasionally the Department of Human Services or another organization may request Council representation on an advisory group or task force.

### Section 2. Attendance Expectations

A member may be removed by the appointing authority at any time at the discretion of the appointing authority (DHS). The co-chairs of the Behavioral Health Planning Council (Council) shall contact a member missing three consecutive meetings or three absences during a two-year period without communication and/or without designation of a proxy if the Council member represents a designated agency. If initial outreach from the Council co-chairs is not successful, the appointing

authority of the Council shall contact the member in writing or verbally to determine interest and continued participation in the Council. The Council co-Chairs and designating authority will work together to determine if removal of a member is needed.

**A.** If an individual misses three consecutive bi-monthly meetings, missing a fourth consecutive meeting may be grounds for removal. If an individual misses three meetings within a calendar year, missing two additional meetings during a second year may be grounds for removal.

**B.** If a member who is designated by a department is absent three consecutive meetings, a request will be made to the member to either give assurance of future attendance or for the department to designate another representative who can assure attendance.

**C.** In all cases, assurance of future attendance or extenuating circumstances may be taken into consideration at the discretion of the Co-Chairs and the Council staff.

**D.** A member may resign at any time by delivering written notice to the Co-Chairs or the Council staff. A resignation is effective when the notice is delivered unless the notice specifies a later effective date.

**E.** In the case of a vacancy on the Council, the appointing authority shall appoint a person to fill the vacancy for the remainder of the unexpired term.

### Section 3. Member Removal

Co-Chairs shall work in consultation with the designating authority to remove members. Privacy and confidentiality shall be respected. Co-Chairs will subsequently inform the Council if a Council member is removed. Council members shall be informed of their end of service and be recognized for their contributions as they transition from the Council in the form of a letter.

## ARTICLE VI: OFFICERS

### Section 1. Number

The Behavioral Health Planning Council (Council) shall elect two officers: a Co-Chair representing mental health and a Co-Chair representing substance use/misuse. It is encouraged that at least one of the chairs be a person with lived experience.

The Minnesota Department of Human Services, Behavioral Health Division shall provide staff support to the Council. The Co-Chairs shall be members of the Council.

### Section 2. Duties

#### A. Co-Chairs

The duties of the Co-Chairs shall be to:

1. Be chief officers and representatives of the Council;
2. Call and co-facilitate meetings of the Council;
3. Help to establish workgroups and committees;

4. Help identify Council vacancies and ensure vacancies are filled;
5. Ensure Council membership is complete and diverse;
6. Work in consultation with the Behavioral Health Division staff in coordinating the activities of the Council.
7. The Chairs shall appoint members to chair the work groups (in consultation with workgroup members) and shall name and dissolve such other special committees as necessity dictates, subject to the approval of the Council.
8. Reach out to Council members as outlined in Sect. 2. Attendance Expectations.

The appointing authority will work in support and coordination with the co-Chairs and assist in co-Chairs in fulfilling their duties when requested by the co-Chairs.

### Section 3. Election

The two co-chairs of the Behavioral Health Planning Council shall be elected every two years by a majority vote of the entire membership. Voting may take place in-person, via email, or other approved technology. The election meeting shall be held each year at the first meeting following the start of federal fiscal year that reaches quorum of the membership. Special elections can occur as needed in the event of an officer vacancy.

### Section 4. Term of Office

Each of the two officers of the Council shall serve a term of two years beginning with the day following the election meeting. Co-Chairs may serve up to two consecutive terms for a total of four years. Co-chairs may function as ex-officio chairs after completion of their term to mentor future chairs.

### Section 5. Removal

Officers of the Council may be removed by a majority vote of the total membership whenever, in its judgment, the best interests of the Council would be served, but such removal shall be without prejudice to such officer's position as a member. An officer may also be removed from office if the appointing authority removes him/her from the advisory Council or if he/she is no longer a member for other reasons. Any officer may resign at any time by giving written notice to the Council.

## ARTICLE VII: COMMITTEES

### Section 1. Executive Committee

The only standing committee of the Council shall be the Executive Committee.

- A. Composition: The two Co-Chairs of the Council; shall serve as the Executive Committee, and a representative of each of the work groups.
- B. Duties:
  1. The Executive Committee shall develop and review agendas;

2. Review and approve requests from agencies and individuals wishing to come before the Council;
3. Recommend to the Council new or updated policies and procedures, and review and make recommendations on other items to come before the Council.
4. In between meetings and during those months the Council does not meet, the Executive Committee, shall have the general supervision of the affairs of the Council. Notice of items to come before the Executive Committee will be given to Council members.
5. Unless empowered by the council to make a decision, all decisions made by the Executive Committee shall be approved by the Council at the next scheduled Council meeting.
6. Other matters as requested by the Minnesota Department of Human Services, Behavioral Health Division
7. Monitor attendance of Council members per Article V: Expectations of Members, Section 2. Attendance Expectations and provide guidance to appointing authority as it relates to attendance. DHS staff will track attendance and provide feedback to the Executive Committee.

## Section 2. Work Groups

### A. Chairs

Work Group Chairs will be selected by the work group unless designated by the Co-chairs.

### B. Decision Making

Voting members of the work group shall be designated by each work group, with the approval of the Council Co-chairs. All Council members are automatically eligible to serve as voting members of specific work group. Non-Council members may serve as non-voting work group members.

### C. Recommendations

All work group decisions shall be made by simple majority vote of members present in person or via other technology at a given meeting. Recommendations shall be forwarded to the full Council for a final disposition.

### D. Removal

The chair or any member of any work group may be removed for willful misconduct. Decision will be recommended by the workgroup to the executive committee.

### E. Creation and Termination of Working Groups

Work groups with their duties and goals can be created by a simple majority vote of the Council. Work groups can then be terminated by a simple majority vote of the Council once their duties and goals have been accomplished.

## **ARTICLE VIII: CONFLICT OF INTEREST**

It is the responsibility of each member of the Behavioral Health Planning Council (Council) to discharge their duties in good faith, in a manner the person reasonably believes to be in the best interests of the Minnesota Department of Human Services and with the care an ordinarily prudent person in a like position would exercise under similar circumstances.

A member of the Council shall recuse themselves from voting on motions in situations where the member has a conflict of interest. A member of the Council who is an employee of the State shall abstain from voting on issues affecting State departments.

### **Section 1. Conflict**

- A. An action by which a member of the Behavioral Health Planning Council (Council) would obtain personal, family and/or organizational financial gain will be regarded as creating a conflict of interest.
- B. Any member having a known conflict of interest or potential conflict of interest shall inform the executive committee and shall request permission to withdraw while the matter in which such conflict of interest may exist is under consideration.
- C. Any member of the Council may raise questions of possible conflict of interest by another member at a council meeting or work group meeting.

### **Section 2. Abstention**

- A. Council members who have a conflict of interest on a specific proposal or formal recommendations created by the Council shall not participate in recommendations and feedback to SAMHSA reports and proposals, assembly of background information, discussions, recommendations or decisions on that proposal or those Council recommendations. Members having a conflict of interest shall be allowed to submit reports concerning a specific proposal or recommendation, but shall do so outside of their role as Council members.
- B. Any member of the Council shall recuse themselves from voting on any matter that could cause a conflict of interest.

### **Section 3. Resolution**

All questions regarding actual or potential conflict of interest shall be decided by the Executive Committee, DHS staff and appointing authority. Conflict of interest procedure will be followed per state guidelines.

## **ARTICLE IX: ANTI-DISCRIMINATION**

The Council shall not discriminate in any regard with respect to race, creed, color, sex, sexual orientation, marital status, religion, national origin, ancestry, pregnancy, and parenthood, custody of a minor child, physical or mental disability, receipt of public assistance, gender identity, and familial



status. If a council member feels discriminated against they should report to the appointing authority. Anti-discrimination procedure will be followed per state guidelines.

#### ARTICLE X: RATIFICATION

These bylaws will be considered ratified when a two-thirds majority of the total membership of the Council has voted approval.

#### ARTICLE XI: AMENDMENTS

Revisions to the Bylaws may be made by the Council through the following process every two years:

- A. Proposed revision shall be placed on agenda for scheduled meetings of the Council.
- B. Proposed revision shall be discussed by the Council and passed by three-fourths of those members present during a vote.

## Appendix A: Statutes

42 U.S.C.

United States Code, 2010 Edition

Title 42 - THE PUBLIC HEALTH AND WELFARE

CHAPTER 6A - PUBLIC HEALTH SERVICE

SUBCHAPTER XVII - BLOCK GRANTS

Part B - Block Grants Regarding Mental Health and Substance Abuse

subpart i - block grants for community mental health services

From the U.S. Government Printing Office, [www.gpo.gov](http://www.gpo.gov)

Appointing Authority – Assistant Commissioner of Community Supports Administration, MN Department of Human Services

Link to full statute: <https://www.gpo.gov/fdsys/pkg/USCODE-2010-title42/html/USCODE-2010-title42-chap6A-subchapXVII-partB-subparti.htm>

### SUBPART I—BLOCK GRANTS FOR COMMUNITY MENTAL HEALTH SERVICES

#### §300x–3. State mental health planning Council

##### (a) In general

A funding agreement for a grant under section 300x of this title is that the State involved will establish and maintain a State mental health planning Council in accordance with the conditions described in this section.

##### (b) Duties

A condition under subsection (a) of this section for a Council is that the duties of the Council are—

- (1) to review plans provided to the Council pursuant to section 300x–4(a) of this title by the State involved and to submit to the State any recommendations of the Council for modifications to the plans;
- (2) to serve as an advocate for adults with a serious mental illness, children with a severe emotional disturbance, and other individuals with mental illnesses or emotional problems; and
- (3) to monitor, review, and evaluate, not less than once each year, the allocation and adequacy of mental health services within the State.

##### (c) Membership

###### (1) In general

A condition under subsection (a) of this section for a Council is that the Council be composed of residents of the State, including representatives of—

- (A) the principal State agencies with respect to—

(i) mental health, education, vocational rehabilitation, criminal justice, housing, and social services; and

(ii) the development of the plan submitted pursuant to title XIX of the Social Security Act [42 U.S.C. 1396 et seq.];

(B) public and private entities concerned with the need, planning, operation, funding, and use of mental health services and related support services;

(C) adults with serious mental illnesses who are receiving (or have received) mental health services; and

(D) the families of such adults or families of children with emotional disturbance.

## (2) Certain requirements

A condition under subsection (a) of this section for a Council is that—

(A) with respect to the membership of the Council, the ratio of parents of children with a serious emotional disturbance to other members of the Council is sufficient to provide adequate representation of such children in the deliberations of the Council; and

(B) not less than 50 percent of the members of the Council are individuals who are not State employees or providers of mental health services.

## (d) “Council” defined

For purposes of this section, the term “Council” means a State mental health planning Council.

(July 1, 1944, ch. 373, title XIX, §1914, as added Pub. L. 102–321, title II, §201(2), July 10, 1992, 106 Stat. 382.)

## References in Text

The Social Security Act, referred to in subsec. (c)(1)(A)(ii), is act Aug. 14, 1935, ch. 531, 49 Stat. 620, as amended. Title XIX of the Act is classified generally to subchapter XIX (§1396 et seq.) of chapter 7 of this title. For complete classification of this Act to the Code, see section 1305 of this title and Tables.

## Prior Provisions

A prior section 300x–3, act July 1, 1944, ch. 373, title XIX, §1915, formerly §1914, as added Aug. 13, 1981, Pub. L. 97–35, title IX, §901, 95 Stat. 545; renumbered §1915 and amended Oct. 19, 1984, Pub. L. 98–509, title I, §§105(b), 106(a), (b), (d), (g), 98 Stat. 2358, 2359; Nov. 18, 1988, Pub. L. 100–690, title II, §§2024–2026, 102 Stat. 4198, 4199; Aug. 16, 1989, Pub. L. 101–93, §2(d), 103 Stat. 606; Nov. 28, 1990, Pub. L. 101–639, §3(a)(2), 104 Stat. 4601, related to the use of grant allotments for alcohol, drug abuse, and mental health services, prior to repeal by Pub. L. 102–321, §201(2).

A prior section 1914 of act July 1, 1944, was classified to section 300x–2 of this title prior to repeal by Pub. L. 102–321.

## §300x-4. Additional provisions

### (a) Review of State plan by mental health planning Council

The Secretary may make a grant under section 300x of this title to a State only if—

- (1) the plan submitted under section 300x-1(a) of this title with respect to the grant and the report of the State under section 300x-52(a) of this title concerning the preceding fiscal year has been reviewed by the State mental health planning Council under section 300x-3 of this title; and
- (2) the State submits to the Secretary any recommendations received by the State from such Council for modifications to the plan (without regard to whether the State has made the recommended modifications) and any comments concerning the annual report.

## Appendix B: Draft Vision and Draft Core Values (2017-2018)

### Vision for Minnesota (for Mental Health and Substance Abuse Disorder) - DRAFT

All Minnesotans, wherever they live, experience optimal health and well-being because of a fully integrated health care system that promotes:

- Full acceptance of what health and wellness mean to each resident, including physical condition, housing, food, security, social connections, community belonging, etc.
- Full access in all locations, communities, tribal reservations, cultures, and languages
- Full focus on prevention and continuum of care availability at the local level and inclusive of all generations
- Full choice for each resident—i.e., the resident chooses, not a social worker or case manager
- Full collaboration of providers, programs, and organizations
- Full integration into community and community traditions and culture
- Local staff who largely reflect the community and culture, and who make use of common or traditional community resources

### Core Values - DRAFT

Core values are our beliefs or ideals that shape the identity and culture of our group and how we as group members interact and work together.

#### *We value*

- **A Focus on the Client and Their Community:** We amplify client and community voices to transform mental health and substance use disorder programs, services, and processes and to create more responsive and effective care.
- **Full and Equitable Opportunities for Wellbeing:** We apply an equity lens to support and maintain access, cultural relevancy, fairness, innovation, and systems accountability.
- **Inquisitiveness and Open-Mindedness:** We support each other's curiosity, learn from and trust each other's expertise, and are willing to be in ambiguity.
- **Authentic relationships:** We assume the best about each other; listen with humility and compassion; act with transparency; and recognize and build on each other's strengths.
- **Positive Impacts:** We are committed to ensuring positive impacts in the well-being of Minnesota residents, its communities, and the state as a whole.

## Appendix C: Simplified Roberts Rules of Order

### Simplified Roberts Rules of Order

#### Main ideas:

- Everyone has the right to speak once if they wish, before anyone may speak a second time.
- Everyone has the right to know what is going on at all times.
- Only urgent matters may interrupt a speaker.
- The [members] discuss only one thing at a time.

#### How to do things:

- 1. You want to bring up a new idea before the group.**  
After recognition by the [president], present your motion. A second is required for the motion to go to the floor for debate, or consideration.
- 2. You want a motion just introduced by another person to be killed.**  
Without recognition from the [president] simply state "I object to consideration." This must be done before any debate. This motion requires no second, is not debatable and requires a 2/3 vote.
- 3. You want to change some of the wording in a motion under debate.**  
After recognition by the [president], move to amend by
  1. adding words,
  2. striking words or
  3. striking and inserting words.
- 4. You like the idea of a motion under debate, but you need to reword it beyond simple word changes.**  
Move to substitute your motion for the original motion. If it is seconded, debate will continue on both motions and eventually the body will vote on which motion they prefer.
- 5. You want more study and/or investigation given to the idea under debate.**  
Move to refer to a committee. Try to be specific as to the charge to the committee.
- 6. You want more time personally to study the proposal under debate.**  
Move to postpone to a definite time or date.
- 7. You are tired of the current debate.**  
Move to limit debate to a set period of time or to a set number of speakers. Requires a 2/3 vote.

**8. You have heard enough debate.**

Move to close the debate. Requires a 2/3 vote. Or move to previous question. This cuts off debate and brings the assembly to a vote on the pending question only. Requires a 2/3 vote.

**9. You want to postpone a motion until some later time.**

Move to table the motion. The motion may be taken from the table after 1 item of business has been conducted. If the motion is not taken from the table by the end of the next meeting, it is dead. To kill a motion at the time it is tabled requires a 2/3 vote. A majority is required to table a motion without killing it.

**10. You want to take a short break.**

Move to recess for a set period of time.

**11. You want to end the meeting.**

Move to adjourn.

**12. You are unsure that the [president]has announced the results of a vote correctly.**

Without being recognized, call for a "division of the house." At this point a standing vote will be taken.

**13. You are confused about a procedure being used and want clarification.**

Without recognition, call for "Point of Information" or "Point of Parliamentary Inquiry." The [co-chairs] will ask you to state your question and will attempt to clarify the situation. Simplified Robert's Rules of Order

**14. You have changed your mind about something that was voted on earlier in the meeting for which you were on the winning side.**

Move to reconsider. If the majority agrees, the motion comes back on the floor as though the vote had not occurred.

**15. You want to change an action voted on at an earlier meeting.**

Move to rescind. If previous written notice is given, a simple majority is required. If no notice is given, as 2/3 vote is required.

**You may INTERRUPT a speaker for these reasons only:**

- to get information about business - **point of information**
- to get information about rules - **parliamentary inquiry**
- if you can't hear, safety reasons, comfort, etc. - **question of privilege**
- if you see a breach of the rules - **point of order**
- if you disagree with the [president]'s ruling – **appeal**

**You may influence WHAT the [members] discuss:**

- if you would like to discuss something – **motion**
- if you would like to change a motion under discussion – **amend**

**You may influence HOW and WHEN the [members] discuss a motion:**

- if you want to limit debate on something - **limit debate**
- if you want a committee to evaluate the topic and report back – **commit**
- if you want to discuss the topic at another time - **postpone or lay it on the table**
- if you think people are ready to vote - **previous question**

Adjourn	S			M	
Recess	S		A	M	
Table	S			M	
Close Debate	S			2/3	R
Limit Debate	S		A	2/3	R
Postpone To Later Time	S	D	A	M	R
Refer To Committee	S	D	A	M	R
Amend Amendment	S	D		M	R
Postpone Indefinitely	S	D	A	M	R
Main Motion	S	D	A	M	R

- S = Must Be Seconded D = Debatable A = Amendable M = Requires A Simple Majority Vote  
2/3 = Requires A 2/3 Vote R = May Be Reconsidered Or Rescinded

Adapted from Case Western Reserve Graduate Student Senate; changes in [ ]  
<http://www.cwru.edu/orgs/gradsenate/rules/handbook.html>