

**Mecklenburg County Local Management Entity
Consumer and Family Advisory Committee**

**Minutes
October 15, 2009**

Members Present: Ron Reeve, Steve M., Ken G., Kathy A., Jim W., Sandy D., Barbara J., Dorothy D., Rina F., William M., Joanne H.

Members Excused: Lora C., Chelsi S.

Members Not Excused: Chris B., Pat O.

Guest: James Campbell, Tonya Williams

AMH Staff: Barbara Cross, Dennis Knasel

AGENDA	AGENDA ITEM	ACTION
Welcome & Introduction	<ul style="list-style-type: none"> ▪ The chair called the meeting to order. ▪ Everyone introduced themselves. 	
Agenda	<ul style="list-style-type: none"> ▪ The agenda was reviewed. ▪ Mystery Shopper Status was added to the agenda. ▪ There was a motion given and a 2nd received to accept the agenda with addition. Motion approved. 	Agenda Approved
Quorum	<ul style="list-style-type: none"> ▪ A quorum was present. 	
Public Comment	<ul style="list-style-type: none"> ▪ Kathy A. requested for Mobile Crisis to come and present. 	
Approve Minutes	<ul style="list-style-type: none"> ▪ The minutes were reviewed. ▪ There was a motion given and a 2nd motion received to accept the minutes. Motion approved. 	Minutes Approved

EDUCATION		
Provider Council Report <i>James Campbell</i>	<ul style="list-style-type: none"> ▪ James Campbell is a program manager with Eastern Seals UCP. ▪ It took approximately 2-3 years to develop the Council. ▪ The Council is active and willing to take on issues. ▪ James stated the different Council agencies representing various disciplines come together and support one another. ▪ The Council has a few subcommittees: Training and Development, Ethics Committee, Provider Outreach Committee, and Nominations Committee. ▪ The Council helped develop the Provider Performance Report, with the LME and CFAC. The goal is to hold providers accountable to a higher level of performance. ▪ The Council has taken on the facilitation of the Info Share breakout sessions. ▪ The question was asked how one can get on the Council's Executive Board. James stated the current members volunteer. There are appointment terms and new members will be voted in as persons rotate off the membership. ▪ There are approximately 12 Executive Committee members. ▪ It seems as though Council members who do the majority of the work are from agencies that have a passion for what they do. ▪ Ron mentioned a lot of providers still have not signed the Code of Ethics. ▪ Kathy asked what are some major obstacles. James stated there aren't any major issues and that it would take a few more months for the Council to penetrate the provider community. The concern is having providers participate at Info Share and on the Council. ▪ James suggested the committee contact Dammeon Chisholm, Miranda Little, or himself if the Council could be of support. CFAC extended the same invitation to the Council. 	
CFAC BUSINESS		
MDAC Employment First Report <i>Ron Reeve</i>	<ul style="list-style-type: none"> ▪ Ron Reeve mentioned Beth Butler, chair of US Business Leadership Network (BLN), will be holding an event on Oct 22nd at the Knight Theatre for business leaders, as an initial step in forming a NC Business Leadership Network. ▪ The sole purpose of US BLN is to encourage the employment of persons with disabilities based on their ability. Visit www.usbln.org to learn more. ▪ The network exists in 35 states, with approximately 70 chapters. 	
Membership Report <i>Lora C.</i>		<ul style="list-style-type: none"> ▪ Deferred at this time.
CCAC Report <i>Rina F.</i>	<ul style="list-style-type: none"> ▪ CCAC is scheduled to meet with the LME Cultural Competence Committee. ▪ The CCAC charter has been finalized. ▪ They have secured a list of consumers to survey. 	<ul style="list-style-type: none"> ▪ Rina to present charter at

	<ul style="list-style-type: none"> ▪ Ron Reeve asked to review the charter. 	the next meeting.
Mystery Shopper Status <i>Sandy D.</i>	<ul style="list-style-type: none"> ▪ Angie Jackson, PRS Manager, has requested for CFAC to conduct another First Responder Survey. ▪ There are approximately 45 Intensive In-Home and Community Support Team providers to survey. ▪ Sandy D. distributed a sample sheet and instructions on how to conduct the survey. ▪ Sandy D. reviewed the instructions with the committee. ▪ Sandy D. asked for the survey calls to be completed by October 31st. She will then compile the report and submit to the LME. ▪ Survey volunteers are: Kathy A., Rina F., Dorothy D., Barbara J., Steve M., Jim W. and Joanne H. 	<ul style="list-style-type: none"> ▪ Survey to be completed
LME UPDATE		
Provider Performance Report Status <i>Dennis Knasel</i>	<ul style="list-style-type: none"> ▪ Sandy stated the categories are being refined. ▪ Sandy gave a follow-up on the letter to DMA regarding the proposed service definition. She wrote the letter and is waiting on the email address of the person to send to. ▪ Sandy asked if there was a decision on the suggestion to add additional consumers/family members to the Community Advisory Committee. It was suggested to have someone from the BP committees and/or someone from RSS' Self Advocates Committee or Mecklenburg's Promise Peer Support participate. Dennis stated Grayce agreed to add additional members. Dennis will contact RSS and Mecklenburg's Promise regarding participants. 	
LME Reduction Plan <i>Dennis Knasel</i>	<ul style="list-style-type: none"> ▪ The County allocated \$4 million to offset the \$6.4 million State reduction. DHHS was instructed by Governor Purdue to restore \$15 million to the MH/DD/SA system. Mecklenburg received another \$950K, which means the total State reduction is \$1.8 million. ▪ The LME was reduced by \$352K, which represents 20% of the reduction. ▪ The Child & Adolescent reduction is now \$371K, which represents 20% of the reduction. The State reduced CTSP funding by \$271K and the remaining \$100K is specific to two community support positions in the PSO. ▪ CASP was reduced by \$55K in SA continuum and \$17K in Adult MH continuum. ▪ DD MR/MI was reduced by \$233K; these were funds that had been supplementing CAP waiver dollars, which represents 12% of the reduction. ▪ MH was reduced by \$214K that includes two PSO community support positions and also included NAMI training thru Mecklenburg Open Door, which represents 12% of the reduction. ▪ There are \$588K MH Trust Fund unencumbered dollars that are being reduced, which represents 33% of the reduction. ▪ The service reductions were made in certain categories. Now that some funding has been restored, the decision was made to reallocate funding to agencies that implement Best Practices. ▪ Ron asked what the consumer impact has been and if there was an increase in consumer complaints. Dennis stated there hasn't been an increase in calls and that the majority of the calls are related to what the consumer is supposed to do after the service is over. The consumers are being given 	

	<p>information on resources in the community.</p> <ul style="list-style-type: none"> ▪ Dennis gave a CAP MR/DD waiver slot update. There are two types of waivers: comprehensive waiver and supports waiver. There are 680 support waiver slots at the State level, in which 92 slots will be allocated to Mecklenburg LME. The main difference between the two waivers is the maximum amount of the budget. The comprehensive waiver has a maximum budget of \$132K and the supports waiver has a maximum budget of \$17,500. If a consumer receives a CAP waiver slot, that consumer is not eligible for any other state funded services. 	
<p>Endorsement Withdrawal Report <i>Dennis Knasel</i></p>	<ul style="list-style-type: none"> ▪ Over the first quarter of the fiscal year, the LME withdrew or denied 14 endorsements. <ul style="list-style-type: none"> ○ 6 did not past the application process and were denied endorsement ○ 2 voluntarily withdrew ○ 6 were involuntary withdrawn <ul style="list-style-type: none"> ▪ 4 requested a local reconsideration review, in which the review panel upheld all decisions ▪ 1 appealed at the State level, in which the State did not uphold the LME’s decision ▪ The provider has 30 days from denial to file for appeal at State level. The State has 30 days to make a decision. 	
<p>Provider Plans of Correction Report <i>Dennis Knasel</i></p>	<ul style="list-style-type: none"> ▪ Ninety plans of correction were issued. <ul style="list-style-type: none"> ○ 38 were resolved ○ 52 are still pending ▪ The provider has 60 days to correct any deficiencies. ▪ The plans of correction issued were not related to consumer health and safety issues. ▪ The higher number of plans are due to the State monitoring protocol being implemented. 	
<p>Best Practice Update <i>Dennis Knasel</i></p>	<ul style="list-style-type: none"> ▪ No update at this time. 	
<p>Community Support Transition Plans <i>Dennis Knasel</i></p>	<ul style="list-style-type: none"> ▪ There are 477 high risk consumers identified by the State that are being impacted by the reduction of community support. There are 100 child and adolescent consumers and 377 adult consumers. ▪ The LME will be holding a series of provider meetings to discuss the transition process. ▪ A Communication Bulletin was released that extended the community support termination date through December for Medicaid consumers. 	
ANNOUNCEMENTS	<ul style="list-style-type: none"> ▪ NC Council Conference – Pinehurst – December 2-4, 2009 	
NEXT MEETING	November 19, 2009	
FUTURE AGENDAS	Supported Employment, Best Practices Update (Quarterly), NC TOPPS, SA RFP Follow-up Reports, Mobile Crisis Status	
ADJOURNMENT	7:30 pm	

Ron Reeve, Chair of Consumer & Family Advisory Committee

Date