

**MECKLENBURG COUNTY LOCAL MANAGEMENT ENTITY
Consumer and Family Advisory Committee**

**Minutes
November 18, 2010**

Members Present: Ron Reeve, Steve M., Dorothy D., Peggy Q., Pat O., Jim W., Sandy D., Joanne H., Kathy A., Ken G., Angela P., Gloria T., Tanya W., Chelsi S., Barbara J., Rina F.

Members Not Excused: Phillip H.

Guest: Dr. Cheryl Nicholas, Michelle Lancaster, Cathy Kocian, Robin Hill-Emmons

AMH Staff: Dennis Knasel, Carlos Hernandez

AGENDA	AGENDA ITEM	ACTION
Welcome & Introduction	<ul style="list-style-type: none"> ▪ The chair called the meeting to order. ▪ Everyone introduced themselves. A quorum was present. 	<ul style="list-style-type: none"> ▪ For information only.
Agenda	<ul style="list-style-type: none"> ▪ The agenda was reviewed. ▪ There was a motion given and a second motion received to approve the agenda. Motion approved. 	<ul style="list-style-type: none"> ▪ Agenda Approved.
Public Comment	<ul style="list-style-type: none"> ▪ None. 	
Approve Minutes	<ul style="list-style-type: none"> ▪ The minutes were reviewed. ▪ It was stated Philip H. was not present at the previous meeting. Change noted. ▪ There was a motion given and a second motion received to accept the minutes with change. Motion approved. 	<ul style="list-style-type: none"> ▪ Minutes Approved.
EDUCATION		
AMH County Perspective <i>Michelle Lancaster</i>	<ul style="list-style-type: none"> ▪ Michelle Lancaster is the General Manager for the Health and Human Services and Public Safety departments (includes AMH, Community Support Services, Domestic Violence, Veterans Services, Homeless Services, DSS, Health Department, relationship with hospitals, MEDIC, Sheriff's Department, Medical Examiner, Court Services and the relationship with court system). ▪ Michelle stated a decision will be made in mid-December regarding Grayce's status and that she is not able to discuss any personnel issues. ▪ Michelle has conducted an internal review looking at all the Mecklenburg Open Door (MOD) documentation for adequate documentation, as a result of MOD not fulfilling their obligation to the County. Unfortunately, there has been a lot of money, time, and effort spent. ▪ Currently, there is an internal audit being conducted on the Crisis Stabilization Unit dollars spent 	

	<p>and analyzing the documentation.</p> <ul style="list-style-type: none"> ▪ The County is also looking at assets purchased with county and state funds and ensuring the County is protected. ▪ Based on initial findings of the internal review, two actions have been taken: AMH Finance has been placed under the direction of County Finance while review of the practices, policies and procedures are completed (approx. timeframe is 45 days) and the County has contracted with Mike Moseley to conduct an operational assessment with a strong focus on organizational structure and the contracting process. ▪ The question was asked how Mike Moseley was chosen. Michelle stated there was no bidding process, but that the County Manager chose Mike Moseley. The County had a relationship with Mike when he worked as the director of DHHS and he has knowledge of the NC system. He has been doing some consulting work for the past couple years. ▪ Mike Moseley will provide a written report to the County on November 29th. The HUD audit should be completed around the first week in December. After full review, a recommendation will be made to the BOCC. ▪ Michelle will remain involved with AMH for quite some time, to review and evaluate the on-going management of resources. ▪ The County is looking more strategically at how contracts are awarded and over what period of time a vendor is awarded a contract. There have been anonymous complaints in the past on how the mental health contracts are awarded. ▪ Ron Reeve stated it would help to have data across the state to help uncover issues in advance, instead of spending more time and effort after the fact to resolve. The State has refused to make standard reports available that show spending by agency by service for the number of people served. Such data contribute to the analysis of best practices and relative costs for specific outcomes. ▪ Ron also mentioned that Medicaid does not provide statements to consumers indicating the services provided and their associated costs. Medicare does provide such reports. Such reports would allow consumers and family members to make more informed decisions on the value of the services they received and also potentially expose fraud. ▪ Ron Reeve mentioned there needs to be an effort to show the positive efforts AMH is doing in the community. ▪ The committee expressed concern with layers and layers of administrative positions utilizing potential consumer care dollars. 	
CFAC BUSINESS		
<p>Monarch Implementation Status <i>Dr. Peggy Terhune,</i></p>	<ul style="list-style-type: none"> ▪ Peggy Terhune gave an updated on the status of Charlotte Town Manor. Monarch is exploring alternative living space. ▪ Each consumer is paying approximate \$650 per month, which does not include meals. The meals 	

<p>CEO</p>	<p>are being charged at \$7-10 per meal or per day.</p> <ul style="list-style-type: none"> ▪ Monarch hired the majority of the Mecklenburg Open Door staff. Staff is committed to working with the consumers and community. ▪ The consumer plans are being reviewed for medical necessity. If they do not meet medical necessity, the consumer is being discharged and referred to the appropriate level of service. ▪ Peggy invited CFAC to provide Monarch with feedback as needed. 	
<p>InnerVision update <i>Cheryl Nichols</i></p>	<ul style="list-style-type: none"> ▪ Since 2005, InnerVision has been conducting consumer satisfaction surveys with an overall satisfactory rate of 95%. ▪ The agency continues to hold focus groups and three issues continue to come up: 1-housing, 2-access to services(s), and 3-money, as it relates to employment. As a result on a micro level, the agency invested funds in retooling the staff. The agency staff are the only clinicians in the state who are trained in psychiatric vocational rehabilitation. They provide onsite and offsite training through Boston University. ▪ The agency has been working with a business incubator consultant, which is a best practice international and national model where a successful (skill set and financially sound) organization gets trained to serve as a mentor, a supervisor, and a guiding light in terms of helping early stage start up organizations. ▪ In July 2011, InnerVision will be the first certified business incubator in the region designed to work with adults with psychiatric disabilities. The average incubator time is three to four years. ▪ The cost savings to the community will be great. A national cost study stated the cost of chronic mental illness per individual ranges from \$35,000-\$100,000 per person per year. ▪ InnerVision has secured a building and will relocate in the near future. The new location is 15,000 sq ft, with a capacity of 2,300 persons. The site is located on the corner of Trade Street and Fourth Street. ▪ InnerVision has submitted a proposal to the LME regarding the needed resources to build capacity to accommodate the pilot group of consumer entrepreneurial. 	
<p>Regional CFAC Meeting with Steve Jordan <i>Ron Reeve</i></p>	<ul style="list-style-type: none"> ▪ The meeting will be held in Winston-Salem on January 4, 2011. ▪ Ron Reeve encouraged the committee members to attend. ▪ Cathy Kocian stated Pathways has arranged for a meeting in March 2011. ▪ There will be a State CFAC and Local CFAC conference call is scheduled for January 19th from 7-8 pm. 	
<p>CFAC Self-Advocates Internship Policy <i>Ron Reeve</i></p>	<ul style="list-style-type: none"> ▪ The policy for absences should coincide with the CFAC member absence policy. <i>If any Committee member fails to attend (3) three consecutive regular meetings without contacting the Chairman with a satisfactory cause, then he/she may be deemed to have resigned from the Committee.</i> ▪ The committee agreed to this change. ▪ There was a motion given and a second motion received to accept the internship policy with change. Motion approved. 	<ul style="list-style-type: none"> ▪ Policy approved.

Agency Referral Survey <i>Sandy D.</i>	<ul style="list-style-type: none"> ▪ Sandy D. assigned a call list of agencies to the volunteers. ▪ Sandy asked to volunteers to ask for assistance on reaching mental health services and record the agency feedback on the log. 	
Consumer Handbook Status <i>Sandy D.</i>	<ul style="list-style-type: none"> ▪ The volunteers will meet with Jill Dineen-Scott on December 6, 2010 to reorganize the content. 	
LME UPDATE		
Recovery Model Education and Peer Support Status <i>Dennis Knasel</i>	<ul style="list-style-type: none"> ▪ The LME is in the process of developing a contract with Psychotherapeutic Services who has hired Mecklenburg Promise staff and has incorporated Mecklenburg's Promise services into their organizational structure. 	
CABHA Status and Transition Plan <i>Dennis Knasel</i>	<ul style="list-style-type: none"> ▪ There are two fairly large adult providers who are in the CABHA appeal process: Successions and Person-Centered Partnerships; if they do not receive certification as a result of the appeal there could be approximately 300-400 adults that may need to be transitioned. ▪ There are four certified adult MH CABHA providers in the region that will be able to increase capacity, however staff have not gotten final verification on level of capacity available. ▪ There are 6 certified CABHAs in the western region that will be able to handle the capacity in the child continuum; LME staff is currently collecting information from certified CABHAs to verify capacity level at each of the agencies. ▪ There are providers who have received their CABHA certification for the child continuum, but have also been endorsed for adult MH/SA community support team. This becomes a complicated issue, as the provider doesn't have the full range of services that a certified CABHA has. ▪ The LME has the responsibility to monitor the transitions. ▪ The target date is December 31, 2010 when two things happen: (1)community support ends and targeted case management begins on January 01, 2011 and (2)agencies who have not achieved CABHA certification can no longer provide community support team for adults and day treatment and intensive in-home for children and adolescents. 	
Waiver Status <i>Michelle Lancaster</i>	<ul style="list-style-type: none"> ▪ Michelle Lancaster has asked the Secretary for an extension on the implementation date of the waiver until July 01, 2012. ▪ The LME will continue to develop business processes. 	
ANNOUNCEMENTS	NC Council Annual Conference, CFAC Regional Meeting	
NEXT MEETING	December 16, 2010	
FUTURE AGENDAS	Best Practices Update (Quarterly), CFAC Data Analysis Request	
ADJOURNMENT	7:40 PM	

Ron Reeve, Chair of Consumer & Family Advisory Committee

Date