Mecklenburg County Local Management Entity Consumer and Family Advisory Committee

Minutes April 22, 2010

Members Present: Ron Reeve, Steve M., Kathy A., William M., Rina F., Jim W., Peggy Q., Joanne H., Pearlie C., Pat O., Dorothy D., Sandy D.,

Members Excused: Lora C., Barbara J., Chelsi S., Ken G.

Guest: Dr. Cheryl Nicholas, Suzanne Thompson

AMH Staff: Barbara Cross, Dennis Knasel

AGENDA	AGENDA ITEM	ACTION
Welcome &	 The chair called the meeting to order. 	 For information
Introduction	 Everyone introduced themselves. 	only.
Agenda	 The agenda was reviewed. 	 Agenda
	• There was a motion given and a 2 nd received to accept the agenda. Motion approved.	Approved.
Quorum	 A quorum was present. 	
Public Comment	 Steve M. mentioned in the NC Mental Hope newsletter, there was an article where Secretary Cansler commented Mecklenburg's CFAC supported the CABHA initiative. Steve M. has concerns that the CABHA requirement could reduce consumer choice. Ron R. mentioned he spoke with Secretary Cansler during his March 22 site visit and mentioned CFAC supported the concept because of its potential to improve service quality while still maintaining adequate consumer choice. 	
Approve Minutes	The minutes were reviewed.	 Minutes
	• There was a motion given and a 2 nd motion received to accept the minutes. Motion approved.	Approved.

EDUCATION	
InnerVision • Psychosocial rehabilitation is the only service the agency provides. Also, runs peer sup	
Dr. Cheryl Nicholas family support groups, family education groups, community forums, quality improvement	ent, and
Recovery Café.	
 InnerVision continues to extensively partner with family members and community partner 	
 InnerVision started out using a modified version of the clubhouse model. Two things m 	
InnerVision away from the clubhouse model: Dr. Nicholas became uncomfortable with	
lack of data and the agency was not close enough to the fidelity of the model to say that	
InnerVision was doing. The organization then moved to provide psychiatric vocational	
rehabilitation.	
 The family members and consumers asked the organization what they can do with the approximation what they can do with they can do with they can do with t	
support. They adopted a learn-grow-go strategy. A consumer developed the Recovery	
initiative. The agency provides the space and the consumers and family members opera	te the
program.	
 The Recovery Café is an innovative approach to giving the consumers hands-on job skill 	
training and a gateway to employments. Also, offers natural supports and family memb	ers an
opportunity to see consumers in action, while they support them.	
 InnerVision's is primarily funded by Medicaid. Additional funding resources are: the I 	LME
for the non-Medicaid consumers, private contributions and in-kind exchanges.	,
• The primary hours of the psychosocial rehabilitation program are 7 am -3 pm. The supervised basis of the 2 mm	pport
services begin after 3 pm.	
 There are approximately 55 persons served each day. The biggest resource to the consumer is to have the consumer tall the sceney how to any 	ida thair
 The biggest resource to the consumer is to have the consumer tell the agency how to gui journey. 	ide their
 The Recovery Café also assists in the reduction of stigma in the community. 	
 Sandy D. mentioned she heard at the MH Commission that because of the CABHA 	
requirement, all the clubhouses will go out of business. Dr. Nicholas commented with t	he
current rate it is hard to stay in business. Also, without intense community support or	
subsidies, you will not sustain. The reality is that you need a lot of support to operate a	
clubhouse.	
 Dennis Knasel mentioned there are three other agencies who operate a psychosocial 	
rehabilitation service:	
 Person-Centered Partnerships – Friendship club transitioned into PSR service definition 	tion
\circ Reintegration Targeting – a new provider; has been endorsed for 6-8 months	
 Successions – started within the last few weeks 	
 Dr. Nicholas challenged the LME to ask the new and existing PSR agencies what is their 	ir

	therapeutic approach.InnerVision ranked #1 for all areas on the FEM tool.	
CFAC BUSINESS	Inner vision ranked #1 for an areas on the FEIVI tool.	
Medicaid 1915 (b)/(c) Waiver Application Status Ron Reeve/ Dennis Knasel	 The LME has applied for the waiver. There are concerns within the DD community, as well as lack of information on how the dollars flow. There are valid concerns if dollars were shifted from the needed DD arena to the MH arena. Local management has the best ability to manage the dollars. This waiver is an expansion on the current Piedmont Behavioral Healthcare (PBH) waiver. PBH may have to make changes to adjust to the way the new LME(s) who are awarded the waiver operate. The desk reviews of the waiver application submissions are happening this week. Dennis mentioned more changes will need to be made to be in compliance with Medicaid. If selected, the LME will look at the funding and capitation rate, before accepting the waiver. 	
Provider Performance Report & Review Process Sandy D.	 Dennis Knasel, Sandy D., and Chris Brigman (from RSS) will be presenting how the report was developed at FARO next week. PBH will be presenting their report, which is very different from Mecklenburg's. RSS operates within both Mecklenburg and PBH LME's. Chris will present the difference between the two reports. The LME is finalizing the letter, which will contain the provider performance report and check sheets. The form was changed by adding a column that has each item numbered to crosswalk against the check sheet. Dennis suggested including verbiage in the letter regarding contacting him if there are suggestions on how to improve the process. There will not be verbiage indicating the decision is appealable. Twelve agencies have been assigned a star rating. The notification letters will be sent by the end of April. 	 CFAC is in agreement with Dennis being the main contact.
CFAC Data Review – Key Questions <i>Ron Reeve/Jim W</i> .	 Jim W. selected a few small agencies to research in terms of expenditures vs. number of consumers served. The list was given to Dennis Knasel. 	 Dennis will research this further and report back to CFAC.
'Be the Bridge' Rally <i>Ron Reeve</i>	 The rally is being held on May 21st at Marshall Park. This is a positive rally regarding acceptance and inclusion. CFAC will have a table. Ron Reeve asked for volunteers to man the table. Volunteers: Sandy D., Rina F., Pearlie C., and Dorothy D. 	
Membership Sandy D.	Ron Reeve received a new membership application.Joanne H. mentioned she may have a possible applicant.	

	 Sandy D. reviewed the committee member terms. Three persons will be leaving at the end of this year: Bill M relocating out of state, Lora C ending 2nd term, and Ron Reeve - ending 2nd term. Sandy D. suggested revising the by-laws to allow the immediate past president to serve on the committee. The committee agreed to this change. Sandy D. mentioned the areas of representation needed are youth MH, male consumer or family member, and SA. Ron Reeve discussed the potential of having self-advocacy interns on the committee. The committee thanked Bill M. for serving on the committee. 	
LME UPDATE		
CABHA Status Dennis Knasel	 Dennis Knasel mentioned this is a four part process: the initial step was for agencies to send in a letter of attestation; step two is a desk review conducted by Division staff, if something is not met during the desk review, the desk review is ended, the provider has the ability to reapply; the third step is an on-site "verification" visit; and, the final step is a clinical interview made up of a team of Clinicians from the Division and LME. There are currently five agencies that have met the desk review. The LME is anticipating another five or six that may pass the desk review. The LME received notification another 15 providers have not met the desk review. Another possible issue is the "any willing provider" structure that exists between now and June 30. If an agency does not achieve CABHA certification they must transition consumers within 30 days, and if this happens prior to June 30th, there may be situations where a consumer is transitioned a couple times before all decisions become final re. certification status. The Secretary made a requested to CMS to extend the timeline by 90 days to six months. CMS has not responded. 	
Budget Update Dennis Knasel	 The recommendations of the reduction plan for the LME are at the County Managers Office. The departments should hear something by the end of April. The Governor's Budget specific to the LME shows eliminating Targeted Case Management. There is a policy regarding payment to family members for the provision of services. CFAC's position was that County and IPRS funding should not be used to pay a parent or family member to provide services to their child. A situation that has been raised is specific to AFL providers, who are now the guardian of the person they are providing the AFL service. Should the policy be revised to include parents, family members, and guardians? Dennis will provide a series of examples that have come up. 	
Mobile Crisis Update <i>Sandy D</i> .	 From March 09 thru March 10, Mobile Crisis had 997 calls, which has increased by 37% from the previous year. The adolescent calls increased by 70%. The diversion rate is at 72%. A diversion is defined if someone does not go to a hospital or jail. 	

	 Mobile Crisis is working at their maximum capacity. Their busiest hours are from 1 pm to 7
	pm.
	 Mecklenburg is one of the higher users for the NC START team.
ANNOUNCEMENTS	 PBH CFAC Person Centered Conference – 4/29-30, Embassy Suites, Concord, NC
	 APSE National Conference – 6/8-10, Atlantic, GA
	 MDAC Employment First Forum – 4/22, 5700 Executive Center Drive
	 NAMI National Convention – 6/30 – 7/3, Washington, DC
	 MH/DD/SA 'Be the Bridge' Rally – 5/21, Marshall Park, Charlotte
	 Mecklenburg Service Delivery Symposium – 4/24, 10 AM to 2 PM, UNCC
	 Mecklenburg ADA 20th Anniversary Event – 7/15, TBD
NEXT MEETING	May 20, 2010
FUTURE AGENDAS	Best Practices Update (Quarterly), LME Strategic Plan Review, SA RFP Follow-up Reports, Self Advocacy, NCTOPPS
ADJOURNMENT	7:35 PM

Ron Reeve, Chair of Consumer & Family Advisory Committee

Date