

**Triad Region Consumer & Family Advisory Committee
Meeting Minutes | February 8, 2021 | Via Zoom**

	Committee Members	Additional Context	Voting Member Present = P Absent = A
	Matt Potter (Forsyth; IDD & MH)	Triad CFAC Chair, recipient of IDD/MH services independently	P
	Tim Gallagher (Forsyth; IDD)	Triad CFAC Vice Chair - Advocacy	P
	Abbi Jackson (Davidson; MH/SU)		A
	Dennis Lynch (Forsyth; MH/SU)	Triad Advisory Committee MH/SUD Chair and IDD Member, Greentree Board	P
	Gladys Christian (Forsyth; MH)	Director of Horases Residential Care, Advisory Disability Rights of NC Member, Peer support.	P
	Glenda Smith (Davie; MH)	NAMI NW Piedmont, retired educator; Triad MH/SUD Advisory Member	P
	Jon Carroll (Forsyth; MH/SU/IDD)	Peer Support Councilor and ECPR as well as Greentree	P
	Julie Whittaker (Davie; MH/SU/IDD)	NAMI member, Davie CAC member, Advocacy	P
	Kelly Owens (Forsyth; MH/SU)	Advocacy	P
	LaKeesiah Henderson (Forsyth; MH/SU)	Advocacy	P
	Mary Miller (Forsyth; MH)	Advocacy	P
	Mary Annecelli (Forsyth; MH)	Triad MH/SUD Advisory Member	A
	Michael Thompson		A
	Obi Johnson (Forsyth; SU)	Immediate Past Chair, Triad Advisory Member MH/SUD	A
	Pam Goodine (Forsyth; SU/MH)	Peer Support Specialist & ECPR Educator, Triad Advisory MH/SUD Member, Greentree	P
	Ricky Graves (Rockingham; MH)	Steering Committee Member, Policies & Procedures Lead; RHC Chair	P
	Sam Gavurin (Forsyth; MH)		A
	Sarah Potter (Forsyth; IDD/MH)	Advocacy; IDD Triad Advisory Member	P
	Terry Cox (Forsyth; MH/SU)	Cardinal Board Member, Peer Support Specialist, Triad MH/SUD Advisory Member, Greentree Peer Center	P
	Staff: Cardinal Innovations Healthcare		Non- Voting
	King Jones	Director Health and Wellness	P
	Deborah Hendren	Member Engagement Regional Manager	P

	Ashley Conger	Chief Communications	P
	Bob Scofield	Member Engagement Specialist	P
	Laura Wilkicki	Business Administrator, Note taker	P
Guests			Non-Voting
	Stacey Harward	Community Engagement Specialist; Community Engagement & Empowerment Team at the Division of Mental Health, Developmental Disabilities, and Substance Abuse Services; NCDHHS <i>Lived Experience with TBI & Depression</i>	A
	Bob Crayton	Central CFAC member	P
	Guynette Hartman	Advocacy	P
	Jesse Battle	TROSA	P
	Neil Caldwell	Stokes News, dialed in but left the meeting by 6:15 p.m.	P

I. Call to Order/Introduction

Matt Potter called the meeting to order at 5:52 p.m.

a. Opening remarks

- Guynette Hartman introduced herself as a family advocate. She is interested in joining our meetings moving forward.
- Jesse Battle, TROSA, introduced himself and hopes to become an integral component of the Triad treatment environment. He shared his contact information in the chat: Senior Director of Community Partnerships, jbattle@trosainc.org, 919-419-1059. He is interested in joining our meetings moving forward.

b. housekeeping

Matt Potter commented that to become a voting member, you will need to submit an application and attend two initial meetings.

II. Public Comments

There are no public comments at this time.

III. Approval of January 11, 2021 Minutes

Members were given a few moments to review the minutes that were distributed via email this afternoon. White Forest needs to be Wake Forest (old business #3). Quarter needs to be Porter in #3). Drop the “e” off Obi’s name.

Matt Potter requested a motion to approve the minutes with the suggested edits.

Pam Goodine motioned to approve the minutes with suggested edits. Terry Cox seconded the motion.

A roll call vote was taken. All in favor. Motion carried forward.

IV. Topic of Discussion

The Cardinal Innovations DSP Workgroup Data Request letter of December was distributed to the members via email just before the meeting by King Jones. King reviewed the stated methodology from the letter. Members asked questions for him to follow up. Cardinal continues to advocate to the state for wage rate changes for our DSC workers.

Questions for King to follow up if he can't offer an answer immediately:

- Starting on page 7: for the lowest to highest utilization counts, do the units used % authorized units and off-count, is that the same thing? What does that mean?
King: When an authorization comes in, there is a certain amount of units authorized depending on the service in chunks of time, like 15 min or 2 hours. The authorization count is how many authorizations were total in that year period that equals authorized units. This could result in a number that is below threshold. That means and I don't know for sure, from my understanding, it's a threshold of how many could be a certain percentage of visits that could be missed. King will follow up with our network team to understand who owns this internally, that would answer to people who have mandatory service that don't receive it (vacation, etc.).
- There is a great difference if someone is going on vacation or otherwise unavailable and not need service hours and say, having the worker not show up and the family having to get that service. This distinction should be made.
- Assuming that the color indicates the percentage used, at what point is it unacceptable and contact the provider to see what the problem is. Is this where we bring in the provider model to work with them to see if this can be improved or what tools can we offer them; is there a timetable or benchmark before we no longer recommend or use that provider. Can we reach out to Trillium to research to see how they are having some success in this. King will check with our Network team.
- When the funds/benefits are not used, could it be rolled over so families can use what's left. Can the families have access to the benefits with another provider when a contracted agency doesn't fulfill their obligation?
- What happens to that money that is not used? Where does the money come from? Fed/state and where does it go? King will research.

Tim said the General Assembly will take it away and just not fund, and indirectly goes to their fund balance. King said we don't pay providers for services not billed; we

measure that the right percentage of dollars that are being spent. If we're outside of that threshold, the state takes back that money. It is Sarah's understanding, but not sure, but those dollars that are not paid out get reinvested back into the community. Not being able to ask for those amounts back, it gets reinvested into the next year's budget. This led to the comment that if that's the source of reinvestment dollars, then what percentage of reinvestment dollars comes from that?

Ashley Conger: This is not really captured by percentage but could do that if a measure by percent is valuable and offer that information for King to bring back to the members. Overages do go into community investments, there is no mandate on how much goes to reinvestment. If Cardinal fell outside that threshold of those service dollars, the state would recoup those funds.

- Does any of this data exist for the B3 services that are provided?
- Is there a monitoring system where a person is scheduled to provide service and doesn't show up so they don't bill. King replied this is part of the electronic verification that is coming out in April where the verification happens when a provider shows up at a family's home.
- Is there any kind of data that Cardinal collects to determine the quality of the delivery of service? This would be important in developing or improving services.

King: Cardinal conducts the Member Satisfaction Survey, but not sure if this drills down enough to the level of this inquiry.

- How voting machines tallied information; can we conduct a survey via this type of technology at less expense and have it at every provider location. 1:07:28 The school system uses something similar; they give each child a number and it follows the student to graduation. EVV could be a potential solution. Does the family have access to it?
- Ashley Conger: In the future state of EVV, there are some great programs that allow families to give feedback. This might be too much to hope for in this first phase, however. It is helpful that everyone's using the same vendor.
- Previously, a list of names were faxed to CenterPoint who got arrested, and we would look to see if any of them are receiving services. Does Cardinal have any system like this? Ashley Conger replied that an individual's eligibility is stopped if they are arrested and Cardinal makes sure we are not receiving any money for these individuals during this time. Medicaid eligibly in NC is handled through DSS where incarcerations are managed on the county level and can depend on the length of incarceration.
- Mary Miller was reading the newspaper today about the changes that Cardinal are making in Forsyth, and was wondering if we could get some information about the list of questions she has as follows:

- How specifically will gaps and delays in service authorization be addressed in Forsyth County?

Ashley Conger: any authorization is to be processed in three days, currently tracking 98%. All other 50% within 90 days. We are tracking anywhere between 59% and 71%...for anyone. Acute needs are being handled faster.

- How will clinically recommended levels of care be addressed now? In the past lower levels were authorized.

Ashley Conger: Working with the DSS liaison in setting up co-location (having Cardinal staff in DSS offices), committing to really quick assessments for children coming into custody, aiming for better cleaner clinical assessment.

- How will limited LOCAL levels of providers be addressed.?

Ashley Conger: we are doing good but have more to go. We are going higher than that the state level recommendation of providers for availability in locations where there were gaps.

- How specifically will ER visits be addressed by Cardinal?

Ashley Conger: We have three. We are co-located like DSS in the ER for quicker assessment; outreach to ER visits are done on frequent revisits; programs specifically with mobile providers making sure we have services in the communities where folks don't have access to providers.

Terry Cox explained that Greentree now has a program called refuge for those individuals that are not admitted but feel they need to go to the ER, and we are reaching out to them for peer support services to take back to the refuge. This is in hopes to avoid ER revisits. Promise Resource to expand the capacity

- How will the job description of the new Director for county operations differ from the past?

King Jones: Director of Regional Affairs open position (former regional executive), drive the RHC and improvement plans for that specific region. We also have a Director of Community Engagement who will work similarly to King in the 20 counties, Stacey Inman is the manager on that team that drives CAC. These positions and King will all work together with communities. These efforts will be specialized for the Triad Region and make efforts to hiring local people.

Ashley Conger shared her contact information in the chat.
Ashley.conger@cardinalinnovations.org.

V. Old Business / Reports

1. Forsyth CAC meeting updates: Don Martin had a meeting on Friday morning, King gave information on the six focus areas (opportunity statements) and the structure of how CAC's roll up to the RHC. The purpose is to align things that are in common and see what initiatives we can derive. This is county specific to the Triad Region. We filled in the last member slot for the Rockingham CAC, and those member names will be brought to the County of Commissioners next Monday to vote and approve and then we'll have a Rockingham CAC set up.
2. Davie CAC by Julie Whittaker: Davie CAC had a presentation from Andy Hagler, Forsyth MHA, at the last meeting, to help with our suicide prevention initiatives of Davie County, targeting out youth. He will be assisting in setting up some education opportunities for school and community people to be more supportive of our youths.
3. Cardinal updates: The Cardinal Board meeting is on Friday the 19th.
4. Matt said The Triad IDD Advisory Committee held a meeting Thursday, went well as a typical meeting; beneficial and effective but nothing actionable to report.
5. Dennis said the Triad MH/SU Advisory Committee is this month on the 18th and we will work more on the effect on students on the COVID-19, as we hear reports of suicide and other problems. We will have two qualified presenters in hopes to get a better picture on the effects on the students presently going on and anticipate problems coming up.
6. Gladys Christian said she would have a report next month on the provider council.
7. Mary Miller said the County Commissioners next meeting will be Thursday at 2:00 p.m. with a report from Shontell Robinson on the Cardinal situation.
8. Pam Goodine said we have several people of this Advisory have missed more than three meetings and typically we would dismiss those people, which would open up slots for new members. Matt said he would like to give some leeway to that because of the technical difficulties having to meet virtually because of COVID. Perhaps we should make this a formal agenda item for next month. Perhaps we could contact these members and inquire about their interest and ability to join.
9. Sarah Potter gave an update on the State CFAC:
 - the next meeting is Wednesday the 10th from 9am to 1pm, no agenda but discussions will be much concerning 122c the deadline for feedback to the legislature is February 16th. Their focus mainly on membership and membership state CFAC because they want to add some traumatic brain injury seats. Because it's so large, we could use some clarity.

- We discussed vaccinations with disabilities being in category 4; left some people with disabilities out...seems like MH and IDD folks get forgotten. CDC guidelines put us as 1C, but no discussions on NC variance to national guidelines and goes back to availability.
 - Discussions around expanding the telehealth systems in the future.
 - Victor Armstrong brought up the focus on crises services and how this should look when a person goes into crises and what happens in the follow up.
10. Jon Carroll stated that Greentree is starting a Veterans group towards the end of February maybe towards March. The first Veterans support meeting is being scheduled.

VI. Comments and Adjourn

Matt Potter requested a motion to adjourn the meeting.

Terry Cox motioned to adjourn the meeting. Julie Whittaker seconded. Motion Carried.

Meeting adjourned at 7:56 p.m.

Submitted by:

Laura A. Wilkicki, Community Operations Business Administrator