

Consumer & Family Advisory Committee Meeting Minutes

May 15, 2018

Piedmont Community Office Conference Center at 4855 Milestone Ave, Kannapolis, NC 28081

Committee Members	Voting Member Present = P Absent = A
Beverly M. Morrow, Chair	P
Jean Andersen	P
Dora Hufton	P
John Hufton	P
Jeff Euto	P
John Hufton	P
Brad Donahue	A
Michelle Joshua	P
LME/MCO and State Staff	Non-Voting
Agency: Cardinal Innovations Healthcare Title: CFAC Board Liaison Name: Yalanda Williams	Present
Agency: Cardinal Innovations Healthcare Title: CFAC Board Clerk Name: Kilsy Silva-Disla	Present
Agency: Division of Mental Health, Developmental Disabilities and Substance Abuse Services NC Department of Health and Human Services, Community Engagement & Empowerment Team Title: Mental Health Program Coordinator Name: Stacey Harward	Absent
Guests	Non-Voting
Jill Queen – Cardinal Innovations QM Department	P
Mary Sechler	P
Terri Clark	P
D.P. Euto	P
Hezekiah Anderson	P
LaRhonda Watkins	P



I. Call to Order/Introduction

Beverly M. Morrow

- Beverly M. Morrow called the meeting to order at 6:00 p.m.
- Beverly informed the membership that she was highlighted in Cardinal's April edition of the Community Newsletter. She explained that she was troubled that her photo was left out. It took eight days (after a complaint was made to Member Engagement, LaKeisha) to receive a response and explanation of why this occurred from Cardinal's Communication Department. Beverly was told it was an oversight. Beverly stated the concern she has is it would seem that proof reading is done a few times before the final is submitted. At no time have other photos of individuals been omitted. How her photo that was submitted in a timely manner was not published seems more than an oversight.
- Introductions were made by visitors and guests as well as everyone present

II. Agenda and Minutes Approval

Beverly M. Morrow

- Agenda and Minutes were presented for approval. Jeff Euto made a motion to approve the agenda and minutes. Michelle Joshua second the motion. Motion was carried, agenda and minutes were approved by the committee

III. Old Business

Beverly M. Morrow

- Beverly shared that Amber Grumbles was no longer going to be a participating as part of the CFAC committee due to personal reasons. She will no longer be a member of CFAC.

Jill Queen

- Jill Queen share the responses for the questions previously addressed by the CFAC members in the last meeting in reference to the Quality Improvement Measures and the Annual Quality Strategy & Performance Improvement Plan. The following is a re-cap of the questions with Jill's response's in red:
 - Pg.6 Member Safety - Bullet #4 – Providing Grand Rounds with CEU's for Cardinal licensed staff to improve application of best practice standards when activities for members. This is a training series offered by the medical department on best practices activities for members in service, sentence had a typo.
Question: Is this a typo, but I am wondering what does this mean? Can someone expound on that point?
 - Pg.13, Appendix A- Where does the CFAC fit into this reporting structure? Beverly responded to that question and answered that CFAC fits under the GCQI Committee. GCQI which leads to CQI and to QM as well as members on the Local Board/Governing Board.
 - Pg.14- On the measures where the bench marks were not met which were retired, were there any plans on revisiting the improvement measures which were not met instead of leaving them retired?
 - QA/QI Plan Executive Summary for CFAC under Appendix B – CQI Annual Work Plan Evaluation 2016-17-outlines performance on goals (page 14 through 19)
 - Two QIAs were retired (both related to use of antipsychotic medication for schizophrenia) because they focused solely on CCCs (they will be re-worked to include all providers);
 - Two QIAs (to decrease use of IHH for children with SED and to increase timeliness of grievance resolution) will be continued into FY 2017-2018 in order to continue to support members and improve the member/stakeholder experience;
 - We will continue another QIA into FY 2017-2018 (decreasing the number of repeat crisis episodes) with additional interventions to support progress toward the goal; and

- We will modify the last QIA (related to post-hospitalization follow-up) and continue it into FY 2017-2018 to accommodate new DMA and DMH contractual requirements.
- Pg.16- There are two or three quality improvement measures which were not clear to me. How do we know we are meeting those measure? What was the increase/decrease? By what increments are we increasing or decreasing that measure? CQI and QM collect data and track QIAS, QIA dashboards, show these.
- Out of the providers that were reviewed none scored 100% on the NC Monitoring review system. Providers that didn't meet the 100% were required fill out a POC (Plan of Care). Plan of Correction. Are we following up on that? Yes and how are we monitoring these providers to ensure they meet the requirements? QM reviews POCs and supporting evidence. Then, QM assesses compliance at next review including if there is a concern about the same issue. QM assesses the implementation and determines where the issue with implementation occurred. Beverly stated that she was really concerned with this and would like more clarity on the matter. State threshold for NC DHHS is 85%. Less than 1% of providers have severe out of compliances that continue over time to a severe degree, most of these providers receive further sanctions which could include referral to licensing agencies, boards or termination of contract.
- Beverly was also concerned about the incidents trend and how it was greater in Piedmont.
- Piedmont has a larger number of members and providers in the area that report incidents. Additionally, restrictive interventions and member behavior go hand in hand, Piedmont has several PRTFs and Residential Level 3 programs for children where members served have more behavioral issues and where restraints are used as part of the behavioral interventions. Most have behavior or RI plans. Medication errors were high due to 1 member with multiple refusals. Additionally, there were a few allegations of abuse, neglect and exploitation. Incidents are completed per member so if there is an allegation of abuse at a group home, an incident is completed for each member in the home (could be 5 to 6 incidents for one situation).
- Jill also emailed the Quality Assurance Quality Improvement program sheet so that the CFAC members could review and give feedback to CI or ask questions if they have any.
- Jill handed out a CFAC Input/Feedback on Quality Assurance/Quality Improvement Program sheet for the members to fill out and give back to Cardinal Innovations. The purpose of this sheet is to hear possible gaps in services or issues CFAC members would like Cardinal Innovations to address.

Beverly M. Morrow/ Members

- Beverly reiterated that as part of the strategic plan members will continue to share or communicate to others about CFAC as well as about Cardinal Innovations. Beverly asked for updates from the members on their progress on this initiative. Here are some of the responses from the members.

Dora Hufton - gave information to the local pharmacy as she felt they needed more information on CI.

John Hufton - Placed pamphlet and about five different resources provided by Cardinal Innovations in the Davidson County Library rack where community news is placed.

Jean Andersen – Shared information at the local farmer's market where she finds that many parents have no idea about who Cardinal Innovations is or the CFAC.

Michelle Joshua – Attended an all-day Cabarrus County workshop designed to inform all aspects of Cabarrus County. Michelle left materials about CFAC to be distributed.

Beverly M. Morrow – She is sharing information when she meets individuals to complete NCI Surveys. Beverly is always sharing about CFAC. She pointed out how one of the guests present came in because he heard about CFAC from Beverly at one of these meetings. Beverly has also written several letters and included CFAC brochures and other pertinent information to some local representatives and to a NC Senator. Beverly mentioned how there is a state to local CFAC meeting that anyone can

dial into. Beverly requested that Yalanda get the dial in information for the members to call in if they choose.

IV. Cardinal Innovations Health Updates

Yalanda Williams

- Yalanda reviewed all of the documents which were handed out at the meeting with the members.
- This is a list of the documents handed out at the meeting:
 - CFAC Input/Feedback on Quality Assurance/Quality Improvement Program
 - Piedmont Community Office Quality Management Dashboard FYTD December 2017
 - CFAC Comment Form
 - Memorandum from Jane G. Clark
 - CFAC Structure of Taskforce and Responsibilities
 - Current CFAC Process Flow Chart
 - Proposed CFAC Process Flow Chart
 - CFAC Relationship Graphic
 - CFAC Clear & Constructive Voices Summit Plan of Action sheet
 - Cardinal Innovations Healthcare Local Business Plan Quarterly update sheet
 - Learning Center Trainings for CFAC Members information sheet
 - Cardinal Innovations Housing Efforts information sheet
 - County Dashboards for the following counties: Stanly, Davidson, Union, Cabarrus, & Rowan
 - Piedmont CFAC Budget Sheet FY2017-2018

V. State CFAC, Community Board, and/ or Corporate CFAC Updates

Jean Andersen

- Jean Anderson gave an update on the Cardinal Executive Board of Directors meeting. She feels that the board is heading in the right direction and that it is really positive to see them moving forward.

VI. New Business

Beverly M. Morrow /Members

- Beverly discussed with members that they will continue to have assignments she will be giving them which will be part of them fulfilling their obligation on being a CFAC member and commenting on the required statutes.
- Beverly wants all of the members to review all of the documents given to them at this meeting and write down any questions they may have in reference to any of the documents.
- Jean and Beverly gave a report on the NC Tides conference. Beverly mentioned how they primarily focused on the Medicaid transformation. Jean felt that Trey Suttan did an excellent job in his presentation on Ethics. There were breakout sessions during the conference; Beverly would love to have the presentation by Suzanne Thompson on Medicaid Transformation 101 to be presented to our CFAC.

VII. Recommendations to the Committee

Beverly M. Morrow

- Beverly reminded the committee members their obligation to spend a minimum of 3 to 4 hours outside of the CFAC meetings and to be involved and engaged in all meeting discussions.
- Beverly also reminded the committee of their assignment.

VIII. Next Steps

Beverly M. Morrow

- Beverly wants to discuss more with the members about Transition to Community Living (How it was and how it is now?). She would like for a Cardinal TCL to attend and speak more about this.
- Beverly would also like to give Reid some time to report on any questions that the members may have about the county dashboards.
- Beverly would like Suzanne Thompson to come and speak to the members about Medicaid reform like she did in the NC Tides conference.

- There is currently an opening for someone to represent Piedmont CFAC at the GCQI committee. Michelle Joshua said she will consider representing Piedmont CFAC in the GCQI Committee and report her final answer at the next meeting. Jill will forward the information on when the committee meets so that Michelle can attend.
- Jeff Euto is up for re-election and Beverly wants to make sure the members are making the decision when he is present at the next meeting as he left early on this meeting.

Membership

- Two new members were up to be voted into CFAC.
- Jean Andersen made a motion to vote Mary Sechler onto the committee. John Hufton second the motion. Motion was carried and approved. Mary Sechler is now a new member of the Piedmont CFAC.
- John Hufton made a motion to vote Terri Clark into the committee. Jean Anderson second the motion. Motion was carried and approved. Terri Clark is now a new member of the Piedmont CFAC.

IX. Public Comment

Beverly M. Morrow

- Terri Clark had questions about Peer Support/ Housing/ SUD concerns on gaps and services.

X. Adjourn

Beverly M. Morrow

John Hufton motioned for the meeting to adjourn. Terri Clark second the motion. Motion was carried and approved. Beverly M. Morrow called the meeting to adjourn at 8:13p.m.

Next Meeting- July 17, 2018 at 6pm

Location: 4855 Milestone Ave. Kannapolis, NC 28081

Submitted by: Kilsy Silva-Disla

Kilsy Silva-Disla/PSP Board Clerk

Name/Title

May 17, 2018

Date