

Northern Region Regional Health Council Meeting Minutes

Monday, April 26, 2021

Council Members	Voting Member Present = P Absent = A
Marcelle Smith, Chair	A
Dan Brummitt, Vice-Chair	P
Elliot Clark, Secretary	P
Lisa Gilbert	P
Sharon Long	P
Nicki Perry	P
Shirley Robinson-Flood	P
Michael Tane	P
Tom Lane	A
Karen Terry	P
Regina Dickens	P
Sandra Davis	A
Danny Wright	A
Kathleen Flaherty	P
Cathy Davis	A
Staff	Non- Voting
King Jones, Director, Member Engagement, Community Ops.	P
Terrell Alston, Regional Affairs Manager	P
Rose Le, Director of Learning and Development	P
Guests	Non-Voting
none	

1. Call to Order

Dan Brummitt called the meeting to order at 6:09 p.m.

2. Introductions - none

3. Public Comments – no public comments.

4. Approval of Meeting Minutes – February 2021

The meeting minutes from the February 3, 2021 were reviewed.

Kathleen Flaherty motioned to approve the minutes as outlined. Michael Tane seconded the motion.

Roll call vote was taken. Motion carried.

5. RHC Overview & Structure Discussion (Elliot Clark)

Elliot welcomed Kathleen Flaherty. The overview of the attendance structure for the RHC council was discussed. The possibility of the RHC meeting in Person county was discussed. Details will be discussed at a later meeting.

6. Regional Health Improvement Plan

The opportunity statements and initiatives were reviewed, and the goal was to identify the key items that will receive community re-investment funds from Cardinal. After meeting with the executive leadership of Cardinal, it was decided that the RFP process will be removed. This means that if the CAC and RHC councils know of any organizations, projects that are in place or groups that currently meet the needs already identified by the RHIP, this group can work to review, approve and fund those directly without them having to submit application.

7. Opportunity Statements Discussion around the 2021 Plan Summary

New timeline – RFP process removed – May 2021 to gather all projects that will be reviewed and approved for funding. The deadline to get funds out the door by June 30, 2021 and meet early June to review all proposed projects and to finalize a vote in mid-June as to which projects will be accepted.

RHIP slides presentation presented.

- **Opportunity Statement #1 - People who live in disparate locations, including rural or off-main transport lines cannot easily or consistently access services.**
 - Expand telehealth including increasing broadband access
 - Review for improvement of existing transportation services in Northern Region
 - Enhance & Expand Community Paramedicine

Member Discussion/Comments

a. *It was decided to include all of the initiatives as outlined above. The Northern region wants to include transportation – as an additional initiative. Review how CARTS interact with our elderly population.*

- **Opportunity Statement #2 - While there are insufficient affordable housing options in North Carolina overall, the RHC has specifically identified acute gaps for individuals living with an IDD or SPMI diagnosis or who cannot qualify for HUD 811 vouchers.**
 - Increase Emergency/Crisis Residential Services, including if a home is damaged or destroyed

- Add Residential services post-detox/Emergency Department stays
- Increase safe and affordable housing options, including veterans or those with “bad histories”

Member Discussions/Comments

a. *It was decided to include all of the initiatives as outlined above with the changing in the wording of “bad histories” we will say “Histories that make it difficult for them to obtain adequate housing”. Housing Units that exist in Halifax county – Elliot will get this information back to the group.*

- **Opportunity Statement #3 - Substance abuse is prevalent in all our communities. Prevent efforts overall must be improved, with aggressive efforts toward opioid abuse and crisis services.**
 - Increase the availability and capacity of crisis substance services for youth and adults, including residential options
 - Add Emergency/Crisis Residential Services
 - Add Extended Residential Services, especially for women

Member Discussions/Comments

a. *It was decided to include all of the initiatives as outlined above.*

- **Opportunity Statement #4 - Cardinal Innovations members in the Northern Region need an enhanced bridge for holistic/integrated services in their home community from point of discharge from ED and Inpatient levels of care, as well as release from incarceration/detention.**
 - Explore integrated care collaboration models and/or co-located services
 - Establish a fully integrated care (physical and behavioral health) wellness center.
 - Develop programming and supports for expecting and post-partum mothers/families, including in-person and telephonic/telehealth options.

Member Discussions/Comments

a. *It was decided to include all of the initiatives as outlined above. Fully integrated care services and how it may look and who will benefit from it – Elliot will try to get some information back to the group.*

- **Opportunity Statement #5 - There is a shortage of IDD caregivers due to higher levels of turnover, driven by worker fatigue and low wages, resulting in families without sufficient back-up staff support for their loved ones.**
 - Identify specific needs and availability of services for IDD and TBI in the Northern Region

- Ensure services/structures/processes are easy to understand – making sure that this will include filing grievances (Cardinal will work towards)
- Advocate for wage increase/rate increase (Cardinal will work towards)

Member Discussions/Comments

a. *It was decided that the first bullet will be the main initiative. The third bullet we will add – possibly some type of monitoring system for the worker. King suggested that the EVV system that is being rolled out will serve as a verification system and can be used to help cracked down on any fraud and/or abuse.*

➤ **Opportunity Statement #6 - Crisis mental health services are needed, especially for complex individuals (i.e., dual diagnosed, children in foster care, complex trauma, etc.) and to prevent death by suicide.**

- Increase capacity for adult mental health crisis care
- Establish a shelter for children coming into DSS custody to have assessments completed and create a stable placement prior to their foster placement
- Establish a maintenance service to meet the needs of individuals with SPMI

Member Discussions/Comments

a. *It was decided to include all of the initiatives as outlined above.*

A vote was taken to approve the documents. Terrell displayed regarding initiatives for inclusion for community re-investment funds.

Regina Dickens motioned to approve. Kathleen Flaherty seconded the motion.

Roll call taken.

Motion carried.

Documents/PowerPoint will be sent to the group.

8. CAC (Community Advisory Council) Updates

- Group currently working to get Halifax CAC up and running, Regina will keep the group updated on the progress.
- It was asked that meeting minutes be distributed earlier – Elliot will make sure this happens.
- Concerns around chairs and co-chairs not having an active enough role when it comes to the CAC meetings. Members are feeling as though they are not needed, and that Cardinal is completely running these meetings.

- d. Concerns with making sure that there are quorums at some of the CAC meetings – group will work to get new members.
- e. January – King will shift this committee to Terrell Alston and Elliot Clark. This information will be forwarded regarding structure of the meetings going forward.

9. Closing Remarks - none

Meeting was adjourned at 7:50 p.m.

Submitted By: Darlene Russell, Cardinal Innovations Business Administrator for Operations Team.