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# North Carolina Mental Health Planning and Advisory Council (NCMHPAC) Meeting Minutes of December 1, 2017 - Approved

Meeting location: 3724 National Drive, Suite 100, Raleigh, NC 1-888-273-3658; 2490768#

Present: Damie Jackson-Diop, Chair, Dave Wickstrom, Vice Chair, Gwen Belcredi, Vicki Smith, Garron Rogers, Mary Edwards, Jean Steinberg, Wes Rider, Tammie Theal, Bert Bennet, Gail Cormier, Marcus Wilson-Stevenson, Barbara Maier, Nicholle Karim, Seth Maid
Phone: Mary Lloyd, Terri Shelton, Jeanne Preisler, Marcus Wilson-Stevenson
Staff: Walt Caison (phone), Susan Robinson, Karen Feasel, Ken Edminster
Guests: Stacy Smith, Jason Vogler, Ken Schuesselin

# 1) Meeting Convened/Introductions

**Action:** Damie Jackson-Diop, Chair, convened the meeting, welcome and introductions were completed.

- 2) Approval of Minutes/ Review of Agenda Action: The agenda was reviewed with minor modifications. Minutes of October 6 were unanimously approved as written.
- 3) **Public Comments** Members of the public can address the Council. Limit of three minutes. **Action:** None.

# 4) Review of Annual MHBG Report- Susan Robinson

**Discussion:** Damie reminded the Council that during this calendar year, the agenda was very intentionally planned for engaging the Council in the work of drafting and completing the new two year plan submitted on September 1, 2017, and the review of expenditures as well as data presentations from Quality Management staff at each meeting in order to help Council prepare for final plan and report discussions such as these.

Susan reviewed the timeline for submission of the MHBG Plan and Report, with the SFY17 MHBG report due to SAMHSA on Dec 1. The required elements and content of the report were reviewed with the Council. The Council previously established and agreed on the priorities reflected in the 2 year SFY 16-17 Plan. The Council reviewed each data point in the table, including the National Outcome Measures (NOMS) and the state identified outcomes that are included in the Table 1 Plan Priorities for the current report year, looked at comparisons between SFY16 and SFY17 achievement or lack thereof, noted adjustments, and identified opportunities to modify or develop new goals and objectives for which there are data collected.

**Action:** After completing a comprehensive review and vibrant discussion regarding the report data and the data reviewed through each meeting during the Council's 2017 calendar year, the Council affirmed their review and unanimously agreed for Damie to provide a letter affirming review of the report for submission. Vicki Smith made a motion for a letter to be written to endorse the report in confidence of the staff's acute attention to detail and the Council

recommendations; Mary Edwards provided the second; after further discussion and question called, no dissensions, no abstentions, motion passed.

Damie encouraged Council members to bring their data files from the prior meetings in order to reference during the year so that they had were grounded in prior discussions that help inform recommendations that are data driven.

#### 5) 2018 Council Meeting Dates & Key Agenda Items – Damie Jackson-Diop

**Discussion:** Damie asked the Council to review the draft calendar of meeting dates and proposed topics for each, proposing that the Council plan on the agenda for the first three meetings as outlined with minor modifications as needed based on speaker availability or other circumstance.

Action: Council agreed unanimously to follow the proposed agenda as outlined for February, April and June 2018. Mary Edwards made the motion, following a second by Barb Maier, no dissensions, no abstentions, motion passed. Council members were asked to track the dates in their calendars as standing meetings; the dates appear on each meeting agenda and in this calendar.

### 6) Consumer Policy Update – Ken Schuesselin

**Discussion:** The intention of the consumer policy role is to intentionally connect consumers inclusive of individuals, families, children, youth and emerging young adults, with a place at the table across all levels of this system to help shape, guide, inform and transform our system. In doing so empower the community as a whole, to inform and educate the full community and facilitate conversations and action plans that intentionally embrace community inclusion and recovery for individuals living with mental illness, co-occurring needs, substance use disorders and those with intellectual and developmental disorders.

There is noted interest in the division and community at large to develop a healthy thriving statewide adult consumer organization. In the two years since Ken has been here, this has been his desire. Ken noted the extreme value in the MHBG support of the collaboration among the two universities, NC State University and UNC-Chapel Hill, in organizational development for consumer and family run non-profits. He noted the graduation of participants just occurred; it was a very meaningful experience for all participants.

**Action:** Ken Schuesselin with NC State University will present information on the Scope of Work, outcomes, lessons learned and intention for next steps at the February 2, 2018 meeting. Ken will also provide updated information on WRAP training supported by the MHBG.

Council members are encouraged to reach out to Ken for presentations or discussions in which he can bring information and learn from others to widen the net of consumer engagement.

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Damie self-disclosed for transparency that she has applied and has been accepted to become a certified advanced WRAP trainer.

### 7) Networking Lunch and Information Exchange

#### 8) MH Recovery Movement & NC PIC Community Inclusion – Walt Caison

**Discussion:** The next NC Practice Improvement Collaborative (NC PIC) will focus on Community Inclusion for Individuals living with Mental Illness on February 20, 2018. This will be funded by the block grant. It was noted that perspectives, such as those from an advocacy agency's definition of 'grassroots' inclusion efforts were different than what was being discussed as part of collective impact model for community inclusion.

**Action:** DMHDDSAS with NCPIC will disseminate link for registration when it becomes available. Follow-up from February 20, will be planned, as this is seen as a starting place for keeping the dialogue and communities engaged.

#### 9) Division of MHDDSAS Update – Jason Vogler

**Discussion:** <u>Cardinal Innovations:</u> Jason summarized recent events of this week related to Cardinal Innovations. On Monday Nov 27, DHHS, DMHDDSAS and DMA intervened in the operations of Cardinal Innovations LME/MCO and the operations of executive officers and Board. Necessary actions were taken to secure access to Cardinal data, technology, funds and interference of former executives. Current staff were asked to continue and expect to continue daily business as usual in this transition. A DHHS staff member has been on site daily since Monday. Such actions were necessitated due to the State Auditor's audit and a DHHS internal audit that identified practices that were not in the best interest to the public or in use of public funds that are outside the purpose and scope of GS122C as community mental health authority and funding boundaries defined. No other federal or MHBG funds were misused. There is a public call for Board members to serve on the Cardinal Board, CFACS and Executive advisory committees (e.g. reinforcing the role of the CFAC in the community as outlined in the statute). These actions were taken with the understanding that the actions of a few should not impact the decisions and work for all. Cardinal will be required to submit a plan for how people in the community will be served with their public dollars.

Council members expressed concern, relief, and support for such actions taken. In addition, concern was expressed in preventing future like activities from taking place in order to reassure and rebuild public trust. There are funding safeguards for state funds, including single stream funding, with MHBG being a part of the state fund bucket with no more than 1/12 allocation per month being distributed and then adjudicated to paid claims later. It was noted that there is a vast difference between non-public and public entities and in comparisons across the LME/MCOs.

Joint SAMHSA site visit for the MHBG and the SAPTBG: Jason indicated he heard overall very complimentary remarks by SAMHSA reviewers related to the expertise, integrity and dedicated staff who are passionately in tune with shaping policies and programs, employing effective strategies and engaging consumers, families, children and youth. Jason thanked those who could participate in making the visit an overall learning experience for all. A follow-up informational call is planned for later this month. A report will not be provided for a few months. In addition, the MHBG was reduced for NC and all states; this is based on the proposed President's budget not the Congressional budget.

<u>Mental Health First Aid (MHFA) and Suicide Prevention Lifeline funding:</u> SAMHSA notified us right before the site visit that neither block grants could be used to support these activities based on federal GAO monitoring. Since then, with DHHS, Jason, Susan, others have been working to identify other funds to support these essential activities. State funds have been identified for the Suicide Prevention Lifeline and are pending approval. Confirmed that MHFA and Lifeline funding. We are still working on potential funding for MHFA funding. **Action:** Council and Jason agreed he would provide a Division Update at each Council meeting.

#### **10) Chairperson's Report**

**Discussion:** <u>Calendar and agenda setting discussion:</u> Damie, Chair, asked for suggestions to consider for the coming year, these included: need more discussion time in agenda; add impact statement regarding those receiving funding when they report to the Council; need more context on how services are provided; get information on children with complex needs; get reports ahead of time when possible; get information on veterans and military-how are helping them, especially suicides and access to care for their families; respect breaks and at least 20 min lunch- no more working lunches; be focused and use time we have-not longer meetings; advance recording of presentations; overwhelmed with info; what do we produce?; helpful when given an intro and provide context – this is related to 'x' connecting the dots of the information provided; visual representation to connect the dots and broader context; be more focused during the meeting time we have.

<u>Recruitment of new members and filling vacancies or those who can no longer attend:</u> Damie invited all to share and encourage candidates to apply or nominate others who may have interest. Of note, is the importance of consider the span of NC in geographic representation (west, east), diversity of race, ethnicity, age, those in the military/veterans, tribal members, families of children and youth with SED, families of adults with SMI, and adults and youth/emerging young adults with lived experience. Member application form can be found at this link <u>https://www.ncdhhs.gov/divisions/mhddsas/grants/mental-health-block-grant</u> <u>Plan Review committee:</u> Dave, Vice Chair, shared the goal of the committee. A folder of materials were distributed to Council members while he was speaking for their review. Damie reviewed the intention of establishing the committee as way for the Council to review the MHBG plans and reports and provide recommendations to the Council for consideration. Damie stated it was important for her to have a task group of the Council making recommendations rather than just the Chair or Vice Chair in isolation. He is considering streamlining the process and the list of questions since it is a lot even though he has carved out time for this committee work. It is anticipated the committee will produce a report before the June 2018 meeting. The intention of the committee is to develop a strategic plan based on the report that the Council can implement.

Suggestions and comments from Council members included: good information may be gained through the process seems unwieldy without narrowing questions and focus; include all members who volunteered to work on the committee in communications; consider reducing the number of questions or inquiries to a few main ones (e.g. is the funding seed money or money that sustains services that cannot otherwise be provided to those with SMI or SED); what is helpful/what is not; the Council needs to have an update on progress and information from the committee each meeting; the Council needs to monitor committee –monitor own process and work; very ambitious, useful and will need to distill questions into bite size to be able to score or rate;

**Action:** Dave will coordinate the next committee meeting. The committee will provide an update on in February. Dave will follow-up with Karen and Jean, both offered to consult with committee in modifying process for impact.

# 5) Bylaws: Annual Review and Revision Recommendations

**Discussion:** Damie led review of the by-laws with Ken. Edits were noted by Ken as incorporated in the Bylaws distributed. Additions were suggested for example, add a preamble using statements in the Council letters to SAMHSA, a few typos were noted.

**Action:** Ken will make additional changes for review and approval. Council members are asked to provide written edits to Ken and Damie prior to the next meeting.

# 6) Council Member Updates -

Disability Rights NC is seeking a representative from the Raleigh-Durham area for their PAMI Advisory Council. Please refer to Vicki Smith at <u>vicki.smith@disabilityrightsnc.org</u>

7) Adjourn – Damie adjourned the meeting and thanked all participants for the intense work done following Mary Edward's motion to adjourn, Jean Steinberg's second to the motion hearing no discussion, no dissensions, no abstentions, motion carried.

# 2018 Meeting Dates

February 2 – April 6 – June 1 – August 3 – October 5 – November 30 11 am call - December 7