

Consumer and Family Advisory Committee- Durham Held Via Video Conference

MEMBERS PRESENT: ⊠ Vandna Munshi, ⊠ Victoria Chibuogu Nneji, ⊠ Tammy Shaw, □ Latasha Jordan, ⊠ Dave Curro, ⊠ Brenda Solomon, ⊠ Chris Dale, ⊠ Pinkey Dunston, ⊠ Regina Mays, ⊠ Charlitta Burruss
BOARD MEMBERS PRESENT:
GUEST(S): \square Suzanne Thompson, DHHS, \square Herb Trippert, Trosa, \boxtimes Jennifer Meade, DHHS
STAFF PRESENT: ⊠ Dr. Aalece Pugh-Lilly, Sr Director of Community Health & Well Being, ⊠ Aimee Izawa, Director Community & Member Engagement ⊠ Ramona Branch, Manager, Member Inclusion & Outreach, ⊠ Victoria Mosey, Member Inclusion & Outreach Specialist

Microsoft Teams meeting

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Meeting ID: 227 772 040 09

Phone Conference ID: 343 043 434#

	AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
1.	Welcome and	The meeting was called to order by Charlitta at 05:37 pm		
	Introductions- 10 min			
2.	Review of the Minutes – 5	The minutes from the March 13, 2023 meeting were reviewed; a motion was		
	min	made by Dave and seconded by Victoria to approve the minutes		
3.	PUBLIC COMMENT- 10 min	Charlitta mentioned that she has had two recent deaths in her life, coming		
		back from DC earlier in the day, having intentions of seeing family/cousin		
		there, but he passed away on this past weekend. She was also close with the		
		individual that passed away via the Dollar Tree shooting.		
		No other comments.		
4.	Speaker: 15-30 min	N/A		

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5.	State Updates 10 min	Jennifer Meade – No updates from the state beyond what was shared in		
	•	CE&E.		
6.	Reports: - 15 min	N/A		
	BOD, Steering Committee,			
	State to Local, State CFAC,			
	Conferences, Trainings,			
	etc.			
7.	MCO Updates- 45 mins-1	- CFAC Application- Dr. Aalece Pugh Lily, Aimee Izawa		
	hour	- Aalece communicated with the state to clarify statutory requirements		
		and guidelines for NC CFAC to communicate them to Alliance CFAC. She noted that there is a shift in focus from Alliance regarding CFAC		
		membership, going from the community in need at large to solely		
		individuals or family members of individuals directly receiving services		
		from Alliance in order to provide input on Alliance services. Individuals		
		are encouraged to re-apply for CFAC membership to attest to meeting		
		criteria outlined by the state CFAC statutory requirements, including		
		having personal experience with Alliance Health managing their		
		services or family member services. Individuals will not have their term		
		reset or be denied/there will be no thorough research into an individual		
		meeting criteria, relying on honor system and report from individual to		
		determine whether or not they still meet criteria. Individuals need to		
		submit their application by September 15 th , 2023 in time for go live Tailored Plan date on 10/01/2023. Robust recruitment efforts are		
		encouraged to fill any potential open spots, to pull off a saved list of		
		those interested should anything change.		
		Regina expressed concern about community members/advocates that		
		are highly involved no longer being able to be involved as a member of		
		CFAC. Aalece mentioned that individuals from the community can still		
		attend meetings, but would not be able to be a voting CFAC member.		
		It's noted that there are also many other community organizations that		
		would benefit from having those individuals involved with them.		
		- Charlitta expressed that she feels these CFAC regulations and		
		adjustments should have been brought up earlier, reviewing that she		
		feels Aalece has been thrown under the bus. She expressed that she		
		doesn't know why we haven't reached out to former CFAC members		

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	to see why they are no longer involved or seeking to join again. She		
	expressed concern about individuals potentially having barriers around		
	internet access or lack of knowledge in the area to join. She		
	additionally expressed concern about community struggles, including		
	gun violence, fentanyl overdoses, etc. She would ideally like to see		
	CFAC be more proactive or reactive, and is interested in how CFAC		
	could be more appealing and interesting for others to join. She		
	indicated that she wants to get results out of what she says and does		
	rather than just attending meetings. Aalece indicated that she		
	appreciates her role in Alliance and the expectations around it, enjoys		
	it, and indicates that she doesn't feel anyone has been thrown under		
	the bus, but that it's become a necessity to address due to significant		
	changes in Alliance and state structure. Charlitta expressed concern		
	that individuals may not be ready for change. She indicated she would		
	be amenable to some development and supports around readiness for		
	change with CFAC members.		
	- Vandna Munshi – She indicated that she feels it makes sense to have		
	CFAC change with the changes to Tailored Plan, and agrees with		
	Charlitta around readiness for change, but acknowledged change is		
	needed. Vandna expressed concern that she is not as knowledgeable		
	as mental health as she is I/DD, seeking clarity from Aalece if she is		
	reviewing the balance of populations represented in CFAC. Aalece		
	reinforced that she feels Alliance is invested in ensuring all four		
	categories (Substance Use Disorder, Mental Health, Traumatic Brain		
	Injury, Intellectual/Development Disability) of member representation		
	present, reviewing that it would also be helpful and important for CFAC		
	to consider recruiting members that meet those different categories to create a balanced perspective. Ramona verified there is currently no		
	TBI representation in the Durham CFAC sub-committee.		
	- Regina expressed concerns about changes to Medicaid in general,		
	noting frustration around her son being diagnosed and categorized in		
	one way as a young adult, and now being reclassified as I/DD and		
	focused on Innovations Waiver. She reports concern about the		
	underserved communities, particularly the Black community, noting		
	that they don't receive the same type of access to services until an		
	issue is identified. She reports concerns regarding shifting conclusions		

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	of assessments when individuals are involved in the service. She		
	noted that an individual may rapidly qualify or disqualify for CFAC		
	depending on shifts in conclusions from assessment and how Alliance		
	categorizes individuals. She noted that with all these difficulties,		
	among basic safety concerns, CFAC participation may be difficult, and		
	that it's difficult to be involved with CFAC considering all this. Aalece reinforced that CFAC ultimately has determination of who is a CFAC		
	member, and that attestations/applications would be consistent		
	moving forward.		
	Aimee indicated that Standard Plans with Medicaid are also required		
	to have CFACs, and individual could join those CFACs if that is the		
	type of Medicaid they receive.		
	- Survey Monkey- Ramona Branch		
	It was reinforced that survey needs to be completed, and if there are		
	issues, to contact Alliance staff to assist with completion.		
	- NAMI Walks Saturday, May 20, 2023 9:00 AM-1:00 PM-Perimeter		
	Park 3015 Carrington Mill Blvd Morrisville, NC- Ramona Branch		
	- June i2i Conference- Ramona Branch		
	- If anyone is interested in the i2i conference, they should contact		
	Alliance Health to receive, and complete, the CFAC Request Form.		
	- Aimee sent out CFAC board meeting slides compiled to CFAC Chairs		
	and Co-Chairs to send out to others. This information will be sent out		
	by MIOS Victoria to the CFAC members.		
	Victoria Mosey –		
	- PRIORITY : April 28 th , Mental Health Kick-off Event – CFAC Co-		
	sponsor?		
	- MIOS Victoria reviewed prior attempts to discuss this event where		
	CFAC is requested to co-host alongside Alliance System of Care. It		
	was noted it was not confirmed that CFAC would cohost, and that this		
	question is being presented now. Aimee reviewed Alliance facilitates		

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	SOC meetings through Durham Collective, and that they are		
	mandated by the state to have a yearly event.		
	- It was reinforced that CFAC is not required to cohost this meeting, and		
	they are allowed to join another organization in cohosting an event or		
	running an event independently in upcoming months. MIOS Victoria is		
	willing to share Durham System of Care Collaborative meeting		
	information on a regular so CFAC members can attend, reinforcing		
	that CFAC presence has been requested and welcomed by SOC.		
	Charlitta expressed concern of needing more regular information from		
	Ashley Bass-Mitchell via email regarding events and meetings, and		
	she hasn't received any information from her. Regina indicated that		
	she was also unaware of the Durham Collaborative having mandatory		
	requirements.		
	- Aimee clarified that CFAC is not required to do the SOC event, as it is		
	solely a SOC event. Ramona indicated that each county CFAC put in		
	their charter that they wanted to host one event a year, and this is		
	being offered as the one event to co-host for the fiscal year.		
	- Regina motioned for CFAC vote to determine if they would co-host the		
	event, and Dave seconded. CFAC members agreed to attend, but		
	noted that some may be limited by transportation, or only able to		
	attend for a short period of time. CFAC ultimately agreed to co-host. It		
	was identified that MIOS Victoria would get more specific action items		
	needed by members for the event in discussion with SOC Coordinator		
	Ashley Bass-Mitchell, and convey these to members via email.		
	- Charlitta requested that Dave review bylaws and charter in June		
	event. Dave agreed to do this, and it will be included on that month's		
	agenda.		
	NOT ADDRESSED (ran out of time):		
	- PRIORITY : Review of prospective physical CFAC meeting locations		

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9. Statutory Requirements and Recommendations: 15-30 min	- This will be reviewed during a future meeting. Charlitta expressed concern that CFAC may not be ready to return to in person yet. - Raleigh Oaks Psychiatric Hospital (Garner) facility tour (will email if not discussed) IF TIME ALLOWS: (1) Review, comment on, and monitor the implementation of the contract deliverables between area authorities and the Department of Health and Human Services. (2) Identify service gaps and underserved populations. (3) Make recommendations regarding the service array and monitor the development of additional services. (4) Review and comment on the area authority budget. (5) Develop a collaborative and working relationship with the area authority's member advisory committees to obtain input related to service delivery and system change issues. (6) Submit to the State Consumer and Family Advisory Committee findings and recommendations regarding ways to improve the delivery of mental health, intellectual and developmental disabilities, substance use disorder, and traumatic brain injury services,	NEXT SIEI S.	TIME LIVAME.
11 Announcements	including Statewide issues.	N/A	N/A
12. Adjournment:	Dave moved to adjourn and it was seconded by Tammy. The suggested next meeting will be May 8, 2023, at 5:30 p.m.	TV/A	19/7