**OUR VISION**

Alliance CFAC promotes a community-based support system that seeks to have each person reach his or her full potential. This committee of individuals and family members gives voice to the interests and opinions of persons with needs related to mental health, developmental disabilities, and substance use.

It embraces the dignity of all residents in our communities so that each person may achieve his or her highest level of responsibility in the community.

It promotes the empowerment of individuals and the active involvement of family members.

**MEMBERS**

- Vicki Bass
- Dorothy Best
- Jackie Blue
- Jamille Blue
- Charlitta Burruss
- Helen Castillo
- Andrea Clementi
- Dave Curro
- Christopher Dale
- LaDeana Dexter
- Albert Dixon
- Bobby Dixon
- Elena (Marie) Dodson
- Jerry Dodson
- Pinkey Dunston
- Shirley Francis
- Bradley Gavriluk
- Leanna George
- Ellen Gibson
- Tracey Glenn-Thomas
- Wanda (Faye) Griffin
- Briana Harris
- Sharon Harris
- James Henry
- Steve Hill
- Connie King Jerome
- Carole Johnson
- Dorothy M. Johnson
- Latasha Jordan
- Jessica Larrison
- Carson Lloyd, Jr.
- Renee Lloyd
- Tekeyyon Lloyd
- Megan Mason
- Regina Mays
- Dr. Michael McGuire
- Karen McKinnon
- Felishia McPherson
- Trula Jean Miles
- Diane Morris
- Carrie Morrissey
- Anthony Navarro
- Israel Pattison
- Jason Phipps
- Gregory Edward Schweizer
- James (Dan) Shaw
- Tammy Harrington Shaw
- Annette Smith
- Ben Smith
- Brenda Soloman
- Jessica Shorts
- Alejandro Vasquez
- Cassandra Williams-Herbert
EXECUTIVE SUMMARY

Dave Curro, Alliance CFAC Chair

The Alliance Health Consumer and Family Advisory Committee started fiscal year 2020 with an emphasis on advocacy, outreach and recruitment. CFAC was also focused on Medicaid transformation, our statutory requirements, and COVID-19. It was a busy year for us!

While the budget impasse delayed the implementation of Medicaid transformation into whole health Standard and Tailored Plans, CFAC continues to advise Alliance about the needs and concerns of its members.

Alliance CFAC penned a letter to the Legislature highlighting the impact continued budget cuts would have on the citizens of NC using lived experiences from our members. There was much positive feedback from this effort and hopefully it will have an impact. Our Wake County CFAC sub-committee developed a white paper on the direct support personnel pay and retention crisis, and this paper was presented to each member of the NC General Assembly. It has seemed to resonate with many advocacy groups across NC and is helping to bring them together to resolve this issue.

Pre-COVID-19, we were able to increase out outreach efforts into the community by attending local MH/IDD/SUD events and creating some of our own events. These events helped inform people in our counties about Alliance Health and how Medicaid transformation will affect them. Senior leadership from Alliance Health has been a willing and eager participant in our outreach efforts, which have resulted in increasing CFAC membership to full capacity. We welcome the vitality and ideas that these new folks bring to the table.

The annual Alliance CFAC Retreat was held in February. We invited each local Community Collaborative to join us and partner in our community outreach efforts. This was a natural fit for our two organizations. The Alliance CEO and staff presented the latest information about the Medicaid transformation progress and we received training from NC DHHS.

Although COVID-19 has put a halt to business as usual, it has not stopped us from carrying out our statutory obligations. We still meet virtually, through Zoom, advise Alliance Health and above all, check up on each other during this pandemic.

I would like to thank the Alliance Health Board of Directors, as well as its CEO and staff for their outstanding support to the Consumer and Family Advisory Committee this past year. It means a lot to the people they serve to be heard and appreciated.
STATE STATUTE CHARGES CFAC WITH THE FOLLOWING RESPONSIBILITIES:

- Review, comment on and monitor the implementation of the local business plan
- Identify service gaps and underserved populations
- Make recommendations regarding the service array and monitor the development of additional services
- Review and comment on the Alliance budget
- Participate in all quality improvement measures and performance indicators
- Submit findings and recommendations to the State Consumer and Family Advisory Committee regarding ways to improve the delivery of mental health, intellectual/developmental disabilities and substance use/addiction services

ACHIEVEMENTS

- Consistently updated the Alliance Board through monthly reports and this Annual Report
- Advised Alliance Board and staff on budget priorities, and gaps and needs
- Provided feedback on Medicaid transformation and its moving parts
- Participated on the Alliance Global Quality Management Committee
- Advocated effectively at the state level
- Created an open letter to the NC General Assembly and a white paper on the direct care worker crisis
- Participated in multiple community events in each county and in several conferences throughout the year
- Recruited and educated new members
- Listened to our community members
- Hosted annual CFAC retreat with Alliance leadership

CONCERNS

- Continued electronic health records delays
- COVID-19 crisis
- Direct care staffing crisis
- Medicaid Transformation: delays and confusion
- Members falling through the gaps
- Opioid crisis/substance use
- State funding and service reductions statewide for the uninsured population
- Stigma
- School services
- Tailored Plan delays
- Transition services for youth
- Unmet social needs
- Unserved populations growing – Medicaid expansion

During the year members of Alliance CFAC received a comprehensive array of training:

Acronyms
CFAC Composition and Structure in Tailored Plans
CFAC Roles and Responsibilities
Coronavirus Self-Monitoring
Creating a Recovery Oriented System of Care
DMH Military and Veterans Program
Effective Systems Advocacy
Making the Connection, Recruitment and Retention
Medicaid Health Care – Understanding the Changes and Supports
NC Medicaid Enrollment Broker
NC Medicaid Direct Transition
Rylan’s Law
Stakeholder Engagement
Suicide Prevention
Tailored Plan Enrollment and Eligibility
Tailored Plan Pre-release Policy Paper
Teen Violence
Understanding Bullying
**Scope of Influence**

Members of Alliance CFAC serve on a variety of additional allied groups and organizations:

- Alcohol Drug Council of NC
- Alliance Board of Directors
- Alliance Audit and Compliance Committee
- Alliance Global Quality Management Committee
- AL-ANON Family Groups
- American Legion
- Americans with Disabilities Act
- Autism Society of Durham
- Autism Society of NC
- Celebrate Recovery Program
- Certified Peer Support Specialist
- Council on Aging
- DHHS Medicaid and CHIP Payment and Access Commission
- Durham County Community Living Program
- Durham Community Collaborative

**DURHAM COUNTY CFAC SUMMARY**

Durham CFAC members, chaired by Steve Hill, really got involved this year with our Outreach and Membership drive. As a result, during the month of October we welcomed three new members to our committee. Charlitta Burruss, Helen Castillo and Regina Mays will strengthen our efforts to identify the challenges with needs and gaps in our community.

As we do each year, we were also highly involved in the community, collaborating with the Recovery Community of Durham and participating in the Durham Celebrates Recovery Event, while Tammy Shaw attended the NAMI conference.

Durham CFAC hosted a community forum in December in collaboration with the Durham Community Collaborative and System of Care. Topics for discussion ranged from Families First and Raise the Age to Medicaid Transformation, DSS and juvenile justice. Representatives from health plans that will be operating Standard Plans in North Carolina were also invited to present at the event.

Two of our newest members, Charlitta Burrus and Regina Mays, attended the One Community in Recovery Conference in Greensboro in March, but unfortunately the COVID-19 pandemic forced us to curtail our planned engagement in several community events, including Bull City Fresh Start, Durham Community Collaborative, NAMI Walks, and the CFAC Legislative Day.

We have learned to focus our efforts in a safer way, spending time educating ourselves about Medicaid transformation and supporting our community in creative ways by learning more about this COVID-19 pandemic we find ourselves dealing with.

COVID-19 has changed the way we live and interact with each other, dealing with how this has had an impact on ourselves, our families, and our communities. We look forward to continued growth in the coming year.

**Post Script:**

Alliance Board member and outgoing CFAC Chair Dave Curro was recognized this year with an honorable mention for ACAP’s national Leadership in Advocacy Award.

ACAP is the Association For Community Affiliated Plans, a policy and advocacy group of not-for-profit health plans across the county that share a mission to provide high-quality health care to people with low incomes and complex health care needs.
**Wake CFAC**

Chair by Carole Johnson, has embraced educating our county regarding behavioral health. Each member actively supports our community with education, outreach, and purpose. We’ve united with the Wake Children’s Collaborative to plan community events to ensure that every member in the community is represented.

Wake CFAC created a sub-committee to address the problems of hiring and maintaining direct support workers, called the NC DSP Wage Taskforce, with the goal to create a living wage for DSP workers to ensure long-term consistent quality of care. A two-page white paper was created and distributed to NC House and Senate members and other LME/MCO CFAC groups. The taskforce created a Facebook page and member Ben Smith, along with his DSP worker, created a video submitted to all legislators and posted to YouTube to allow viewers to see the importance of direct support work.

With a steadfast membership drive we are at full capacity, and are joined at our meetings by a number of non-members with a shared interest in serving and embracing Wake County community needs.

Despite COVID-19 and its many restrictions, Wake CFAC members have remained active at community events at a safe distance. Several attended the 11th Annual NC One Community in Recovery March in Greensboro, and others attended the i2i Conference in Pinehurst.

We hosted an informational table at “Cary Care and Share,” sharing resources and networking. Ben Smith (pictured below), a Wake CFAC member, is the face of this community resource fair year after year.

We continue to attend the State CFAC meetings and Legislative Day, and several members have written personal stories and distributed them to legislators. Many members engage in the DHHS weekly COVID calls for individuals and families.

Our members and NC DSP task force have been instrumental advocated for HB488, which includes a wage survey for direct support workers in North Carolina, and if passed can provide essential data to address low wages.
Cumberland CFAC has worked hard during this challenging year to remain impactful throughout our community, sharing information about our group and Alliance Health, and about changes to our public system during Medicaid transformation that will affect many of our neighbors.

Cumberland CFAC is at full capacity this year as we welcomed three new members, Felishia McPherson, Andrea Clementi and Alejandro Vasquez, and Michael McGuire was elected Vice Chair of our group.

As a result of COVID-19 our group, like many others, made the necessary transition from live to virtual meetings whenever possible.

Cumberland CFAC is at full capacity this year as we welcomed three new members, Felishia McPherson, Andrea Clementi and Alejandro Vasquez, and Michael McGuire was elected Vice Chair of our group.

Needs and gaps continue to be an important part of Cumberland CFAC discussions, with our members constantly brainstorming ways to bridge the gap of needed information and resources for those in need. In the same vein, the impact of State budget cuts remains a significant concern for our group.

CUMBERLAND COUNTY CFAC SUMMARY

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As a result of COVID-19 our group, like many others, made the necessary transition from live to virtual meetings whenever possible.

Prior to the pandemic limiting our activities, we collaborated with the Cumberland County Community Collaborative to educate the inner city of Fayetteville by hosting a forum on Medicaid transformation and how it will impact how people here receive their health care in the future.

Our members attended viewings of the powerful documentary *The Anonymous People* across the community and at various conferences. A number of our members attended the I2I Conference in Pinehurst, as well as the Alliance Health CFAC Retreat and the State CFAC meeting.

We shared Alliance Health information in the Cumberland County Schools and at PTO/PTA and at NAMI meetings, and hosted information booths at school events, fall festivals, and other community venues. Many of our members were proud to participate in the NAMI Walk.

Needs and gaps continue to be an important part of Cumberland CFAC discussions, with our members constantly brainstorming ways to bridge the gap of needed information and resources for those in need. In the same vein, the impact of State budget cuts remains a significant concern for our group.

In memoriam: Jamille Blue
Johnston CFAC continued to be chaired by Jason Phipps and Cassandra Williams-Herbert, and welcomed three new members, Marie Dodson, Anthony Navarro and Jessica Storts.

As well as serving on the Johnston CFAC, our members continue to serve and take on leadership roles on other local, regional, state and federal advocacy and community agencies.

Johnston CFAC continues to receive updates on Medicaid transformation from the DHHS Community Engagement Team as well as Alliance Health management and staff. Our questions, feedback and suggestions are sought, welcomed and considered.

This year has been one of transition as we all have been preparing for the roll out of the state Standard Plans and communicating information about Medicaid transformation has been a focus of our community outreach events.

Before the COVID-19 pandemic curtailed many normal activities, Johnston CFAC hosted a table at the Johnston County Opioid Task Force Resource Fair, where they shared Alliance CFAC literature and drug disposal kits.

JOHNSON COUNTY CFAC SUMMARY

Johnston CFAC and Alliance Health staff hosted a county community forum to present information on Medicaid transformation and the Raise the Age program, and we invited each of the health plans that will be operating the states Standard Plans to share information during the event.

We also collaborated with the Alliance Health Community Engagement Team to host a booth at the Clayton Harvest Festival, again sharing information about Alliance Health, CFAC and Medicaid transformation, as well as drug disposal kits and other resources.

With the onset of the global Coronavirus pandemic it is hard know how future collaborations and community events will be planned, implemented or even allowed, but Johnston CFAC is prepared to meet the challenge with the help of its members, Alliance staff, and our community partners.

We are looking for ways to keep our members, that are in self-quarantine and have limited technological resources available, engaged with CFAC. We continue to be the voice of our communities around the decision-making table to ensure their needs are being met and voices are being heard.