

**Joint Meeting between Pitt County Board of Commissioners  
and the Pitt County Mental Health Area Board**

October 26, 1999  
7:00 p.m.  
Commissioners' Auditorium

The Pitt County Board of Commissioners met in a regular session meeting on Tuesday, October 26, 1999, at 7:00 p.m. in the Commissioners' Auditorium, Pitt County Office Building, Greenville, North Carolina with the following commissioners present:

Eugene James, Chairman  
Glenn Bowen, Commissioner  
Charles P. Gaskins, Commissioner  
Thomas H. Johnson, Commissioner  
Mark W. Owens, Jr., Commissioner  
Beth B. Ward, Commissioner

Commissioners Absent were:

Jeffrey E. Savage, Vice Chairman  
David Hammond, Commissioner  
M. Theresa Shank, Commissioner

Also present were:

Thomas B. Robinson, County Manager  
JoAnne Burgdorff, County Attorney  
Susan J. Banks, Clerk to the Board  
Arlen Holt, PIO and Cable Coordinator  
Melonie T. Bryan, Director of Financial Services  
Dean Phillips, Mental Health  
Randy Horton, Mental Health Assistant Director  
Faye Bleicher, Mental Health

Mental Health Area Board Members Present:

David White, Chairman  
John Swope  
Diana Davenport  
Melba Tripp  
Charles Mayo  
Lester Brown  
John Ferren  
Sharon Bradley  
Bonnie Feldbush  
Stephanie Harrell  
Terri Williams  
Darnell Parker  
John Bulow  
Charles Gaskins, Commissioner Representative

Call to Order and Welcome by Chairman James.

Prayer offered by Commissioner Johnson.

Pledge led by Commissioner Bowen.

Mental Health Area Board Chairman David White called the Mental Health Area Board to order and welcomed everyone.

**UPON MOTION** by Commissioner Bowen, seconded by Commissioner Gaskins, the Board voted unanimously to excuse Commissioners Savage, Hammond and Shank.

### **Approval of Agenda**

**UPON MOTION** by Commissioner Ward, seconded by Commissioner Gaskins, the Board voted unanimously to approve the agenda as presented.

Mental Health Area Board Chairman David White asked for approval of the agenda. He also expressed appreciation to all of the Mental Health employees who went beyond the call of duty during the recent flooding caused by Hurricane Floyd.

Upon motion by John Ferren, seconded by John Swope, the Board voted unanimously to approve the agenda.

### **Technical Assistance Collaborative, Inc. Report (TAC)**

Mr. Robinson introduced Ms. Martha Knisley of Technical Assistance Collaborative, Inc., (TAC) which is located in Cary, North Carolina and Boston, Massachusetts.

Ms. Knisley stated that one of the questions was to determine if the Pitt County Mental Health, Developmental Disabilities and Substance Abuse Center should be a single or multi county agency. In addition, there was a review of the Mental Health Center's operations for strengths and weaknesses. The purpose for this meeting is to hear and accept this report and determine a future meeting with the Mental Health Area Board to move forward with further work needed for this Mental Health Area Program.

Chairman James expressed appreciation to the Mental Health employees who worked through Hurricane Floyd who went beyond their normal jobs.

Ms. Knisley stated that she had strategies for the Mental Health staff to use to move forward. She stated that she met with the two Boards in July and then brought a small team into the Mental Health Center in August to do a review. She met with the County Attorney, Finance Officer and had continued conversations with other Mental Health staff. She stated that the hiring salary for Area Director was also considered by the team. She stated that she had talked with Mark Botts at the Institute of Government, University of Chapel Hill, North Carolina. Ms. Knisley stated that they had already made some recommendations to the staff which had already been put into practice.

Ms. Knisley said that the current state of affairs to manage and operate the area program, is very volatile. She said that this has been a very hard time to manage the requirements that are being made of Mental Health programs. She reported that the General Assembly is conducting a study that will provide a lengthy report by April 1, 2000. There is also an internal study being done within the Health and Human Services areas also. She stated that they reviewed the financing, structure and quality of services and their findings could probably be used for other programs in the State but that these problems have been more exaggerated at the Pitt County Mental Health Center.

Ms. Knisley stated that in single county mental health programs, counties have more oversight. She said it is difficult to know when and how to step in when there are problems

because the General Statutes are not as clear in this regard. There have been changes in funding structures which have made things more difficult. Ms. Knisley said that the leadership taken by the Finance Officer has been unprecedented in the State and was a very positive move.

Ms. Knisley stated we are trying to make clear roles and responsibilities. She stated that they have added a lot of technical assistance in the report at Mr. Robinson's request so that the commissioners will have some oversight that they can use to move forward with the program. She stated that the single county question is still undecided.

Ms. Knisley stated that the Memorandum of Understanding between the County and the Mental Health Area Program was a very positive step and that the Area Program was in the black for operation in the first quarter of this fiscal year. She said that audits may still show some irregularities.

Ms. Knisley made the following presentation:

#### **Rationale for Study**

- Need to examine management and governance options given recent volatility, challenges, new requirements and decreased revenues.
- Opportunity to evaluate options while top two positions are vacant
- Potential for merger and/or collaborative arrangements now exist

#### **Findings**

- Financial Management/Operations
  - Memorandum of Understanding is a positive step
  - Past problems may still have impact
  - Claims sampling will improve billing accuracy but not guarantee 100% approval of claims
  - Strategies to enhance revenues and improve productivity can be strengthened
  - Contract monitoring can also be improved
  - MIS installation will be challenging
- Community Coordination
  - Gaps in service and responsiveness identified by community providers and staff
  - Community representatives report problems do not always get resolved with clarity and in a timely manner
  - Community trying to organize itself into system of care – Area Program need to lead this effort
  - Community resources can help Area Program meet demand
- Services Issues:
  - A more clearly single clinical philosophy needed to assure quality, consistent services and to retain qualified staff
  - Staff vacancies are undermining ability of program to meet basic requirements and quality services
  - Problems identified with CAP-MR staffing
  - Access/Crisis Emergency Services gaining needed attention but can be improved further

#### **RECOMMENDATIONS**

- TAC does not recommend merger at this time
- Fourteen recommendations made for Board Governance related to: training and role clarification; policy development; defining expectations for business planning, strategic organizational planning and performance; and exerting an outside influence

- Short Term:
  - Hire a qualified Area Director/explicit qualifications listed in full Study along with two key expectations for Area Director
  - Hire a qualified Chief Financial Officer who will report to County Finance Office until Area Program comes into compliance with County requirements
  - Meet corporate compliance expectations through new memorandum of agreement
- Corporate Compliance Expectations include:
  - Establishing effective administrative and clinical leadership
  - Achieving an acceptable level of financial accountability
  - Increasing revenues to an acceptable level
  - Attaining sufficient program and administrative staffing to assure State mandates can be met
- Corporate Compliance Expectations continued include:
  - Meeting all external requirements
  - Attaining COA Accreditation
  - Meeting requirements for medical records: update and improve accuracy and quality
  - Achieving acceptable staff productivity levels
  - Meeting Y2K compliance for all systems

**Action Steps to meet short term goals:**

1. Hire qualified Area Director and Finance Officer. Suggested starting salary of \$85,000 to \$95,000 for Area Director.
2. Clarify responsibilities and liabilities
3. Develop a consistent clinical philosophy
4. Develop a short term staffing plan
5. Successfully implement PsychConsult
6. Develop overall MIS plan
7. Complete COA preparations
8. Assure compliance of all medical records and improve the efficiency and effectiveness of medical records
9. Refine and implement productivity measurements
10. Construct management performance reports
11. Assure ability to meet external Medicaid UM requirements

**Strategic Business Plan – longer term goals:**

1. Conduct system-wide assessment of need
2. Continue to enhance clinical leadership and implementation of “best practice”
3. Develop annual performance and outcome measures
4. Explore strategic opportunities for alliances and/or mergers
5. Implement financial systems, controls and data exchange mechanisms that meet County requirements
6. Develop a human resource development plan with classification and re-classification plans, staff recruitment and retention strategies
7. Set budget and revenue targets consistent with staffing plans
8. Develop longer term revenue maximization strategies
9. Develop cost projections for replacement and infrastructure upgrades

**TAC RECOMMENDS PRIORITIZING FOUR STRATEGIES:**

1. Hire an Excellent Area Director –qualified to meet demands as outlined in this proposal
2. Implement PsychConsult –with goal to improvement management and decision support
3. Use COA as vehicle to assure Area Program can meet demands of the future
4. Develop three-year strategic business plan

Action steps required:

1. State will be reducing the Medicaid services and could curb the number of services that they will pay for which will affect service delivery for the program
2. Need to do needs assessment.
3. Need to update clinical leadership around best practice. What to expect in type of service to be delivered versus old way of doing business.
4. Develop performance and outcome standards
5. Strategic and alliances
6. Internal controls be established to meet requirements

Ms. Knisley stated that Mental Health needs a Human Resources Plan. She said there was a serious mismatch in available staff and the demands of the jobs. She said the people coming for employment are not prepared to do the work. Clinical and Technical levels are not where they need to be. The computer systems and medical records need improvements and it is a serious challenge to attract professionals in the mental health business. Ms. Knisley stated that this is not uncommon.

Ms. Knisley stated that there needs to be some longer term revenue maximization program because they are either going to have to cut back or find new revenues. She said their priority should be to get the best Area Director they can hire.

Ms. Knisley added that when they did their site consult they determined that there is a need for new information systems and she stated they would need adequate resources to get it up and operating with good support.

Dr. Charles Mitchell, Interim Area Director of Mental Health Center, said the report was an eye opener even though the Area Board members were aware of some of the issues. The entire staff is working toward improvement. Some things have been completed but they are looking for other resources through grants. They now have a contract officer that is handling the contracts.

Dr. Mitchell said that they had 300 people on staff one and half year ago and now have 190. He said they are looking for fiscal management and new and different ways to provide help to the people in the County. Dr. Mitchell praised the Mental Health Center staff for their hard work during Hurricane Floyd and the flooding. He said they have plans for a lot of the recommendations to be implemented. Dr. Mitchell said that they are going to make the Mental Health Program work. The staff members are dedicated to making it a better place.

Chairman James spoke about how Mental Health will to succeed and he is looking forward to its success.

Commissioner Owens said each commissioner has an obligation to help meet the needs. Most of these people do not have the funds to pay for their services and the State and Federal governments continue to send down mandates without funding. He said they all want to fulfill the services but there is never enough money. He stated that they need to look at that aspect and impact of the services. It will be the County's responsibility to meet the needs and will have the most impact.

Commissioner Ward asked about the problems in filling positions at the Mental Health. Ms. Knisley responded that there are problems in the clinical area, with a number of problems dealing with new and more complex issues. Drugs are different today. This County is going to have an aging and developmental disabilities population that will bring different types of

problems. There are new treatments but the potential staff that are coming from graduate schools are not prepared to treat these situations.

Ms. Knisley noted that among the other healthcare in the world, mental health has lagged behind. She stated that the Mental Health Program needs to develop a partnership for quality with the County. She also stated that talented people are not choosing the mental health profession because it does not pay as well as other healthcare professions. On the financial side, there are more positive jobs to take for financial employees.

Commissioner Bowen praised Ms. Knisley for her report. He questioned the length of the contract with TAC.

Commissioner Johnson thanked Ms. Knisley for her report and expressed appreciation to the Area Board. He also thanked Dr. Mitchell stating he has done a fantastic job as interim director.

Chairman James asked Dr. White to see if there are any questions by the Area Board. Dr. White thanked the Board of Commissioners for bringing Ms. Knisley in and making her recommendations. He thanked Dr. Mitchell for being the interim Area Director. Dr. White also praised Mental Health staff for the great work they did during the hard times of the flood. He said they were looking forward to digging into the report and make Pitt County Mental Health an outstanding program.

Commissioner Bowen asked about the progress of hiring an Area Director. It was stated that the hiring committee would meet briefly following this meeting.

Chairman James asked if the Board of Commissioners would like to accept the report and recommendations by Ms. Martha Knisley, Technical Assistance Collaborative, Inc.

**UPON MOTION** by Commissioner Gaskins, seconded by Commissioner Owens, the Board voted unanimously to accept the report and recommendation made by Technical Assistance Collaborative, Inc. and instruct the Mental Health Area Board to meet with Ms. Knisley to review the report and implement the recommendations.

Chairman James adjourned the meeting at 7:55 p.m.

Respectfully submitted,

Susan J. Banks, CMC  
Clerk to the Board