

Summary of NC Board Meeting May 21, 2012

Present: Rhonda Ames, Dan Fisher, Joseph Rogers, David Sanders, and staff: Ray Bridge, Lauren Spiro

1. Ray- most crucial issue is MH consumer grants, Protecting federal funding for statewide networks. Obama proposes holding TA Center funding steady, propose cutting 28% of consumer statewide network grants – decreasing by about 8. Ray has been going on the Hill with MHLG. Key is Senate Appropriations Committee who will write the bill the next 3-4 weeks so they aren't talking to anyone now. We will try to get to senators to protect this money. Statewide family networks would get a cut but still get 3 million dollars, while the consumer networks would get less than 2 million dollars. Ray is trying to set up Hill visits this week with Dan.

Even if we get the senate to treat us kindly, funding for domestic agencies (SAMHSA) could be slashed.

Dan added – that any time anyone is in town let Ray know so you could visit your reps. Ray – has a 1 page justification statement – why these statewide networks are so critical. USpra is joining MHA & NCCBH June 25-26, 2012. Dave Sander (is on the Board of Directors of USpra) thinks June 26 is the actual Hill visit day and they are trying to recruit as as many people as possible.

2. Decision made. These 2 people are recommended since they fill the need for diversity Lauren Grimes- representing youth and Jimi Kelley – representing Native Americans Lauren to ask the board for a vote confirming the slate as submitted with a 1 week deadline to vote. We continue to reach out for diverse representation. If you know anyone that represents a diverse community send them in by June 27 4pm

3. Retreat – Strategic Planning

We need a strategic planning retreat of the NC board. The major question is how to fund it. The NCMHR exists on dues and Emotional CPR training. We need \$12,000-\$14,000 to bring our board together. Our need to influence government goes beyond SAMHSA to CMS, HHS, for example. If SAMHSA funded a retreat they would expect a report from us about the retreat. Faces and Voices of Recovery (FAVOR) has an annual meeting and their board members pay their own way. Joseph estimated cost is \$1500 per person.

NC asked Paolo for funding to bring together 5 NC board reps & 5 FAVOR reps.

Board members agreed we need to maintain autonomy – have our own strategic planning meeting, then have the SAMHSA funded meeting.

Rhonda – we have a responsibility to raise money for us to come together, some expense should be paid by us.

Where and when- pick a hub city and use airport hotel.

St. Louis was suggested as it is equally painful for everyone, Baltimore is possible

Aug 27-28 or 28-29 was discussed as being a possible time for a 1.5 day strategic planning meeting, eg, Mon afternoon (noon) - Tues, or Tues- Wed. Plan: Do a doodle and see if those dates work for the board.

4. Alternatives Conference – NC Open Meeting – Request was made for board members willing to help plan the meeting- Rhonda volunteered.

5. Fundraising

Dan is on the board of Foundation for excellence in MH care. It is a national community foundation. Chairman is Virgil Stucker, who runs Cooper-Rees. Other board members include Bill Anthony, Courtney Harding, a former MH Commissioner. They want the foundation to support a genuine shift away from the medical model and more to a social model of MH care. It is a family of funds that can be set up by different board members for a particular interest. Dan proposed a fund oriented to support national causes to shift MH care to support NC (eg, retreat) and bring in innovative approaches such as Open Dialogue to bring this information to people with MH experience. This week Dan set up a fund within the Foundation to get individual donors and help fund NC activities and incubate the NC to become an independent 501c3. Dan has a blog on Dialogical recovery from Monological Medicine. He wants to bring the dialogical approach together with the MH movement.

6. Credentialing – on the call the Board decided to have a meeting of board members who are interested. We need to decide if we wish to pursue this. Maybe it could be a joint meeting with NAPS. Would it be for traditional providers or peers?

Are they creating a positive , hopeful environment.

Have a NC meeting June 25, 4pm