

December 2022 Board Meeting Thursday, December 8 at 3:00 p.m.



Board meetings are held in the Board Training Room at 400 Johnson Street in Alpena.



NORTHEAST MICHIGAN COMMUNITY MENTAL HEALTH AUTHORITY BOARD BOARD MEETING December 8, 2022 at 3:00 p.m. A G E N D A

I.

Call to Order

II.	Roll Call & Determination of a Quorum			
ш.	Pledge of Allegiance	MISSION STATEMENT To provide comprehensive services and supports		
IV.	Appointment of Evaluator	that enable people to live and work independently.		
V.	Acknowledgement of Conflict of Interest			
VI.	Information and/or Comments from the Public			
VII.	Approval of Minutes			
VIII.	Consent Agenda 1. Partners in Prevention	(Available at Meeting)		
IX.	 December Monitoring Reports 1. Budgeting 01-004 (Annual Audit Update) 2. Financial Condition 01-005 3. Grants or Contracts 01-011 			
Χ.	Board Policies Review and Self-Evaluation 1. Grants or Contracts 01-011			
XI.	Linkage Reports 1. NMRE – December 7 Board Meeting 2. Advisory Council Update – December 5 Meeting			
XII.	Operations Report	(Available at Meeting)		
XIII.	Chair's Report 1. Bylaws Review 2. Educational Sessions			
XIV.	Executive Director's Report 1. Executive Director's Update 2. QI Council Update			
XV.	Information and/or Comments from the Public			
XVI.	Information and/or Comments for the Good of the	e Organization		
XVII.	Next Meeting – Thursday, January 12 at 3:00 p.m 1. Set January Agenda			
XVIII. Meeting Evaluation				

Adjournment

Northeast Michigan Community Mental Health Authority (NeMCMHA) Board Board Meeting November 10, 2022

I. Call to Order

Chair Eric Lawson called the meeting to order in the Board Room at 3:00 p.m.

II. Roll Call and Determination of a Quorum

Present: Robert Adrian, Les Buza, Bonnie Cornelius, Lynnette Grzeskowiak, Charlotte Helman, Judy Jones, Terry Larson, Eric Lawson, Gary Nowak, Lloyd Peltier (arrived at 3:07 p.m.), Pat Przeslawski, Terry Small

Staff & Guests: Carolyn Bruning, Connie Cadarette, Erin Fletcher, Ruth Hewett, Larry Patterson, Nena Sork, Stephanie Szatkowski, Jen Walburn

III. <u>Pledge of Allegiance</u>

Attendees recited the Pledge of Allegiance as a group.

IV. Appointment of Evaluator

Bonnie Cornelius was appointed as evaluator for this meeting.

- V. <u>Acknowledgement of Conflict of Interest</u> No conflicts of interest were acknowledged.
- VI. <u>Information and/or Comments from the Public</u> No information or comments were presented.

VII. <u>Approval of Minutes</u>

Terry Larson's county was corrected to Presque Isle in the Nomination Committee section.

Moved by *Terry Larson, supported by Gary Nowak, to approve the minutes of the October 13, 2022 meeting, with the aforementioned revision.* Motion carried.

VIII. Educational Session – Compliance Report

Jen Walburn presented the annual Compliance Training and Report, which she has to attest to the Office of the Inspector General has been disseminated appropriately. She reviewed the seven elements of compliance and Board member responsibilities and oversight.

Lloyd Peltier joined the meeting at 3:07 p.m.

Compliance is the conduct and integrity of the organization, which pertains to fraud, waste, and abuse. Board conduct is included in compliance, among HIPAA and the Michigan Mental Health Code, etc. Staff are trained to follow the rules of compliance in an attempt to avoid any breaches. There were two internal breaches in the past year. The Deficit Reduction Act, Federal False Claims Act, whistleblower provisions, and documentation requirements per the Medicaid Provider Manual were discussed.

Jen reviewed compliance reporting requirements and which audits/reviews took place in FY22. There were five provider disenrollments/contract terminations, nine internal compliance complaints, five external/contract provider complaints, two external corrective action plans, and five internal corrective action plans. Jen covered the items that are checked during Medicaid Verification, including correct units being reported and that services are authorized in the individual's plan of service. She reported that 75% of CMHSPs use the same software, PCE, internally known as Majestic. Nena stated the Agency meets with PCE twice a month to go over enhancements.

IX. November Monitoring Reports

1. Treatment of Individuals Served 01-002

The October Recipient Rights Advisory Committee minutes were included in the Board packet. Gary Nowak questioned whether the committee had enough members present to have a quorum; however, no motions were passed at the meeting, so it wouldn't have been an issue. The schedule for the Recipient Rights Advisory Committee meetings has been changed, and Eric Lawson expressed interest in attending the next

meeting. Gary stated an alternative Board member should be assigned to the Recipient Rights Advisory Committee, and it was suggested Eric appoint himself to the role. Charlotte Helman inquired about the line item for Incident Reports – Medication Other on the Quarterly Recipient Rights Activity Report. Ruth Hewett was brought into the meeting to address the question, and stated the Medication Other Incident Reports include medication refusals or medication forgotten by the individual, and they aren't just showing staff medication errors. Eric reiterated that a quorum is 50% plus one, and would like to ensure all policies correctly reflect such.

2. Ends 04-001

The Ends Monitoring Report was provided as a handout and included updated numbers for all Sub-Ends. Nena stated the services for children Sub-End is low due to still being very short-staffed. She is pleased with the amount of services being provided in the home, as relationships with families are better when services take place in the home, which allows staff to support the whole family, not just the child. Nena reported that a full-time CLS worker was just hired for the BHH program, which will allow them to take on more referrals.

Connie Cadarette reported on the financial Sub-Ends with soft close numbers. Agency-wide revenues exceed Agency-wide expenses by \$401,732, which are local funds that can be kept. Medicaid funds are overspent by \$845,961 and Healthy Michigan funds were underspent by \$708,274. This produced a negative amount due from the NMRE of \$137,687. Last year the Agency returned over \$2 million to the NMRE. The NMRE is fully funded and will be sending revenue back to the State, so they will be able to supplement the amount due.

Gary reported on budget discussions from the NMRE Board meeting, as their reporting to the Board shows NeMCMHA as being \$1 million overspent on direct care wages. Nena explained the NMRE doesn't know exactly how much funds each CMHSP will need, so they spread the money out across the all of them. Whatever isn't used goes back to the NMRE and they pay it back to the State. Though it shows the Agency as being \$1 million over budget, it is due to how the money is spread out among the five CMHSPs and the Agency does not owe the negative funds showing.

Moved by Les Buza, supported by Gary Nowak, to approve the November Monitoring Reports as presented. Motion carried.

X. Board Policies Review

1. Treatment of Individuals Served 01-002

Eric stated the policy was last updated in 2019 to accurately reflect the Executive Director's title.

2. Staff Treatment 01-003

Eric reported this policy was also last updated to correct the Executive Director's title.

3. Ends 04-001

Eric stated the Ends Policy was recently finalized to show the updated Ends that were just discussed.

XI. Linkage Reports

1. NMRE – October 26 Board Meeting

Eric spoke with Deanna Yockey regarding the NMRE's administrative overhead, which he thinks is excellent at only about 2% of their budget. Terry Larson stated he is disappointed with the lack of use of the funds the SUD Board has available, which are from liquor taxes. A portion of the tax money stays in the county, but a good amount goes to the NMRE. Terry reported there is still a significant amount of money in the account. Terry would like the NMRE to be more aggressive with its advertising of what funds are available and what they can be used for. The Sunrise Center, Catholic Human Services, and Alcona Health Center all use the funds for substance abuse prevention. Terry would like the county commissioners in attendance to discuss the funds with their fellow commissioners. Robert Adrian stated most of Alpena's funds go to Catholic Human Services, but as soon as they give the funds out, more money is coming right back in. Nena reported on the funds all four counties have available: Alcona \$83,133, Alpena \$265,468, Montmorency \$61,123, and Presque Isle \$98,534.

2. CMHA – Fall Conference Report

Gary, Bonnie, and Judy Jones stated the keynote speakers at the conference were amazing. Bonnie recommended all new Board members attend a CMHA conference.

XII. Operations Reports

Erin Fletcher provided the Board with a review of the October Operations Report. There was an increase in services provided, with 72 access screens completed in October. The prior monthly average was 55. There were 67 hospital prescreens, of which 27 went inpatient. Peer support services have increased over the year, with 51 individuals served in October and a monthly average of 41. In October, 1,111 unduplicated individuals were served.

XIII. Nomination Committee Report

Pat reported the Nomination Committee reviewed the letters to the County Commissioners and decided everything was copacetic. Eric has reviewed and signed the letters.

XIV. <u>Chair's Report</u>

1. Strategic Plan

Eric called the Board's attention to the handout of the official Strategic Plan for 2022 – 2023, which is the culmination of the work over the past year.

XV. <u>Executive Director's Report</u>

Nena reported on her activities for the last month. During the week of October 17, she finished contract meetings, was involved in an Administrative Hearing, and attended the NMRE Operations Committee. Nena attended the CMHA Fall Conference the following week, as well as the NMRE Board meeting, and the Medication Take Back Event. She would like to have one of the keynote speakers from the CMHA conference come and present to the community. The amount of medication turned in at the Take Back Events has steadily decreased, so the community may have worked its way out of the problem. The Agency has been approved to have a medication drop box onsite, but there are a few details to be worked out before it is installed. During the week of October 31, Management Team held two supervisor trainings, which received positive feedback. Nena attended the launch of the ACC/Western Michigan University collaborative social work programs, and the Agency hosted a well-attended training at the college on Benefits to Work, which covers those who want to work while receiving Medicaid benefits. The Agency is also working with ACC on a collaborative program for NeMCMHA staff, which will allow them to receive college credits while working and taking additional training courses. The hope is that between Thanksgiving and the New Year the Agency will be running 400 ads on WBKB. One ad will be about jobs and one will be testimonies about the organization. During the week of November 7, Nena attended the NMORC Prevention/Workforce meeting and the NMRE Finance meeting.

XVI. Information and/or Comments from the Public

There were no additional comments.

XVII. Information and/or Comments for the Good of the Organization

Eric wished Carolyn Bruning a happy birthday. Gary wished everyone a Happy Thanksgiving.

XVIII. <u>Next Meeting</u>

The next regularly scheduled meeting of the Northeast Michigan Community Mental Health Authority Board will be held Thursday, December 8, 2022 at 3:00 p.m.

1. Set December Agenda

The proposed December agenda items were reviewed.

2. <u>Meeting Evaluation</u>

Bonnie stated the meeting started on time, the reports were great, and the majority of the Board participated. She really enjoyed the meeting and feels everyone is here because it matters.

XIX.

Adjournment *Moved by Judy Jones, supported by Lynnette Grzeskowiak, to adjourn the meeting.* Motion carried. This meeting adjourned at 4:26 p.m.

Bonnie Cornelius, Secretary

Eric Lawson, Chair

Rebekah Duhaime Recorder

POLICY CATEGORY: POLICY TITLE AND NUMBER: REPORT FREQUENCY AND DUE DATE:

EXECUTIVE LIMITATIONS GRANTS OR CONTRACTS, 01-011 ANNUAL, DECEMBER

Executive Director Report:

Following each of the five sub-items within the policy, I will indicate my interpretation and status of each.

Policy Statement:

With respect to contracts and grants, the Executive Director may not enter into any grant or contract, unless it emphasizes the production of ends and the avoidance of unacceptable means. Accordingly, they may not:

- 1. Fail to prohibit particular methods and activities to preclude grant funds or contracts from being used in imprudent, unlawful or unethical ways.
 - Interpretation: Contracts must include language that mandates all contractors, vendors, subcontractors and suppliers of goods to adhere to all applicable laws, ordinances, and regulations when providing services. Contractors must agree to provide service in an ethical manner.
 - **Status:** All service contracts contain language that requires the contractors to adhere to all applicable local, state, and federal laws, ordinances and regulations when providing services as part of the agreement.

Contract boilerplate templates were used for FY 22 service contracts. Contractors were receptive to the boilerplate language.

Contract Monitoring for FY 22 review continues to be impacted by COVID-19 as it relates to entering homes, screening, and documentation from licensing bodies. (Some Adult Foster Care Homes had delay in application for renewal of licenses, etc.) Reviews of contractors continues. The Contract Manager will utilize a hybrid version to monitor contracts which will include a virtual review process, on site reviews, and phone interviews to obtain necessary monitoring information.

Contractors continue to be held to training, rights compliance, and any restrictions imposed by Governors Orders addressing the COVID-19 Pandemic.

- 2. Fail to assess and consider an applicant's capability to produce appropriately targeted efficient results.
 - Interpretation: Contracts must include language indicating expected outcomes and evaluation of services provided by contractors, vendors, and subcontractors.
 - **Status:** Service Contracts contained language indicating what the measurable expected outcomes of the service contracts are. Contracts require authorization, as well as mandating the adherence to the measurable goals identified in the plan of service. Contracts will be evaluated at least annually.

One of the Agency's major provider of services is NEMROC. Quarterly meetings occurred to address service outcomes and problem solving areas of concern. For other contractors, evaluation continues via the Recipient Rights Office, regular meetings with providers, and contract site visit evaluations.

This past year, the Agency continued to be in contact with the various providers to discuss additional funding to those who qualify by performing face-to-face services (Direct Care Wage Pass-through). Providers were also allowed to submit for stability payments to offset COVID-19 interruptions in service provision. One provider applied and received the stability payment.

- **3.** Enter into any contract for services without approval from the Board, except for contracts for residential services and professional clinical services. In unusual circumstances, when a contract requires execution prior to the next regular meeting of the Board, the Executive Director may approve such contracts when the total cost of the contract does not exceed \$25,000.
 - **Interpretation:** The Board will approve all service contracts, excluding those pertaining to residential services or professional clinical services.
 - **Status:** All contracts (excluding residential and professional clinical) are submitted to the Board on a regular basis for review and approval. As a matter of policy, routine contracts are included on the Board's Consent Agenda; contracts that require more detailed discussion and consideration (such as the provider agreement with the PIHP) are handled as separate agenda items.
- 4. Fail to maintain financial obligations for contracts on a fiscal year basis.
 - Interpretation: The contract term shall follow the fiscal year calendar.
 - **Status:** For those contracts that Northeast provides payment, the contracts are written on a fiscal year basis. Occasionally multi-year contracts are used (e.g., MDHHS), but language limits financial obligations to fiscal year periods.
- 5. Fail to determine to the best of their ability that all contractors, vendors, subcontractors, and suppliers of goods shall prohibit discrimination based on religion, race, color, national origin, age, sex, height, weight, marital status, political affiliation, sexual orientation, record of arrest without conviction, or physical or mental handicap.
 - **Interpretation:** All contracts must include language that prohibits discrimination based on religion, race, color, national origin, age, sex, height, weight, marital status, political affiliation, sexual orientation, record of arrest without conviction, or physical or mental handicap.
 - **Status:** All contracts contain language that prohibits discrimination based upon the abovementioned areas.
- 6. For contracts over \$25,000 needing execution prior to the next regularly scheduled meeting of the Board, the Executive Director will notify the Board Chair who will request the Executive Committee review the contract and take action. The Board will be notified at the next Board meeting of the recommendations and outcome of the Executive Committee.
 - **Interpretation:** Any urgent contracts over \$25,000 needing approval prior to the regularly scheduled Board meeting will get approval from the Board Chair.
 - **Status:** With the increase in the use of EGrAMS as it relates to contracts from the State, the Executive Director has been notifying the Board Chair at the time the EGrAMS authorizations come through. Notification to the full Board is provided at their next regularly scheduled meeting.
- 7. The Executive Director will notify the Board, at the next regular Board meeting, when there is an application executed by the Agency for available grants, which enhance the lives of the people we serve and/or assist in the day-to-day operations of the Agency. Grant funds will be included in the budget and presented to the Board for approval at the next regularly scheduled Board meeting.
 - **Interpretation:** The Board will be notified for all applications for grant funds made through the Agency.
 - **Status:** Grant application notices are included on the Consent Agenda as they are applied for, and if the grant is awarded, the dollars for the grant are incorporated into the budget or budget amendment.

Summary:

I believe we are in substantial compliance with the Board's policy. The Agency has made efforts to stay in contact with the various contractors throughout the fiscal year. Three providers requested stability payments this fiscal year. The Agency received funding to accommodate this request, as the providers are long standing partners with the Agency and payments were provided to secure the provider network for necessary services. The Agency provided stability payments for two of these requests. These providers continue to partner with the Agency today.

This year contract monitoring reciprocity continues, meaning Northeast can ask another CMH who has completed a site visit at a location we have someone living, for their review of a site to determine compliance, which was utilized with many of the out of catchment area residential homes. The NeMCMHA Contract staff will review those providers having only one individual served through a CMH in which NeMCMHA serves that individual. We, in turn, will share with other boards our site visit information. This reduces the number of duplicate reviews the homes are involved with and allows less intrusion into the person's home situation.

The QI staff continues to complete provisional Home and Community Based Services (HCBS) surveys on all new providers who deliver adult foster care, community living supports, and supported employment services. This is to ensure the providers are prepared to meet the HCBS guidelines.

All contracts have now been transitioned to the Contract Manager, Morgan Hale BBA. It is planned that by the end of this fiscal year leases and rental agreements will be moved to the Contract Manager.

EXECUTIVE LIMITATIONS (Manual Section)

GRANTS OR CONTRACTS (Subject)

Board Approval of Policy Last Revision Approved by the Board: August 8, 2002 December 9, 2021

•1 POLICY:

The Executive Director may not enter into any grant or contract, unless it emphasizes the production of Ends and the avoidance of unacceptable means.

Accordingly, the Executive Director may not:

- Fail to prohibit particular methods and activities to preclude grant funds or contracts from being used in imprudent, unlawful, or unethical ways.
- Fail to assess and consider an applicant's capability to produce appropriately targeted efficient results.

The Executive Director may execute the EGrAMS authorizations for the contracts through the State of Michigan for such agreements as the General Funds contract, PASSAR Agreements, and other grants initiated by the Michigan Department of Health and Human Services. The Executive Director shall inform the Board Chair at the time the EGrAMS authorizations are received.. Notification to the full Board will be provided at their next regularly scheduled meeting.

In addition, for **CONTRACTS**:

- Enter into any contract for services without approval from the Board except for contracts for residential services and professional clinical services. In unusual circumstances, when a contract requires execution prior to the next regular meeting of the Board, the Executive Director may approve such contracts when the total cost of the contract does not exceed \$25,000.
- Fail to maintain financial obligations for contracts on a fiscal year basis.
- Fail to determine, as the best one can, that all contractors, vendors, subcontractors, and suppliers of goods shall prohibit discrimination based on religion, race, color, national origin, age, sex, height, weight, marital status, political affiliation, sexual orientation, record of arrest without conviction, or physical or mental handicap.

• For contracts over \$25,000 needing execution prior to the next regularly scheduled meeting of the Board, the Executive Director will notify the Board Chair. The Board Chair will request the Executive Committee review the contract and take action. The Board will be notified at the next Board meeting of the recommendations and outcome of the Executive Committee.

In addition, for **GRANTS**:

• The Executive Director will notify the Board at the next regular Board meeting, when there is an application executed by the Agency for available grants, which enhance the lives of the people we serve and/or assist in the day-to-day operations of the Agency. Grant funds will be included in the budget and presented to the Board for approval at the next regularly scheduled Board meeting.

•2 APPLICATION:

The Northeast Michigan Community Mental Health Authority Board

- •**3 DEFINITIONS:**
- •4 **REFERENCES:**
- •5 FORMS AND EXHIBITS:

GOVERNANCE PROCESS (Manual Section)

BOARD MEMBER RECOGNITION (Subject)

Board Approval of Policy Board Revision of Policy August 8, 2002 December 12, 2019

•1 POLICY:

The Board may recognize its members for extended tenure or upon termination or retirement, either upon completion of full terms or partial terms of office. Such recognition may take any form deemed appropriate by the Board. The Board may include such recognition for service within the Board meeting minutes.

The following schedule shall provide guidance concerning frequency and nature of awards to Board members:

At 5 years	A framed Certificate of Appreciation signed by the
	current Board Chair and Executive Director
At 10 years	A Certificate of Appreciation signed by the current
	Board Chair and Executive Director
At 15 years	A Certificate of Appreciation signed by the current
	Board Chair and Executive Director
At 20 years and each 5	An appropriate gift (as determined by the Executive
years thereafter	Director in consult with the Board Chair)
Upon retirement from	A Letter of Appreciation from the Board and if
Service at any other	possible a Certificate of Appreciation from the
time	Department of Health and Human Services

Award Schedule

These acknowledgements shall be presented at the March Board meeting.

•2 APPLICATION:

The Northeast Michigan Community Mental Health Authority Board

•**3 DEFINITIONS:**

- •4 **REFERENCES:**
- •5 FORMS AND EXHIBITS:

GOVERNANCE PROCESS (Manual Section)

BOARD MEMBER ORIENTATION (Subject)

Board Approval of Policy Last Revision to Policy Approved: April 14, 2005 December 8, 2016

•1 POLICY:

The Board will provide an orientation for new Board members as well as regular updates for all Board members. This orientation program will include information addressing the areas noted below. Primary responsibility for delivery of each section is also noted:

- Community Mental Health History (General perspective: CMHAM Boardworks 2.0 module: "Foundations: Public Policy;" Northeast perspective: Executive Committee/Executive Director)
- Community Mental Health Mission and Priorities (General perspective: CMHAM Boardworks 2.0 module: "Foundations: Intended Beneficiary Command"; Northeast perspective: Executive Committee/Executive Director)
- Michigan's Mental Health Code (General perspective: CMHAM Boardworks 2.0 module "Leadership: Legal;" Northeast perspective: Executive Director)
- Policy Governance (primarily Executive Committee with elements from CMHAM Boardworks 2.0 modules: "Leadership: Participatory Governance and Ethical Implications")
- Organizational structure of Northeast Michigan Community Mental Health Authority (General perspective: CMHAM Boardworks 2.0 modules: "Implementation: Best Practices;" Northeast perspective: Executive Director)
- Services offered by Agency (Executive Director, Services Directors, Boardworks 2.0 modules: "Management: Systems")
- Basics of mental healthcare financing and managed care (General perspective: CMHAM Boardworks 2.0 modules: "Current and Future Funding for CMHSPs and PHIPs," Northeast perspective: Executive Director, Accounting Officer and Finance Officer)
- The Board's relationships with the Counties, Department of Health and Human Services, the PIHP, the Board Association and other local agencies (Executive Committee/Executive Director; CMHAM Boardworks 2.0 modules: "Leadership: Legal")

For newly appointed Board members, those portions of the orientation program that are to be delivered by members of the Executive Committee, other members

of the Board or the Executive Director shall be delivered within the first 90 days of the members' terms. New Board members will be encouraged to complete the Community Mental Health Association of Michigan Boardworks 2.0 Training program within one year.

The Executive Committee shall assure that at least one Board member is both knowledgeable in the area of policy governance and is willing and able to train other Board members in its principles.

For each of the other curriculum areas, the Executive Director, with the support of the Board, will assure that orientation material is developed, available in appropriate media and kept current.

•2 APPLICATION:

The Northeast Michigan Community Mental Health Authority Board members

•**3 DEFINITIONS:**

•4 **REFERENCES:**

<u>On Board Leadership</u>, Carver, John, Jossey – Bass, 2002 <u>The Policy Governance Fieldbook</u>, Oliver, Carolyn, Jossey – Bass, 1999 "John Carver on Board Governance" A Video Presentation CMHAM Resource Manual Mental Health Code, Michigan PA 258 of 1976 Plan of Service, NeMCMHA

•5 FORMS AND EXHIBITS:

Program	Consumers served November 2022 (11/1/22 - 11/30/22)	Consumers served in the Past Year (12/1/21 - 11/30/22)	Running Monthly Average(year) (12/01/21-11/30/22)
1 Access Routine	41	637	53
Emergent		5	0
Urgent	1	3	0
Crisis	35	575	48
Prescreens	49	778	61
2 Doctors' Services	442	1464	438
3 Case Management			
Older Adult (OAS)	112	320	115
MI Adult	114	373	126
MI ACT	30	62	27
Home Based Children	24	52	21
MI Children's Services	67	136	53
IDD	150	396	177
4 Outpatient Counseling	119(24/95)	261	106
5 Hospital Prescreens	49	778	61
6 Private Hospital Admissions	16	237	19
7 State Hospital Admissions	0	2	0
8 Employment Services			
IDD	57	88	52
MI	23	60	18
Touchstone Clubhouse	91	110	95
9 Peer Support	58	83	42
10 Community Living Support Services			
IDD	97	154	93
MI	56	111	59
11 CMH Operated Residential Services			
IDD Only	55	67	56
12 Other Contracted Resid. Services			
IDD	34	38	36
MI	31	39	34
13 Total Unduplicated Served	1032	2286	1025

County	Unduplicated Consumers Served Since December 2021
Alcona	244
Alpena	1361
Montmorency	274
Presque Isle	343
Other	58
No County Listed	6

BYLAWS

Recognizing the responsibility of the Alcona, Alpena, Montmorency, and Presque Isle County Boards of Commissioners to provide suitable mental health services to the above named counties, the boards of commissioners have duly appointed a Community Mental Health Board as a Mental Health Authority according to Public Act 258, 1974, as amended.

Recognizing further the responsibility of this Authority in upholding the best interests of the citizens through concerted effort in providing and maintaining mental health services in accordance with Public Act 258, 1974, as amended, the Northeast Michigan Community Mental Health Authority hereby organizes in conformity with bylaws and regulations herein-stated.

For the purpose of these bylaws, whenever the term "Authority" shall appear, it shall be interpreted to mean the Northeast Michigan Community Mental Health Authority, who shall have authority in the government of the county mental health services for the above-mentioned counties. Whenever the term "Board" shall appear, it shall be interpreted to mean the Board of Directors of the Northeast Michigan Community Mental Health Authority. Whenever the term "Department" is used, it shall be interpreted to mean the Michigan Department of Health and Human Services.

ARTICLE I - NAME

The name of this Board shall be the NORTHEAST MICHIGAN COMMUNITY MENTAL HEALTH AUTHORITY.

ARTICLE II - MISSION

To provide comprehensive services and supports that enable people to live and work independently.

ARTICLE III - DUTIES

This community mental health authority shall:

A. Examine and evaluate the mental health needs of the counties it represents and the public and nonpublic services necessary to meet those needs.

- B. Review and approve an annual plan and budget for the program. (The format and documentation of the annual plan and budget shall be as specified by the Department.)
- C. Provide and advertise a public hearing on the annual plan and budget.
- D. Submit to each board of commissioners a copy of the Board's needs assessment, annual plan, and requests for new State funds.
- E. Take such actions as it deems necessary and appropriate to secure private, federal, and other public funds to help support the program.
- F. Approve and authorize contracts for services.
- G. Review and evaluate the quality, effectiveness, and efficiency of services being provided by the program.
- H. Appoint an Executive Director of the community mental health program who shall meet standards of training and experience as established by the Department in Administrative Rules.
- I. Establish general policy guidelines within which the Executive Director shall execute the program.
- J. Subject to the provisions of Chapter II of Public Act 258, 1974, as amended, the Authority may enter into contracts for purchase of mental health services with private or public agencies.

Contracts may be entered into with any facility or entity of the Michigan Department of Health and Human Services with the approval of the Michigan Department of Health and Human Services.

ARTICLE IV- MEMBERSHIP

Section 1. Appointment

The county boards of commissioners of the counties involved, being Alcona, Alpena, Montmorency, and Presque Isle, shall establish a 12-member community mental health authority board of directors. Each board of commissioners shall appoint the Board members from its county.

Section 2. Composition

The composition of the Board shall be as specified in the Mental Health Code, section 222.

Section 3. Terms; Vacancies; Removal of Member

The term of office of a board member shall be three (3) years from April 1 of the year of appointment. Vacancies shall be filled for unexpired terms in the same manner as original appointments. Board members are encouraged to attend all Board meetings. If a Board member misses two consecutive meetings without advance notice to the Board Chairperson or his or her designee, a letter from the Board Chairperson will be sent to the Board member inquiring about the member's intent to fulfill his or her term of office. If no response is received within 30 days, a second letter will be sent with a copy to the Chairperson of the appointing County Commission. If no response is received within 30 days, a letter will be sent to the Chairperson of the removal of the Board member according to the requirements of the Mental Health Code, § 224, which states in part: A board member may be removed from office.

ARTICLE V - OFFICERS

Section 1. Officers; Election; Term of Office

The officers of this Board shall consist of a Chair, Vice-Chair, and Secretary who shall perform the duties usually pertaining to such offices or as provided by the Board. All officers shall be elected for a term of one year and shall hold office until the next regular election; such election to be held at the April meeting of each year.

The annual election of Board Members to Board Offices shall be conducted in the following manner:

 By the October Meeting prior to the April election, the Chair will recommend to the Board, subject to the approval of the Board, a "Board Officers Nominating Committee", a Special Committee of the Board which shall exist for the sole purpose of nominating candidates to fill the positions of the Board's Offices; that Committee as needed to fill Board vacancies, the Chair will appoint a "Nomination/Board Member Composition Committee," which shall consist of at least four, and no more than six, Board Members, preferably one from each county.

This Committee shall review the terms of all Board members with terms expiring and identify the need for individuals with lived experience or a family member of an individual with lived experience for potential appointments. The committee shall attempt to recruit or identify candidates for membership who meet the requirements of Section 222 (1) of the Mental Health Code. These recommendations shall be communicated to the county Boards of Commissioners as necessary by the Board's Chair or his/her designee.

- By the March meeting, that Committee shall report its recommendations to the Board for its members' consideration prior to the April election meeting.
- During the April Meeting, a slate of candidates for the Board's three offices shall be placed in nomination first by the Nomination/Board Member Composition Committee, which shall give its report at the call of the Chair.
- Election of the Board's Chair for the next year shall be the first election, and shall be conducted by the current Chair, who shall state the Nomination/Board Member Composition Committee's nomination, then ask if there are any [further] nominations from the floor; if/when none is heard after *three* such invitations, then the Chair shall declare that nominations are closed and the election may proceed.
- Balloting may be by voice, by show-of-hands, or by roll call at the request of any Board member, as the Board may determine in advance or by its majority vote at any time during the election process; a majority of votes cast shall determine the outcome of the election.
- Following the election of a new Chair (and assuming the current Chair does not succeed to the office), the immediate-past-Chair shall relinquish the chair to the new Chair, who shall conduct the balance of the elections in the same manner.
- Elections then proceed in this order: Vice-Chair... then Secretary.
- Newly-elected officers assume their offices immediately upon elections.
- If questions of procedure arise before or during the meeting or elections, the Board shall resolve these questions via reference to its Bylaws, Policies, and/or Robert's Rules.

Section 2. Duties

<u>Chair</u> – The Chair shall be the presiding officer at all meetings of the Board; shall be an ex officio member of all committees; shall appoint the Chair of the standing and special committees; shall sign and execute in the name of the Board; shall call meetings of the Board; shall work with the Executive Director to create the meeting agenda; and shall perform such other duties as are required by the Board.

Vice-Chair – The Vice-Chair, in the event of the incapacity or absence of the Chair, shall assume the duties prescribed to the Chair. In the absence of the Chair from a meeting of the Board, the meeting shall be called to order by one of the officers of the appointed Board, designated as temporary Chair, in the following order of precedence:

Vice Chair ... then Secretary.

If the Chair does arrive, the temporary Chair shall surrender the chair to him/her.

Secretary – The Secretary or his/her designee shall send appropriate notices, shall act as custodian of all records and reports, and shall be responsible for the keeping and reporting of adequate records of all meetings of the Board.

Section 3. Additional Officers

The Board may elect or appoint such other officers or agents as it may deem necessary for the transaction of business of the Board, and for terms to expire the same as other officers provided for in these Bylaws.

Section 4. Removal of an Officer

The Board may remove an Officer for just cause by the majority of the Board (7). A member removed from office shall remain a member of the Board, unless he or she is removed from the Board by the appointing board of commissioners according to Article IV, Section 3.

Section 5. Replacement of an Officer

Should an Officer be unable to finish their term of office, the Board Chair will appoint a replacement for the position vacated, preferably from the same County to assure equal representation on the Executive Committee. If the appointee rejects the appointment, the Chair will appoint another Board member.

ARTICLE VI - MEETINGS

Section 1. Regular Meetings

The Board of directors of Northeast Michigan Community Mental Health Authority shall hold at least twelve regular meetings annually at a time and place to be designated by the Chair of the Board. All meetings of the Board shall be open to the public and shall be held in a place available to the general public. All meetings shall be held in accord with 1976 P.A. Act 267 (the "Open Meetings Act") and 1976 P.A. 422 (the "Freedom of Information Act"). Within ten days after the April meeting of the Board in each year, the Secretary shall post a public notice stating the dates, times, and places of its regular meetings.

If there is a change in the schedule of regular meetings of the Board, there shall be posted within three days after the meeting at which the change is made, a public notice stating the new dates, times, and places of its regular meetings. Upon written request, at the same time a public notice of meeting is posted, the Secretary shall provide a copy of the public notice of that meeting to any newspaper published in the state and to any radio and television station located in the state, free of charge.

Other requirements pertaining to regular meetings of this Board contained in Public Act 267, 1976 shall be adhered to.

The agenda for regular meetings of the Board may include the following:

Call to Order Roll Call and Determination of a Quorum Pledge of Allegiance Appointment of Evaluator Acknowledgement of Conflict of Interest Information and/or Comments from the Public Approval of Minutes **Educational Session** Consent Agenda Monitoring Reports Policy Review, Approval & Self-Evaluation (if any) Linkage Reports **Operations Report** Chair's Report **Executive Director's Report** Information and/or Comments from the Public Information and/or Comments for the Good of the Organization Next Meeting – Setting Agenda Meeting Evaluation Adjournment

Section 2. Special Meetings

Special meetings of the Board may be called by the Chair or upon written request of any three members of the Board filed with the Secretary or his/her designee. Notices of a special meeting shall be given by one of the following means or as required by the Open Meetings Act:

- a. Personal notice by telephone or otherwise to each Board member at least 24 hours before such meeting.
- b. Public notice at least eighteen hours before such meeting, stating date, time, and place.
- c. As otherwise determined by the Chair.

Each notice of a special meeting shall state the time, place, and purpose thereof.

The agenda for special meetings of the Board may include the following:

Call to Order Roll Call and Determination of a Quorum Statement of Purpose of Meeting Transaction of Business According to Stated Purpose Adjournment

Section 3. Closed Meetings

A 2/3 majority roll call vote of appointed Board members shall be required to call a closed session, for purposes stated in Section 8, Public Act 267, 1976. The roll call vote and the purpose or purposes for calling the closed meeting shall be entered into the minutes of the meeting at which the vote is taken.

Section 4. Meeting by Remote Communication

A Board member may participate in a meeting by conference telephone or any similar communication equipment through which all persons participating in the meeting can hear each other. Participation in a meeting pursuant to this Section constitutes presence in person at the meeting.

Section 5. Minutes

The Board shall keep minutes of each meeting showing the date, time, place, members present, members absent, any decisions made at a meeting open to the public, and the purpose or purposes for which a closed session is held. The minutes shall include all roll call votes taken at the meeting.

Minutes shall be public records open to public inspection and shall be available at the address designated on posted public notices pursuant to Section 1. Copies of the minutes shall be available to the public at a reasonable estimated cost for printing and copying.

Proposed minutes shall be available for public inspection no later than eight (8) business days after the meeting to which the minutes refer. Approved minutes shall be available for public inspection not later than five (5) business days after the meeting at which the minutes are approved by the Board.

A separate set of minutes shall be taken by the Secretary or his/her designee at the closed meeting; these minutes shall not be available to the public, and shall only be disclosed if required by a civil action filed under Section 10, 11, or 13 of Public Act 267, 1976. These minutes may be destroyed one year and one day after approval of the minutes of the regular meeting at which the closed meeting was approved.

Section 6. Materials to be Furnished Board Members

Insofar as possible, all members of the Board shall be mailed a copy of the proposed agenda and copies of all material to be considered at regular Board meetings in advance of such meetings; however, any Board member or the Executive Director may place an item on the agenda by requesting the Chair to include such item or items.

Insofar as possible, all members of the Board shall be mailed copies of the agenda to be considered at special Board meetings, unless this requirement shall be waived by unanimous consent of all Board members.

Section 7. Quorum and Voting

One-half plus one of the appointed Board members, which shall include one officer, shall constitute a quorum of the Board. Consistent with Robert's Rules of Order, motions made during Board and committee meetings shall require a second in order to be considered. The affirmative vote of the majority of the votes cast shall be required for the passage of any motion or resolution at any meeting of the Board or its committees. The Chair of the Board will be allowed to vote.

It shall be the prerogative of any Board member to require a roll call vote on any motion.

Section 8. Decorum during Debate

Board members shall confine their remarks to the question, be courteous in their language and behavior, not arraign the motives of another Board member and emphasize it is not the individual, but the measure which is subject of debate. The Chair will assure enforcement of these behavioral guidelines.

The Chair shall call to order any person who is being disorderly by speaking or otherwise disrupting the meeting proceedings by failing to be courteous, by speaking longer than a reasonable time, or by speaking vulgarities. Such person shall thence be warned by the Chair that he/she may be expelled from the meeting and he/she shall not be permitted to speak further at the same meeting except upon special request of the Board. If the person continues to be disorderly and disrupt the meeting, the Board Chair, or a designee, shall contact local law enforcement to have said individual removed from the meeting. No person shall be removed from a public meeting except for an actual breach of the peace committed at the meeting.

ARTICLE VII - COMMITTEES

The Board of Directors shall establish the following standing committees: Executive Committee and Recipient Rights Committee. The standing committees shall perform such functions and duties as designated by the Board.

At the annual organizational meeting of the Board, the Chair of the Board shall appoint the Chair and members of the standing committees; those persons shall be members of the Board, except that the Recipient Rights Committee membership may include Community Mental Health Board members, staff personnel, government officials, attorneys, mental health consumer interest group representatives, or other persons, at the discretion of the Board Chair.

The Chair shall appoint the chair and members of special committees, subject to the approval of the Board; those persons need not be members of the Board, shall be counted for quorum, and shall be eligible to vote on committee matters. The Chair of the Board shall be the only ex officio member of any and all standing committees, shall be included in counting for quorum, if present, and shall be eligible to vote.

The Board may establish such other committees as it deems proper.

All standing and special committees shall meet upon the call of the committee Chair, with the concurrence of the Board Chair, to consider whatever business is before said committee in order to recommend appropriate action to the Board.

Committees of the Board may meet by teleconference providing all requirements of the Open Meetings Act are met, including providing and announcing a location at which members of the public may attend and hear the entire deliberations of the committee and all committee members.

Matters reported by a committee may be reported with a recommendation for Board action, or solely for the information of the Board.

Tenure on standing committees shall be for a one-year term beginning in April or until the appointment of a new committee; however, nothing herein shall be construed to prevent reappointment of any committee member.

Nothing contained in this Article shall be construed to deny any Board member the right to attend any meeting of any standing or special committee.

For Board committees a quorum shall be defined as equal to at least fifty percent (50%) plus one of the committee membership.

Notices to the public regarding committee meetings shall be posted pursuant to Section 5, Public Act 267 of 1976, and Article VI of these Bylaws.

Section 1. Executive Committee

The Executive Committee shall consist of four members: the Chair, Vice-Chair, Secretary of the Board, and immediate past Chair. If the immediate past Chair is no longer a current member of the Board, the Board shall elect an additional Board member to serve as an at-large member of the Committee. It is the preference of the Board to have all four counties represented on the Committee. This committee shall have authority to act on behalf of the Board during the period between meetings of the Board, subject to any prior limitation imposed by the Board and with the understanding that all matters of major importance be referred to the Board.

At the request of the Board (by consensus or majority vote) or the Chair, this Committee may research and apprise Board members of proposed, pending and current legislation pertaining to mental health services, and shall recommend a Board position.

Section 2. Recipient Rights Committee

This Committee shall advise the Board and Executive Director concerning implementation of policy as it relates to the Recipient Rights system and shall review the operation of the Office of Recipient Rights in accordance with Section 757 of the Mental Health Code. This Committee shall serve as the Appeals Committee under Section 784. Preference is to have at least two Board representatives as members of this Committee.

ARTICLE VIII - EXECUTIVE DIRECTOR OF THE COMMUNITY MENTAL HEALTH AUTHORITY

The Executive Director of the Northeast Michigan Community Mental Health Authority shall be selected by the Board. The Executive Director shall be given the necessary authority and responsibility to operate all mental health services and carry out all policies as may be adopted by the Board, or any of its committees to which it has delegated authority. The Executive Director shall ensure that appropriate orientation programs for new Board members and continuing education programs for all Board members are carried out and shall represent the Board in all areas in which the Board has not formally designated some other person to so act.

ARTICLE IX - MISCELLANEOUS

Section 1. Amendment and Adoption of Bylaws

These Bylaws may be amended or repealed by the affirmative vote of a majority of the members of the Board present at any regular or special meeting of the Board if notices of the proposed amendment or repeal are contained in the written notice of the meeting, such notice to be given prior to such a meeting by ordinary mail. Bylaws may also be amended without notice by a three-fourths vote of the Board members present.

Section 2. Rules of Order

Robert's Rules of Order shall be the parliamentary guideline for all matters of procedure not specifically covered by the Bylaws or by specific rules or procedures adopted by this Board.

Section 3. Conflict of Interest

No Board member shall in any way be a contractor for purposes of remuneration of this Authority or its contracting agencies unless a competitive bid process is utilized, the Board member discloses the association and affiliation, and a two-thirds (2/3) majority vote of the Board supports such a contract.

Section 4. Employment

Employment of a Board member or any member of his or her immediate family is prohibited.

Section 5. Suspension of Rules

The rules governing all matters of procedure of the Board provided in the Bylaws and in subsequent governing resolutions may be temporarily suspended at any time by the unanimous consent of the members present to facilitate the accomplishment of any legal objectives of the Board.

Section 6. Depository

As a Mental Health Authority, the Board may act as its own depository of funds, or, at its discretion, designate a county willing to act as depository.

Section 7. Per Diem and Reimbursement

Board members shall be paid in accord with the payment schedule for Northeast Michigan Community Mental Health Authority.

Section 8. Assurances

With respect to both employment practices and services rendered, the Authority will not discriminate against persons because of religion, race, color, national origin, age, sex, height, weight, marital status, political affiliation, sexual orientation, or physical or mental handicap.

No service or program provided by the Authority will be withheld from any person on the basis of residence in a county other than Alcona, Alpena, Montmorency, and Presque Isle counties. If a person cannot meet financial obligations incurred by such program or service, the county of residence will be billed.



QI Council Minutes

For Meeting on 08/15/22 10:15 AM-12:00 PM Board Room & Via Teams

Meeting called by:	Lynne Fredlund (Angela Stawowy took over when she arrived at 10:27 a.m.)
Type of meeting: Facilitator: Note taker: Timekeeper:	Bi-Monthly Lynne Fredlund/Angela Stawowy Pennie Hoeft, Clerical Services Support Staff
Attendees:	Lynne Fredlund, Rich Greer, Amber Gapske, Angela Stawowy, Joe Garant, Genny Domke, Nena Sork
Absent:	Jennifer Whyte
QI Coordinator:	Lynne Fredlund
Assistant:	Pennie Hoeft Agenda Topics

The meeting was called to order by in Lynne Fredlund at 10:17am.

Review of Minutes

Discussion: Review and by consensus, the minutes of the June meeting were approved. Action items: Person responsible: Pennie Hoeft Deadline: ASAP

Committees requesting Additional Time

There were no requests from the Committees to have additional time.

Management Team

Discussion: The 07/11/22 meeting minutes are included in the 08/15/22 QI Packet. The minutes show that the Management Team reviewed the Budget, including the Revenue Budget and the Expenditure Budget a retention/reinvestment payment and deferred compensation. They also reviewed the benefit items of Mental Health Parity and covering dental and vision for part-time employees for the fiscal year 2023. Erin Fletcher gave an update from the Clinical Leadership Team including new hires, conference trainings, reviewing of inpatient hospitalizations, and Clinical Case Reviews. MIS received new tables for the computer lab, new laptops for the mobile computer lab. Other MIS works in progress are research of getting power or Ethernet switches, a trial of the phishing email test and researching new laptops and desktop computers with Windows 11. Several policies were reviewed including the following: 2670-Safety and Emergency Preparedness, 3210-Job Descriptions, 3255 Supplemental Employment, 3330 Staff Safety and Security, 3575-Leave Without Pay,

3838-Sentinel Events/Critical Incidents, 5680-Telemedicine/Telehealth Appointments, and 5125-Companion/Medication Procedures. Community Outreach items were discussed as well as Strategic Planning, the most recent Staff Survey and establishing a fully operational office in Alcona County. Refer to the minutes for more detailed information. Action Items: Report Monthly Person Responsible: Nena Sork

Deadline:

Advisory Council

Discussion: The 06/09/22 meeting minutes are included in the 08/15/22 QI Packet. These minutes include Budget review, a semi-annual report on the Ends established by the Board, an update on the Spring Conference, and an Operations report including discussion on the renovations and changes made to Clubhouse. The Chair's report consisted of the Strategic Plan Review, Director's Contract and Policy Workshop Action. The Director's Update included the approval of federal student loan forgiveness, community training and workshops, and staff retention payments. For more detailed information, please refer to the enclosed meeting minutes. **Action Items:** Report Bi-Monthly

Person Responsible: Nena Sork

Deadline:

CARF Committee

Discussion: A verbal report was given by Lynne Fredlund. They met to review the follow-up items for the upcoming CARF survey which will be August 24-26. They have reviewed all of the Plans, including Accessibility, Risk, and Cultural Competency. They received the new standards which Lynne is processing to get scanned and uploaded. They will also be meeting on August 17 to tie up any loose ends before the CARF survey.

Action Items:

Person Responsible: Lynne Fredlund

Deadline:

Clinical Leadership Team

Discussion: The 07/13/22 meeting minutes were included in the 08-15-22 QI Packet. Lisa Orozco reported that the Agency processes are now on the Tree which makes them accessible and more easily located. They are continuing to review the hospitalization reports to make sure people are getting discharged in a timely manner. The use of a medication disposal box was approved. Installation will be completed when Management decides the best possible location for it. The DEA recommends that it be installed inside the building. There will be a take back event in October. They are in the process of getting all-staff meetings on the schedule for next year. **Action Items:** Report Monthly **Person Responsible:** Lisa Orozco

Deadline:

Customer Satisfaction Committee

Discussion: Angela Stawowy reports that the Customer Satisfaction Committee is on track with gathering information and getting the data compiled from the most recent Intellectual Developmental/Disability (IDD) survey. They have reviewed the comments and they are mostly positive. The rate of reporting seems to be similar to the reporting rate of prior surveys.

Deadline:

Resource Standards and Development Committee

Discussion: The 07/07/22 and 08/04/22 meeting minutes were included in the 08-15-22 QI Packet. Genny Domke reports that the Employee of the Month is now featured on our social media accounts. Several staff morale activities are ongoing including: Friday trivia and theme days, picture boards, random acts of kindness, and Joke of the Month. Other recent special activities include the collection of purses for the Michigan State Police, bingo cards for mental health month, boys and girls club donation collection, and ice cream for ice cream day to all offices and homes. The Committee is assisting in putting together three baskets for the upcoming annual staff training scheduled for August 17, 2022.

Action Items: Monthly

Person Responsible: Genny Domke

Deadline:

Risk Management Committee

Discussion: Lynne Fredlund reported that Risk Management did not have a meeting due to not having a quorum and there was nothing to report at this time. Action Items: Report Bi-Monthly

Person Responsible: Lynne Fredlund

Deadline:

Safety Committee

Discussion: The 06/28/22 and 07/26/22 meeting minutes were included in the 08-15-22 QI Packet. Rich Greer reports that the Safety Committee has been preparing and uploading the required items for the CARF survey. They have updated policies to reflect the changes made to the Safety & Emergency Preparedness manual and corresponding flip charts. The flip charts have been updated, put together and distributed to the homes. The Emergency Events and Drill Log was updated as well and is in use and available on the Tree for all homes and offices to report drills and other events.

Action Items:

Person Responsible: Rich Greer **Deadline:**

> Angela Stawowy arrived at 10:27am.

Utilization Management

Discussion: The 05/05/22 and 06/30/22 meeting minutes were included in the 08/15/22 QI packet and can be reviewed for more detailed information. The minutes show that the committee reviewed and updated the UM Plan including the Level of Care, a report on Children's Hospitalizations, Clinical Case Reviews, goals for the upcoming fiscal year, CLS Planning Guide and LOCUS training. Standard Reports were reviewed including Covid-19, Clinical Case Review (CCR), LOCUS, Hospitalizations, Hospitalization Costs and Respite. 08-15-2022 Page 3 of 5

Deadline:

Quality Oversight Committee (QOC) - NMRE

Discussion: A verbal report was given by Lynne Fredlund. Minutes from this meeting will be included in the next QI meeting packet. Lynne did comment that there was discussion that the Plan of Correction for the PIHP audit was accepted.

Action Items: Report Bi-Monthly Person Responsible: Lynne Fredlund

Deadline:

QI Member Concerns

Discussion: Amber Gapski reports a new part-time peer was hired and training has begun. That is going well and she is certified, so she is primarily just being trained in our processes. They are also going to be revamping the Healing Voices including adding some activities for the group. This will be discussed in further detail at their next meeting. Nena Sork commented that there is still difficulty getting referrals for the "WAM" group and trying to encourage those in Behavioral Health Home and possibly some youth to participate as well. **Action Items:** N/A

Person(s) Responsible: All members

Deadline:

Project Team/Workgroup update/Old business:

- Joe will be leaving and Paul Krueger will be taking Joe's spot on the QI committee.
- PIHP audit was accepted. Human Resources, HR, is working on a credentialing piece, as well as completing the training grid to show the training that is required for each position both initially and annually, and when that training is due. Jen and Lynne are on a team working on a home and community based services policy. The behavioral support services plan policy includes information on the technical requirements, such as. "if an individual has three 911 calls within thirty days, their plan would need to be reviewed." Jail diversion meetings were required. Only one of these occurred in FY 21. The new jail diversion coordinator and Frank VanGotham are meeting to develop the processes for jail diversion and will be doing a meet and greet with all local and state law enforcement services as well as the court systems. They will start doing preparations to provide training as well.
- Health services advisory group met. There was no follow-up on that at the time of this meeting.
- Ace team is providing a benefits planning training on November 2nd. Zach Miller is now a true Benefits – To – Work person.
- CARF review will be August 24-26. Lynne reported that all required information is being uploaded into the necessary system for the review. There was a pre-survey meeting on August

11th with the lead reviewer and a schedule was determined for the review. The names of person's served and staff that will be involved is still being completed and will be submitted as well. Some programs did not have a volunteer to be interviewed, so there will be some that will just be assigned as necessary. A Performance services review and a Business function services review are both required by CARF. That was completed by Lynne and will be included in the Quality Improvement Plan as Attachment A. See below for more specific information.

<u>New Business:</u>

 Quality Improvement Plan – Attachment A, Performance Measurement Business Functions and Program Performance. Improve results for individuals served, performance measures exist for all 8 accredited programs included. See document attached. The committee reviewed the plan provided by Lynne Fredlund, discussed possible edits and additions and updated the policy as appropriate. Lynne will send the plan to committee members for their review. She would like to include coordination with contractors and we can review for the next meeting.

Next Meeting Date: Next meeting is TBD in September but will be in the Board Training Room.

The meeting was adjourned by consensus at 11:33am

Angela Mawory 10/14/2014

JANUARY AGENDA ITEMS

Policy Review

Emergency Executive Succession 01-006

Policy Review & Self-Evaluation

Executive Director Role 03-001

Monitoring Reports

Emergency Executive Succession 01-006 Budgeting 01-004

Activity

Ownership Linkage

Educational Session