# NORTHEAST MICHIGAN COMMUNITY MENTAL HEALTH AUTHORITY

# NeMCMHA Board Meeting Thursday, April 13 at 3:00 p.m.



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



#### NORTHEAST MICHIGAN COMMUNITY MENTAL HEALTH AUTHORITY BOARD BOARD MEETING April 13, 2023 at 3:00 p.m. A G E N D A

I.	Call to Order	
II.	Seating of Board Members	
	Bonnie Cornelius – Alcona County	
	Lynnette Grzeskowiak – Alpena County	
	Gary Nowak – Presque Isle County	
III.	Roll Call & Determination of a Quorum	MISSION STATEMENT
IV.	Pledge of Allegiance	To provide comprehensive services and supports
V.	Appointment of Evaluator	that enable people to live and work independently.
VI.	Acknowledgement of Conflict of Interest	
VII.	Information and/or Comments from the Public	
VIII.	Report of Nomination/Board Composition Comm	ittee(Verbal)
IX.	Election of Officers	(Page 1)
Х.	Approval of Minutes	
XI.	Audit Report – Financial & Compliance (Straley, I	Lamp & Kraenzlein PC)(Booklet)
XII.	April Monitoring Reports	
	1. Budgeting 01-004	(Page 5)
	2. Financial Condition 01-005	
	3. Asset Protection 01-007	(Included in Audit Report Discussion)
	4. Communication and Counsel 01-009	(Handout)
XIII.	<b>Board Policies Review and Self-Evaluation</b>	
	1. Financial Condition 01-005 [Review]	
	2. Communication and Counsel 01-009 [Review]	
	3. Governing Style 02-002 [Review & Sel	
	4. Cost of Governance 02-013 [Review Revis	ions & Self-Evaluate](Page 11)
XIV.	Linkage Reports	
	1. NMRE Board Meeting – March 22	
	2. Advisory Council Meeting – April 10	
	3. CMHA Summer Conference "Cultivating Community"	June 6 & 7(Page 12)
XV.	Operations Report	(Page 13)
XVI.	Chair's Report	
	1. Section 222 & Conflict of Interest Forms	
	2. Establishment of Regular Meeting Date	
	3. Appointment of Standing Committees	(Page 17)
XVII.	Executive Director's Report	(Verbal)
	I. Information and/or Comments from the Public Information and/or Comments for the Good of th	ne Organization
XX.	Next Meeting – Thursday, May 11 at 3:00 p.m.	
	1. Set May Agenda	(Page 18)
XXI.	Meeting Evaluation	(Verbal)

XXII. Adjournment

- 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 By-Laws, Policies and/or Robert's Rules.

#### Northeast Michigan Community Mental Health Authority (NeMCMHA) Board Board Meeting March 9, 2023

#### I. Call to Order

Chair Eric Lawson called the meeting to order in the Board Room at 3:01 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, Pat Przeslawski, Terry Small

Staff & Guests: Lisa Anderson, Carolyn Bruning, Connie Cadarette, Mary Crittenden, Erin Fletcher, Kingsli Kraft, Larry Patterson, Abbey Podbielski, Nena Sork, Frank Van Goethem, Jen Walburn

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

Attendees recited the Pledge of Allegiance as a group.

#### IV. <u>Appointment of Evaluator</u>

Judy Jones 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 to the Board.

#### VII. Approval of Minutes

*Moved by Gary Nowak, supported by Terry Small, to approve the minutes of the February 9, 2023 Board meeting as presented.* Motion carried.

#### VIII. Educational Session – Gentle Teaching/Sunrise Side of Sarah

Board members viewed the Sunrise Side of Sarah video included in Gentle Teaching training. It tells the story of deinstitutionalization in Michigan, the use of Gentle Teaching, and their impact on Sarah, an individual served by Northeast. Les Buza was on the Mt. Pleasant Center Board while his daughter lived there. He was told Alpena had the best group homes and that his daughter should be moved up here when the Mt. Pleasant Center closed. Nena Sork stated there were originally 26 homes opened and the Agency is now down to nine. Nena stated millions of dollars are put back in the community by the group homes. Terry Larson stated the staff are wonderful with clients and do a phenomenal job.

#### IX. Consent Agenda

#### 1. ABA Pathways

Board members reviewed a change to the ABA Pathways contract, which adds a new code for Exposure Adaptive Behavior Treatment.

*Moved by Terry Larson, supported by Gary Nowak, to approve the March Consent Agenda.* Roll call: Ayes: Robert Adrian, Les Buza, Bonnie Cornelius, Lynnette Grzeskowiak, Charlotte Helman, Judy Jones, Terry Larson, Eric Lawson, Gary Nowak, Lloyd Peltier, Pat Przeslawski, Terry Small; Nays: None; Absent: None. Motion carried.

#### X. March Monitoring Reports

#### 1. Budgeting 01-004

Connie Cadarette reviewed the Statement of Revenue and Expense and Change in Net Position for the month ending January 31, 2023. Medicaid is underspent \$121,170 and Healthy Michigan is underspent \$304,211, for a total underspent amount of \$425,381. General funds lapsing to MDHHS are currently at \$280,000. Connie stated there will be a financial impact when the Public Health Emergency ends, as Medicaid spenddowns will begin again right away. The current change in net position is negative \$92,372. The negative amount is mostly due to not yet receiving local matching funds or incentive payments. It is normal for the number to be negative at this time of year.

Larry Patterson reviewed expenses with negative variances. Some variances are due to timing issues, which include the line items for Postage, Telephone & Connectivity, and Utilities. A few of the line items that had originally been cut to balance the budget will need to see adjustments. These include Salaries, Pension, and Program Supplies. A few line items will continue to be monitored, including Contracted Inpatient, Professional Fees, and Miscellaneous Expense (which is the Agency's 10% share of inpatient costs). With 33.33% of the year elapsed, the Agency has used 31.6% of expenses.

#### 2. Treatment of Individuals Served 01-002

Board members received the 2022 I/DD Customer Satisfaction Committee survey results at the meeting. Pat Przeslawski stated there has been a lot of consistency over the years. Nena reported the QI Committee is routinely looking at improvements and suggestions. The 50% response rate is not unusual, as many of the surveys go out to guardians, and they don't always receive them back.

#### *Moved by Pat Przeslawski, supported by Lynnette Grzeskowiak, to approve the March Monitoring Reports.* Motion carried.

#### XI. Board Policies Review

#### 1. Budgeting 01-004

Connie and Larry both reviewed the policy and did not have any suggested revisions.

#### 2. Board Members Ethical Code of Conduct 02-008

Revisions were suggested to make job titles consistent, and chief executive and CEO were both changed to Executive Director. Board members were asked to sign and return the updated version of the Board Members Ethical Code of Conduct policy.

*Moved by Gary Nowak, supported by Terry Small, to approve the revisions to the Board Members Ethical Code of Conduct Policy.* Motion carried.

#### XII. Linkage Reports

#### 1. NMRE Board Meeting – February 22, 2023

Gary reported there was a good presentation on the liquor tax that gave him a better understanding. There was also discussion of the new crisis residential facility in Gaylord and the possible rural exemption.

#### XIII. Operations Report

Mary Crittenden reported on individuals served for the month of February 2023. There were 51 routine access screens, older adult services served 123 individuals, and ACT served 36 individuals. There were two state hospital admissions for individuals who decompensated and were readmitted. The group homes served 55 individuals. Overall, 1,089 individuals were provided services during the month of February.

#### XIV. Executive Director's Report

Nena reported work is continuing on the AFC assessment tool, and the next stage will be rolling it out to some of the AFC providers. The revised assessment will be tested on those who had the most significant reductions to see how it captures their behaviors and impacts their scores. Nena spent time with Diane Pelts from AuSable Valley CMHA who reports they don't contract with private AFCs. They utilize larger, corporate homes, and have also contracted out all of their previously owned group homes, including staffing, to Bay Health Home Services. The corporate homes are a larger expense, but there are less emergent issues. Nena will compare the Agency's compensation grid to other CMHSPs and she expects the process to be completed by the end of April.

Mary Crittenden, Rebekah Duhaime, and Nena updated the Board on the Mental Health Movement 5K Run-Walk the Agency is hosting on May 20. Online registration is available and all proceeds from the 5K will be donated to Hope Shores Alliance.

The first Behavioral Health Subcommittee meeting was held last week in Lansing. Two CMHSP directors and Alan Boulter spoke to the committee.

#### XV. Chair's Report

Eric reappointed Gary Nowak to the NMRE Board.

#### 1. Update on PAC Campaign

The current total of Board member donations to the PAC is \$140 from three donations.

#### 2. Nomination/Board Member Composition Committee

The committee met in November and suggested all three Board members with expiring terms, Bonnie Cornelius, Lynnette Grzeskowiak, and Gary Nowak, have their terms renewed. The Nomination/Board Member Composition Committee, which will consist of Terry Larson, Lloyd Peltier, Pat Przeslawski, and Terry Small, will meet at 2:30 p.m. prior to the April 13 meeting to discuss officers. Terry Small had been appointed as a Temporary Vice Chair after Roger Frye's passing.

#### 3. Board Member Recognition

Gary Nowak – 24 years Pat Przeslawski – 23 years Terry Larson – 22 years Les Buza – 13 years Judy Jones – 10 years Eric Lawson – 8 years Bonnie Cornelius – 8 years Robert Adrian – 3 years Lynnette Grzeskowiak – 2 years Terry Small – 2 years

Judy Jones was recognized with two certificates. The first for reaching ten years of service on the NeMCMHA Board and the second from the CMHA for completing Boardworks in its entirety.

Eric and Nena reported the CMHA is asking every CMHSP to provide a donation representing their region for the next conference. Nena asked that Board members bring ideas to the next meeting.

#### XVI. Information and/or Comments from the Public

Scholarship information for the 5K can be sought from Nichole Keyes.

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

Board members discussed a previous Board member who is now in an AFC home. A card will be sent to her on the Board's behalf.

#### XVIII. <u>Next Meeting</u>

The next regularly scheduled meeting of the NeMCMHA Board will on Thursday, April 13 at 3:00 p.m.

#### 1. Set April Agenda

The proposed April agenda items were reviewed.

#### 2. <u>Meeting Evaluation</u>

Judy stated meeting started and ended on time. She appreciated the video on Sarah and stated it was enlightening. The majority of the Board participated, and learning about the history of Northeast is important for all to understand.

#### XIX. <u>Adjournment</u>

*Moved by Les Buza, supported by Lynnette Grzeskowiak, to adjourn the meeting.* Motion carried. This meeting adjourned at 4:25 p.m.

Bonnie Cornelius, Secretary

Rebekah Duhaime Recorder

Eric Lawson, Chair

#### Northeast Michigan Community Mental Health Authority Statement of Revenue and Expense and Change in Net Position (by line item) For the Fifth Month Ending February 28, 2023

41.7% of year elapsed

		Actual February	Budget February	Variance February	Budget	% of Budget
		Year to Date	Year to Date	Year to Date	FY23	Earned or Used
	Revenue					
1	State Grants	67,975.71	133,564.20	\$ (65,588)	320,554.08	21.2%
2	Grants from Local Units	107,004.17	111,099.05	(4,095)	266,637.66	40.1%
3	NMRE Incentive Revenue	0.00	114,583.35	(114,583)	275,000.04	0.0%
4	Interest Income	3,860.58	208.35	3,652	500.04	772.1%
5	Medicaid Revenue	13,354,470.70	13,051,657.55	302,813	31,323,977.94	42.6%
6	General Fund Revenue	151,974.66	501,161.25	(349,187)	1,202,787.00	12.6%
7	Healthy Michigan Revenue	655,103.52	1,105,355.85	(450,252)	2,652,854.04	24.7%
8	Contract Revenue Blue Horizons	189,415.47	185,158.35	4,257	444,380.04	42.6%
9	3rd Party Revenue	227,694.69	148,634.20	79,060	356,722.08	63.8%
10	5	32,289.24	38,255.85	(5,967)	91,814.04	35.2%
11		54,639.57	53,583.40	1,056	128,600.16	42.5%
12	•	223,178.60	208,913.30	14,265	501,391.92	44.5%
13		141,564.52	0.00	141,565	0.00	0.0%
14	5	18,305.60	13,105.40	5,200	31,452.96	58.2%
15		15,227,477	15,665,280	(437,803)	37,596,672	40.5%
10		10,221,411	10,000,200	(401,000)	01,000,012	40.070
	Expense					
16		6,281,184.83	6,393,101.10	111,916	15,343,442.54	40.9%
17	5	269,116.13	298,502.65	29,387	716,406.36	37.6%
18		1,106,087.00	1,413,808.05	307,721	3,393,139.32	32.6%
19	5	97,061.08	104,125.90	7,065	249,902.16	38.8%
20		536,251.11	539,125.85	2,875	1,293,902.04	41.4%
21		64,404.60	69,605.45	5,201	167,053.08	38.6%
22	Office Supplies & Postage	22,775.93	21,108.15	(1,668)	50,659.56	45.0%
23	Staff Recruiting & Development	65,137.67	102,381.00	37,243	245,714.40	26.5%
24	Community Relations/Education	7,049.46	12,123.75	5,074	29,097.00	24.2%
25	Employee Relations/Wellness	42,910.83	46,666.65	3,756	111,999.96	38.3%
26	Program Supplies	199,105.07	165,526.50	(33,579)	397,263.60	50.1%
27	Contract Inpatient	736,452.77	667,895.00	(68,558)	1,602,948.00	45.9%
28	Contract Transportation	11,290.04	14,897.05	3,607	35,752.92	31.6%
29		1,882,884.26	2,251,198.75	368,314	5,402,877.00	34.8%
30	Contract Employees & Services	2,863,924.32	2,490,932.80	(372,992)	5,978,238.72	47.9%
31	1 3	92,897.49	83,593.75	(9,304)	200,625.00	46.3%
32		6,676.47	12,150.05	5,474	29,160.12	22.9%
33		163,466.41	153,492.10	(9,974)	368,381.04	44.4%
34	-	4,150.58	5,693.35	1,543	13,664.04	30.4%
35		41,088.85	33,712.15	(7,377)	80,909.16	50.8%
36		54,735.20	55,981.70	1,247	134,356.08	40.7%
37		81,806.95	80,479.20	(1,328)	193,150.08	42.4%
38	Maintenance	91,400.65	94,654.20	3,254	227,170.08	40.2%
39		7,124.44	7,219.05	95	17,325.72	41.1%
40		5,556.56	7,417.50	1,861	17,802.00	31.2%
40		67,631.48	63,358.75	(4,273)	152,061.00	44.5%
		19,003.47	57,619.70	38,616	138,287.30	44.5% 13.7%
42					19,938.00	
43		3,158.73	8,307.50	5,149	,	15.8%
44	I I I I I I I I I I I I I I I I I I I	66,576.94	68,890.50	2,314	165,337.16	40.3%
45	· · · · ·	153,565.22	044 744 00	(153,565)	0.00	0.0%
46	Depreciation & Amoritization Expense	254,377.35	341,711.90	87,335	820,108.56	31.0%
47	•	15,298,852	15,665,280	366,428	37,596,672	40.7%
48	Change in Net Position	\$ (71,375)	\$0	\$ (71,375)	<u>\$</u> -	-0.2%
	<b>-</b>					
48						
49		\$ (356,333)				
50	, , , , , , , ,	390,843				
51	Total NMRE (Over) / Under Spent	\$ 34,510				
52	General Funds to Carry Forward to FY23	\$ 27,814				

321,372 349,186

\$

General Funds Lapsing to MDHHS
General Funds (Over) / Under Spent

#### Northeast Michigan Community Mental Health Authority Statement of Net Position and Change in Net Position Proprietary Funds February 28, 2023

	Total Business- Type Activities	Total Business- Type Activities	
• · ·	February, 2023	Sept. 30, 2022	% Change
Assets			
Current Assets:	* • • • • • · -	• • • • • • • • • • •	
Cash and cash equivalents	\$ 3,660,647	\$ 3,594,601	1.8%
Restricted cash and cash equivalents	1,096,297	1,088,772	0.7%
Investments	750,000	750,000	0.0%
Accounts receivable	2,317,894	2,549,394	-9.1%
Inventory	26,496	26,496	0.0%
Prepaid items	481,316	375,788	28.1%
Beneficial Interest	5,050	5,050	0.0%
Total current assets	8,337,701	8,390,100	-0.6%
Non automatic acasta			
Non-current assets:	FC4 000	FF4 000	4.00/
Capital assets not being depreciated	561,909	551,968	1.8%
Capital assets being depreciated, net	2,820,542	2,617,437	7.8%
Beneficial Interest	8,195	8,195	0.0%
Total non-current assets	3,390,646	3,177,600	6.7%
Total assets	11,728,347	11,567,700	1.4%
1.1-1-10.00			
Liabilities			
Current liabilities:	0.007.000	0.007.050	0.00/
Accounts payable	3,207,028	2,927,356	9.6%
Accrued payroll and payroll taxes	740,817	1,049,338	-29.4%
Deferred revenue	22,672	21,558	5.2%
Current portion of long-term debt (Accrued			
Leave, Lease Liability)	330,783	212,859	55.4%
Total current liabilities	4,301,300	4,211,110	2.1%
<b>N</b> I (11) (11)			
Non-current liabilities:			
Long-term debt, net of current portion			
(Accrued Leave, Lease Liability)	1,244,437	1,102,606	12.9%
Total liabilities	5,545,737	5,313,716	4.4%
Net Position			
Invested in capital assets, net of related debt	2,903,528	2,942,461	-1.3%
Restricted	49,003	61,004	
Unrestricted	3,230,079	3,250,520	-0.6%
Total net position	\$ 6,182,610	\$ 6,253,985	-1.1%
Net Position Beginning of Year	6,253,985		
Restatement	-		
Rootatomont	- 6,253,985		
D			
Revenue	15,227,477		
Expense	(15,298,852)		
Change in net position	(71,375)		
Net Position February 28, 2023	\$ 6,182,610		
Net i Usiliun i Ebiuary 20, 2023	φ 0,102,010		

Unrestricted Net Position as a % of projected annual expense Recommended Level

8.6% or 31 days 8% - 25%

<u>...Index.doc</u> <u>EXECUTIVE LIMITATIONS</u> (Manual Section)

FINANCIAL CONDITION (Subject)

Board Approval of Policy Last Revision of Policy Approved August 8, 2002 April 09, 2020

## •1 POLICY:

With respect to the actual, ongoing condition of the organization's financial health, the Executive Director may not cause or allow the development of fiscal jeopardy or a material deviation of actual expenditures from board priorities established in Ends policies.

Accordingly, he or she may not:

- 1. Expend more funds than have been received in the fiscal year to date unless the debt guideline (below) is met.
- 2. Borrow money in an amount greater than can be repaid by certain, otherwise unencumbered revenues within 60 days.
- 3. Use any designated reserves other than for established purposes.
- 4. Conduct inter-fund shifting in amounts greater than can be restored to a condition of equal or greater to the original discrete fund balances by certain, otherwise unencumbered revenues within 30 days.
- 5. Fail to settle payroll and debts in a timely manner.
- 6. Allow tax payments or other government-ordered payments or filings to be overdue or inaccurately filed.
- 7. Acquire, encumber, or dispose of real property.

#### •2 APPLICATION:

The Northeast Michigan Community Mental Health Authority Board

#### •**3 DEFINITIONS:**

#### •4 **REFERENCES:**

•5 FORMS AND EXHIBITS:

..<u>\Index.doc</u> EXECUTIVE LIMITATIONS (Manual Section)

COMMUNICATION AND COUNSEL TO THE BOARD (Subject)

Board Approval of Policy Last Revision of Policy Approved August 8, 2002 April 9, 2020

#### •1 POLICY:

With respect to providing information and counsel to the board, the Executive Director may not permit the board to be uninformed or unsupported in its work. Accordingly, he or she may not:

- 1. Neglect to submit monitoring data required by the board (see policy on Monitoring Executive Performance) in a timely, accurate and understandable fashion, directly addressing provisions of the board policies being monitored.
- 2. Let the board be unaware of relevant trends, anticipated adverse media coverage, material external and internal changes, particularly changes in the assumptions upon which any board policy has previously been established.
- 3. Fail to advise the board if, in the Executive Director's opinion, the board is not in compliance with its own policies on Governance Process and Board-Staff Relationship, particularly in the case of board behavior which is detrimental to the work relationship between the board and the Executive Director.
- 4. Fail to marshal for the board as many staff and external points of view, issues and options as needed for fully informed board choices.
- 5. Present information in unnecessarily complex or lengthy form or in a form that fails to differentiate among information of three types: monitoring, decision preparation and other.
- 6. Fail to provide a mechanism for official board, officer or committee communications.
- 7. Fail to deal with the Board as a whole except when (a) fulfilling individual requests for information or (b) responding to officers or committees duly charged by the board.

- 8. Fail to report in a timely manner an actual or anticipated noncompliance with any policy of the Board.
- 9. Fail to supply for the consent agenda all items delegated to the Executive Director yet required by law or contract to be board-approved, along with the monitoring assurance pertaining thereto.

#### •2 APPLICATION:

The Northeast Michigan Community Mental Health Authority Board

#### •**3 DEFINITIONS:**

#### •4 **REFERENCES:**

#### •5 FORMS AND EXHIBITS:

<u>..\Index.doc</u> <u>GOVERNANCE PROCESS</u> (Manual Section)

**GOVERNING STYLE** (Subject)

Board Approval of Policy Last Revision of Policy Approved by Board: August 8, 2002 April 9, 2020

## •1 POLICY:

The board will govern with an emphasis on outward vision encouraging diversity of viewpoints, strategic leadership more than administrative detail, clear and concise roles of board and Executive Director, collectively and proactively focusing on the future.

The board will:

- 1. Function as a unit, be responsible for governing itself, and initiate its own practices. The board will use the expertise of individual members to enhance the ability of the board as a body.
- 2. Focus its primary efforts on the intended long-term impact outside the operating organization, and will direct the organization through the development of written board policies.
- 3. Enforce upon itself whatever discipline is needed to govern with excellence. Discipline will apply to matters such as attendance, preparation for meetings, policymaking principles, respect of roles, and ensuring the continuity of governance capability. Continual board development will include orientation of new members in the board's governance process and periodic board discussion of process improvement.
- 4. Monitor and discuss the board's process and performance at each meeting. Selfmonitoring will include comparison of board activity and discipline to policies in the Governance Process and Board-Staff Relationship categories.

#### •2 APPLICATION: The Northeast Michigan Community Mental Health Authority Board

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

<u>...Index.doc</u> <u>GOVERNANCE PROCESS</u> (Manual Section)

**COST OF GOVERNANCE** (Subject)

Board Approval of Policy Last Revision of Policy Approved November 7, 2002 April 13, 2023

## •1 POLICY:

Because poor governance costs more than learning to govern well, the board will invest in its governance capacity.

Accordingly:

- 1. Board skills, methods and supports will be sufficient to assure governing with excellence.
  - A. Training and retraining will be used liberally to orient new members and candidates for membership, as well as to maintain and increase existing member's skills and understandings.
  - B. Outside monitoring assistance will be arranged so that the board can exercise confident control over organizational performance. This includes but is not limited to fiscal audits.
  - C. Outreach mechanisms will be used as needed to ensure the board's ability to listen to owner viewpoints and values.
- 2. Costs will be prudently incurred, though not at the expense of endangering the development and maintenance of superior capability.
  - A. Up to \$22,511 in fiscal year '23 for tBoard travel and Board development.
  - B. Up to \$31,436 in fiscal year '23 for audit and other third-party monitoring of organizational performance.
  - C. Up to \$28,963 in fiscal year '23 for community public relations and Board contracted services.

#### •2 APPLICATION:

The Northeast Michigan Community Mental Health Authority Board

#### •**3 DEFINITIONS:**

#### •4 **REFERENCES:**

#### •5 FORMS AND EXHIBITS:



# ANNUAL SUMMER CONFERENCE

## **Cultivating Community**

June 5, 2023 <u>Pre</u>-Conference June 6-7, 2023 Full Conference

Grand Traverse Resort Traverse City, Michigan

Program	Consumers served March 2023 (3/1/23 - 3/31/23)	Consumers served in the Past Year (4/1/22 - 3/31/23)	Running Monthly Average(year) (4/1/22 - 3/31/23)
1 Access Routine	64	672	56
Emergent	0	5	0
Urgent	0	4	0
Crisis	49	533	45
Prescreens	68	797	62
2 Doctors' Services	567	1524	484
3 Case Management			
Older Adult (OAS)	97	250	116
MI Adult	65	164	115
MI ACT	37	73	29
Home Based Children	29	55	24
MI Children's Services	68	151	60
IDD	182	430	172
4 Outpatient Counseling	89(20/69)	210	109
5 Hospital Prescreens	68	797	62
6 Private Hospital Admissions	23	248	20
7 State Hospital Admissions	1	3	0
8 Employment Services			
IDD	57	89	55
MI	20	59	20
Touchstone Clubhouse	87	111	94
9 Peer Support	45	78	45
10 Community Living Support Services			
IDD	93	151	95
MI	68	118	63
11 CMH Operated Residential Services			
IDD Only	55	75	55
12 Other Contracted Resid. Services			
IDD	34	38	36
MI	30	41	33
13 Total Unduplicated Served	1123	2353	1060

County	Unduplicated Consumers Served Since February 2022
Alcona	243
Alpena	1399
Montmorency	282
Presque Isle	353
Other	67
No County Listed	9

#### Northeast Michigan Community Mental Health Authority

#### M E M O R A N D U M

To: NeMCMHA Board Members

From: Nena Sork

Date: April 4, 2023

Subject: Mental Health Code Section 222

Annually the Board *must* certify its compliance with Section 222 of the Mental Health Code. That section of the Code (a copy of which is attached) sets certain requirements and limitations for participation by individuals as Board members. These requirements and limitations may be summarized as follows:

- At least four members must be primary consumers or family members of primary consumers
- At least two of the above four members must be primary consumers
- No more than four county commissioners
- No more than six public officials, including the above mentioned county commissioners (Please use the definitions on the survey form.)

It is important that Board members understand the use of this information. We are required to disclose to MDHHS (or essentially anyone who might ask) the composition of our Board and prove that we are in compliance with these provisions. It is MDHHS's interpretation that those Board members who we "count" as primary or family members be willing to have that information publicly disclosed. Therefore, please have this in mind as you complete this form.

Section 222 also addresses avoidance of conflict of interest. The attached form has been revised to address these items as well. Board members must not be:

- employed by MDHHS or Community Mental Health;
- a party to a contract with Community Mental Health; or
- serve in a policy making position with an agency under contract with Community Mental Health (except under certain circumstances)

Please complete this form return it to Rebekah Duhaime. Thank you.

Attachment: Sec. 222(1)(4)(5)

Northeast Michigan Community Mental Health Authority (NeMCMHA) Mental Health Code Section 222 Survey

Printed Name		ignature	Date	
<u>Boa</u>	rd Composition	n (please use the def	initions immediately belo	w in responding to these questions.)
1.	Are you curren	ntly or have you eve	er been a "primary consum No	er" of mental health services?
2.	Are you a fam services?	ily member of a prin	mary consumer who is rec	eiving, or has received, mental health
3.	Are you a cour	nty commissioner?	🗌 No	
4.	Are you a pub	lic official?	🗌 No	

Please use the following definitions in responding to this inquiry. These are the definitions used in the Mental Health Code.

#### **<u>Primary</u>** Consumer:

"Primary Consumer" means an individual who has received or is receiving services from MDHHS or a community mental health services program, or services from the private sector equivalent to those offered by MDHHS or a community mental health services program.

**Family Member:** "Family Member" means a parent, stepparent, spouse, sibling, child, or grandparent of a primary consumer, or an individual upon whom a primary consumer is dependent for at least 50% of his or her financial support.

**Public Official** "Public Officials" are individuals serving in an elected or appointed public office or who are employed more than 20 hours per week by an agency of federal, state, city, or local government.

#### **Conflict of Interest**

1.	Are you employed by MDHHS or Com	munity Mental Health?
2.	Are you party to a contract with NeMC	MHA?
3.	Do you serve in a policy-making positio	on with an agency under contract with NeMCMHA?
4.	•	king position with an agency with which the Board holds a f so, the procedure required by Sec. 222 (5) must be followed regarding $\Box$ No

#### MENTAL HEALTH CODE (EXCERPT) Act 258 of 1974

## 330.1222 Board; composition; residence of members; exclusions; approval of contract; exception; size of board in excess of § 330.1212; compliance.

Sec. 222. (1) The composition of a community mental health services board shall be representative of providers of mental health services, recipients or primary consumers of mental health services, agencies and occupations having a working involvement with mental health services, and the general public. At least 1/3 of the membership shall be primary consumers or family members, and of that 1/3 at least 1/2 of those members shall be primary consumers. All board members shall be 18 years of age or older.

(2) Not more than 4 members of a board may be county commissioners, except that if a board represents 5 or more counties, the number of county commissioners who may serve on the board may equal the number of counties represented on the board, and the total of 12 board memberships shall be increased by the number of county commissioners serving on the board that exceeds 4. In addition to an increase in board memberships related to the number of county commissioners serving on a board that represents 5 or more counties, board memberships may also be expanded to more than the total of 12 to ensure that each county is entitled to at least 2 board memberships, which may include county commissioners from that county who are members of the board if the board represents 5 or more counties. Not more than 1/2 of the total board members may be state, county, or local public officials. For purposes of this section, public officials are defined as individuals serving in an elected or appointed public office or employed more than 20 hours per week by an agency of federal, state, city, or local government.

(3) A board member shall have his or her primary place of residence in the county he or she represents.

(4) An individual shall not be appointed to and shall not serve on a board if he or she is 1 or more of the following:

(a) Employed by the department or the community mental health services program.

(b) A party to a contract with the community mental health services program or administering or benefiting financially from a contract with the community mental health services program, except for a party to a contract between a community mental health services program and a regional entity or a separate legal or an administrative entity created by 2 or more community mental health services programs under the urban cooperation act of 1967, 1967 (Ex Sess) PA 7, MCL 124.501 to 124.512, or under 1967 (Ex Sess) PA 8, MCL 124.531 to 124.536.

(c) Serving in a policy-making position with an agency under contract with the community mental health services program, except for an individual serving in a policy-making position with a joint board or commission established under 1967 (Ex Sess) PA 8, MCL 124.531 to 124.536, or a regional entity to provide community mental health services.

(5) If a board member is an employee or independent contractor in other than a policy-making position with an agency with which the board is considering entering into a contract, the contract shall not be approved unless all of the following requirements are met:

(a) The board member shall promptly disclose his or her interest in the contract to the board.

(b) The contract shall be approved by a vote of not less than 2/3 of the membership of the board in an open meeting without the vote of the board member in question.

(c) The official minutes of the meeting at which the contract is approved contains the details of the contract including, but not limited to, names of all parties and the terms of the contract and the nature of the board member's interest in the contract.

(6) Subsection (5) does not apply to a board member who is an employee or independent contractor in other than a policy-making position with a joint board or commission established under 1967 (Ex Sess) PA 8, MCL 124.531 to 124.536, a separate legal or administrative entity established under the urban cooperation act of 1967, 1967 (Ex Sess) PA 7, MCL 124.501 to 124.512, a combination of municipal corporations joined under 1951 PA 35, MCL 124.1 to 124.13, or a regional entity to provide community mental health services.

(7) In order to meet the requirement under subsection (1) related to the appointment of primary consumers and family members without terminating the appointment of a board member serving on March 28, 1996, the size of a board may exceed the size prescribed in section 212. A board that is different in size than that prescribed in section 212 shall be brought into compliance within 3 years after the appointment of the additional board members.

**History:** 1974, Act 258, Eff. Aug. 6, 1975;--Am. 1995, Act 290, Eff. Mar. 28, 1996;--Am. 2002, Act 596, Imd. Eff. Dec. 3, 2002;-Am. 2003, Act 278, Imd. Eff. Jan. 8, 2004

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#### Northeast Michigan Community Mental Health Authority Board COMMITTEE ROSTER April 2023

#### April 2023 (New)

#### EXECUTIVE COMMITTEE

\_\_\_\_\_, Chair \_\_\_\_\_\_, Vice Chair \_\_\_\_\_\_, Secretary \_\_\_\_\_\_, Past Chair

#### **RECIPIENT RIGHTS COMMITTEE**

 (Board Rep.)
 (Board Rep.)

Lorell Whitscell Tom Fredlund Renee Smart-Sheppler Barb Murphy Ruth Hewett, Recipient Rights Officer

#### **NOMINATIONS COMMITTEE**

#### **CONSUMER ADVISORY COUNCIL**

\_\_\_\_\_, (Board Rep.)

Eileen Tank Rebecca Stockford Anne Ryan Janet Freeman Alan Fischer

## (Current)

## **EXECUTIVE COMMITTEE**

Eric Lawson, Chair Terry Small, (Temporary) Vice Chair Bonnie Cornelius, Secretary Gary Nowak, Past Chair

#### **RECIPIENT RIGHTS COMMITTEE**

Judy Jones (Board Rep.) Patricia Przeslawski (Board Rep.) Lorell Whitscell Tom Fredlund Renee Smart-Sheppler Barb Murphy Ruth Hewett, Recipient Rights Officer

#### NOMINATIONS COMMITTEE

Terry Small Lloyd Peltier Pat Przeslawski Terry Larson

#### **CONSUMER ADVISORY COUNCIL**

Les Buza Eileen Tank Rebecca Stockford Anne Ryan Janet Freeman Alan Fischer

#### **MAY AGENDA ITEMS**

# **Policy Review & Self-Evaluation** Board Job Description 02-003

Board Core Values 02-014

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<u>Educational Session</u> Part I of Strategic Planning - Environmental Scan