

Northeast Michigan Community Mental Health Authority Board August 2022 Meetings



- **Advisory Council**

Monday, August 8

5:00 p.m.

- **Board Meeting**

Thursday, August 11

3:00 p.m.



NORTHEAST MICHIGAN COMMUNITY MENTAL HEALTH AUTHORITY BOARD
BOARD MEETING
August 11, 2022 at 3:00 p.m.
A G E N D A

- I. Call to Order**
- II. Roll Call & Determination of a Quorum**
- III. Pledge of Allegiance**
- IV. Appointment of Evaluator**
- V. Acknowledgement of Conflict of Interest**
- VI. Information and/or Comments from the Public**
- VII. Approval of Minutes (Pages 1 – 6)**
- VIII. Educational Session – Recipient Rights.....(See Packet)**
- IX. Consent Agenda (Available at Meeting)**
 - 1. Rite Aid Hdqtrs. Corp.**
- X. August Monitoring Reports**
 - 1. Treatment of Individuals Served 01-002..... (Pages 7 – 16)**
 - 2. Staff Treatment 01-003 (Page 17)**
 - 3. Budgeting 01-004 (Pages 18 – 19)**
 - 4. Financial Condition 01-005..... (Available at Meeting)**
- XI. Board Policies Review and Self-Evaluation**
 - 1. Chairperson’s Role 02-004.....[Review & Self Evaluate] (Pages 20 – 21)**
 - 2. Board Member Per Diem 02-009...[Review & Self Evaluate] (Pages 22 – 23)**
 - 3. Board Self-Evaluation 02-012.....[Review & Self Evaluate] (Page 24)**
- XII. Linkage Reports**
 - 1. Northern Michigan Regional Entity Update**
 - a. July 27, 2022 Meeting..... (Available at Meeting)**
 - 2. Advisory Council (Verbal Update)**
- XIII. Operations Report..... (Page 25)**
- XIV. Chair’s Report**
 - 1. Begin Board Self-Evaluation (Pages 26 – 30)**
 - 2. Directors Evaluation (Page 31)**
- XV. Director’s Report**
 - 1. Director’s Report.....(Verbal)**
 - 2. Endowment Fund Grant Awards (Page 32)**
- XVI. Information and/or Comments from the Public**
- XVII. Information and/or Comments for the Good of the Board**
- XVIII. Next Meeting – Thursday, September 8 at 3:00 p.m.**
 - 1. Set September Agenda (Page 33)**
 - 2. Meeting Evaluation (All)**
- XIX. Adjournment**

<p>MISSION STATEMENT</p> <p>To provide comprehensive services and supports that enable people to live and work independently.</p>

**Northeast Michigan Community Mental Health Authority (NeMCMHA) Board
Strategic Planning [Part III]/Board Meeting
July 14, 2022**

I. Call to Order

Chair Eric Lawson called the meeting to order in the Board Room at 3:02 p.m.

II. Roll Call and Determination of a Quorum

Present: Geyer Balog, Les Buza, Bonnie Cornelius, Judy Jones, Terry Larson, Eric Lawson, Gary Nowak, Pat Przeslawski, Terry Small

Absent: Bob Adrian, Roger Frye (Excused), Lynnette Grzeskowiak (Excused)

Staff & Guests: Lisa Anderson, Carolyn Bruning, Connie Cadarette, Mary Crittenden, Erin Fletcher, Diane Hayka, Larry Patterson, Nena Sork, Jen Whyte

III. Pledge of Allegiance

Attendees recited the Pledge of Allegiance as a group.

IV. Acknowledgement of Conflict of Interest

No conflicts were identified.

Gary Nowak stated Roger Frye is currently admitted to MyMichigan Medical Center Midland. Gary led a minute of silent prayer for Roger.

V. Appointment of Evaluator

Pat Przeslawski was appointed as evaluator for this meeting.

VI. Information and/or Comments from the Public

There were no comments presented.

VII. Approval of Minutes

Moved by Gary Nowak, supported by Terry Small, to approve the minutes of the June 9, 2022 meeting as presented. Motion carried.

VIII. Consent Agenda

1. Partners in Prevention

2. Autism Contract Updates

a. Acorn Health of Michigan

b. ABA Pathways

Moved by Terry Larson, supported by Les Buza, to approve the Consent Agenda as presented. Roll call: Ayes: Geyer Balog, Les Buza, Bonnie Cornelius, Judy Jones, Terry Larson, Eric Lawson, Gary Nowak, Pat Przeslawski, Terry Small; Nays: None; Absent: Bob Adrian, Roger Frye, Lynnette Grzeskowiak. Motion carried.

IX. Strategic Planning – Educational Session

Board members reviewed the NeMCMHA Strategic Plan Proposal. The mission statement, vision, and core values will remain unchanged. Board members first looked at forces in the environment impacting behavioral health. Nena Sork stated opposition to the Shirkey and Whiteford bills is well organized and there is a lot of support from judges, sheriffs, probate, etc., as well as a massive influx of calls to the governor's office opposing the bills. Eric Lawson stated the Health Resources & Services Administration (HRSA) approval for loan forgiveness should help with staff recruitment. Nena said the Agency is below

70 open positions for the first time in a while, as there are currently 68 open positions. In the month of June and the first two weeks of July there have been 22 new hires.

Board members next reviewed their current goals. While looking at the goal of reducing the risk of metabolic syndrome in adults and children, Nena stated coordination of care with primary care providers has increased and there is open communication with those providers if the individual served allows it, with the majority of individuals being agreeable to this. Staff can help individuals get to their primary care provider appointments and even attend with them to aid in understanding the information being discussed. Nena stated this increased coordination of care has helped to catch cancer and thyroid diagnoses and those individuals were able to get early interventions. Board members agreed to keep this an active goal.

Nena discussed the internal goals the Agency has created after holding their stakeholder meeting. The state sends out questions which are passed along to the schools, law enforcement, and the justice system, among others, and the public are also welcome to attend the meeting and answer the questions. After the meeting, the Agency develops their goals based on the feedback received. The current targeted goals address community education, expanding Behavioral Health Home (BHH), increasing transportation assistance, strengthening relationships with law enforcement, and expanding peer support services. Nena stated it would be beneficial to include these goals with the Board Ends so they could be worked on together.

The next Board goal reviewed addresses promoting a trauma-informed community. Nena stated there is a lot of work to be done, as many need help with trauma, and adults who have past trauma need support. The Agency is very involved with community partners who work with trauma. Nena stated the Agency's current goal of community education would complement the Board's trauma goal.

Eric stated it's important for people to know NeMCMHA can screen children. Terry Larson said he would like to see the Agency do all they can to work with the schools to help identify and deal with risks. Nena said the recently retired AMA ESD superintendent had been working with her on screening children who may be at risk for doing something violent or being a victim of violence. NeMCMHA and the AMA ESD had an agreement in place that NeMCMHA would see any child who scored high on the risk screen. Nena stated it is the Agency's job to assume the risk for these individuals. The Board was in consensus to keep the trauma goal.

The Board next reviewed their goal of supporting and expanding services to children and young adults with autism spectrum disorder. Nena stated the Agency cannot expand more at this time, as they currently contract with every available autism program. The Board was in agreement to revise this goal to remove "expand."

The goal of coordinating community education and partnership in suicide prevention will be kept. Nena stated Alcona County had the second highest suicide rate in the state between 2005 and 2020, with 28.6 suicides per 100,000 persons. The highest in the state was Iosco County. Nena thinks a focus has to be put on suicide prevention, as those in rural communities can't get into psychiatrists and therapists. Nena stated very few of the recorded suicides were community mental health clients, with many being males aged 40 and over, as well as many veterans. While the demographics or the number of professionals can't be changed, the stigma around mental health can be reduced, and the Agency's crisis services can be increasingly advertised for the community.

The Board was in agreement to keep their goal of increasing substance use disorder services and training, as well as keeping their goal of collaborating with the VA. Nena has found veterans who were honorably discharged receive great services from the VA, but those veterans who were medically or dishonorably discharged and may fall through the cracks can be seen by the Agency.

The goal of further utilizing the Health Information Exchange (HIE) will be revised to include the new name of Great Lakes Health Connect, as well as adding information about the internal PCE portal used

by the Agency. NeMCMHA is notified through HIE if an individual is admitted, transferred, or discharged for physical health reasons.

The goal of keeping current in IT will be kept. Nena stated some of the surplus funds are being used to renovate the computer lab, as well as setting up a mobile computer lab. The Board did not think any new goals needed to be added, especially with there still being 68 open positions within the Agency.

The Board next reviewed current barriers/challenges. Nena has tasked staff to work on recruiting even more direct care workers. The Agency provides training and education for direct care workers, and Nena would like to start working with the college in September to possibly create a certification for direct care work. Nena stated the Agency is encouraging people to open foster care homes, and they support them and help them get licensed. The Board also reviewed the current opportunities. Nena is focusing on opening an office in Alcona County, so the Agency can have a stronger impact with a physical presence.

Nena stated the Agency needs relief from the Sub-End of increasing the number of children receiving home-based services, as there are currently eight open positions in the department. Erin Fletcher stated at the end of May 42% were receiving home-based services. The original goal of the Sub-End was 80%. Nena will speak with staff to see how this Sub-End can be revised to be more realistic, either by decreasing the percentage goal or by removing a specific percentage in favor of simply "increasing" home-based services. The Sub-End of developing one additional contract residential provider will be revised to state, "strive to develop."

The Sub-Ends regarding co-occurring disorders will be continued. The current goal is to have 10% of eligible individuals enrolled in BHH, and per Mary Crittenden, the Agency is currently at around 23%. Nena, Mary, and Board members were in agreement to raise the goal to 30%. The Sub-Ends for financial outcomes will be kept as good fiscal responsibility. The Sub-Ends for community education will be expanded, as Nena and the Agency are trying to be more creative with community outreach. The Sub-End will be revised to include events and education. All discussed revisions will be shown to the Board in September and will be adopted in October.

X. Budget Amendment #2

Connie Cadarette presented Budget Amendment #2. The amendment was done to clean up the budget, as some new departments were put in place this year and had to be estimated on the original budget. Now they have eight months of data and can do a more accurate amendment to the budget. Revenues are up for Medicaid and Healthy Michigan, more money has been received from the NMRE rebate, and an efficiency rebate has also been received.

Larry Patterson reported on the amended Expenditure Budget. Health insurance and prescriptions were the two largest decreases, and funding was reallocated from those line items. Larry reviewed line items receiving reallocations, with the largest reallocation of \$1.5 million going to Contracted Employees/Services.

Moved by Les Buza, supported by Gary Nowak, to approve Budget Amendment #2 as presented. Roll call: Ayes: Geyer Balog, Les Buza, Bonnie Cornelius, Judy Jones, Terry Larson, Eric Lawson, Gary Nowak, Pat Przeslawski, Terry Small; Nays: None; Absent: Bob Adrian, Roger Frye, Lynnette Grzeskowiak. Motion carried.

XI. July Monitoring Reports

1. Budgeting 01-004

Connie Cadarette reviewed the Statement of Revenue, Expenses and Change in Net Position for the month ending May 31, 2022. Connie stated there are still a few variances, but with 66.67% of the year elapsed, the Agency is staying very close to what was expected, sitting at 64.56%.

Gary Nowak departed the meeting at 4:31 p.m.

Larry Patterson reviewed the negative variances on the Statement of Revenue, Expenses and Change in Net Position. Funds have been reallocated to the line items with negative variances. Larry stated the line for Capital Equipment is a timing issue and will be resolved.

2. Asset Protection 01-007

There were no questions or comments on the Asset Protection monitoring report.

3. Community Resources 01-010

The Community Resources monitoring report details the Agency's collaborative and productive relationships in the community.

Moved by Terry Small, supported by Bonnie Cornelius, to approve the July Monitoring Reports as presented. Motion carried.

XII. Board Policies Review and Self-Evaluation

1. Community Resources 01-010

The Board agreed they are abiding by this policy.

2. Public Hearing 02-010

The Board and present staff were in agreement the Board is abiding by this policy.

Les Buza departed the meeting at 4:43 p.m.

XIII. Linkage Reports

1. Northern Michigan Regional Entity (NMRE)

a. June 22, 2022 Meeting

Nena Sork reported they are still working on advocacy regarding the proposed senate bills. NMRE Board members received an update on Northern Lakes CMHA. Nena brought up a news article from 07/13/22 which stated two primary members with lived mental health experience were removed from the Northern Lakes Board. Nena stated this will spill over to the overall perception of community mental health and could affect funding for the other CMH Boards and NeMCMHA. The proposed new CMH would have to be a part of, and receive funding from, the NMRE.

2. Board Committee Per Diem Discussion

Members of the Advisory Council currently receive a \$25 per diem. Recipient Rights volunteer community members currently do not receive a per diem. Bonnie Cornelius stated the per diem for the Recipient Rights committee shouldn't change, as they are volunteers, and Pat Przeslawski was in agreement. Advisory Council is a requirement of NeMCMHA's contract with MDHHS, but their per diem hasn't change since its inception. Terry Small would like to see it raised to \$35.

Moved by Terry Small, supported by Bonnie Cornelius, to approve raising the Advisory Council member per diem to \$35. Roll call: Ayes: Geyer Balog, Bonnie Cornelius, Judy Jones, Terry Larson, Eric Lawson, Pat Przeslawski, Terry Small; Nays: None; Absent: Bob Adrian, Les Buza, Roger Frye, Lynnette Grzeskowiak, Gary Nowak. Motion carried.

XIV. Operations Report

Mary Crittenden reviewed the services provided by staff for the month ending June 30, 2022. There were 40 routine requests for services and 46 hospital prescreens, 13 of which were placed in private hospitals. Community Living Support Services for I/DD served 100 and 66 were served for MI. Per Mary, the summer months are typically a little slower, with 989 individuals being served in June.

XV. Chair’s Report

Eric Lawson stated he will probably be absent for the August Board meeting. Bonnie Cornelius would be next in the line of succession and agreed to run the meeting. The August meeting will also be Diane Hayka’s last meeting before retiring.

Eric stated his name appeared in a political flyer endorsing a candidate as the NeMCMHA Board Chair. Eric explained he hadn’t been asked to give his title as Board Chair, and he cannot endorse a political candidate on behalf of the Agency. Eric reiterated that NeMCMHA isn’t a political organization. Eric has posted an official statement on the Agency Facebook and Instagram. Eric further explained what Board members endorse as individuals is fine, but it cannot be done from Board seats.

1. Planning for Executive Director Evaluation

The Board will be evaluating executive performance as shown on the monthly monitoring reports. Rebekah Duhaime can provide any past reports Board members would like to see.

XVI. Director’s Report

1. Director’s Update

Nena Sork provided Board members with a quick update of the various activities she participated in during the past month. Nena has attended three of the four county commission meetings in the last month, as well as attending the MMRA renewal meeting. Nena stated she attended the BCBS pre-renewal meeting, and the Agency shouldn’t have to pass along an increase to staff this year.

2. Employee Handbook

Nena discussed with the Board the Agency’s need for an official employee handbook, as there are over 130 policies staff should be familiar with. They have found an organization that can create an employee handbook completely customized for the Agency for \$4,000. The only other option they found was a subscription service which would cost \$12,000.

Moved by Pat Przeslawski, supported by Judy Jones, to approve moving forward with an Employee Handbook. Roll call: Ayes: Geyer Balog, Bonnie Cornelius, Judy Jones, Terry Larson, Eric Lawson, Pat Przeslawski, Terry Small; Nays: None; Absent: Bob Adrian, Les Buza, Roger Frye, Lynnette Grzeskowiak, Gary Nowak. Motion carried.

Nena stated the new psychiatrist, Dr. Thibault, starts on August 1. Nena also shared the Individual Placement and Support employment program attended their annual summit, and they were recognized out of 23 community mental health organizations as one of the top three programs in the state for their employment rate, as well as being in the top five for employment lasting longer 180 days or longer.

Nena stated employee recognition will be on August 16, and the staff picnic and annual training will be the following day.

3. QI Council Update

The most recent QI Council minutes were provided for Board review. There were no comments or questions.

XVII. Information and/or Comments from the Public

Lisa Anderson thanked the Board for their approval of the employee handbook project and stated it will be wonderful for all employees.

XVIII. Information and/or Comments for the Good of the Board

There was no additional information and/or comments for the good of the Board.

XIX. Next Meeting

The next regularly scheduled meeting of the Northeast Michigan Community Mental Health Authority Board will be held Thursday, August 11, 2022 at 3:00 p.m.

1. Set August Agenda

The August agenda items were reviewed.

2. Meeting Evaluation

Pat Przeslawski stated the meeting started mostly on time (Rebekah Duhaime will fix the clock in the Board Room), and Board members had a lot of discussion with over 75% of the Board participating. Pat stated empathy was very obvious from the Board, but they were also very practical.

XX. Adjournment

Moved by Pat Przeslawski, supported by Terry Larson, to adjourn the meeting. Motion carried.
This meeting adjourned at 5:04 p.m.

Bonnie Cornelius, Secretary

Eric Lawson, Chair

Rebekah Duhaime
Recorder



Recipient Rights Update Northeast MI CMH

2022

Know your recipient rights office staff ...

Ruth Hewett, Recipient Rights Officer,
office 989-358-7847, cell 989-590-0887,
email rhewett@nemcmh.org.

Elizabeth “Liz” Kowalski, Recipient Rights
Advisor, office 989-358-7848, cell 989-590-
0808, email ekowalski@nemcmh.org.

Robert “Rob” Keyes, Recipient Rights
Advisor, office 989-358-7850, email
rkeyes@nemcmh.org.

Rights fax: 989-358-7849

A close-up photograph of a person wearing a white lab coat. Their right hand is pointing towards the screen of a smartphone held in their left hand. The background is slightly blurred, showing more of the lab coat and the person's torso.

About Us

Abuse Definitions and Examples

MHC 330.1722(1) “A recipient of mental health services shall not be subjected to abuse or neglect.”

Abuse, Class I

- A non-accidental act or provocation of another to act, by an employee, volunteer, or agent of a provider that caused or contributed to the death, or sexual abuse of, or serious physical harm to a consumer.
- Examples:
- Pushing a consumer, causing him to fall and break a leg.
- Touching the inner thigh of a consumer because it “feels good.”
- Purposely turning on the hot water in the shower resulting in burns to the consumer.

Abuse, Class II

- A non-accidental act or provocation of another to act, by an employee, volunteer, or agent of a provider that caused or contributed to non-serious physical harm to a consumer; or
- The use of unreasonable force on a consumer by an employee, volunteer, or agent of a provider with or without apparent harm; or,
- Any action or provocation of another to act by an employee, volunteer, or agent of a provider that causes or contributes to emotional harm to a consumer; or,

Abuse, Continued

Abuse definitions are found in the Administrative Rules.

Abuse, Class II Continued

- An action taken on behalf of a consumer by a provider who assumes the consumer is incompetent, despite the fact that a guardian has not been appointed, that results in substantial economic, material, or emotional harm to the recipient.
- Exploitation of a consumer by an employee, volunteer, or agent of a provider.
- Examples:
- Using a consumer's "Bridge Card" to purchase something for themselves.
- Twisting a consumer's arm behind the back to make the individual leave the room.

Abuse, Class III

The use of language or other means of communication by an employee, volunteer or agent of a provider to degrade, threaten or sexually harass a consumer.

Degrading behavior includes language or epithets that insult the person's heritage, mental status, race, sexual orientation, gender, intelligence, etc. Examples include swearing at consumers, using foul language at consumers, using racial or ethnic slurs toward or about consumers, making emotionally harmful remarks toward consumers, causing or prompting others to do these things.

Abuse, Continued

Substantiations of Abuse require formal disciplinary action per the Administrative Rules.

Abuse, Class III Continued

Degrade: means any of the following:

treat humiliatingly; to cause somebody or something a humiliating loss of status or reputation, or cause somebody a humiliating loss of self-esteem, make worthless: to cause people to feel that they or other people are worthless and do not have the respect or good opinion of others

(syn) degrade, abase, debase, demean, humble,

humiliate: These verbs mean to deprive of self-esteem or self-worth: to shame or disgrace

Examples of Class III

- Calling a consumer names.
- Swearing at a consumer.
- Shaking a finger in the face of a consumer.
- Saying to a consumer, “You will never amount to anything.”
- Yelling at a consumer.
- Telling the consumer there is no afternoon snack because the consumer misbehaved.
- Telling a consumer he/she is “bad.”
- Talking down to a consumer, like a parent scolding a child.

Neglect Definitions and Examples

Substantiations of Neglect require formal disciplinary action per the Administrative Rules.

Neglect, Class I

Acts of commission or omission by an employee, volunteer, or agent of a provider that result from noncompliance with a standard of care or treatment required by law and/or rules, policies, guidelines, written directives, procedures, or individual plan of service and causes or contributes to the death, or sexual abuse of or serious physical harm to a consumer.

The failure to report apparent or suspected abuse Class I or neglect Class I of a consumer when the abuse or neglect results in the death of, or serious physical harm, to the consumer.

Neglect, Class II

Acts of commission or omission by an employee, volunteer, or agent of a provider which result from noncompliance with a standard of care or treatment required by law, rules, policies, guidelines, written directives, procedures, or individual plan of service and that cause or contribute to non-serious physical harm or emotional harm, to a consumer; or,

The failure to report apparent or suspected abuse Class II or neglect Class II of a consumer when the abuse or neglect results in non-serious physical harm to the consumer.

Neglect, Continued

Neglect is failing to do something we should do.

Neglect, Class III

Acts of commission or omission by an employee, volunteer, or agent of a provider that result from noncompliance with a standard of care or treatment required by law, rules, policies, guidelines, written directives, procedures, or individual plan of service and that either placed or could have placed a consumer at risk of physical harm or sexual abuse; or,

The failure to report apparent or suspected abuse Class III or neglect Class III of a consumer when the abuse or neglect places a consumer at risk of serious or non-serious harm.

Examples of Neglect

- Not following the Nutrition Guidelines in the Plan of Service.
- Leaving a consumer in a vehicle on a hot, sunny day.
- Not applying sunscreen as often as is recommended resulting in sunburn.
- Leaving a consumer's home when they told staff they planned to hurt themselves.
- Going in to work with consumers with symptoms of COVID.
- Transporting a consumer and staff receiving a citation for running a stop sign which resulted in an accident.
- Knowing a staff member is having a sexual relationship with the consumer and not reporting it.



Mandatory Reporting

Know who to contact to report recipient rights complaints (RR), adult protective services (APS), and child protective services (CPS).

- RR – Ruth, 989-358-7847. If unavailable, Liz or Rob at 989-358-7848 or 989-358-7850, respectively.
- CPS – Centralized Intake at 855-444-3911. Write 3200.
- APS – Centralized Intake at 855-444-3911. Write an IR.

Who must report, what must be reported, and when must it be reported? All reporting must be done verbally immediately, followed by an incident report before the end of your shift.

Please follow the Abuse and Neglect Summary of Reporting Requirements poster that is posted at your work site. This includes recipient rights, child protective services, and adult protective services.

All employees, contractors and contractor's employees, and volunteers must follow the Michigan Mental Health Code, P.A. 258 of 1974.



What are a few of the Consumers' other Rights?

Just a couple of other important rights ...

Confidentiality

What is considered confidential?

- The individual's name and any personal identification
- Whether or not the person is receiving services from us
- Photographs, videotapes, audio recordings (See Rights policy 3810, procedure 11 "Social Media")
- All information in a person's record and
- Any information you learn about the person while providing services.


- Consent of the person or guardian, if there is one, or parent of a minor is required before giving out any information. A MDHHS Consent form must be completed in order to share information. A case manager will assist with obtaining consent if needed.
- Respecting confidentiality means you cannot discuss what happened with any consumer when not at work or with people not authorized to know it. There must be a "need-to-know" basis to share information. Sharing this information should be done in a private, secure location and not in the presence of the individual or others.

Just a couple of other important rights ...

Dignity & Respect

How do you treat someone with dignity and respect?

- Dignity - to be treated with esteem, honor, politeness; to be addressed in a manner that is not patronizing, condescending or demeaning; to be treated as an equal; to be treated the way any individual would like to be treated.
- Respect - to show deferential regard for; to be treated with esteem, concern, consideration or appreciation; to protect the individual's privacy; to be sensitive to cultural differences; to allow an individual to make choices.
- Examples include:
 - Calling a person by his or her preferred name, using positive language, encouraging the person to make choices instead of making assumptions about what he or she wants, taking the person's opinion seriously, including the person in conversations, allowing the person to do things independently or to try new things.
- All staff shall treat consumers and their family members with dignity and respect, being sensitive to conduct that is or may be deemed offensive to the other person.

A modern office meeting room with a large window, a long table, and chairs. The room is bright and airy, with a large window on the left side. The window has a grid pattern and offers a view of a cityscape. A long, light-colored wooden table is in the foreground, surrounded by black chairs. There are three small potted plants on the table. A large black TV is mounted on the wall to the right. The ceiling has exposed pipes and a light fixture.

What does the Rights Office do?

What are some of the Rights Office duties?

Consultation – If you have a rights related question, call us. Rights policies are kept current with state law and are available on the agency’s website at nemcmh.org

Training-Rights training is occurring constantly. If you desire a training specific for your site, call us.

Monitoring-ORR visits each service site (contractual and directly operated) at least annually.

Investigations-Investigating recipient right complaints.



**Thank You.
Keep up
the great
work!**



Recipient Rights Advisory Committee Minutes July 27, 2022

The meeting was called to order at 3:05 p.m. July 27, 2022, by Chair Pat Przeslawski in the Administrative Conference Room.

Present: Judy Jones, Barb Murphy, Pat Przeslawski, Renee Smart-Sheppler and Lorell Whitscell
Absent: Tom Fredlund (Excused)
Staff: Ruth Hewett
Guests: None.

DRAFT MINUTES

I. **Old Business.** None.

II. **Approval of Minutes.** The minutes from 4-20-2022 were approved as written by consensus.

III. **New Business.**

QUARTERLY RIGHTS ACTIVITY REPORT: The report covered the third quarter of FY 22, 4/1/2022 – 6/30/2022. The complaints this past quarter were comparable to the previous quarter but higher than they were the same quarter last year. Of the 30 complaints, 23 were investigated, 3 were handled as interventions, and 4 were outside the jurisdiction of the rights office. There was 1 investigation pending. Of the 26 investigations/interventions, there were 14 substantiations. The substantiation rate was 54%, which is typical. There was 1 remedial action pending at the time of the report. Barb moved to review the report, supported by Renee, motion carried.

RESULTS OF COMMITTEE COMPOSITION SURVEY: All composition surveys were returned and the Mental Health Code composition rate was exceeded. Of the 6 members, 2 are primary consumers, 5 are secondary consumers, and 2 are board members. Committee members reported other advocacy representation as a former AFC home supervisor, SIS assessor, Blue Horizon board member, NEMROC board member, retired deputy sheriff, former Area 3 Director of Special Olympics, guardian of a primary consumer, retired educator, and two active participants in the faith-based community.

SEMI-ANNUAL REPORT: The Semi-Annual report was a compilation of rights complaints / investigations from 10-1-2021 through 3-31-2022. The committee has reviewed this information via the quarterly reports. Judy asked for a comparison with other cmh agencies in the state. Ruth reported the state rights office publishes an annual report from the data received from all the cmhs as well as the hospitals. Ruth will present information at the next meeting showing where Northeast compares with others.

RIGHTS OFFICE STAFF AND RESPONSIBILITIES: Ruth reported the second recipient rights advisor position was filled on 7-8-2022 by Robert Keyes. He comes with a criminal justice background, having served time in the Navy. He is currently attending the state mandated Basic Skills training this week and will be able to begin rights activities in a few weeks. In addition, since the retirement of the customer service rep in April, the rights office has assumed the responsibilities of customer service, grievances and appeals.

IV. **Educational Session:** The committee was presented with the recipient rights update training that all employees will complete during their annual staff training in August. The committee members took the opportunity to complete the test that accompanied the training.

V. Other Business.

The next meeting will be October 19, 2022 at 3 p.m. in the Administrative Conference Room.

VI. Adjournment.

Moved by Renee to adjourn, supported by Lorell. The meeting adjourned at 4 pm.

Ruth Hewett, Recorder

Patricia Przeslawski, Chairperson

QUARTERLY RECIPIENT RIGHTS ACTIVITY REPORT

Time Period: May, June & July 2022:

I. COMPLAINT DATA SUMMARY		<u>FY 21-22</u>					<u>FY 20-21</u>			
A. Totals	1 st	2 nd	3 rd	4 th		1 st	2 nd	3 rd	4 th	
Complaints Received:	23	34	30			33	23	26	25	
Investigated:	21	30	23 + 1 pdg			26	19	23	22	
Interventions:	01	01	03			01	-0-	-0-	-0-	
Substantiated:	12	24	14			22	08	06	16	
Outside Jurisdiction:	-0-	01	04			02	-0-	-0-	01	
No Code Protected Right:	01	02	-0-			04	04	03	02	

B. Aggregate Summary of Complaints

CATEGORY	Received	Investigation	Intervention	Substantiated
Abuse I	0	0		0
Abuse II	0	0		0
Abuse III	4	4		2
Sexual Abuse	0	0		0
Neglect I	0	0		0
Neglect II	0	0		0
Neglect III	4	4		2
Rights Protection System	1	1	0	1
Admiss/Dischrg-2 ND Opinion	0	0	0	0
Civil Rights	0	0	0	0
Family Rights	0	0	0	0
Communication & Visits	0	0	0	0
Confidentiality/Disclosure	6	3	3	4
Treatment Environment	0	0	0	0
Freedom of Movement	0	0	0	0
Financial Rights	0	0	0	0
Personal Property	1	1	0	0
Suitable Services	9	9	0	*4 + 1 pdg
Treatment Planning	0	0	0	0
Photos/Fingerprints/Audio etc	1	1	0	1
Forensic Issues	0	0	0	0
Total	26	23	3	14 + 1 pdg

The Dignity & Respect pending from last quarter was substantiated.

The Services Suited to Condition pending from last quarter was not substantiated.

c. Remediation of substantiated rights violations.

Category/Specific Allegation	Specific Provider	Specific Remedial Action
Abuse, Class II	Windy Hill AFC	Training
Abuse, Class III	NEMCMH	Suspension
Treatment Environmnt	NEMCMH	Written Reprimand
Pending last qtr:		
Suit Serv-Dign/Respt	NEMCMH	Written Reprimand
Abuse III	NEMCMH	Written Reprimand
Abuse III	NEMCMH	Pending
Neglect III	Lighthouse	Written Reprimand
Neglect III	NEMCMH	Written Reprimand
Rgt Prot Sys-fail2rept	Beacon of Ossineke	Training
Confidentiality	NEMCMH	Documented Counseling
Confidentiality	NEMCMH	Documented Counseling
Confidentiality	NEMCMH	Documented Counseling
Confidentiality	NEMCMH	Documented Counseling
Suit Serv-Dign/Respt	Self Determination	Other
Suitable Services	NEMCMH	Documented Counseling
Suitable Services	NEMCMH	Documented Counseling
Suitable Services	NEMCMH	Documented Counseling
Photos/Fingerprint/Aud	NEMCMH	Written Reprimand

D. Summary of Incident Reports: April, May & June 2022

Category Type	1 st Qtr		2 nd Qtr		3 rd Qtr		4 th Qtr	
	'22	'21	'22	'21	'22	'21	'22	'21
01.0 Absent without leave (AWOL)	01	04	02	01	01	02		04
02.0 Accident – No injury	07	03	01	05	07	07		06
02.1 Accident – With injury	11	20	21	18	22	16		18
03.0 Aggressive Acts – No injury	32	16	40	51	44	39		55
03.1 Aggressive Acts – w/ injury	04	04	04	05	06	04		12
03.3 Aggressive Acts – Property Destruc	06	01	02	09	01	03		06
04.0 Death	04	01	09	05	07	08		05
05.0 Fall – No injury	27	07	26	10	13	12		16
06.0 Medical Problem	119	103	89	120	120	135		119
07.0 Medication Delay	-0-	04	05	05	05	02		08
07.1 Medication Error	19	29	20	23	24	19		28
07.2 Medication Other	54	52	35	46	59	49		61
07.3 Medication Refusal	10	99	16	22	23	04		31
08.0 Non-Serious Injury – Unknwn cause	10	08	02	08	08	08		09
09.0 Other	76	68	72	102	92	78		109
10.0 Self Injurious Acts – No injury	01	04	01	02	02	07		02
10.1 Self Injurious Acts – w/injury	05	09	04	06	10	04		06
Challenging Behavior	28	17	31	50	39	15		36
Fall – with injury	15	07	22	22	14	12		17
Arrests	01	04	02	02	02	06		09
Total	430	460	404	512	499	430		557

E. Prevention Activity	Quarter	YTD
Hours Used in Training Provided	28.50	73.50
Hours Used in Training Received	7.00	11.00
Hours Used in Site Visits	7.75	16.25

F. Monitoring Activity	Quarter	YTD
Incident Report Received	499	1,333

G. Source of All Complaints:	Quarter	YTD
Recipient:	06	15
Staff:	15	47
ORR:	07	22
Gdn/Family:	02	02
Anonymous:	-0-	01
Comm/Gen Pub:	-0-	<u>-0-</u>
Total	30	87

Ruth M. Hewett, Recipient Rights Officer

7/25/2022
Date

AGENCY	Northeast Michigan CMH Authority
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Rights Office Director: Ruth M. Hewett

Reporting Period: 10/1/2021 to 3/31/2022

CMH 1,822 # of Consumers Served (unduplicated count) **CMH** 2 Rights Office FTEs

LPH Number of Admissions **LPH** Hours/40 working in rights

Section I: Complaint Data Summary

Part A: Agency Totals

Allegations	57	DO NOT TYPE HERE - IT WILL AUTO FILL
Interventions	2	DO NOT TYPE HERE - IT WILL AUTO FILL
Interventions Substantiated	2	DO NOT TYPE HERE - IT WILL AUTO FILL
Investigations	51	DO NOT TYPE HERE - IT WILL AUTO FILL
Investigations Substantiated	34	DO NOT TYPE HERE - IT WILL AUTO FILL

COMPLAINT SOURCE

Recipient	9	
Staff	32	
ORR	15	
Guardian/Family	0	
Anonymous	1	
Community/General Public	0	
Total Complaints Received	57	DO NOT TYPE HERE - IT WILL AUTO FILL

Part B: Summary by Category

Freedom from Abuse

Code	Category	Received		Investigations	Investigations Substantiated	Recipient Population		
						MI	DD	SED
7221	Abuse class I	1		1	0	1	0	0
72221	Abuse class II - nonaccidental act	0		0	0	0	0	0
72222	Abuse class II - unreasonable force	3		3	1	0	3	0
72223	Abuse class II - emotional harm	0		0	0	0	0	0
72224	Abuse class II - treating as incompetent	0		0	0	0	0	0
72225	Abuse class II - exploitation	0		0	0	0	0	0
7223	Abuse - class III	5		5	5	1	4	0
7224	Abuse class I - sexual abuse	0		0	0	0	0	0

Freedom from Neglect

Code	Category	Received		Investigations	Investigations Substantiated	Recipient Population		
						MI	DD	SED
72251	Neglect class I	0		0	0	0	0	0
72252	Neglect class I - failure to report	0		0	0	0	0	0
72261	Neglect class II	0		0	0	0	0	0
72262	Neglect class II - failure to report	0		0	0	0	0	0
72271	Neglect class III	12		12	9	4	19	0
72272	Neglect class III - failure to report	0		0	0	0	0	0

Rights Protection System

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7060	Notice/explanation of rights	0	0	0	0	0	0	0	0
7520	Failure to report	0	0	0	0	0	0	0	0
7545	Retaliation/harassment	0			0	0	0	0	0
7760	Access to rights system	0	0	0	0	0	0	0	0
7780	Complaint investigation process	0	0	1	0	0	0	0	0

7840	Appeal process	0	0	0	0	0	0	0	0
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Admission/Discharge/Second Opinion

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	Recipient Population		
							MI	DD	SED
4090	Second opinion - denial of hospitalization	0	0	0	0	0	0	0	
4190	Termination of voluntary hospitalization (adult)	0	0	0	0	0	0	0	
4510	admission process	0	0	0	0	0	0	0	
4630	Independent clinical examination	0	0	0	0	0	0	0	
4980	Objection to hospitalization (minor)	0	0	0	0	0	0	0	
7050	Second opinion - denial of services	0	0	0	0	0	0	0	

Civil Rights

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7041	Civil rights: discrimination, accessibility, accommodation, etc	0	0	0	0	0	0	0	
7044	Religious practice	0	0	0	0	0	0	0	
7045	Voting	0	0	0	0	0	0	0	
7047	Presumption of competency	0	0	0	0	0	0	0	
7284	Search/seizure	0	0	0	0	0	0	0	

Family Rights

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7111	Family dignity and respect	0	0	0	0	0	0	0	
7112	Receipt of general education information	0	0	0	0	0	0	0	
7113	Opportunity to provide information	0	0	0	0	0	0	0	

Communication and Visits

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7261	Visits	0	0	0	0	0	0	0	
7262	Contact with attorneys or others regarding legal matters	0	0	0	0	0	0	0	
7263	Access to telephone, mail	0	0	0	0	0	0	0	
7264	Funds for postage, stationery, telephone usage	0	0	0	0	0	0	0	
7265	Written and posted limitations, if established	0	0	0	0	0	0	0	
7266	Uncensored mail	0	0	0	0	0	0	0	

Confidentiality/Privileged Communications/Disclosure

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7481	Disclosure of confidential information	4	2	2	2	1	3	1	0
7485	Withholding of information (includes recipient access to records)	1	0	0	1	0	0	1	0
7486	Correction of record	0	0	0	0	0	0	0	0
7487	Access by p & a to records	0	0	0	0	0	0	0	0
7501	Privileged communication	0	0	0	0	0	0	0	0

Treatment Environment

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7081	Safe environment	3	0	0	3	1	1	14	0
7082	Sanitary/humane environment	1	0	0	1	1	0	3	0
7086	Least restrictive setting	0	0	0	0	0	0	0	0

Freedom of Movement

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7441	Restrictions/limitations	0	0	0	0	0	0	0	
7400	Restraint	0	0	0	0	0	0	0	
7420	Seclusion	0	0	0	0	0	0	0	

Financial Rights

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7301	Safeguarding money	0	0	0	0	0	0	0	
7302	Facility account	0	0	0	0	0	0	0	
7303	Easy access to money in account	0	0	0	0	0	0	0	
7304	Ability to spend or use as desired	0	0	0	0	0	0	0	
7305	Delivery of money upon release	0	0	0	0	0	0	0	
7360	Labor & Compensation	0	0	0	0	0	0	0	

Personal Property

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7267	Access to entertainment materials, information, news	0	0	0	0	0	0	0	
7281	Possession and use	1	0	0	1	1	0	0	
7282	Storage space	0	0	0	0	0	0	0	
7283	Inspection at reasonable times	0	0	0	0	0	0	0	
7285	Exclusions	0	0	0	0	0	0	0	
7286	Limitations	0	0	0	0	0	0	0	
7287	Receipts to recipient and to designated individual	0	0	0	0	0	0	0	
7288	Waiver	0	0	0	0	0	0	0	
7289	Protection	0	0	0	0	0	0	0	

Suitable Services

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	Recipient Population		
							MI	DD	SED
1708	Dignity and Respect	14	0	0	14	11	1	16	
7003	Informed consent	0	0	0	0	0	0	0	
7029	Information on family planning	0	0	0	0	0	0	0	
7049	Treatment by spiritual means	0	0	0	0	0	0	0	
7080	Mental health services suited to condition	8	0	0	8	4	2	7	
7100	Physical and mental exams	0	0	0	0	0	0	0	
7130	Choice of physician/mental health professional	0	0	0	0	0	0	0	
7140	Notice of clinical status/progress	0	0	0	0	0	0	0	
7150	Services of mental health professional	0	0	0	0	0	0	0	
7160	Surgery	0	0	0	0	0	0	0	
7170	Electro convulsive therapy (ECT)	0	0	0	0	0	0	0	
7180	Psychotropic drugs	0	0	0	0	0	0	0	
7190	Notice of medication side effects	0	0	0	0	0	0	0	

Treatment Planning

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7121	Person-centered process	0	0	0	0	0	0	0	
7122	Timely development	0	0	0	0	0	0	0	
7123	Requests for review	0	0	0	0	0	0	0	
7124	Participation by individual(s) of choice	0	0	0	0	0	0	0	
7125	Assessment of needs	0	0	0	0	0	0	0	

Photographs, Fingerprints, Audiotapes, One-way Glass

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7241	Prior consent	0	0	0	0	0	0	0	
7242	Identification	0	0	0	0	0	0	0	
7243	Objection	0	0	0	0	0	0	0	
7244	Release to others/return	0	0	0	0	0	0	0	
7245	Storage/destruction	0	0	0	0	0	0	0	

TOTALS		53	2	2	51	34	13	69	0
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No Right Involved

Code	Category	Received

0000	No Right Involved	3
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Outside Provider Jurisdiction

Code	Category	Received
0001	Outside provider jurisdiction	1

Section II: Substantiation data

Category (from Complaint Data)	Specific Provider Type	Specific Remedial Action	Specific Remedial Action	Specific Remedial Action
Dignity and respect	Residential DD	Employee left the agency, but substantiated		
Dignity and respect	Residential DD	Employee left the agency, but substantiated		
Dignity and respect	Other	Employment Termination		
Dignity and respect	Residential DD	Written Reprimand		
Dignity and respect	Residential DD	Suspension		
Dignity and respect	Residential MI & DD	Employment Termination		
Dignity and respect	Residential MI & DD	Employee left the agency, but substantiated		
Dignity and respect	Residential MI & DD	Training		
Dignity and respect	Residential DD	Suspension		
Dignity and respect	SIP	Written Reprimand		
Dignity and respect	Residential DD	Written Reprimand		
Mental health services suited to condition	Residential MI & DD	Employee left the agency, but substantiated		
Mental health services suited to condition	Residential DD	Verbal Counseling		
Mental health services suited to condition	Residential MI & DD	Written Counseling	Training	
Mental health services suited to condition	Residential DD	Verbal Counseling	Verbal Counseling	
Safe environment	Residential DD	Written Reprimand		
Sanitary/humane environment	Residential MI & DD	Environmental Repair/Enhancement		
Abuse class II - unreasonable force	Residential DD	Training		
Abuse class III	Residential MI & DD	Employment Termination		
Abuse class III	Residential MI & DD	Training		
Abuse class III	Residential DD	Suspension		
Abuse class III	Residential DD	Suspension		
Abuse class III	Other	Employee left the agency, but substantiated		
Neglect class III	Residential DD	Written Counseling	Written Counseling	Employee left the agency, but substantiated
Neglect class III	Residential DD	Verbal Counseling		
Neglect class III	Residential MI & DD	Written Reprimand		
Neglect class III	Residential DD	Written Reprimand		
Neglect class III	Residential MI & DD	Written Reprimand	Written Counseling	
Neglect class III	Residential DD	Written Counseling		
Neglect class III	Residential MI & DD	Written Counseling		
Neglect class III	Residential DD	Written Reprimand	Written Reprimand	
Neglect class III	Residential DD	Written Reprimand		
Property - possession and use	Residential DD	Other		
Disclosure of confidential information	Other	Verbal Counseling		
Disclosure of confidential information	Residential DD	Employment Termination		
Disclosure of confidential information	Other	Verbal Counseling		

Turnover by Department					
Division/Department Name	# at	Employees	Employees	# at	Total
	1/1/2022	Hired/Trnsfr'd	Separated/Trnsfr'd	6/30/2022	Turnover
Administration/Support Services	44	3	2	45	5%
MI/IDD Program Management	7	2	4	5	57%
Psychiatry & Nursing Support	9	3	1	11	11%
OAS Services	12	3	2	13	17%
MI CRS Services	4	2	1	5	25%
MI Access	4		2	2	50%
MI Adult Casemanagement	9		1	8	11%
MI Adult A.C.T.	5	1	1	5	20%
Home Based Child	6	4	3	7	50%
MI Peer Support Services	3			3	0%
MI/IDD Employment Services	16	4	5	15	31%
Self Determination	4			4	0%
DD Casemanagement	9	1		10	0%
DD Clinical Support	2	1		3	0%
DD SIP Residential	30	10	10	30	33%
DD Community Support	18	2	1	19	6%
Blue Horizons	9	3	2	10	22%
Brege	12		1	11	8%
Cambridge	12	3	3	12	25%
Harrisville	9	1	2	8	22%
Mill Creek	10	2	4	8	40%
Pine Park	9	3	2	10	22%
Princeton	9	5	6	8	67%
Thunder Bay Heights	10	5	4	11	40%
Walnut	8	4	1	11	13%
Totals	270	62	58	274	21%

Agency-Wide Turnover					
Division/Department Name	# at	Number	Total	# at	Total
	1/1/2021	Hires	Employees	12/31/2021	Turnover
All Employees	270	49	45	274	17%

Northeast Michigan Community Mental Health Authority

Statement of Revenue, Expenses and Change in Net Position

October 1, 2022 through June 30, 2022

Percent of Year is 75.00%

	Total Amended Budget	YTD Totals 6/30/22	Under/(Over) Budget	Percent of Budget - YTD	
Operating revenue					
Medicaid:					
1	Traditional Capitation	\$ 31,749,435	\$ 23,718,725	\$ 8,030,710	74.71%
2	Traditional Settlement	-	(97,460)	97,460	
3	Healthy Michigan Capitation	2,281,297	1,728,377	552,920	75.76%
4	Healthy Michigan Settlement	-	(605,697)	605,697	
5	State General Fund:				
6	Formula Fundings	1,152,288	876,736	275,552	76.09%
7	Settlement		(387,494)	387,494	
8	Client Fees	417,400	266,037	151,363	63.74%
9	Grant revenue	324,039	214,785	109,254	66.28%
10	Other earned contracts	631,127	484,754	146,373	76.81%
11	County Appropriation	688,110	201,105	487,005	29.23%
12	Interest and other revenue	44,250	508,391	(464,141)	1148.91%
13	Fiduciary Receipts	-	276,482	(276,482)	0.00%
14	Group Home Revenues	627,025	404,066	222,959	64.44%
15	Total operating revenue	\$ 37,914,971	\$ 27,588,807	\$ 10,326,164	72.76%
Operating expenses					
16	Salaries and wages	\$ 16,259,455	\$ 11,307,034	\$ 4,952,421	69.54%
17	Social security tax	712,305	478,932	233,373	67.24%
18	Self insured benefits	3,008,505	1,815,113	1,193,392	60.33%
19	Life and disability insurances	211,146	157,942	53,204	74.80%
20	Pension	1,314,023	945,589	368,434	71.96%
21	Unemployment & workers comp.	181,032	122,216	58,816	67.51%
22	Office supplies & postage	52,371	30,804	21,567	58.82%
23	Staff recruiting & development	134,351	102,967	31,384	76.64%
24	Community relations/education	24,312	15,147	9,165	62.30%
25	Employee relations/wellness	125,213	74,701	50,512	59.66%
26	Program supplies	617,809	234,025	383,784	37.88%
27	Contract transportation	75,304	24,455	50,849	32.48%
28	Contract employees & services	6,910,487	5,200,134	1,710,353	75.25%
29	Contract inpatient services	1,430,446	1,032,646	397,800	72.19%
30	Contract residential services	3,997,982	3,380,507	617,475	84.56%
31	Telephone & connectivity	157,729	145,142	12,587	92.02%
32	Staff meals & lodging	100,461	51,945	48,516	51.71%
33	Mileage & gasoline	375,389	256,286	119,103	68.27%
34	Maintenance	228,886	188,473	40,413	82.34%
35	Building rent	131,070	99,745	31,325	76.10%

This financial report is for internal use only. It has not been audited, and no assurance is provided.

36	Board travel/education	13,664	7,645	6,019	55.95%
37	Professional fees	94,009	75,163	18,846	79.95%
38	Property & liability insurance	145,156	97,719	47,437	67.32%
39	Utilities	210,016	132,484	77,532	63.08%
40	Group home rent	112,443	80,297	32,146	71.41%
41	Group home food	157,682	34,269	123,413	21.73%
42	Capital equipment	311,048	195,536	115,512	62.86%
43	Client equipment	24,000	14,518	9,482	60.49%
44	Miscellaneous expense	178,442	100,092	78,350	56.09%
45	Stability Payments	101,825	64,325	37,500	0.00%
46	Fiduciary Expense	-	304,405	(304,405)	0.00%
47	Depreciation expense	518,409	315,365	203,044	60.83%
48	Total operating expenses	<u>\$ 37,914,971</u>	<u>\$ 27,085,620</u>	<u>\$ 10,829,351</u>	<u>71.44%</u>
49	Change in net position	-	<u>503,187</u>	<u>\$ (503,187)</u>	
50	Medicaid Funds (Over)/Under Spent		97,460		
51	Healthy Michigan Funds (Over)/Under Spent		605,697		
52	Total Due to NMRE (Over)/Under Spent		<u>703,157</u>		
53	General Funds to Carry Forward to FY23		41,333		
54	General Funds Lapsing to MDHHS		346,161		
55	General Funds (Over)/Under Spent		<u>387,494</u>		
56	Beginning net position	<u>5,688,828</u>	<u>5,688,828</u>		
57	Ending net position	<u>\$ 5,688,828</u>	<u>\$ 6,192,015</u>		

This financial report is for internal use only. It has not been audited, and no assurance is provided.

GOVERNANCE PROCESS

(Manual Section)

CHAIRPERSON'S ROLE

(Subject)

Board Approval of Policy

August 8, 2002

Last Revision Approved by the Board:

August 12, 2021

●1 **POLICY:**

The Chairperson assures the integrity of the board's process and, secondarily, occasionally represents the board to outside parties. The Chairperson is the only board member authorized to speak for the board (beyond simply reporting board decisions), other than in rare and specifically authorized instances.

1. The job result of the Chairperson is that the board behaves consistent with its own rules and those legitimately imposed upon it from outside the organization.
 - A. Meeting discussion content will only be those issues which, according to board policy, clearly belong to the board to decide, not the Executive Director.
 - B. Deliberation will be fair, open, and thorough, but also efficient, timely, orderly, and kept to the point.
2. The authority of the Chairperson consists in making decisions that fall within the topics covered by board policies on Governance Process and Board-Executive Director Relationship, except where the board specifically delegates portions of this authority to others. The Chairperson is authorized to use any reasonable interpretation of the provisions in these policies.
 - A. The Chairperson is empowered to chair board meetings with all the commonly accepted power of that position (e.g., ruling, recognizing). The Chairperson may invoke Roberts Rules of Order.
 - B. The Chairperson has no authority to make decisions about policies created by the board within Ends and Executive Limitations policy areas. Therefore, the Chairperson has no authority to supervise or direct the Executive Director.
 - C. The Chairperson will represent the board to outside parties in announcing board-stated positions and in stating Chair decisions and interpretations within the area delegated to him or her.

D. The Chairperson may delegate this authority, but remains accountable for its use.

3. Any person desiring to address the Board, either as an individual or on behalf of a group, shall be requested to identify him/herself by name and residence county and his/her group if he/she represents one. He/She shall then state his/her reason for addressing the Board and may be limited in their remarks to three minutes on matters within jurisdiction of the Board at which time a brief supporting the points may be submitted to the Board for its consideration; provided, however, that individual employees of the Board shall have exhausted administrative procedures before making the request to address the Board on specific matters which shall have had administrative review. The presiding officer may also extend the period of time with approval of the Board. All questions presented by any person to either the Board or any member of the staff shall be answered in a manner as determined by the presiding officer.

●2 **APPLICATION:**

The Northeast Michigan Community Mental Health Authority Board

●3 **DEFINITIONS:**

●4 **REFERENCES:**

Board By-Laws
Roberts Rules of Order

●5 **FORMS AND EXHIBITS:**

**NORTHEAST MICHIGAN COMMUNITY MENTAL HEALTH AUTHORITY
POLICY & PROCEDURE MANUAL**

GOVERNANCE PROCESS

(Manual Section)

BOARD MEMBERS PER DIEM


(Subject)

Board Approval of Policy
Last Revision Approved by the Board:

August 8, 2002
June 9, 2022

●1 **POLICY:**

1. Board Members shall be paid a per diem of \$75 per meeting which exceeds four (4) hours in duration; Board Members shall be paid a per diem of \$50 for meetings less than four (4) hours in duration; \$75 per meeting outside the service area and \$75 per day for conference attendance. Board Members required to travel the day preceding a meeting will be reimbursed at the per diem rate for less than four (4) hours. In order to be eligible for these payments, these meetings must be approved by the Board or by the Board Chair if time constraints would not permit a delay until the next meeting of the Board.
2. Reimbursement of Board Members' expenditures for travel, lodging, meals, registration fees, tolls, parking fees and similar expenses related to Board business shall be at current rates established by the Board and consistent with applicable guidelines.
3. For purposes of reimbursement of expenses of travel to Board and Committee meetings held in a city other than a Board Member's city or township of residence, each Board Member shall have established a standard round-trip distance between home and Board Meeting site; reimbursement of such travel expenses shall be made monthly. For other Board-business-related travel, a record of actual mileage (via the shortest route between home and destination) shall be required, unless standard-map-mileage is utilized as a default. Wherever practical, Board Members traveling to the same destination should coordinate transportation to minimize expense. Reimbursement of all other expenses shall require documentation in the form of receipts. No reimbursement shall be made for purchases of alcoholic beverages.
4. Current reimbursement rates are:

Mileage: Mileage reimbursement equal to employee reimbursement rates 

Lodging: \$75.00 per night, unless lodging is at the site of a conference, in which case that facility's rate shall be honored. Hotel accommodations should be made by the Executive Secretary or designee so tax exemption occurs. Board members are encouraged to utilize double occupancy when appropriate.

**NORTHEAST MICHIGAN COMMUNITY MENTAL HEALTH AUTHORITY
POLICY & PROCEDURE MANUAL**

Meals: **\$65.00** per day maximum, or individually by meal. Please note the allowance includes a gratuity to a maximum of 15%.
 \$ 15.00 for Breakfast
 \$ 20.00 for Lunch
 \$ 30.00 for Dinner

●2 **APPLICATION:**

The Northeast Michigan Community Mental Health Authority Board

●3 **DEFINITIONS:**

●4 **REFERENCES:**

●5 **FORMS AND EXHIBITS:**

GOVERNANCE PROCESS

(Manual Section)

BOARD SELF-EVALUATION

(Subject)

Board Approval of Policy
Last Revision Approved by Board:

November 7, 2002
August 8, 2019

●1 **POLICY:**

In cooperation with the Executive Director, the board will establish a set of measurable standards in which the function and process of the board and performance of the individual board members can be evaluated.

Under the leadership of the chairperson, on an annual basis, the board will conduct a self-evaluation in conjunction with the appraisal of the executive director.

The board will evaluate itself in the areas outlined in the Board Job Description policy.

The Chairperson will distribute a report to the board outlining the results of the self-evaluation.

The board will discuss and interpret the outcomes of the self-evaluation.

The board will formulate a work plan that will highlight specific goals and objectives for improvement of identified areas.

The board will monitor its adherence to its own Governance Process policies on a regular basis. Upon the choice of the board, any policy can be monitored at any time. However, at minimum, the board will both review the policies and monitor its own adherence to them, according to the perpetual calendar schedule.

●2 **APPLICATION:**

The Northeast Michigan Community Mental Health Authority Board

●3 **DEFINITIONS:**

●4 **REFERENCES:**

●5 **FORMS AND EXHIBITS:**

	Program	Consumers served July 2022 (7/1/22 - 7/31/22)	Consumers served in the Past Year (8/1/21 - 7/31/22)	Running Monthly Average(year) (8/1/21 - 7/31/22)
1	Access / Crisis / Prescreens	58 - Routine 0 - Emergent 0 - Urgent 60 - Crisis 65 - Prescreens	638 - Routine 3 - Emergent 5 - Urgent 635 - Crisis 759 - Prescreens	53 - Routine 0 - Emergent 1 - Urgent 54 - Crisis 60 -Prescreens
2	Doctors' Services	377	1387	411
3	Case Management			
	Older Adult (OAS)	127	290	106
	MI Adult	119	382	133
	MI ACT	26	60	27
	Home Based Children	20	48	26
	MI Children's Services	56	110	65
	IDD	197	435	177
4	Outpatient Counseling	90(21/69)	246	112
5	Hospital Prescreens	65	759	59
6	Private Hospital Admissions	24	214	17
7	State Hospital Admissions	0	3	0
8	Employment Services			
	IDD	56	86	48
	MI	19	50	18
	Touchstone Clubhouse	98	110	93
9	Peer Support	45	73	39
10	Community Living Support Services			
	IDD	99	149	88
	MI	59	107	56
11	CMH Operated Residential Services			
	IDD Only	55	63	56
12	Other Contracted Resid. Services			
	IDD	37	38	34
	MI	31	41	35
13	Total Unduplicated Served	974	2260	1013

County	Unduplicated Consumers Served Since August 2021
Alcona	244
Alpena	1361
Montmorency	275
Presque Isle	322
Other	45
No County Listed	13

NORTHEAST MICHIGAN COMMUNITY MENTAL HEALTH AUTHORITY

INTEROFFICE MEMORANDUM

TO: Board Members
FROM: Eric Lawson
SUBJECT: Self-Evaluation
DATE: July 29, 2022

During the August meeting, we traditionally review the policy self-evaluation that we have conducted during our monthly board meetings related to Board compliance with the policies. Included here are excerpts from the last year's minutes highlighting those discussions.

Policy # & Name	Evaluation Excerpt from Minutes	Board Meeting Minutes:
02-002 Governing Style	This policy requires self-evaluation. Roger Frye believes Board members are abiding by this policy. Pat Przeslawski noted this Board is a well-run board, while we may not always agree we are able to discuss openly. Bonnie Cornelius noted this helps to remind the Board they are the embodiment of the population in our counties.	04-14-22
02-003 Board Job Description	Board members reviewed the policy and did not recommend any revisions.	05-12-22
02-004 Chairperson's Role	Board members reviewed this policy. Eric Lawson requested input from Board members as to whether this policy is being followed. He requested an "s" be added to paragraph 3 on the second page. Another change would be to change township to county in that paragraph.	08-12-21
02-005 Board Committee Principles	Board members reviewed the policy and Pat Przeslawski noted the Board is following this policy well. She reports this identifies the fact that they cannot exercise authority over staff. She also noted it addresses interaction with the community.	02-10-22
02-006 Board Committee Structure	Board members reviewed the policy. Gary Nowak reported the Recipient Rights Committee is doing a fantastic job and has a good leader.	09-09-21
02-007 Annual Board Planning Cycle	There were no revisions or comments provided. Board members agreed they were adhering to the policy.	10-14-21

NORTHEAST MICHIGAN COMMUNITY MENTAL HEALTH AUTHORITY

Policy # & Name	Evaluation Excerpt from Minutes	Board Meeting Minutes:
02-007 Annual Board Planning Cycle (Cont'd)	Eric Lawson shared that two CARF consultants attended the policy workshop to discuss changes and they suggested adding language to comply with CARF standards. Eric discussed the proposed changes to the policies, and stated the biggest additions were regarding the Executive Director's evaluation, clarifying the process that already occurs.	06-09-22
02-008 Code of Conduct	This policy was reviewed by Board members. This requires Board members to attest to their adherence to this policy. Diane Hayka requested Board members to sign the form and return the forms to her.	03-10-22
02-009 Board Member Per Diem	<p>The per diem rates and mileage rates were discussed. The hotel rate was clarified. The mileage rate was increased effective July 1, 2021 to 55¢ from 50¢. This policy did not require any revisions.</p> <p>Eric Lawson stated the Board discussed raising their per diem to \$50 for a half day (four hours or less) and \$75 for a full day (over four hours). A meeting out of catchment area or a conference day will be a \$75 per diem. Bonnie Cornelius stated the per diem hasn't been changed in years and Eric stated the Board has taken care of employees, so it is appropriate for the Board to now consider their own compensation.</p>	<p>08-12-21</p> <p>06-09-22</p>
02-010 Public Hearing	The Board and present staff were in agreement the Board is abiding by this policy.	07-14-22
02-011 Board Member Recognition	Eric Lawson noted this policy was recently revised to address awards for 20+ years Board members. Board members had no recommended revisions for this policy.	12-09-21
02-012 Board Self-Evaluation	Pat Przeslawski noted this evaluation process is difficult to do. She reported having less committees in the governance process has worked well.	08-12-21
02-013 Cost of Governance	The budget numbers have been adjusted for the current fiscal year in this policy revision. Board members felt they were abiding by this policy.	04-14-22
02-014 Board Core Values	Board members reviewed the policy and did not recommend any revisions.	05-12-22
02-015 Board Member Orientation	Board members reviewed this policy. Geyer Balog reported he felt he was oriented very well. There are many elements to the policy. Eric Lawson noted he believes multiple board members have enough knowledge in Board Governance to train new board members when the need arises.	12-09-21
02-016 Disclosure of Ownership		06-09-22

NORTHEAST MICHIGAN COMMUNITY MENTAL HEALTH AUTHORITY

03-001 Executive Director Role	There were no revisions or recommendations for revisions. Eric Lawson requested input as to how the Board is operating as related to this policy. Terry Small indicated he believes Board members operate according to this policy.	01-13-22
03-002 Delegation to the Executive Director	Pat Przeslawski reported the Board update this policy just two years ago. The policy is clear and does not require further revision.	02-10-22
03-003 Executive Job Description	Board members believe this policy looks good. Board members indicated the Director’s performance on ends meeting objectives set and that the organization is operating within established ethics.	10-14-21
03-004 Monitoring Executive Performance	There were no suggested revisions to this policy. Lynne Fredlund reviewed suggested changes to the Executive Director Evaluation Form. The proposed changes do not change the process, but outline the process that is already in place. Board members spoke to concerns of too much added language, while others agreed it isn’t creating additional work, just outlining the work that is already being done. Eric Lawson stated the proposed changes should improve Board familiarity with the process, especially for new members. Lynne stated she would make the wording as concise as possible.	10-14-21 06-09-22
03-005 Chief Executive Officer Search Process	Board members reviewed the policy. Bob Adrian noted we may wish to discard this policy for the next 20 years. Pat Przeslawski indicated the Board adhered to this policy during their recent search.	09-09-21

In addition to the review above, the Board also completes an additional form as a self-evaluation tool which has been used by other Boards seeking CARF Accreditation under Board Governance. We have attached this form again for completion. We believe this was a useful tool in achieving our accreditation under Board Governance. Please complete this form and return it to Rebekah Duhaime. She will compile the results and present them at the September meeting.

Attachment

**NEMCMHA BOARD SELF-EVALUATION
2022**

	ITEM	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
1	There is sufficient meeting time devoted to discussion of NeMCMHA performance and review of strategic issues.				
2	Board and Committee meetings are productive.				
3	The free and open exchange of views is encouraged.				
4	The Board provides clearly written expectations and qualifications for the Executive Director position.				
5	Board members are involved and interested in the Board's work.				
6	The Board of Directors has a written process for handling urgent matters between meetings.				
7	Board members understand the Agency's mission and its programs.				
8	Board members participate in the organization in ways other than attending monthly meetings.				
9	The Board has defined its role, responsibilities, and the scope of its authority.				
10	Board members understand the financial structure of the organization and their fiduciary responsibilities.				
11	New Board members are oriented to NeMCMHA's mission, vision, bylaws, policies, Board structure, and their roles and responsibilities as members.				
12	The Board is familiar with NeMCMHA programs and kept informed of critical changes as they occur.				
13	Board members have complete information about financial issues which pertain to Board decisions and responsibilities.				
14	Board members are appropriately involved in the strategic planning of the organization.				
15	NeMCMHA effectively attempts to address identified gaps and deficits in service.				
16	The mission/vision reflects issues important to our service populations.				
17	The Board has identified, prioritized, and scheduled those issues that it believes should be discussed and reviewed by the Board on a regular basis.				
18	I have sufficient opportunity for input into policy development and decision-making.				
19	I am an active participant in committees and meetings.				
20	I understand NeMCMHA's financial position, funding sources, and resources.				
21	I understand the mission and values of NeMCMHA.				

A. WHAT ISSUES HAVE MOST OCCUPIED THE BOARD'S TIME AND ATTENTION DURING THE PAST YEAR?

B. WHAT IS THE MOST IMPORTANT PRIORITY FOR NEMCMHA TO ADDRESS OVER THE NEXT 12 MONTHS?

C. IN WHAT WAYS SHOULD THE BOARD'S ROLE BE EXPANDED OR REDUCED?

D. WHAT WERE ONE OR TWO SUCCESSES DURING THE PAST YEAR FOR WHICH THE BOARD TAKES SOME SATISFACTION?

E. WHAT OPPORTUNITIES FOR IMPROVEMENT DO YOU SEE IN THE BOARD'S ORGANIZATION OR PERFORMANCE?

F. HOW DOES THIS BOARD COMPARE TO OTHER BOARDS ON WHICH YOU SERVE?

OTHER COMMENTS:

NORTHEAST MICHIGAN COMMUNITY MENTAL HEALTH AUTHORITY

Executive Director Evaluation

Employee Name: Nena Sork
Title: Executive Director

Evaluation Period: From July 2021 to August 2022

The evaluation process consists of a review of the monitoring reports that have been made over the course of the year to assure compliance. The monitoring reports are reviewed on a revolving schedule as identified on the perpetual calendar. Monitoring reports include information on overall performance versus target, and personal performance versus target. In July, the Board focuses on reviewing all monitoring reports provided during the preceding year in preparation for delivery of the evaluation at the August meeting. Board members seeking to review any previously provided monitoring reports may request assistance from the Executive Secretary.

Board members take action at their August meeting after discussion of compliance in meeting the monitoring schedule. Discussion includes the timeliness of the presentation according to schedule and the acceptable and reasonable interpretation of the monitoring reports. This also includes the Executive Director's presentation of information over the course of the year relating to meetings, committees, professional development and continued advancement for the organization, accomplishments and opportunities over the past 12 months, which the Board is provided monthly under the Director's Report agenda item.

By consensus at the August 11, 2022 Board meeting, the Director's performance was positive for FY 21-22.

Eric Lawson, Chair

Northeast Michigan Community Mental Health Authority

To: Board Members

From: Margie Hale-Manley

Date: 8/2/2022

Subject: Endowment Fund Grant Awards

In continuing to provide notification to the Board for usage of the spendable dollars available in the Endowment Fund created through The Community Foundation of Northeast Michigan, this memo serves as an update of the grant awards since 2-1-22.

As you may recall, a committee was established to review applications for grants and approve awards while maintaining funding to assure future needs can be met. The funds awarded are not covered by other resources.

1. \$249.74 –Display and cash boxes, liners, etc. to update and expand a person's micro-enterprise

SEPTEMBER AGENDA ITEMS

Policy Review

01-001 General Executive Constraint
01-009 Compensation & Benefits

Policy Review & Self-Evaluation

02-006 Board Committee Structure
03-005 Chief Executive Officer
Search Process

Monitoring Reports

01-004 Budgeting
01-009 Compensation & Benefits [if salary survey is received]

Review

Annual Planning Cycle – Set Perpetual Calendar
Review Linkage Activities and establish schedule

Ownership Linkage

Public Hearing Budget

Educational Session

Self-Evaluation

Finalize Annual Self-Evaluation