

**NORTHEAST  
MICHIGAN  
COMMUNITY  
MENTAL HEALTH  
AUTHORITY**



*NeMCMHA Board Meeting  
Thursday, January 12 at 3:00 p.m.*

*Recipient Rights Committee Meeting  
Wednesday, January 25 at 3:00 p.m.*

Board meetings are held in the Board Room at 400 Johnson Street in Alpena. Recipient Rights Committee meetings are held in the Administrative Conference Room.

**NORTHEAST MICHIGAN COMMUNITY MENTAL HEALTH AUTHORITY BOARD**  
**BOARD MEETING**  
**January 12, 2023 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 – 4)**
- VIII. Educational Session – Cultural Understanding and Advancement Committee .....(Verbal)**
- IX. January Monitoring Reports**
  - 1. Budgeting 01-004 ..... **(Page 5)**
  - 2. Emergency Executive Succession 01-006 ..... **(Page 6)**
- X. Board Policies Review and Self-Evaluation**
  - 1. Emergency Executive Succession 01-006 [Review] ..... **(Page 7)**
  - 2. Executive Director Role 03-001 ..... [Review & Self-Evaluation]..... **(Page 8)**
- XI. Operations Report ..... (Handout)**
- XII. Chair’s Report**
  - 1. CMHA PAC .....**(Verbal)**
- XIII. Executive Director’s Report .....(Verbal)**
- XIV. Information and/or Comments from the Public**
- XV. Information and/or Comments for the Good of the Organization**
- XVI. Next Meeting – Thursday, February 9 at 3:00 p.m.**
  - 1. Set February Agenda ..... **(Page 9)**
- XVII. Meeting Evaluation ..... (Verbal)**

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

**Northeast Michigan Community Mental Health Authority (NeMCMHA) Board  
Board Meeting  
December 8, 2022**

**I. Call to Order**

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

**II. Roll Call and Determination of a Quorum**

Present: Robert Adrian, Les Buza, Bonnie Cornelius, Lynnette Grzeskowiak, Charlotte Helman, Terry Larson, Eric Lawson, Lloyd Peltier, Pat Przeslawski, Terry Small

Absent: Judy Jones (Excused), Gary Nowak

Staff & Guests: Lisa Anderson, Carolyn Bruning, Connie Cadarette, Mary Crittenden, Erin Fletcher, Brooke Paczkowski, Larry Patterson, Abbey Podbielski, Nena Sork, Jen Walburn

**III. Pledge of Allegiance**

Attendees recited the Pledge of Allegiance as a group.

**IV. Appointment of Evaluator**

Terry Larson was appointed as evaluator for this meeting.

**V. Acknowledgement of Conflict of Interest**

No conflicts of interest were acknowledged.

**VI. Information and/or Comments from the Public**

Bonnie Cornelius wished everyone a Merry Christmas.

**VII. Approval of Minutes**

*Moved by Les Buza, supported by Robert Adrian, to approve the minutes of the November 10, 2022 meeting.* Motion carried.

**VIII. Consent Agenda**

**1. Partners in Prevention**

The Partners in Prevention contract was provided to the Board as a handout.

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

**IX. December Monitoring Reports**

**1. Budgeting 01-004**

Connie Cadarette stated they have completed a soft close of FY22. She reported on the Statement of Revenue, Expense, and Change in Net Position as of October 31, 2022. Revenues are looking good and the Agency's projection was close. The change in net position is \$6,338 to the good. Medicaid is underspent \$52,473, Healthy Michigan is underspent \$66,558, and general funds are underspent \$46,971.

Larry Patterson reported on expenses and reviewed line items with negative variances. Most variances are due to timing issues, and should clear up in a few months. Larry stated there will be a negative variance on the fiduciary expense all year as there weren't any funds allocated to the line item. With 8.33% of the year elapsed, the Agency is at 8% of expenditures.

**2. Financial Condition 01-005**

Connie stated the financial condition will not be available as it won't be accurate due to FY22 not being fully closed yet.

**3. Grants or Contracts 01-001**

Nena stated the Agency anticipates a lot of spenddowns coming back into play once the public health emergency ends. The Agency will get a 90-day notice when the change occurs. Nena stated this will give the

Agency extra Medicaid dollars for at least the first six months of FY23. The Board reviewed the procedure for contracts over \$25,000, and suggested a revision to the interpretation of #6 on the monitoring report. The Board will approve the monitoring report with the caveat that the interpretation of #6 be updated to match the policy.

*Moved by Robert Adrian, supported by Bonnie Cornelius, to approve the December Monitoring Reports with the above correction to the interpretation on item #6 of the Grants or Contracts monitoring report.* Motion carried.

## **X. Board Policies Review**

### **1. Grants or Contracts 01-01**

Eric reviewed the suggested revisions to the policy with the Board. The suggested revisions reflect the actual procedures the Board has been following. Robert asked if there is a process in place for grant review, and Nena stated the Agency doesn't typically write and apply for grants.

### **2. Board Member Recognition 02-011**

There were no suggested revisions on this policy.

### **3. Board Member Orientation 02-015**

Eric pointed the Board toward the revisions on this policy.

*Moved by Pat Przeslawski, supported by Les Buza, to approve the revisions to the Grants or Contracts and Board Member Orientation Policies.* Motion carried.

## **XI. Linkage Reports**

### **1. NMRE – December 7 Board Meeting**

Eric brought two handouts for the Board. One was regarding what PIHPs do and the other was the NMRE member newsletter. Eric stated the Network Adequacy Plan was reviewed at the NMRE Board meeting. The plan details if the NMRE has the necessary resources and staffing to meet the MDHHS requirements for services within their area of coverage. Terry Larson stated many people are becoming frustrated, as the problems keep being identified, but nothing is being done. He also reported there is a significant amount of liquor tax funding available for each county that is sitting unused. The funds have to be used for treatment and prevention of substance abuse. Nena stated the Agency can't apply for the money as it isn't a licensed SUD provider. The NMRE reported changes to PI, which Nena said she is not concerned about, as the Agency routinely excels with their PI. The narrative used to count for 40%, but has now been dropped to 25%. Mary Crittenden pays close attention to PI and corrects issues quickly when they fall off track.

### **2. Advisory Council Update – December 5 Meeting**

Nena stated it was a short meeting, and they will be doing the video presentations at the next meeting. Currently, the NMRE doesn't have a committee as they don't have enough members. Advisory Committee discussed how to recruit more members so the committee can get up and running again.

## **XII. Operations Report**

Mary reported on November operations numbers. There 41 routine requests for services and one urgent request. Employment Services served 57 individuals for I/DD and 23 for MI. There were 91 contacts for Touchstone Clubhouse. The total number of unduplicated individuals served in November was 1,032.

## **XIII. Chair's Report**

### **1. Bylaws Review**

Eric stated Rebekah Duhaime brought up the question of pronoun usage in accordance with APA style. Eric prefers usage of the Chicago Manual of Style, which does not endorse usage of the singular "they." Eric asked the Board if they would like to change "he/she" to "they," leave it as is, or make it ungendered. The Board was in agreement to leave the pronouns as they currently are.

### **2. Educational Sessions**

Eric asked the Board what they would like to hear about for educational sessions in the coming year. Pat

would like to hear about Clubhouse again. Terry Larson asked about doing a presentation for a presentation on the liquor tax program. Nena stated the Agency can't use the liquor tax money unless Catholic Human Services receives the funds and funnels it to the Agency. NeMCMHA does serve those with a dual diagnosis of mental illness and substance use disorder. Catholic Human Services, Sunrise Center, and possibly Alcona Health Center can use the funds locally. Eric asked Board members to let himself or Nena know if they come up with any ideas for educational sessions.

#### **XIV. Executive Director's Report**

##### **1. Executive Director's Update**

Nena provided the Board with an overview of her activities for the last month. She is the Chair of the CMHA Member Services Committee, and attended its meeting in Lansing during the week of November 14, as well as attending the CMHS Contract and Finance meeting the NMRE Operations Committee meeting. For the week of November 21, she continued to work on job descriptions with HR. They have already revised over 100 job descriptions, and are getting closer to the end of the project. Nena stated Teresa Elowsky, Self-Determination Supervisor, would be retiring the following week, and she has been employed with the Agency for over 42 years, so she spent time working on that transition. During the week of November 28, Senate bills 597 and 598 were voted down. Nena met with ACC to continue working on the three credit course available to NeMCMHA staff. Management Team is considering offering scholarships to cover the credit hour costs. ACC and WMU will be working together on BSW and MSW degrees.

The Agency is working with WBKB on two commercials. Nena wanted to get them out around Thanksgiving, but there are still some issues to work out. She also participated in the Nursing Home Monitoring meeting and the CMHS Board of Directors meeting. During the current week, she attended the NMORC Prevention/Workforce meeting, Advisory Council, and the NMRE Board meeting. Nena reported that NeMCMHA was voted the number one mental health provider in the Sunrise Side's Best for 2022. The search for an office in Alcona County continues, and Nena received notice of a building for rent in Harrisville that used to be a medical clinic. She will be going down to look at the building, as there are concerns about parking availability.

##### **2. Foster Swift**

Nena provided the Board with a handout on Foster, Swift, Collins & Smith, P.C. The Agency's retirement company recommended the Agency work with an attorney to find a new TPA, as the previous retirement fund manager passed away. The third party administrator would help keep the retirement programs in IRS compliance. Signing the engagement letter will allow Foster Swift to work on projects for the Agency.

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

##### **3. QI Council Update**

Eric pointed Board members toward the QI Council minutes in their packets that are from the August QI meeting. There were no questions.

#### **XV. Information and/or Comments from the Public**

There were no additional comments.

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

Nena drew the Board's attention to the handout they received on value of CMHA. She stated the Board has typically had 100% participation in the PAC in the past, and hopes to get back to that point. Nena would like to have a conversation with the Board at the next meeting.

#### **XVII. Next Meeting**

The next regularly scheduled meeting of the Northeast Michigan Community Mental Health Authority Board will be held Thursday, January 12, 2022 at 3:00 p.m.

**1. Set December Agenda**

The proposed January agenda items were reviewed.

**2. Meeting Evaluation**

Terry Larson stated the meeting started on time and Board members absolutely came out of the meeting with new understanding. The majority of the Board participated and Terry stated the Agency has a great staff and the Board is great to be a part of. Terry thinks it is an honor to serve on this Board.

**XVIII. Adjournment**

*Moved by Les Buza, supported by Pat Przeslawski, to adjourn the meeting.* Motion carried. This meeting adjourned at 4:13 p.m.

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Bonnie Cornelius, Secretary

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Eric Lawson, Chair

Rebekah Duhaime  
Recorder

**Northeast Michigan Community Mental Health Authority**  
**Statement of Revenue and Expense and Change in Net Position (by line item)**  
**For the Second Month Ending November 30, 2022**  
**16.67% of year elapsed**

	Actual November Year to Date	Budget November Year to Date	Variance November Year to Date	Budget FY23	% of Budget Earned or Used
<b>Revenue</b>					
1 State Grants	23,149.98	53,425.68	\$ (30,276)	320,554.08	7.2%
2 Grants from Local Units	44,003.67	44,439.62	(436)	266,637.66	16.5%
3 NMRE Incentive Revenue	0.00	45,833.34	(45,833)	275,000.04	0.0%
4 Interest Income	1,089.50	83.34	1,006	500.04	217.9%
5 Medicaid Revenue	4,927,825.54	5,220,663.02	(292,837)	31,323,977.94	15.7%
6 General Fund Revenue	74,589.00	200,464.50	(125,876)	1,202,787.00	6.2%
7 Healthy Michigan Revenue	288,652.32	442,142.34	(153,490)	2,652,854.04	10.9%
8 Contract Revenue Blue Horizons	37,168.72	74,063.34	(36,895)	444,380.04	8.4%
9 3rd Party Revenue	92,951.19	59,453.68	33,498	356,722.08	26.1%
10 Behavior Health Home Revenue	24,758.10	15,302.34	9,456	91,814.04	27.0%
11 Food Stamp Revenue	19,773.42	21,433.36	(1,660)	128,600.16	15.4%
12 SSI/SSA Revenue	82,463.57	83,565.32	(1,102)	501,391.92	16.4%
13 Revenue Fiduciary	54,569.88	0.00	54,570	0.00	0.0%
14 Other Revenue	8,572.40	5,242.16	3,330	31,452.96	27.3%
15 <b>Total Revenue</b>	<b>5,679,567</b>	<b>6,266,112</b>	<b>(586,545)</b>	<b>37,596,672</b>	<b>15.1%</b>
<b>Expense</b>					
16 Salaries	2,501,005.77	2,557,240.44	56,235	15,343,442.54	16.3%
17 Social Security Tax	105,293.69	119,401.06	14,107	716,406.36	14.7%
18 Self Insured Benefits	405,736.58	565,523.22	159,787	3,393,139.32	12.0%
19 Life and Disability Insurances	37,363.98	41,650.36	4,286	249,902.16	15.0%
20 Pension	219,131.85	215,650.34	(3,482)	1,293,902.04	16.9%
21 Unemployment & Workers Comp.	27,448.84	27,842.18	393	167,053.08	16.4%
22 Office Supplies & Postage	9,442.89	8,443.26	(1,000)	50,659.56	18.6%
23 Staff Recruiting & Development	39,858.49	40,952.40	1,094	245,714.40	16.2%
24 Community Relations/Education	2,640.65	4,849.50	2,209	29,097.00	9.1%
25 Employee Relations/Wellness	7,570.70	18,666.66	11,096	111,999.96	6.8%
26 Program Supplies	60,536.23	66,210.60	5,674	397,263.60	15.2%
27 Contract Inpatient	347,340.00	267,158.00	(80,182)	1,602,948.00	21.7%
28 Contract Transportation	4,906.46	5,958.82	1,052	35,752.92	13.7%
29 Contract Residential	611,513.48	900,479.50	288,966	5,402,877.00	11.3%
30 Contract Employees & Services	939,282.77	996,373.12	57,090	5,978,238.72	15.7%
31 Telephone & Connectivity	46,072.47	33,437.50	(12,635)	200,625.00	23.0%
32 Staff Meals & Lodging	3,954.08	4,860.02	906	29,160.12	13.6%
33 Mileage and Gasoline	55,406.46	61,396.84	5,990	368,381.04	15.0%
34 Board Travel/Education	3,056.35	2,277.34	(779)	13,664.04	22.4%
35 Professional Fees	19,263.25	13,484.86	(5,778)	80,909.16	23.8%
36 Property & Liability Insurance	21,582.93	22,392.68	810	134,356.08	16.1%
37 Utilities	29,025.59	32,191.68	3,166	193,150.08	15.0%
38 Maintenance	45,913.72	37,861.68	(8,052)	227,170.08	20.2%
39 Interest Expense Leased Assets	2,397.04	2,887.62	491	17,325.72	13.8%
40 Rent	2,423.51	2,967.00	543	17,802.00	13.6%
41 Food	25,537.78	25,343.50	(194)	152,061.00	16.8%
42 Capital Equipment	2,741.46	23,047.88	20,306	138,287.30	2.0%
43 Client Equipment	1,940.53	3,323.00	1,382	19,938.00	9.7%
44 Miscellaneous Expense	8,371.86	27,556.20	19,184	165,337.16	5.1%
45 Expense Fiduciary	60,851.41		(60,851)	0.00	0.0%
46 Depreciation & Amortization Expense	115,002.24	136,684.76	21,683	820,108.56	14.0%
47 <b>Total Expense</b>	<b>5,762,613</b>	<b>6,266,112</b>	<b>503,499</b>	<b>37,596,672</b>	<b>15.3%</b>
48 <b>Change in Net Position</b>	<b>\$ (83,046)</b>	<b>\$ 0</b>	<b>\$ (83,046)</b>	<b>\$ -</b>	<b>-0.2%</b>
48 Contract settlement items included above:					
49 Medicaid Funds (Over) / Under Spent	\$ 271,158				
50 Healthy Michigan Funds (Over) / Under Spent	124,678				
51 <b>Total NMRE (Over) / Under Spent</b>	<b>\$ 395,836</b>				
52 General Funds to Carry Forward to FY23	\$ 7,268				
53 General Funds Lapsing to MDHHS	118,607				
54 <b>General Funds (Over) / Under Spent</b>	<b>\$ 125,875</b>				

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

Executive Limitations  
Emergency Executive Succession  
Annual: January 2023

**POLICY STATEMENT:**

In order to protect the Board from sudden loss of Executive Director services, the Executive Director may not have less than one other executive familiar with Board and Executive Director issues and processes.

- **Interpretation**

I interpret the policy to require plans to address two possible scenarios: 1) the temporary assumption of the Executive Director’s responsibilities during, for example, a brief period of illness, and 2) the assumption of these responsibilities if the Executive Director’s position were to be suddenly vacated.

- **Status**

“Scenario 1” In the event of a temporary absence there should not be a significant problem with the current administrative staffing available at the Agency. The Leadership Teams [Management and Clinical Leadership], our program managers, and clinical staff are competent and capable of managing services on a day-to-day basis. The Chief Operations Officer would be the designee for any necessary signatures to operate the day-to-day business needs of the organization.

“Scenario 2” Mary Crittenden (Chief Operations Officer), with assistance of the Leadership Teams [Management and Clinical Leadership] and Erin Fletcher (Clinical Director), is well qualified to step in as interim director while the Board considers its options. With many long-standing members of the Administrative Team, I am confident operations would not be adversely impacted under Ms. Crittenden’s guidance.

**SUMMARY:**

We are fortunate to have a strong contingent of management staff members, many of whom have been employed for a lengthy period of time, on whom the Board will be able to rely if need be.

**Board Review/Comments**

Reasonableness Test: Is the interpretation by the Executive Director reasonable?

Data Test: Is the data provided by the Executive Director both relevant and compelling?

Fine-tuning the Policy: Does this report suggest further study and refinement of the policy?

Other Implications: Does this report suggest the other policies may be necessary?



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

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EXECUTIVE LIMITATIONS

(Manual Section)

**EMERGENCY EXECUTIVE SUCCESSION**

(Subject)

Board Approval of Policy  
Last Revision of Policy Approved

August 8, 2002  
January 9, 2020

●1 **POLICY:**

In order to protect the Board from sudden loss of Executive Director services, the Executive Director may not have less than one other executive familiar with Board and Executive Director issues and processes.

●2 **APPLICATION:**

The Northeast Michigan Community Mental Health Authority Board

●3 **DEFINITIONS:**

●4 **REFERENCES:**

●5 **FORMS AND EXHIBITS:**

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

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**BOARD STAFF RELATIONSHIP**

(Manual Section)

**EXECUTIVE DIRECTOR ROLE**

(Subject)

Board Approval of Policy  
Last Revision to Policy Approved by Board:

August 8, 2002  
January 09, 2020

●1 **POLICY:**

The Executive Director is accountable to the Board acting as a body. The Board will instruct the Executive Director through written policies, delegating to him or her interpretation and implementation of those policies.

●2 **APPLICATION:**

The Northeast Michigan Community Mental Health Authority Board

●3 **DEFINITIONS:**

●4 **REFERENCES:**

●5 **FORMS AND EXHIBITS:**

	Program	Individuals served December 2022 (12/1/22 - 12/31/22)	Individuals served in the Past Year (1/1/22 - 12/31/22)	Running Monthly Average(year) (1/1/22 - 12/31/22)
1	Access Routine Emergent Urgent	60	640	53
		0	5	0
		1	3	0
	Crisis	52	523	44
	Prescreens	66	795	62
2	Doctors' Services	444	1479	442
3	Case Management			
	Older Adult (OAS)	113	318	115
	MI Adult	112	383	126
	MI ACT	27	61	27
	Home Based Children	29	55	22
	MI Children's Services	78	146	54
	IDD	156	401	176
4	Outpatient Counseling	130(26/104)	266	107
5	Hospital Prescreens	66	795	62
6	Private Hospital Admissions	15	242	19
7	State Hospital Admissions	0	1	0
8	Employment Services			
	IDD	56	87	53
	MI	21	59	18
	Touchstone Clubhouse	92	112	95
9	Peer Support	48	77	43
10	Community Living Support Services			
	IDD	85	151	94
	MI	60	113	60
11	CMH Operated Residential Services			
	IDD Only	53	66	56
12	Other Contracted Resid. Services			
	IDD	34	38	36
	MI	33	42	34
13	Total Unduplicated Served	1035	2302	1029

County	Unduplicated Individuals Served Since January 2022
Alcona	243
Alpena	1370
Montmorency	279
Presque Isle	347
Other	60
No County Listed	3

## **FEBRUARY AGENDA ITEMS**

### **Policy Review**

Asset Protection 01-007

### **Policy Review & Self-Evaluation**

Board Committee Principles 02-005

Delegation to the Executive Director 03-002

### **Monitoring Reports**

Treatment of Individuals Served 01-002 (Recipient Rights Report)

Staff Treatment 01-003 (Turnover Report)

Budgeting 01-004 (Finance Report)

### **Linkage Reports**

NMRE Board

Advisory Council

### **Educational Session**