

FEBRUARY BOARD MEETING

THURSDAY, FEBRUARY 13, 2025



3:00 PM

400 JOHNSON STREET ALPENA, MICHIGAN 49707

NORTHEAST MICHIGAN COMMUNITY MENTAL HEALTH AUTHORITY BOARD Meeting Agenda | Thursday, February 13, 2025 | 3:00 p.m.

| I. | Call to Order | MISSION STATEMENT |
|---------|---|--|
| II. | Roll call & Determination of a Quorum | To provide comprehensive services and supports |
| 111. | Note that & Determination of a Quorum | that enable people to live and work independently. |
| III. | Pledge of Allegiance | independently. |
| IV. | Appointment of Evaluator | |
| V. | Acknowledgement of Conflict of Interest | |
| VI. | Information and/or Comments from the Public | |
| VII. | Approval of Minutes | (Pages 1 – 3) |
| VIII. | February Monitoring Reports | |
| | 1. Budgeting 01-004 | (Page 4) |
| | 2. Treatment of Individuals Served 01-002 | (Pages 5 – 9) |
| | 3. Staff Treatment 01-003 | (Page 10) |
| IX. | Board Policies Review and Self-Evaluation | |
| | 1. Asset Protection 01-007 (Review) | (Pages 11 – 12) |
| | 2. Board Committee Principles 02-005 (Review & S | , - |
| | 3. Delegation to the Executive Director 03-002 (Rev | |
| Х. | Linkage Reports | |
| | 1. NMRE Board | (Verbal) |
| | 2. Advisory Council | ` ' |
| | | |
| XI. | Operations Report | (Handout) |
| XII. | Board Chair's Report | |
| | Recipient Rights Committee | (Verbal) |
| | 2. CARF | (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 | ne Organization |
| XVI. | Next NeMCMHA Board Meeting – Thursday, Marc | sh 13 at 3:00 p.m. |
| /\ • I• | 1. Proposed March Agenda Items | · |
| | , | , , |
| XVII. | Meeting Evaluation | (Verbal) |
| | | |

XVIII. Adjournment

Northeast Michigan Community Mental Health Authority Board Board Meeting – January 9, 2025

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: Bob Adrian, Les Buza, Bonnie Cornelius, Lynnette Grzeskowiak, Charlotte Helman, Judy

Jones, Dana Labar, Eric Lawson, Gary Nowak, Lloyd Peltier, Terry Small

Absent: Kara Bauer LeMonds (Excused)

Staff & Guests: Jessica Barbeau, Connie Cadarette (Teams), Mary Crittenden, Erin Fletcher, Brooke

Paczkowski, Nena Sork

III. Pledge of Allegiance

Attendees recited the Pledge of Allegiance as a group.

IV. Appointment of Evaluator

Lynnette Grzeskowiak was appointed as evaluator of the meeting.

V. <u>Acknowledgement of Conflict of Interest</u>

No conflicts of interest were acknowledged.

VI. <u>Information and/or Comments from the Public</u>

There were no comments from the public.

VII. Approval of Minutes

Moved by Bonnie Cornelius, supported by Lloyd Peltier, to approve the minutes of the December Board meeting, as presented. Motion carried.

VIII. Consent Agenda

Moved by Lloyd Peltier, supported by Lynnette Grzeskowiak, to approve the January Consent Agenda. Roll Call: Ayes: Bob Adrian, Les Buza, Bonnie Cornelius, Lynnette Grzeskowiak, Charlotte Helman, Judy Jones, Dana Labar, Eric Lawson, Gary Nowak, Lloyd Peltier, Terry Small; Nays: None; Absent: Kara Bauer LeMonds. Abstain: None. Motion carried.

IX. Educational Session: Supported Independence Program (SIP) with Jessica Barbeau

Jessica Barbeau, SIP Supervisor, Community Living Services Coordinator, provided the Board with an overview of the SIP program, and answered Board member questions. Board members provided positive feedback regarding the information presented.

X. <u>January Monitoring Reports</u>

1.Budgeting 01-004

Connie Cadarette presented the Budgeting Monitoring Report to the Board via Microsoft Teams. The current total overspent amount of Medicaid and Healthy Michigan combined is \$130,527. General Funds are currently overspent by \$91,001. The Change in Net Position is at negative \$45,051.

2. Emergency Executive Succession 01-006

Board members reviewed the monitoring report and did not have any questions.

Moved by Lloyd Peltier, supported by Lester Buza, to approve the January Monitoring Reports. Motion carried.

XI. Board Policies Review and Self-Evaluation

1. Emergency Executive Succession 01-006

Board members reviewed the suggested revision to the policy, which would revise "Executive Director issues" to "Executive Director duties."

Moved by Bob Adrian, supported by Terry Small, to approve the revision to the Emergency Executive Succession Policy. Motion carried.

2. Executive Director Role 03-001

The policy was reviewed, and no revisions were deemed necessary and Board members felt they were following the policy as written.

XII. Operations Report

Mary Crittenden reported on operations for the month of December. There were 53 prescreens, 17 of which were admitted to private hospitals (7 children and 10 adults). Employment services served 46 individuals with I/DD and 42 individuals with MI. Peer Support Services served 50 individuals, 5 children and 45 adults. Overall, the Agency served 1,003 unduplicated individuals in December. Mary also informed the Board they may see a reduction in Physician Services and Outpatient Therapy due to two staff members being out on maternity leave.

XIII. Board Chair's Report

1. Review Revisions to Board Bylaws

Board members reviewed the suggested revisions to Section 6. Materials to be Furnished to Board Members. It was revised to add, "Board members may receive materials physically via postal mail or electronically via email. Each Board member may choose their preferred method for receiving Board materials."

Moved by Lester Buza, supported by Charlotte Helman, to approve the revisions to the Board bylaws. Motion carried.

XIV. Executive Director's Report

Nena reviewed her meetings and commitments for the last month. She reviewed with the Board a letter received from Grand Valley State University regarding Jeff Wirgau's, P.A., and the wonderful job he does with many P.A. intern students. Board members were appreciative of Jeff's dedication.

XV. Information and/or Comments from the Public

None were presented.

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

None were presented.

XVII. Next Meeting

The next meeting of the NeMCMHA Board is scheduled for Thursday, February 13 at 3:00 p.m.

1. February Agenda Items

The proposed February agenda items were reviewed.

XVIII. Meeting Evaluation

Lynnette feels everyone comes prepared each month and all Board members are given plenty of opportunity to participate. Board members receive appropriate materials well in advance and are properly notified of changes/updates on materials. She found Jess's SIP presentation very interesting and informative, and she

| XIX. | Moved by Lloyd Peltier, supported by Lynnette Grze | eskowiak, to adjourn the meeting. Motion carried. This |
|------|--|--|
| | meeting adjourned at 4:00 p.m. | |
| | | Bonnie Cornelius, Secretary |
| | | Eric Lawson, Chair |

is impressed with the dedication of the staff.

Northeast Michigan Community Mental Health Authority Statement of Revenue and Expense and Change in Net Position (by line item) For the Third Month Ending December 31, 2024

25% of year elapsed

| | | Actual Budget December December Year to Date Year to Date | | Variance December Year to Date | Budget FY25 | % of Budget Earned or Used |
|----------|---|---|---------------------------|--------------------------------------|----------------------------|----------------------------------|
| | Revenue | | | | | |
| 1 | State Grants | 53,529.09 | 67,838.01 | \$ (14,309) | 271,352.00 | 19.7% |
| 2 | Grants from Local Units | 66,659.50 | 66,659.49 | 0 | 266,638.00 | 25.0% |
| 3 | NMRE Incentive Revenue | - | 82,500.00 | (82,500) | 330,000.00 | 0.0% |
| 4 | Interest Income | 872.19 | 1,500.00 | (628) | 6,000.00 | 14.5% |
| 5 | Medicaid Revenue | 8,186,534.00 | 8,219,283.51 | (32,750) | 32,877,134.00 | 24.9% |
| 6 | General Fund Revenue | 300,696.00 | 300,696.69 | (1) | 1,202,787.00 | 25.0% |
| 7 | Healthy Michigan Revenue | 518,400.81 | 356,839.26 | 161,562 | 1,427,357.00 | 36.3% |
| 8 | 3rd Party Revenue | 111,446.89 | 141,961.26 | (30,514) | 567,845.00 | 19.6% |
| 9 | Behavior Health Home Revenue | 98,622.57 | 77,431.26 | 21,191 | 309,725.00 | 31.8% |
| 10 | Food Stamp Revenue | 24,152.93 | 23,706.27 | 447 | 94,825.00 | 25.5% |
| 11 | SSI/SSA Revenue | 161,540.30 | 167,983.50 | (6,443) | 671,934.00 | 24.0% |
| 12 13 | Revenue Fiduciary | 66,886.92 | 0.00 | 66,887 | 0.00 | 0.0% |
| 14 | Other Revenue Total Revenue | 23,991.35 | 12,700.50 | 11,291 | 50,802.00 | 47.2% |
| 14 | | 9,613,333 | 9,519,100 | 94,233 | 38,076,399 | 25.2% |
| 4.5 | Expense | 4 000 005 00 | 0.000.440.00 | (400,000) | 45 045 070 00 | 00.00/ |
| | Salaries | 4,023,285.30 | 3,836,418.96 | (186,866) | 15,345,676.00 | 26.2% |
| 16 | Social Security Tax | 166,993.98 | 159,689.49 | (7,304) | 638,758.00 | 26.1% |
| 17 | Self Insured Benefits | 606,312.39 | 679,168.08 | 72,856 | 2,716,673.00 | 22.3% |
| 18 | Life and Disability Insurances | 63,902.40 | 67,389.96 | 3,488 | 269,560.00 | 23.7% |
| 19 | Pension | 348,824.71 | 357,573.48 | 8,749 | 1,430,294.00 | 24.4% 23.4% |
| 20 | Unemployment & Workers Comp. | 30,100.74 | 32,185.23 | 2,084 | 128,741.00 | |
| 21 | Office Supplies & Postage | 9,185.87 | 11,167.71 | 1,982 | 44,671.00 | 20.6% 9.0% |
| 22 | Staff Recruiting & Development | 11,827.60 | 32,817.66 | 20,990 | 131,268.00 | |
| 23 24 | Community Relations/Education | 12,494.48 21,343.59 | 16,718.49 27,709.50 | 4,224 6,366 | 66,874.00 | 18.7% 19.3% |
| 25 | Employee Relations/Wellness | , | 139,799.97 | 11,654 | 110,838.00 | 22.9% |
| 26 | Program Supplies Contract Inpatient | 128,145.49 | · | 23,071 | 559,200.00 | 23.6% |
| 27 | Contract Transportation | 394,128.63 55.50 | 417,199.26 3,506.25 | 3,451 | 1,668,797.00 14,025.00 | 0.4% |
| 28 | Contract Transportation Contract Residential | 1,361,756.99 | 1,283,967.75 | · | | 26.5% |
| 29 | Local Match Drawdown NMRE | | | (77,789) | 5,135,871.00 | 25.0% |
| 30 | Contract Employees & Services | 24,642.00 1,805,385.35 | 24,642.00 1,795,578.99 | (0.906) | 98,568.00 | 25.1% |
| 31 | Telephone & Connectivity | 68,884.89 | 55,186.47 | (9,806) (13,698) | 7,182,316.00 220,746.00 | 31.2% |
| 32 | Staff Meals & Lodging | 9,805.99 | 6,718.02 | (3,088) | 26,872.00 | 36.5% |
| 33 | Mileage and Gasoline | 113,419.25 | 109,274.91 | (4,144) | 437,100.00 | 25.9% |
| 34 | Board Travel/Education | 1,494.41 | 3,414.99 | 1,921 | 13,660.00 | 10.9% |
| 35 | Professional Fees | 6,629.99 | 8,512.47 | 1,882 | 34,050.00 | 19.5% |
| 36 | Property & Liability Insurance | 38,552.75 | 23,208.99 | (15,344) | 92,836.00 | 41.5% |
| 37 | Utilities | 59,168.40 | 48,399.96 | (10,768) | 193,600.00 | 30.6% |
| 38 | Maintenance | 37,616.86 | 36,081.93 | (1,535) | 144,328.00 | 26.1% |
| 39 | Interest Expense Leased Assets | 10,606.89 | 10,774.98 | 168 | 43,100.00 | 24.6% |
| 40 | Rent | 2,134.29 | 2,062.50 | (72) | 8,250.00 | 25.9% |
| 41 | Food | 37,149.99 | 34,975.02 | (2,175) | 139,900.00 | 26.6% |
| 42 | Capital Equipment | 8,965.53 | 3,324.93 | (5,641) | 13,300.00 | 67.4% |
| 43 | Client Equipment | 5,583.06 | 5,750.01 | 167 | 23,000.00 | 24.3% |
| 44 | Fiduciary Expense | 67,677.84 | 0.00 | 101 | 0.00 | 0.0% |
| 45 | Miscellaneous Expense | 37,127.06 | 38,924.52 | 1,797 | 155,698.00 | 23.8% |
| 46 | Depreciation & Amoritization Expense | 242,761.14 | 243,957.27 | 1,196 | 975,829.00 | 24.9% |
| 47 | MI Loan Repayment Program | 0.00 | 3,000.00 | 3,000 | 12,000.00 | 0.0% |
| 48 | Total Expense | 9,755,963 | 9,519,100 | (169,186) | 38,076,399 | 25.6% |
| 49 | Change in Net Position | \$ (142,631) | \$ - | \$ (142,631) | \$ - | -0.4% |
| | - | | | <u> </u> | | |
| 50 | Contract settlement items included above: | | | | | |
| 51 | Medicaid Funds (Over) / Under Spent | \$ (80,565) | | | | |
| 52 | Healthy Michigan Funds (Over) / Under Spent | (75,223) | | | | |
| 53 | Total NMRE (Over) / Under Spent | \$ (155,788) | | | | |
| 54 | General Funds to Carry Forward to FY25 | \$ - | | | | |
| 55 | General Funds Lapsing to MDHHS | (223,801) | | | | |
| 56 | General Funds (Over) / Under Spent | \$ (223,801) | | | | |
| | · · · · | | | | | |
| 57 58 | Behavior Health Home Evpenses | 98,623 (98,137) | | | | |
| 58 50 | Behavior Health Home Expenses BHH Funds (Over) / Under Spent | (98,137) 486 | | | | |
| 59 60 | Total PULI (Over) / Under Spent | ¢ 400 | | | | |

486

60

Total BHH (Over) / Under Spent



Recipient Rights Advisory Committee Minutes January 22, 2025

The meeting was called to order at 3:00 p.m. January 22, 2025 by Pat Przeslawski in the Administrative Conference Room.

Present: Tom Fredlund, Judy Jones, Barb Murphy, Pat

Przeslawski

Absent: Kara Bauer LeMonds (Excused), Renee Smart-Sheppler, Lorell Whitscell

Staff: Ruth Hewett

Guests: None

DRAFT MINUTES

I. Old Business. None.

II. Approval of Minutes. The minutes from 10-23-2024 were approved as written by consensus.

III. New Business.

<u>REVIEW OF THE FUNDING FOR THE RIGHTS OFFICE</u>: Connie Cadarette, Finance Director, presented the preliminary FY25 recipient rights budget. The budgeted amount of \$245,405 remains the same as FY 24.

QUARTERLY RIGHTS ACTIVITY REPORT: The committee reviewed the report which covered the first quarter of FY 25, 10/1/2024 – 12/31/2024. There were 29 complaints received with 27 being investigated and 2 contained no Code-protected right. Of the 27, 22 were substantiated with 2 investigations pending. Barb moved to review the report, Tom supported.

INTEREST TO CONTINUE ON COMMITTEE: Members were solicited as to their interest in being reappointed to the committee. The Board chair will appoint committee members during the March board meeting. Judy indicated her term on the Board is expiring, so she does not wish to continue on this committee. All others in attendance expressed their desire to continue and the absent committee members will be contacted. Ruth will submit the names of those interested to the director for consideration.

IV. Educational Session: During the educational session, the committee conducted the annual review of policy #3860 Rights of Substance Use Recipients as required.

V. Other Business.

Ruth informed the committee she will be retiring on April 11, 2025. Via speaker phone, Nena consulted with the committee per the Mental Health Code, regarding the hiring of Ruth's replacement. She assured the committee she will select an individual "who has the education, training, and experience to fulfill the responsibilities of the office." By consensus, the committee gave Nena their "goahead" with the selection as the committee does not meet again until April. Nena offered that if anyone had suggestions, comments, or questions, to call her.

VI. Adjournment.

Barb moved to adjourn, and the meeting ended at 4 p.m. The next meeting will be April 23, 2025 in the Administrative Conference Room at 3 p.m.

| Patricia Przeslawski | , Committee Chair | |
|----------------------|-------------------|--|

FY25 Preliminary Recipient Rights Budget

| Staff Wages/benefits Office/program supplies Meals/lodging Travel Training Membership Dues | \$ 239,606.00 400.00 1,000.00 2,269.00 2,000.00 130.00 |
|--|--|
| Total Budget | \$ 245,405.00 |
| FY24 budget | \$ 245,405.00 |
| \$\$\$ Increase/(Decrease) See Note % Increase/(Decrease) | \$ - 0.0% |
| FY 24 budget | \$245,405.00 |

Note: No increase due to overall agency trimming of travel/training, etc. to offset increased benefit expenses.

\$0.00

Prepared by: Connie Cadarette, Finance Director

Prepared on: 1-16-2025

\$\$ Increase

Northeast Michigan Community Mental Health Authority 400 Johnson Street, Alpena, MI 49707 989-358-7847

QUARTERLY RECIPIENT RIGHTS ACTIVITY REPORT

<u>Time Period: October, November & December 2024:</u>

| l. | COMPLAINT D | ATA SUMMAR | Υ | FY 24- | <u> 25</u> | | | FY 2 | <u>3-24</u> | |
|----|-------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|
| | A. Totals | | 1 st | 2 nd | 3 rd | 4 th | 1 st | 2 nd | 3 rd | 4 th |
| | Complaints | Received: | 29 | | | | 33 | 23 | 31 | 25 |
| | Investigate | d: | 27 | | | | 28 | 19 | 28 | 17 |
| | Interventio | ns: | -0- | | | | 01 | 03 | -0- | 02 |
| | Substantia | ted: | 22 | | | | 18 | 14 | 21 | 14 |
| | Outside Ju | risdiction: | -0- | | | | -0- | -0- | -0- | -0- |
| | No Code P | rotected Right: | 02 | | | | 04 | 01 | 03 | 06 |

B. Aggregate Summary of Complaints

| CATEGORY | Received | Investigation | Intervention | Substantiated |
|--|----------|---------------|--------------|---------------|
| Abuse I | 0 | 0 | | 0 |
| Abuse II | 3 | 3 | | 3 |
| Abuse III | 3 | 3 | | 2 |
| Sexual Abuse | 0 | 0 | | 0 |
| Neglect I | 1 | 1 | | 1 |
| Neglect II | 0 | 0 | | 0 |
| Neglect III | 5 | 5 | | 4 + 1 pend |
| Rights Protection System | 0 | 0 | 0 | 0 |
| 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 | 3 | 3 | 0 | 3 |
| Treatment Environment | 1 | 1 | 0 | 0 |
| Freedom of Movement | 1 | 1 | 0 | 1 |
| Financial Rights | 0 | 0 | 0 | 0 |
| Personal Property | 0 | 0 | 0 | 0 |
| Suitable Services | 9 | 9 | 0 | *7 + 1 pend |
| Treatment Planning | 0 | 0 | 0 | 0 |
| Photos/Fingerprints/Audio etc | 1 | 1 | 0 | 1 |
| Forensic Issues | 0 | 0 | 0 | 0 |
| Total | 27 | 27 | 0 | 22 + 2 pend |

Total 27 27 0 22 + 2 pend

^{*} The 2 pending from last quarter resulted in one substantiated and one not substantiated.

c. Remediation of substantiated rights violations.

| Category/Specific Allegation | Specific Provider | Specific Remedial Action |
|---------------------------------|----------------------|----------------------------------|
| Pending Actions from last qtr: | Flovidei | Remedial Action |
| Abuse, Class III | NEMCMH | Verbal Deprimend |
| Suitable Services | NEMCMH | Verbal Reprimand Other |
| | | _ |
| Suitable Services/Dign & Resp | NEMCMH | Verbal Reprimand |
| | | |
| | | |
| Actions this gtr: | | |
| Abuse, Class II | Flatrock | Termination |
| Abuse, Class II | Beacon | Termination |
| Abuse, Class III | NEMCMH | Termination |
| Abuse, Class III | NEMCMH | Termination |
| Abuse, Class III | NEMCMH | Termination |
| Neglect, Class I | Cornerstone | Pending |
| Neglect, Class III | NEMCMH | Termination |
| Neglect, Class III | NEMCMH | Employee left, but substantiated |
| Neglect, Class III | NEMCMH | Employee left, but substantiated |
| Neglect, Class III | NEMCMH | Employee left, but substantiated |
| Confidentiality | NEMCMH | Written Reprimand |
| Confidentiality | NEMCMH | Suspension |
| Confidentiality | NEMCMH | Pending |
| Freedom of Movement | NEMCMH | Employee left, but substantiated |
| Service Suited to Condition | NEMCMH | Termination |
| Service Suited to Condition | NEMCMH | Verbal Reprimand |
| Service Suited to Condition | NEMCMH | Pending |
| Suit Services/Dignity & Respect | NEMCMH | Verbal Reprimand |
| Suit Services/Dignity & Respect | Hope Network | Written Reprimand |
| Suit Services/Dignity & Respect | NEMCMH | Employee left, but substantiated |
| Suit Services/Dignity & Respect | NEMCMH | Verbal Reprimand |
| Photographs/Fingerprinting/Audi | NEMCMH | Other |

D. Summary of Incident Reports. (1st Qtr '24)

Ruth M. Hewett, Recipient Rights Officer

| Category Type | 1 st Q | tr | 2 nd C |)tr | 3 rd Q | tr | 4 th Q | tr |
|---|-------------------|-----|-------------------|-----|-------------------|-----|-------------------|-----|
| | '25 | '24 | '25 | '24 | '25 | '24 | '25 | '24 |
| 01.0 Absent without leave (AWOL) | 07 | 06 | | 01 | | 02 | | 05 |
| 02.0 Accident – No injury | 18 | 04 | | 80 | | 11 | | 12 |
| 02.1 Accident – With injury | 41 | 28 | | 30 | | 38 | | 72 |
| 03.0 Aggressive Acts – No injury | 29 | 34 | | 29 | | 21 | | 29 |
| 03.1 Aggressive Acts – w/ injury | 04 | 11 | | 14 | | 14 | | 16 |
| 03.3 Aggressive Acts – Property Destruc | 02 | 01 | | 03 | | -0- | | 01 |
| 04.0 Death | 05 | 04 | | 11 | | 05 | | 01 |
| 05.0 Fall – No injury | 13 | 09 | | 11 | | 18 | | 12 |
| 06.0 Medical Problem | 151 | 116 | | 117 | | 84 | | 129 |
| 07.0 Medication Delay | 06 | 03 | | 05 | | 02 | | 04 |
| 07.1 Medication Error | 10 | 17 | | 19 | | 12 | | 22 |
| 07.2 Medication Other | 124 | 81 | | 93 | | 91 | | 135 |
| 07.3 Medication Refusal | 44 | 30 | | 17 | | 09 | | 10 |
| 08.0 Non-Serious Injury – Unknwn cause | 15 | 24 | | 25 | | 12 | | 15 |
| 09.0 Other | 109 | 66 | | 77 | | 78 | | 87 |
| 10.0 Self Injurious Acts – No injury | 03 | 04 | | 07 | | 03 | | 07 |
| 10.1 Self Injurious Acts – w/injury | 10 | 09 | | 21 | | 14 | | 19 |
| Challenging Behavior | 23 | 41 | | 28 | | 09 | | 80 |
| Fall – with injury | 19 | 12 | | 27 | _ | 25 | | 12 |
| Arrests | 04 | 03 | | 02 | | 02 | | 05 |
| Total | 637 | 503 | | 545 | _ | 450 | | 601 |

| E. | Prevention Activity Hours Used in Training Pro Hours Used in Training Red Hours Used in Site Visits | | Quarter 18.00 05.25 01.50 | YTD 18.00 05.25 01.50 |
|----|---|---|--|--|
| F. | Monitoring Activity Incident Report Received | | Quarter 637 | YTD 637 |
| G. | Source of All Complaints: | Recipient: Staff: ORR: Gdn/Family: Anonymous: Comm/Gen Pub: Total | Quarter 01 10 15 02 01 -0- 29 | YTD 01 10 15 02 01 -0- 29 |

01/22/2025

Date

Turnover by Department

| | ' | uniover by Departmen | · | | | | | | |
|--|------------------|----------------------|--------------------|-------------|------------|---------|--|--|--|
| | 44 -4 | F | F | 44 -4 | - | Total | | | |
| District Description A Nove | # at 1/1/2024 | Employees | Employees | # at | | urnover | | | |
| Division/Department Name | 1/1/2024 | Hired/Trnsfr'd | Separated/Trnsfr'd | 12/31/2 | 1024 | | | | |
| Administration/Support Services | 49 | 6 | 9 | | 46 | 18% | | | |
| MI/IDD Program Management | 6 | | 1 | | 5 | 17% | | | |
| Psychiatry & Nursing Support | 13 | 2 | | | 15 | 0% | | | |
| OAS & OBRA Services | 12 | 1 | | | 13 | 0% | | | |
| MI CRS Services | 3 | 1 | | | 4 | 0% | | | |
| MI Access | 2 | 1 | 1 | | 2 | 50% | | | |
| MI Adult Casemanagement | 6 | 1 | 1 | | 6 | 17% | | | |
| MI Adult A.C.T. | 3 | 3 | 3 | | 3 | 100% | | | |
| Home Based Child | 6 | 3 | 1 | | 8 | 17% | | | |
| MI CLS & Peer Support Services | 18 | 8 | 5 | | 22 | 28% | | | |
| MI/IDD Employment Services | 18 | 4 | 5 | | 17 | 28% | | | |
| Self Determination | 4 | | | | 4 | 0% | | | |
| DD Casemanagement | 9 | 2 | 2 | | 9 | 22% | | | |
| DD Clinical Support | 2 | | | | 2 | 0% | | | |
| DD SIP Residential | 35 | 16 | 20 | | 31 | 57% | | | |
| DD Community Support | 19 | 4 | 2 | | 21 | 11% | | | |
| Greenhaven (7-1-24 formerly Blue Horizons) | 10 | 1 | 3 | | 8 | 30% | | | |
| Brege | 10 | 3 | 5 | | 8 | 50% | | | |
| Cambridge | 11 | 3 | 2 | | 12 | 18% | | | |
| Harrisville | 11 | 8 | 9 | | 10 | 82% | | | |
| Mill Creek | 10 | 11 | 13 | | 8 | 11% | | | |
| Pine Park | 11 | 3 | 3 | | 11 | 27% | | | |
| Princeton | 9 | 8 | 6 | | 11 | 67% | | | |
| Thunder Bay Heights | 12 | 1 | 6 | | 7 | 50% | | | |
| Walnut | <u>10</u> | 12 | 12 | | <u>10</u> | 120% | | | |
| Totals | 299 | 102 | 109 | | 293 | 36% | | | |
| Agency-Wide Turnover | | | | | | | | | |
| | | | Total | | | Total | | | |
| | # at | Number | Employees | <u># at</u> | Т | urnover | | | |
| Division/Department Name | 1/1/2024 | <u>Hires</u> | <u>Separated</u> | 12/31/2024 | | Rate | | | |
| All Employees | <u>299</u> | <u>94</u> | <u>100</u> | | <u>293</u> | 33% | | | |

EXECUTIVE LIMITATIONS

(Manual Section)

ASSET PROTECTION

Board Approval of Policy August 8, 2002

Policy Last Reviewed: March 14, 2024 Last Revision to Policy Approved by Board: March 14, 2024

•1 POLICY:

The Executive Director may not allow assets to be unprotected, inadequately maintained, nor unnecessarily risked.

Accordingly, he or she may not:

- 1. Fail to insure against theft and casualty losses at:
 - Actual cash value, less any reasonable deductible for vehicles;
 - Replacement value, less any reasonable deductible for personal and real property; and,
 - Against liability losses to Board members, staff, or the organization itself in an amount greater than the average for comparable organizations.
- 2. Allow unbonded personnel access to material amounts of funds.
- 3. Unnecessarily expose the organization, its Board or staff to claims of liability. The Executive Director's annual monitoring report shall include a risk analysis summary.
- 4. Make any purchase wherein normally prudent protection has not been given against conflict of interest. Make any purchase of over \$2,000 without having obtained comparative prices and quality. Make any purchase over \$10,000 without a stringent method of assuring the balance of long term quality and cost; further, such purchases over \$10,000, not included in the Board's capital equipment budget, shall require Board approval. Orders shall not be split to avoid these criteria.
- 5. Fail to protect intellectual property, information, and files from loss or significant damage.
- 6. Receive, process, or disburse funds under controls which are insufficient to meet the Board-appointed auditor's standards.

Subject: ASSET PROTECTION 01-007

- 7. Invest or hold operating capital in insecure instruments, including uninsured checking accounts and bonds of less than AA rating, or in non-interest bearing accounts except where necessary to facilitate ease in operational transactions.
- 8. Endanger the organization's public image or credibility, particularly in ways that would hinder its accomplishment of mission, including changing the name of the organization or substantially altering its identity in the community.
- 9. Subject facilities and equipment to improper wear and tear or insufficient maintenance.
- •2 APPLICATION:

The Northeast Michigan Community Mental Health Authority Board

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

Subject: ASSET PROTECTION 01-007

..\Index.doc

GOVERNANCE PROCESS

(Manual Section)

BOARD COMMITTEE PRINCIPLES

Board Approval of Policy August 8, 2002

Policy Last Reviewed: February 8, 2024
Last Revision to Policy Approved by Board: February 13, 2020

•1 POLICY:

Board committees, when used, will be assigned so as to reinforce the wholeness of the board's job and so as never to interfere with delegation from board to Executive Director. Committees will be used sparingly and ordinarily in an *ad hoc* capacity.

- 1. Board committees are to help the board do its job, not to help or advise the staff. Committees ordinarily will assist the board by preparing policy alternatives and implications for board deliberation. In keeping with the board's broader focus, board committees will normally not have direct dealings with current staff operations.
- 2. Board committees may not speak or act for the board except when formally given such authority for specific and time-limited purposes. Expectations and authority will be carefully stated in order not to conflict with authority delegated to the Executive Director.
- 3. Board committees cannot exercise authority over staff. Because the Executive Director works for the full board, he or she will not be required to obtain approval of a board committee before an executive action.
- 4. Board committees are to avoid over-identification with organizational parts rather than the whole. Therefore, a board committee which has helped the board create policy on some topic will not be used to monitor organizational performance on that same subject.
- 5. This policy applies only to committees which are formed by board action, whether or not the committees include non-board members. It does not apply to committees formed under the authority of the Executive Director.

•2 APPLICATION:

The Northeast Michigan Community Mental Health Authority Board

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

Subject: BOARD COMMITTEE PRINCIPLES 02-005

BOARD STAFF RELATIONSHIP

(Manual Section)

DELEGATION TO THE EXECUTIVE DIRECTOR

Board Approval of Policy August 8, 2002

Policy Last Reviewed: February 8, 2024 Last Revision to Policy Approved by Board: February 9, 2023

•1 POLICY:

All Board authority delegated to staff is delegated through the Executive Director, so that all authority and accountability of staff—as far as the Board is concerned—is considered to be the authority and accountability of the Executive Director.

- 1. The Board will direct the Executive Director to achieve specified results, for specified recipients, at a specified worth through the establishment of *Ends* policies. The Board will limit the latitude the Executive Director may exercise in practices, methods, conduct, and other "means" to the Ends through establishment of *Executive Limitations* policies.
- 2. As long as the Executive Director uses *any reasonable interpretation* of the Board's *Ends* and *Executive Limitations* policies, the Executive Director is authorized to establish all further policies, make all decisions, take all actions, establish all practices, and develop all activities.
- 3. The Board may change its *Ends* and *Executive Limitations* policies, thereby shifting the boundary between Board and Executive Director domains. By so doing, the Board changes the latitude of choice given to the Executive Director. But so long as any particular delegation is in place, the Board and its members will respect and support the Executive Director's choices. This does not prevent the Board from obtaining information in the delegated areas.
- 4. Only decisions of the Board acting as a body are binding upon the Executive Director.
 - A. Decisions or instructions of individual Board members, officers, or committees are not binding on the Executive Director except in rare instances when the Board has specifically authorized such exercise of authority.
 - B. In the case of Board members or committees requesting information or assistance without Board authorization, the Executive Director can refuse such requests that require—in the Executive Director's judgment—a material amount of staff time or funds or is disruptive.

•2 APPLICATION:

The Northeast Michigan Community Mental Health Authority Board

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

Subject: DELEGATION TO THE EXECUTIVE DIRECTOR 03-002

MARCH AGENDA ITEMS

Policy Review

Budgeting 01-004

Policy Review & Self-Evaluation

Board Members' Code of Conduct 02-008

Monitoring Reports

Budgeting 01-004 Financial Condition 01-005 Asset Protection 01-007

Activity

Board Member Recognition

Educational Session

TBD