WEST MICHIGAN COMMUNITY MENTAL HEALTH

BOARD OF DIRECTORS MEETING MINUTES

September 15, 2020

- 1. <u>Call to Order</u>: The West Michigan Community Mental Health Board of Directors met for its regular meeting via Zoom, at 5:30 p.m. on Tuesday, September 15, 2020. Chair Jim Prince presided.
- 2. <u>Roll Call</u>: The following members were present: Mary Alway, Ron Bacon, Linda Bairl, Pat Bettin, Dr. Jennifer Branning, Dawn Martin, Jim Prince, Andy Sebolt, Kay Seng, Lucinda Shafer and Larry VanSickle. Absent: Todd Dancz. A quorum was present. CMH staff members present: Lisa Williams, Michele Condit, Bethany Sherfinski, Ellen Plummer, Josh Snyder, and Kim Goodrich (Recorder).
- 3. <u>Introductions</u>: Dr. Williams introduced WM's newest board member, Linda Bairl, from Lake County. Ms. Bairl was appointed two weeks ago by the County Commission
- 4. <u>Delegations, Communications and Expressions from the Community</u>: There were none.
- 5. <u>Approval of Agenda</u>: Mr. Bacon made the motion, seconded by Mr. Sebolt, that the West Michigan Community Mental Health Board of Directors approve the agenda as presented. The motion carried via roll call vote.
- 6. <u>Conflict of Interest Question</u>: Mr. Prince asked if any board member wished to declare a conflict of interest regarding any matter to be considered by the West Michigan Community Mental Health governing body. No such declarations were made.
- 7. <u>Consent Agenda</u>: Mr. Bacon made the motion, seconded by Mrs. Bettin, to approve the item on the consent agenda:
 - 7.1 Minutes from the 8/18/20 WMCMH Board of Directors Meeting. The motion carried via roll call vote.
- 8. <u>Executive Committee Meeting Report</u>: Mr. Prince stated that the meeting minutes are attached for review and items will be covered under other agenda items.
- 9. Finance Committee Recommendation: Mr. VanSickle reported that the Finance Committee met via Zoom and reviewed a list of contracts over \$20,000 to bring to the full board. Most of the contracts were projected for the full fiscal year. Ms. Sherfinski reiterated that these are typical for this time of the year. A lot are service contracts and residential services. Also included are contracts for the psychiatrists that we use for telepsychiatry. The dollar amounts are projections based on last year's expenses. Mr. VanSickle made the motion, seconded by Mrs. Seng, to approve the list of contracts greater than \$20,000 as presented. The motion carried via roll call vote.

Mr. VanSickle and Ms. Sherfinski reviewed the proposed FY 20/21 Budget. The Variance Report is a comparison to the final budget from FY20. When comparing to FY 20, it seems that variances are a little higher, but we are taking COVID into consideration and we hope that things will go back to normal after a few months. Ms. Sherfinski also noted that the bottom line projected a \$500,000 shortfall and we had

planned to use fund balance or the LRE's ISF. Since this document was sent to the board, we received updated revenue projections from the State and those look like they will cover all of the shortfall. We will have a budget amendment fairly quickly to make that adjustment. Mr. VanSickle made the motion, seconded by Mr. Bacon, to approve the FY 20/21 Budget as presented. The motion carried via roll call vote.

10. Chief Clinical Officer and Chief Healthcare Integration Officer's Report: Ms. Plummer reported that there has been a lot of things happening around restructure. We will have the Clinical Service Planners in place by the end of September and hopefully will have added the two clinicians to the Access Team. We will be moving all the annual and initial assessments to Access and all annual plans and reviews to the Clinical Service Planners. Lots of updates to our EMR are occurring. Elizabeth McDowell started in August as the Access and Crisis Services Supervisor and we will be hiring another master's level clinical for the CSS expansion. We continue to do crisis contacts via phone or video but are seeing a slight increase in face to face contacts using PPE. We had 21 health screening referrals to NMHSI in August in both the Ludington and Shelby clinic. So far, 75 of our consumers have selected NMHSI as their primary care practice since our partnership began. We continue to hold Lunch and Learns with NMHSI staff and this month it is about depression in adolescent and youth presented by some of our staff.

Mr. Snyder reported that we are turning a corner on the new care model. We are ready to assign staff in their new roles. Then we'll begin mapping clients to the new structure. We continue to provide services in the COVID environment we are in; evaluating how our current strategies are working as we move on, making sure that everything we are doing is meeting the needs of the clients. We are beginning to see more employment related referrals for our mentally ill adult department. It's part of our care model change where every person gets the services they need, and we don't have any silos keeping folks getting what they need. Trainings are occurring for motivational interviewing, some trauma evidenced based practices (EMDR and Seeking Safety), and we'll be looking at some clinical pathways for health concerns and really supporting those issues in the clients. Also looking at high risk behaviors.

11. <u>Chief Financial Officer's Report</u>: Ms. Sherfinski reviewed the financial services report through the period ending July 31, 2020, ten months of the fiscal year. The amended budget is reflected from last month. Things are evening out a bit. Some of those things that we planned to do but have to push off to the end of the year are starting to happen, so we are starting to see some expenses there.

Ms. Sherfinski reviewed an amendment to the WMCMH Money Purchase Plan, the 401(a) retirement plan that we have for our staff, a defined contribution plan. We identified earlier this year that this was something that needed some updates and clarification and ensure it is in line with how we want to the plan to work. Just some minor clean up. We also realized that there wasn't a cap on the in lieu of Social Security portion so we are instituting the cap so that it's in further alignment with what that benefit in Social Security would look like. There were also a couple earnings that needed to be spelled out. Mr. VanSickle made the motion, seconded by Mr. Bacon, to approve the amendment to the WMCMH Money Purchase Plan as presented. The motion carried, via roll call vote.

12. <u>Chief Operations Officer's Report</u>: Ms. Condit reported that back in May the LRE was at WM and for its annual site visit. We just recently received the results from that visit. Each section is scored individually and then an overall agency score. Our score was

94.88%, which is consistent with what we have received over the last few years. We were not overly concerned with any of the citations. We are heading into another site visit; the Department comes out once a year to all PIHPs and does a review of waivers. They will spend a month with the LRE, doing a remote site visit and we were notified that they will be spending the week of November 14th with WM's desk audit and reviewing clinical records. The team is busy working with the clinical teams to get prepared for that.

Ms. Condit reported that as stated several months ago, we were doing some work to help with the census, which was scheduled to end at the end of October. We now were notified that it will end at the end of September. We've been doing what we can to work with the three communities. We'll have some social media blitzes and sending texts to all of our consumers to remind them about completing the census.

The Walk a Mile Rally is typically held in Lansing in May, but due to COVID it was postponed. It will now take place virtually next week. It will take place on the Board Association's Facebook page and CMHs were given the opportunity to submit video statements that will be played and people can walk a virtual mile and post a picture of yourself.

Ms. Condit noted that ass of tomorrow, all of our staff will be back from furlough.

13. <u>Lakeshore Regional Entity Update</u>: Dr. Williams reported that there has not been any progress on the settlement discussion with the state. The committee that is responsible for negotiating with the state met this afternoon and talked about what is next given that we haven't heard much from the Department. We were told in the meeting that one of the recommendations about managing the past liabilities of the region is under consideration by the Department and being discussed with some financial experts within the state to consider our solution. That's good potential and we should know something in a couple weeks relative to that.

Dr. Williams stated that we've met twice now regarding contract negotiations with Beacon and clarified our expectations of the contract going forward, assuming a pretty significant decrease in administrative services and some of those functions will be returning to the CMHs or the LRE. We are making progress and she thinks Beacon recognizes that when they were unwilling or unable to enter into an arrangement with risk sharing, it changed the nature of the contract significantly. We are hoping to have a finished contract next month.

Dr Williams also stated that Greg Hofman announced his intent to retire effective February 1. The LRE Board is looking to identify an interim CEO for the region and there will be some initial thoughts going to the board on Thursday.

14. <u>Director's Report</u>: Dr. Williams provided an update on the organizational priorities. CCBHC continues to move forward on implementation of grant 2 and we have done much of the work on the requirements of grant 1. Grant 1 ends September 30th, so there will be lots of end of the year documents to complete. We also applied for a no cost extension because of COVID and we received the extension. With regards to grant 2, the clinical reports earlier are all part of implementation for grant 2. We also selected a Project Evaluator and Michele and the team began working with the new project evaluator this past month and are pretty excited about the potential of what they will be able to support for us. UM staffing changes are starting as mentioned and we are also making revisions to our overall UM/UR plan for the agency and all of the staff will be

trained soon for the new UM/UR plan. For restructure, positions were posted and we've identified some performance metrics as a result of what we expect to occur due to the model changes and we'll monitor when all the pieces and parts are in place. We are using our lean work with SFM to help us compete those projects, move our work forward and help with the critical training for the organization.

Dr. Williams reported that we continue to look at our COVID response. Part of what we are doing now is making various changes to the care model and restructure really thinking of putting elements of our COVID plan right into the care model as handling it separately is really hard to do. We are continuing to do most of our contacts via phone or video but we are looking at resuming certain types of face to face activity for certain populations that need it.

Dr. Williams reported that in partnership with SFM Group, the group that helped us with lean implementation, we did a revised strategic planning process this year. We practiced it with the 4th quarter of this fiscal year with our directors and we'll roll it out for the new fiscal year in early October. Dr. Williams will share the newest version with the board. It is a one-page document and includes our mission, vision and values all within the context of it, as well as our 5 year strategic goals, 1 year goals and objectives for the quarter. More next month.

- 15. <u>Upcoming Committee Meetings:</u>
 - LRE Board Meeting September 17th at 1:00 via Teams
 - Executive Committee October 13th at noon via Zoom
- 16. <u>WMCMH Board Member Comments, Questions, Clarifications and Critique of Meeting:</u> Mr. Prince is patiently waiting for when we can meet in person.
- 17. Delegations, Communications and Expressions from the Community: There were none.
- 18. Executive Session: There was none.
- 19. <u>Adjournment</u>: Mr. Bacon made the motion, seconded by Mrs. Shafer, that the West Michigan Community Mental Health Board of Directors adjourn its meeting. The meeting adjourned at 6:26 p.m.

Kimberly Goodrich	James Prince	
Recording Secretary	Chairperson	