

**WEST MICHIGAN COMMUNITY MENTAL HEALTH
BOARD OF DIRECTORS MEETING MINUTES**

April 21, 2021

1. Call to Order: The West Michigan Community Mental Health Board of Directors met for its regular meeting via Zoom, at 5:30 p.m. on Tuesday, April 20, 2021. Chairperson Jim Prince presided. The meeting was held via Zoom due to Mason County declaring a State of Emergency in effect until June 13, 2021. Public were provided information to attend via Zoom.
2. Roll Call: The following members were present: Mary Alway, Linda Baierl, Pat Bettin, Ron Bacon, Dr. Jennifer Branning, Jim Prince, Andy Sebolt, Kay Seng, Lucinda Shafer, and Larry VanSickle. Absent: Todd Dancz and Dawn Martin. A quorum was present. CMH staff members present were: Lisa Williams, Michele Condit, Bethany Sherfinski, Ellen Plummer, Josh Snyder, Jane Shelton, Lesa Lloyd, and Kimberly Goodrich.
3. Introductions: Dr. Williams introduced Lesa Lloyd and Jane Shelton from our financial team. They are present to be part of the audit report. She also welcomed Bill Hirschman, financial auditor, who joined the meeting for a presentation on our recently completed financial audit. Also introduced was Mary Marlatt-Dumas, the new CEO of the LRE.
4. Delegations, Communications and Expressions from the Community: There were none.
5. Approval of Agenda: Mr. Bacon made the motion, seconded by Mrs. Seng, that the West Michigan Community Mental Health Board of Directors approve the agenda as presented. The motion carried via roll.
6. Conflict of Interest Question: 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. Annual Organizational Meeting – Report of the Governance Committee: Mr. Bacon reported that the Governance Committee met earlier this month and reviewed the board evaluation survey summary. He reported that there were no surprises in the summary or anything significant to pull out of the survey and no action items are being recommended.

Mr. Bacon reported that the Governance Committee discussed officer nominations for the 2021/2022 year. The following officers were nominated:

Board Chairperson – Jim Prince
Vice-Chairperson – Larry VanSickle
Secretary – Pat Bettin

With no additional nominations or discussion, Mr. Bacon made the motion, seconded by Mrs. Shafer, to elect the slate of officers as recommended by the Governance Committee for the 2021/2022 year. The motion carried via roll call vote.

Mr. Bacon reported that the WMCMH Board meeting schedule was reviewed for 2021/2022, with the meetings remaining on the third Tuesday of the month at 5:30 pm. Mr. Bacon the motion, seconded by Mrs. Alway, to approve the 2021/2022 WMCMH board meeting schedule as presented. The motion carried via roll call vote.

Mr. Prince thanked the board for the opportunity to continue to serve as board Chair.

Dr. Williams reminded everyone to complete and return the annual paperwork to Ms. Goodrich, as it is important information for us specific to having the appropriate membership on our board for Mental Health Code and CCBHC requirements.

Mr. Bacon reviewed the committee memberships. Everyone is encouraged to let Ms. Goodrich know if they have any interest in being on a specific committee. Mr. Prince will make any necessary appointments to the board committees.

8. Consent Agenda: Mr. VanSickle made the motion, seconded by Mr. Bacon, to approve the item on the consent agenda:

- 8.1 Minutes from the 3/16/21 WMCMH Board of Directors Meeting. The motion carried via roll call vote.

9. Financial Audit Report for Fiscal Year Ending 9/30/20: Mr. Bill Hirschman reviewed the Independent Auditor's Report and stated that the statements are a fair presentation of where WMCMH was at the end of September. This is considered a clean opinion, the highest quality opinion you can receive. Mr. Hirschman also reviewed the financial statements as of 9/30/2020. WMCMH has roughly 13% of its total budget in the Fund Balance, which is a good amount to have. No deficiencies in internal control were identified. There were no compliance issues identified either.

Mr. Prince was appreciative of the good outcome of the report and thanked Ms. Sherfinski and her team for doing such a great job.

10. Mary Marlatt-Dumas, LRE CEO: Ms. Marlatt-Dumas is the new CEO for the Lakeshore Regional Entity. She has 16 years of experience working at a PIHP and five years at a local CMH before that. She shared that she is working on transitioning and wrapping up things with Bill Riley. One of her goals is to have a different culture and work more collaboratively with the CMHs. It's important for her to know what the community needs are and what CMHs may be struggling with. As of Friday, the LRE submitted its initial proposal to MDHHS in hopes of getting resolution of the long-standing deficit of the region. She hired a CFO that will be coming on board in the next month. The COO position is posted, with 30+ candidates. The LRE is gearing up to begin the HSAG site review process. The LRE signed a new building lease and will expand to the office space next to them. They also experienced its first surplus in the region for many, many years and part of that will be used toward the historical deficit. Mr. Prince thanked Ms. Marlatt-Dumas for taking the time to attend a WMCMH board meeting.
11. Executive Committee Meeting Report: Mr. Prince stated that the report is attached for review and items will be covered under other agenda items. There were no action items from the committee.

12. Finance Committee Report: Mr. VanSickle reported that the Finance Committee met last week and reviewed a list of contracts over \$20,000. The proposed rate increases for residential providers is due to trying to make things a little more equal. Ms. Sherfinski stated that it's a range because we looked at a number of factors and looked at providers that provided similar services to more closely align. There were also some providers who hadn't gotten consistent increases. Dr. Williams added that the increases were budgeted for and we were just waiting to ensure we had the revenue to support and sustain them. Mr. VanSickle made the motion, seconded by Mr. Bacon, to approve the contracts over \$20,000 as presented. The motion carried via roll call vote.
13. Clinical Services Report: Ms. Plummer stated that we set our reports up a bit differently and are trying to connect the "why" in what we are doing and to help translate our strategic planning goals to the board. The Continued Stay Review process has transitioned back to WM as of April 1st from the LRE/Beacon. All the processes have been put back into place and they are working very well. We finished the quarter with meeting the goal of having all IPOSs done in a conflict free structure. We are continuing to work on the Utilization Management plan revisions and hope to have that soon for the board to review. We hired a weekend Crisis Stabilization Services worker and that will allow that person to check in on consumers over the weekend. We did not meet the goal for number of annual assessments completed in the conflict free structure in March, but we beat February's numbers. We had 14 health screenings completed in March with NMHSI and they have nine new patients for their primary care services. We had some hopes for some vaccination collaboration clinics, but they are on hold due to concerns around the Johnson and Johnson vaccine.

Mr. Snyder reported on the service delivery side. As of March 22nd, we moved from primarily telehealth services with client choice dictating face-to-face to much more face-to-face unless consumer requested telehealth services. This change was due to the guidance that MDHHS issued. Josh shared metrics around CCBHC and indicated that we had met the goal on therapists trained in trauma, chronic health conditions, and motivational interviewing. NOMs is an assessment that is part of our CCBHC grant requirement and we try to do them with every consumer. It's been a challenge for us. For this quarter we had 201 new CCBHC consumers and of those, 188 were offered a NOMs (58%) and 17% of those completed it.

14. Chief Financial Officer's Report: Ms. Sherfinski reviewed the financial services report through the period ending February 28, 2021, five months of the fiscal year. No significant changes from last month. The biggest variance in expense is with salaries and fringes with the delays we've had in getting new staff onboarded, typically due to COVID.

Ms. Sherfinski stated that the full financial audit report was included in your packet for your review.

15. Chief Operations Officer's Report: Ms. Condit reported that her report also includes some of the strategic work we've done in quarter two. We continue to fill positions, but we have some domino effect with staff moving around internally. COVID numbers continue to be on the rise across our three counties, with 895 cases, averaging about 47 new cases a day. The percent positive rates show Mason and Lake County numbers dropped by a smidge, but Oceana County's positive rates continue to be on the rise. We had one additional staff who tested positive for COVID, but we don't have any staff out

due to exposure or in quarantine. We've had some staff who were exposed but due to being fully vaccinated they didn't have a need to quarantine. About 55% of our staff are fully vaccinated. We continue to monitor all the numbers and requirements and that our facilities meets the needs of our staff and consumers. As part of our Quarter 2 work, our employee net promoter score for March was a -5, which is in the category of needing work. We have a few things in place and some others that will be rolling out soon to support our staff. Our consumer NPS score continues to be excellent. We continue to monitor our encounters and making sure those services continue at the pre-COVID levels. We also have offered our contract providers to complete an NPS and that score for March was very good. From a public relation perspective, we will be focusing on some marketing for our Medication Assisted Treatment (MAT) services. Another focus over Q2 is our Lean work, which was rolled out at the same time our restructure work was rolled out. We are still doing our Plan, Do, Check, Act (PDCA) to embed Lean into our work culture, including Standard Operating Procedures (SOPs), workbooks and metrics.

Ms. Condit reviewed the MMBPIS Report for 1st Quarter FY 2021. We met or exceeded the State standards for every indicator.

Ms. Condit also reviewed two proposed policy changes. Mrs. Shafer made the motion, seconded by Mrs. Seng, to approve the policy changes as presented. The motion carried via roll call vote.

16. Lakeshore Regional Entity Update: Dr. Williams stated that everything was covered in Ms. Marlatt-Dumas' report earlier in the meeting. There was a question on the change in the law of no-fault insurance and Ms. Dumas and Dr. Williams provided some additional detail on that.

Dr. Branning left the meeting at 6:46 pm.

17. Director's Report: Dr. Williams stated that the organizational priorities were provided earlier in other reports and she has nothing more to add.

Dr. Williams reviewed the board meeting protocol that was developed should the emergency orders no longer exist across our counties. Thus far, Oceana and Lake Counties have declined the state of emergency and Mason County has enacted it. If Oceana does not declare a state of emergency in June, we will meet face to face. The protocols go over expectations and guidelines for meeting in person. We will send them out again before we start meeting in person.

Regarding strategic planning, the board had a concern about the metrics not necessarily having value, so they were tied to program reports as discussed above. We have entered our third quarter of our fiscal year and have newly established metrics set. The main reminder is that the quarterly goals are meant to build toward the one-year goals, and the one-year goals build to the 3-5 year goals. As you look through the MDHHS budget report, you will see our strategic planning ties to many elements of it.

As noted by Ms. Dumas, Sen. Shirkey's behavioral health carve in proposal is on the table and he has declared that it is his intension to get it through the House and Senate and be on the Gov. desk for the next fiscal year.

18. Upcoming Committee Meetings:
 - Executive Committee – Tuesday, May 11th at noon via Zoom
 - LRE Board Meeting – May 18th at 1:00
19. WMCMH Board Member Comments, Questions, Clarifications and Critique of Meeting:
Mrs. Bettin clarified her question regarding the auto insurance change.
20. Delegations, Communications and Expressions from the Community: There were none.
21. Executive Session: There was none.
22. Adjournment: 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 7:05 p.m.

Kimberly Goodrich
Recording Secretary

James Prince
Chairperson