

WEST MICHIGAN COMMUNITY MENTAL HEALTH
BOARD OF DIRECTORS MEETING MINUTES

March 15, 2022

1. Call to Order: The West Michigan Community Mental Health Board of Directors met for its regular meeting in person in the conference room of the Lakeshore Resource Network, located in Ludington, at 5:30 p.m. on Tuesday, March 15, 2022. Vice-Chairperson Larry VanSickle presided.
2. Roll Call: The following members were present: Mary Alway, Pat Bettin, Ron Bacon, Linda Baierl, Dr. Jennifer Branning, Todd Dancz (via Zoom), Dawn Martin, Andy Sebolt, Kay Seng, Lucinda Shafer, and Larry VanSickle. Absent: Jim Prince (excused). A quorum was present. CMH staff members present were: Lisa Williams, Michele Condit (via Zoom), Bethany Sherfinski (via Zoom), Ellen Plummer (via Zoom), Josh Snyder (via Zoom), Devon Hernandez (via Zoom), and Kimberly Goodrich.
3. Introductions: Dr. Williams introduced Devon Hernandez, WMCMH's Director of Corporate Compliance and Risk Management. She is presenting the Compliance Report tonight.

Dr. Williams stated that Don Avery is also present via Zoom. Mr. Avery is the Provider Network Manager at the LRE.
4. Delegations, Communications and Expressions from the Community: There was none.
5. Approval of Agenda: Mr. Bacon made the motion, seconded by Mrs. Bettin, that the West Michigan Community Mental Health Board of Directors approve the agenda as presented. The motion carried.
6. Conflict of Interest Question: Mr. VanSickle 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. Consent Agenda: Dr. Branning made the motion, seconded by Mr. Bacon, to approve the item on the consent agenda:
 - 7.1 Minutes from the 2/15/22 WMCMH Board of Directors Meeting. The motion carried.
8. Devon Hernandez Introduction: Ms. Hernandez has been with WM for ten years in June, with experience in clinical, health services, and administrative work. She has a bachelor's in Healthcare Administration and an MBA in Leadership Skills. She began her position of Director of Corporate Compliance and Risk Management in January of this year. She is sharing the Compliance Report with the board this evening.
9. Compliance Report: Ms. Hernandez reviewed the Compliance Report for the period of March 2021 through September 2021, the last report that Mr. Wilske had done before he left. She noted that under one investigation there could be numerous allegations. There were ten substantiated reports during that reporting period. Recommendations go to the

Department it affects and she follows up that it was carried out. She also reviewed the Compliance Report for the period of October 2021 through February 2022. She completed 21 audits during this timeframe. These are proactive audits designed to help us ensure people are following WM policies and procedures.

10. Executive Committee Meeting Report: Mr. VanSickle reported that the Executive Committee's report is available for review. There were no action items nor questions from the board.
11. Finance Committee Recommendation: Mr. VanSickle reported that the Committee did not meet but were forwarded a short list of contracts to review and bring to the full board for its approval. Ms. Sherfinski reported that the first one is a services agreement for a residential setting for a two-year period. There are three consultant contracts on the list as well. Mrs. Always made the motion, seconded by Mr. Sebolt, to approve the list of contracts greater than \$20,000 as presented. The motion carried.
12. Health Integration and Clinical Services Report: Ms. Plummer highlighted that we have a new full time Nurse Practitioner, Jennifer Dalton, beginning on March 21st. She has a lot of substance abuse experience and will be providing Suboxone through SATP on a contract basis.

Mr. Snyder reported that we get SOR funds (State Opiate Response), federal monies that are given to all states to combat the opiate epidemic. With some of these funds, we are in the process of purchasing three vending machines for each of our main lobbies that will allow people to get a Naloxone Kit through a machine. The kit is free and comes with instructions on how to use it. They should probably be in place within the next few months. Mrs. Bettin asked if there was going to be any public information on why we would do this and to explain what medication assisted treatment is? Does it encourage people to use vs encourage them to stop? Mr. Snyder explained that improving naloxone access is a harm reduction strategy that saves lives. The research around harm reduction strategies suggests that access to these strategies creates an opportunity for the impacted individual to interact with organizations and treatment providers like us in a positive and engaging way that may later increase their likelihood of seeking help with their addiction. We will be working with the Health Department on promoting this as well as through our social media, and we've talked with the County Commissions and Sheriff's Departments. Dr. Branning suggested that one way to education about the use and importance of naloxone is through the Mason County Library and its Shifting Landscapes event. It brings a lot of people in from the community to discuss various topics. Dr. Williams stated that we are in partnership with three local libraries through a grant that the libraries were awarded to educate about mental health and substance abuse. Under the grant, libraries are built to be a connecting point for access to mental health and substance use treatment services. We will work with them to provide education about our services, our mobile crisis team, and general access. Part of the grant is that the libraries will also be supplying Naloxone. We've had Naloxone in our office for at least five years now and supplied it for local police departments. We had a contract with the Red Project out of GR and did Naloxone training for staff and community members in all three of our communities. MAT (medicated assisted treatment) is related to people controlling and managing cravings (suboxone, vivitrol, etc.,) and Naloxone is really a rescue drug for someone who has an overdose. There are almost no negative side effects if it's given to someone who is not having an overdose. We will definitely, per Ms. Bettin's recommendation,

provide education to the community about substance use disorder treatment, naloxone purpose and access, and stigma related to substance use disorders.

13. Chief Financial Officer's Report: Ms. Sherfinski reviewed the financial services report through the period ending January 31, 2022. CCBHC Medicaid Revenue is showing in the figures this month, so our bottom line looks a lot better.

Ms. Sherfinski reviewed a letter that she is asking the board to approve as a Resolution to authorize signers for Certera Investment Services. Certera is an investment company that we can invest in Treasury Bills with. It's to show that these staff have the ability to do those investments. Mrs. Bettin made the motion, seconded by Mr. Bacon, to approve the Resolution for the authorized signers as presented. The motion carried.

14. Chief Operations Officer's Report: Ms. Condit highlighted some training that's coming up in April called Implicit Bias training. Implicit Bias describes our attitudes toward people, or stereotypes we attribute to them, even when we might not even know we are doing it. This is a new standard in the healthcare setting and WM is required to have this training as part of CCBHC Demonstration. There is also a new requirement from LARA for our healthcare licensed staff. This will be a first step to create a more accessible, comfortable, and welcoming environment for our consumers and visitors. If board members have an interest in joining one of the Implicit Bias Training sessions, you can contact Betsy Reed-Henry or Kim.

Ms. Condit reviewed a new policy for board member consideration regarding leaves of absence for non-FLMA kinds of leave. Mrs. Shafer made the motion, seconded by Mrs. Seng, to approve new policy 4-1-4 Leaves of Absences. The motion carried.

Mr. VanSickle stated that it was requested that the board approve a letter that will transfer MMRMA representation to Ms. Condit, as well as the Director of Corporate Compliance. They will be our member representatives. This authorization is required by MMRMA. Mr. Bacon made the motion, seconded by Mrs. Shafer, to approve transferring representation to MMRMA as presented. The motion carried.

15. Community Mental Health Association of Michigan (CMHAM): Dr. Williams reported that most of the activity at CMHAM over the past couple months continues to surround advocating against the Senate bills. The bills were rumored to hit the senate floor a couple weeks ago but were only moved to a third reading vs. sent to a vote. We understand that the fact they did not make it to a vote is because there were not enough votes for the bills to pass. There are still several senators on the fence and the MCD Health Plans are advocating very hard. We continue to watch and pay attention to what's happening. The revised bills from Rep. Whiteford are in the House Health Policy Committee and they will start hearing testimony later this week. There is also some legislation on the state sliding fee scale to align with the Federal sliding fee scale and that alignment is what makes it possible for staff to get into the loan repayment program. We are watching for that to go through so that we can certify for this program again. It is sitting with the Senate Health Policy Committee and should have been on the agenda already. We believe that legislators are sitting on these bills as a strategy to get movement on the Shirkey legislation. CMHAM has been very active in advocating around this issue as well and is keeping us up to date with all activity.

Dr. Williams stated that CMHAM will be hosting its summer conference in person in Traverse City in early June. More to come as we get additional information.

16. Lakeshore Regional Entity Update: As Dr. Williams reported previously, the LRE sanctions were lifted and the contract is back on a one year contract rather than month to month. She also explained the distinction between the sanctions and the past liabilities. The settlement that was reached was regard to the sanctions and not the past liabilities. There have been many conversations between the LRE CEO, LRE CFO, lawyers, LRE Board and the State trying to determine strategies available to the region over the past month. The region is making progress toward identifying a couple paths that could be taken by the LRE board. No resolution, but there is meaningful activity and discussion occurring to hopefully reach resolution.

On Thursday the LRE board is reviewing revisions to the LRE Bylaws and the LRE Operating Agreement. Depending on how those discussions go, you may see both those documents here next month for a CMH vote. There are a couple items they are still discussing that would impact WM. One of the liveliest discussions continues to be around member representation on the board. Right now, it's based on population (a representative model) and it's being proposed that we move to three appointees from each member (senatorial model) and go to a 15 member board. Dr. Williams supports the changes to the Bylaws. If that is approved, the WM will need to appoint another member to the LRE Board. Ron Sanders and Jane Virduin are community representatives on the board and so we would need the third appointee from WM to be a WM board member. This will be brought forward when the bylaws are approved by the LRE Board. With regards to the Operating Agreement, the most significant change relates to the funding methodology to be consistent with a per eligible per month and a smoothing plan so that there is no harm done to CMH members in the transition from current methodology to the new methodology.

17. Director's Report: Dr. Williams reported no changes to COVID protocols at this point. We fall under the healthcare protocols, so masking is still required. One county is still "high" in terms of risk, and two counties are at the "substantial" level.

Dr. Williams reported that the Department called a meeting and announced an entire Department restructure. The BHDDA is being dissolved and a series of new departments are being formed. A new head of all areas will be Farrah Hanley. She was the lead finance person in negotiations of the settlement originally with the region. They created a separate children's division that covers all children's services. Another department is called HASA, essentially the old division of Medicaid (MSA) that contains all health policy and special innovation programs, which includes CCBHC. There is a third division centered around the specialty waiver services. We don't know what all the changes mean yet but they will occur quickly—as in March 21st. Jon Villasurda, a Department Administrator who was involved in many projects, including CCHBC Demonstration, resigned his position just prior to the announcement and is officially gone.

Dr. Williams stated that our four board members who were up for reappointment were all reappointed by their county commissions. That is great news. Thank you for continuing to serve on our Board.

18. Upcoming Committee Meetings:
 - LRE Board Meeting – Thursday, March 17th at 1:00 in Muskegon
 - Executive Committee – Thursday, April 7th at noon in Ludington
19. WMCMH Board Member Comments, Questions, Clarifications and Critique of Meeting:
There were none.
20. Delegations, Communications and Expressions from the Community: There were none.
21. Executive Session: There was none.
22. Adjournment: With no additional business, Mrs. Shafer made the motion, seconded by Mrs. Bettin, to adjourn the West Michigan Community Mental Health Board of Directors adjourned its meeting at 6:43 p.m.

Kimberly Goodrich
Recording Secretary

Larry VanSickle
Vice-Chairperson