

WEST MICHIGAN COMMUNITY MENTAL HEALTH

BOARD OF DIRECTORS MEETING MINUTES

May 17, 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, May 17, 2022. Vice-Chairperson Larry VanSickle presided.
2. Roll Call: The following members were present: Mary Alway, Linda Baierl, Ron Bacon, Pat Bettin, Dr. Jennifer Branning, Andy Sebolt, Kay Seng, Lucinda Shafer, and Larry VanSickle. Absent: Todd Dancz, Dawn Martin (excused), and Jim Prince (excused). A quorum was present. CMH staff members present were: Lisa Williams, Bethany Sherfinski, Ellen Plummer, Josh Snyder, Lisa Nordman, and Kimberly Goodrich.
3. Introductions: Dr. Williams introduced Lisa Nordman, Director of Conflict Free Case Management. She has been with the organization for 12 years in a variety of roles. She leads the Access program, UM, and Crisis Stabilization Services. She will be providing an overview of Zero Suicide.
4. Delegations, Communications and Expressions from the Community: There were none.
5. Approval of Agenda: 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.
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: Mr. Bacon made the motion, seconded by Mrs. Bettin, to approve the item on the consent agenda:

7.1 Minutes from the 4/19/22 WMCMH Board of Directors Meeting. The motion carried.
8. Governance Committee: Mr. Bacon reported that the Governance Committee is asking for the second reading and approval of the proposed updates to the WMCMH Board Bylaws. The updates are around title changes and clarification of Open Meetings Act rules. Mrs. Bettin made the motion, seconded by Mrs. Seng, to approve the proposed changes to the WMCMH Board Bylaws as presented. The motion carried.
9. Executive Committee Meeting Report: Mr. VanSickle reported that the Executive Committee's report is available for review. There were no action items or questions from the board.
10. Finance Committee Recommendation: Mr. VanSickle reported that the Committee did not meet but were forwarded a list with two contracts to review and bring to the full board for its approval. Ms. Sherfinski stated that the first contract is related to the DHS worker who is dedicated to help our consumers apply for Medicaid or other state benefits. The second contract is for a specialized residential placement. Mr. Sebolt made the motion, seconded by Mr. Bacon, to approve the list of contracts greater than \$20,000 as presented. The motion carried.

11. CCBHC Advisory Committee Meeting Report: Mrs. Seng reported that the 2nd CCBHC grant ended April 30th of this year. We met all of our service goals and IPP data goals. We showed improvement in all of our NOMs indicators with the exception of tobacco product use. We improved in all of our goals this last quarter and met or exceeded our targets in 10 of 15. Work continues on improving the remaining five. Mrs. Seng reported that Dr. Williams also provided the committee with information on the Demonstration, of which we are nine months into the first year. WMCMH is in the process of applying through SAMHSA again now for a CCBHC-IA grant that is intended to bridge the Expansion grants and state Demonstration. Mr. Snyder shared a service array expansion pilot that was started as a result of the CCBHC grant and demonstration which will allow us to better serve the mild/moderate population.
12. Health Integration and Clinical Services Report: Mr. Snyder highlighted the Interconnected Systems Framework (ISF) work with which we are involved in, along with the Unite Way and the ESD to look at all the school systems in Mason County to see how we can provide better mental health services for students. There are some frameworks that have been used in the nation that have been helpful, so the ISF workgroup exploring that.

Ms. Plummer reviewed policy 2-2-8, Self-Determination. The State revised the actual technical title to Self-Direction. Under self-direction, consumers direct and design their own treatment. The policy update is strictly a change in terminology (from self-determination to self-direction). Mr. Bacon made the motion, seconded by Mrs. Bettin, to approve the proposed policy change as presented. The motion carried.

Lisa Nordman, Director of Conflict Free Case Management, provided an overview of Zero Suicide. The foundational belief of Zero Suicide is that suicide deaths are preventable for individuals under the care of health and behavioral health systems. It's a system solution and is a result of partnership between the National Action Alliance for Suicide Prevention, the Suicide Prevention Resource Center, and other national suicide prevention experts. The model requires leadership, training, Identifying, engaging, treating, transition and improving to align around the preventions of suicide. We are trying to complement but not duplicate the systems we have across our communities.

13. Chief Financial Officer's Report: Ms. Sherfinski reviewed the financial services report through the period ending March 31, 2022. No significant changes from last month. Revenue has been exceeding what we budgeted, and expense is lower. We are still seeing a big variance in salaries from vacant positions. Repair and maintenance was budgeted for some replacements in our buildings where the work has not yet been completed.

Ms. Sherfinski also reviewed the Cash and Investment Report for the period ending March 31, 2022. Interest earned on T bills has not matured yet.

Ms. Sherfinski reported that we recently implemented a new payroll system and we successfully got everybody paid, not without some bumps though. It took a lot of patience and learning from everyone in the organization.

14. Chief Operations Officer's Report: In Ms. Condit's absence, Dr. Williams highlighted that we just finished with the region's site visit to WMCMH, using the new site visit process with revised expectations. Some areas of strength the LRE identified were: assessments, planning, progress notes, staff training and credentialing. Continued work needs to be done around coordination across our residential providers and ensuring that

the flow of service and continuity of service exists across the different providers. Also, we have room to improve in writing goals and objectives in our person-centered plans. We'll get a final report in about a month along with a request for plans of correction for the areas where we have room to improve.

Dr. Williams also provided an update on the 2nd Quarter Strategic Planning. We had consistent performance on our encounters, our consumer net promoter score, our financial activities as well as the number of people we are serving overall. The employee net promoter score is still below target but higher than our last review. YTD revenue is over, under on expense, climbing as we should at the end of the first six months toward our projected goals. Our performance relative to the BHAG has jumped significantly: at the end of the second quarter, WMCMH had served 3,175 unique individuals. The goal for the year, is to serve 3,833 individuals. A reminder that the BHAG is a number that represents our progress towards improving access to services in our community.

Mr. Bacon left the meeting at 6:04 pm.

15. Lakeshore Regional Entity Update: Dr. Williams stated that we've been talking for several months about the region's efforts to rebuild and reorganize as the contract with Beacon is coming to a close. The LRE CEO came to settlement around the sanctions with MDHHS and the region is back in good standing, with a yearly contract like the other PIHPs in the state. As these key pieces began to come together, it was time to look at revising and updating the regional bylaws to reflect the kind of regional governance and operations that we'd collectively (as 6 regional partners—5 CMHs and 1 PIHP) like to have. This required a pretty substantial overhaul of the bylaws and operating agreement. The values of the region remain largely the same. The shifts in the bylaws are around how we demonstrate the substance of the relationship through the appointment of and representation of the CMH boards and the rules about how we agree to work together. We went from a representative model (more population=more board members) to a senatorial model (each CMH has equal, 3 appointees, representation on the LRE Board). The bylaws were approved at the LRE Board meeting last month and are out to the members for discussion and vote, as they require CMH approval to go into effect. Mrs. Shafer made the motion, seconded by Mrs. Seng, to approve the Resolution approving the LRE Board Bylaws as presented. The motion carried unanimously.

Dr. Williams provided an overview of the LRE Operating Agreement. Some things were in the Operating Agreement that should have been in the Bylaws, and vice versa. The most significant change from a regional perspective is related to the change in the funding formula to a full PM/PM methodology. It was decided that the shift is hard, but it was harming members by not making that shift completely (having a leg in 2 separate funding methodologies simultaneously). Because of our good financial stand, the LRE has some resources to do some "smoothing," meaning if a CMH takes a hit moving to the new funding methodology, the LRE can assist with funding while the CMH makes necessary adjustments to accommodate the shift in funding. Mrs. Bettin made the motion, seconded by Mrs. Shafer, to approve the Resolution approving the LRE Operating Agreement as presented. The motion carried unanimously.

Mr. Sebolt left the meeting at 6:18 pm.

16. CEO's Report: Dr. Williams reported a slight increase in COVID cases however, hospitalizations continue to stay low. We continue to watch numbers and our protocols continue to remain the same. We are still requiring masks in our offices and when staff

are providing services in the community or in consumers' homes. We have been consistently following the OSHA standards and CDC guidance and until those rules change, we will continue on the path we're on.

Dr. Williams reported that the legislation that adjusts the Michigan sliding fee scale that effects our CCBHC and National Health Services Corp certification is sitting in the Senate for its third reading today and potentially a vote. We have heard that it has been sent to Rule Writing so the assumption is that it will pass, and we will actually be able to submit our application for the National Health Services Corp with that in place and hopefully be able to resume our support to staff in terms of loan repayment. This is an important recruiting and retention tool for our staff. The Senate and House bills around system redesign has been quiet, with likely no movement until right before summer recess or in lame duck. CMHAM is moving their offices. There will be a three-month period where they will all be remote as they are leasing their current offices prior to being able to move into their new space. Conferences and trainings are still taking place, but CMHAM is suspending regular committee meetings until the move is complete.

Dr. Williams provided an update on the experience that Mrs. Martin shared at the last board meeting. We looked into the circumstances she described and feel confident we know what occurred internally. We have done some staff training and education to address the barrier we identified. We have reached out to Mrs. Martin to followed up on what we learned and what we have done.

Dr. Williams shared that Northern Lakes CMH (who we used to be affiliated with) is having some challenges with some of their counties and are under some heightened scrutiny from their counties. There's lots going on in the news about it, some of which is not entirely complete or accurate. If you have any questions regarding the situation, please reach out to Dr. Williams.

17. Upcoming Committee Meetings:

- LRE Board Meeting – Thursday, May 19th at 1:00 in Muskegon
- Executive Committee – Tuesday, June 14th at noon in Ludington

18. WCMCMH Board Member Comments, Questions, Clarifications and Critique of Meeting: Mrs. Seng appreciated the update.

19. Delegations, Communications and Expressions from the Community: There were none.

20. Executive Session: There was none.

21. Adjournment: With no additional business, Mrs. Shafer made the motion, seconded by Mrs. Alway, to adjourn the West Michigan Community Mental Health Board of Directors at 6:35 p.m.

Kimberly Goodrich
Recording Secretary

Larry VanSickle
Vice-Chairperson