

WEST MICHIGAN COMMUNITY MENTAL HEALTH

BOARD OF DIRECTORS MEETING MINUTES

August 16, 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 Center, located in Ludington, at 5:30 p.m. on Tuesday, August 16, 2022. Chairperson James Prince presided.
2. Roll Call: The following members were present: Mary Alway, Ron Bacon, Pat Bettin, Dr. Jennifer Branning, Jim Prince, Andy Sebolt, Kay Seng (via phone), Lucinda Shafer, and Larry VanSickle. Absent: Linda Baierl, Todd Dancz, and Dawn Martin, all excused. A quorum was present. CMH staff members present were: Lisa Williams, Michele Condit, Bethany Sherfinski, Ellen Plummer, Josh Snyder, Devon Hernandez, Lori Schummer, and Kimberly Goodrich.
3. Introductions: Dr. Williams introduced Devon Hernandez, WMCMH's Director of Corporate Compliance and Risk Management. She also introduced Lori Schummer, WMCMH's Director of Public Relations and Customer Services. They are both presenting to the board this evening.
4. Delegations, Communications and Expressions from the Community: There were none.
5. Approval of Agenda: Mr. Bacon made the motion, seconded by Dr. Branning, 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. Consent Agenda: Mr. VanSickle made the motion, seconded by Mrs. Bettin, to approve the item on the consent agenda:
 - 7.1 Minutes from the 7/19/22 WMCMH Board of Directors Meeting. The motion carried.
8. Corporate Compliance Training: Ms. Hernandez, Director of Corporate Compliance and Risk Management, stated that the board is to be trained on Corporate Compliance annually. She provided a PowerPoint presentation and highlighted some areas of the training. The WMCMH Board of Directors is ultimately responsible for corporate compliance within the organization. Ms. Hernandez stated that staff are also trained to all the policies and procedures regarding compliance.
9. FY 2021 Annual Report: Ms. Schummer, Director of Public Relations and Customer Services, provided an overview of the FY 2021 Annual Report. The tone of the Annual Report is that every person that walks through our door has the potential to Renew, Rebuild and Recover. The highlights of the report include board information, strategic planning goals, financial information, CCBHC information, and some program and staff information. Dr. Williams reported that she has attended each commission meeting in the last few weeks and shared the Annual Report with them as well.

10. Executive Committee Meeting Report: Mr. Prince reported that the Executive Committee's report is available for review. There were no action items or questions from the board.
11. Finance Committee Report: Mr. VanSickle reported that the Committee met last week and among the things reviewed was a list of two contracts over \$20,000. Both were normal residential contracts. Mr. VanSickle made the motion, seconded by Mrs. Bettin, to approve the list of contracts greater than \$20,000 as presented. The motion carried.

Mr. VanSickle reported that the Finance Committee had a discussion on proposed changes to policy 3-4-3 Procurement and Contracting Guidelines. Currently the Finance Committee and the full board approve any contract over \$20,000. It has been that way for many years and the thought is that with economic changes and duplicate processes the finance department sometimes has to go through, the dollar amount should be raised to \$50,000. After a thorough discussion, the Finance committee members approved it. Ms. Sherfinski added that because of the daily dollar amount of residential contracts and the timing of the meetings, the Board is seeing them after the fact, or the contract is held up, so we end up duplicating some work or efforts. The Finance Committee also requested that a list of contracts over \$20,000 still be provided to the Finance Committee and questions can be asked and concerns addressed. Mr. VanSickle made the motion, seconded by Mrs. Shafer, to approve the proposed changes to policy 3-4-3 as presented, which includes moving the limit for signing without Finance and Board approval to \$50,000. Mr. Prince doesn't want to lose the feeling of transparency and Mrs. Always liked the idea of knowing what facilities we are working with so having a list of contracts provided is a good idea. Dr. Williams absolutely wants to continue the transparency. A lot of contracts are for consumers who were approved in other settings that have to move for one reason or another, or a single case agreement with a hospital. Ms. Sherfinski stated that as long as we have a process in place for checks and balances and we follow that process, it is not an issue with Medicaid. We also have a 30-day termination clause in the majority of our contracts if the board is not pleased with something we did. The motion carried.

Ms. Sherfinski reviewed the FY22 proposed budget amendment. The largest change is on the revenue section. We had a decrease in federal grants as we weren't able to spend some of the revenue as quickly as we needed to. One of the grants is the DOJ grant. While they approved the grant, it was a lengthy process to approve spending money in this year. It should be able to be carried over to next year. The CCBHC demonstration revenue was budgeted conservatively, and this is still estimated as we aren't sure what the State is going to do. Part of the CCBHC program allows us to keep the excess if we spend less than what we received, and it is not considered Medicaid and we can use to offset other areas. Mr. VanSickle made the motion, seconded by Mrs. Bettin, to approve the proposed FY22 budget amendment as presented. The motion carried.

Ms. Sherfinski provided a brief overview of the Compliance Audit Summary for fiscal year ending 9/30/21. It is required by the State to have an external audit on a specific set of guidelines related to our contracts with the State. The audit firm who does our financial audit also does this audit. The opinion is that we comply in all respects. There were no findings.

Ms. Sherfinski provided a brief overview of the Single Audit Summary for fiscal year ending 9/30/2021. This audit is required because we exceed the threshold of directly received grants from the Federal government. It has high criteria and is heavily scrutinized. We complied in all material respects but had one finding. The finding is relative to a \$50 training that we had paid for in the grant period, but the staff member

didn't actually complete the training until after the grant period. There are some recommendations and process changes that we are making so we check for that sort of thing going forward.

12. CCBHC Advisory Committee Report: Mrs. Seng reported that a closeout of the grant was provided to the committee. Goals and performance were met and exceeded. The regional SAMHSA director visited WMCMH in June and stated that we are one of the highest performing CCBHC grantees. Regarding demonstration, we are meeting our goals but there is a little glitch with what the State has in its records for us for persons served. We get paid by the number of daily visits for all the consumers who are enrolled, so that is very important. The Federal government just expanded CCBHC Demonstration eligibility to all states. Still waiting to hear if we received the CCBHC innovation and advancement grant, which we will likely hear about at the end of September.
13. Healthcare Integration and Clinical Services Report: Ms. Plummer shared that we are relooking at our crisis stabilization model. It's been a good collaboration between our management and union team to work on some solutions to help alleviate some staff burden that's occurring due to open positions and increased demand for crisis services. It's great to see everyone work together on it. For three months, clinical supervisors will be a part of the shift work to help alleviate some of the work and we are also looking at the way we schedule crisis coverage.

Mr. Snyder reported that we have a new Children's and Family Services Director after the departure of Marianne Kotecki. Keeli Sholtey recently accepted the position. Ms. Sholtey has been with us for about 11 years, and we are happy to have her serve in this capacity.

14. Chief Financial Officer's Report: Ms. Sherfinski reviewed the financial report through the period ending June 30, 2022. There's not a lot different than what we saw last month and nothing unexpected.

Ms. Sherfinski reviewed the Cash and Investments Report for period ending June 30, 2022. Similar to last quarter, interest is still low.

15. Chief Operations Officer's Report: Ms. Condit reported that the highlight of her report was having Ms. Schummer come to tonight's meeting. Ms. Schummer has been with the organization for a number of years and most recently joined the team as Director of Public Relations and Customer Services.
16. Lakeshore Regional Entity Update: Dr. Williams reported that the LRE is doing a newsletter every other month, which is included in your packet for information. She also reported that as of last Wednesday, the Bylaws and Operating Agreement were officially approved by the Executive committee of the LRE and went into effect immediately. The LRE board meeting that was scheduled for this week however, because the timing between the approval of the bylaws and the CMH Board meeting schedule did not allow time for all appointments to be made. WMCMH bylaws indicate that Mr. Prince makes appointments of this variety. After the WM Board approved the bylaws several months back, Mr. Prince made the WM appointments to the LRE Board. The WMCMH appointees will be Jane Verduin (continuing), Ron Sanders (continuing) and Ron Bacon (newly appointed). Dr. Williams will be meeting regularly with the three of them prior to board meetings to help keep them informed and to answer any questions. We now have equal representation on the board and the funding methodology has been changed to per member per month. Both of these things are good news for WMCMH and, Dr. Williams believes, ultimately for the region overall.

As far as resolution of past liabilities, it continues to be an issue of discussion. The LRE Board had authorized the pursuit of some legal action against the state. We will see how that unfolds over the course of the next few months.

17. CEO's Report: Dr. Williams reported that Mason and Oceana County COVID numbers are on the rise. Please be aware and careful. Our staff occurrence and some residential settings are seeing an increase again as well. There is very low staff to staff or staff to consumer transmission occurring, though. We will be reviewing the new CDC guidelines, however that WM has to follow the OSHA guidance as a healthcare agency. The subsequent OSHA guidance has not been released at this point.

Dr. Williams stated that there is nothing to update on with public policy and system redesign. We continue to believe that being a CCBHC is still our best bet to stay relevant and do our best if there are any legislative changes.

Dr. Williams stated that we are in the process of beginning our strategic planning process and last year we had a few board members interested in doing some work around our strengths, weaknesses, opportunities, and threats (SWOT). Please let her or Ms. Goodrich know if you are interested in doing that again.

18. Upcoming Committee Meetings:

- LRE Board Meeting – August meeting canceled
- Special LRE Board Meeting – Wednesday, September 7th from 3-4 pm
- LRE Board Member Governance Training – Thursday, September 15th 8:30 – 11:30 am
- LRE Work Session/Public Budget Hearing – Thursday, September 15th 11:30 – 12:30 pm
- LRE Board Meeting – Thursday, September 15th at 1:00 in Muskegon
- Executive Committee – Tuesday, September 13th at noon in Ludington
- Finance Committee – to be scheduled in September

19. WCMCH Board Member Comments, Questions, Clarifications and Critique of Meeting: Mr. VanSickle noted his concern with Network 180 in the LRE. Mr. Prince thanked Mr. Bacon for his willingness to serve on the LRE Board.

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

21. Executive Session: There was none.

22. Adjournment: With no additional business, Mr. Bacon made the motion, seconded by Mrs. Shafer, to adjourn the West Michigan Community Mental Health Board of Directors meeting. The meeting adjourned at 6:45 p.m.

Kimberly Goodrich
Recording Secretary

James R. Prince
Chairperson