

WEST MICHIGAN COMMUNITY MENTAL HEALTH

BOARD OF DIRECTORS MEETING MINUTES

October 18, 2022

1. Call to Order: The West Michigan Community Mental Health Board of Directors met for its regular meeting in person in the Commissioner Room of the Lake County Courthouse, located in Baldwin, at 5:32 p.m. on Tuesday, October 18, 2022. Chairperson James Prince presided.
2. Roll Call: The following members were present: Mary Alway, Ron Bacon, Linda Baierl, Todd Dancz, Dawn Martin, Jim Prince, Andy Sebolt, Kay Seng, Lucinda Shafer, and Larry VanSickle. Absent: Pat Bettin (excused) and Dr. Jennifer Branning. A quorum was present. CMH staff members present were: Lisa Williams, Michele Condit, Bethany Sherfinski, Ellen Plummer, Josh Snyder, and Kimberly Goodrich.
3. Introductions: Don Avery from the LRE was present via Zoom.
4. Delegations, Communications and Expressions from the Community: There were none.
5. Approval of Agenda: Mr. Bacon made the motion, seconded by Mr. Dancz, that the West Michigan Community Mental Health Board of Directors approve the agenda as presented. The motion carried.
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 Mr. Sebolt, to approve the item on the consent agenda:
 - 7.1 Minutes from the 9/20/22 WMCMH Board of Directors Meeting. The motion carried.
8. 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.
9. Finance Committee Report: Mr. VanSickle reported that the Finance Committee did not meet but was forwarded a request to take an item to the board regarding additional repair and maintenance expenditures for FY23. Ms. Sherfinski noted that these were some updates we were going to do last year but didn't happen for a variety of reasons. We would like to move the dollars to our FY23 budget. Mr. VanSickle made the motion, seconded by Mrs. Seng, to approve the recommendation to allow additional repair and maintenance expenditures to move to FY23. The motion carried.
10. Healthcare Integration and Clinical Services Report: Ms. Plummer highlighted the work being done around self-direction (formally known as self-determination). We have identified areas of improvement related to the technical requirements of self-direction.

The project will hit every department in our organization and will impact many consumers.

Mr. Snyder reported that the organization is getting better at using its metrics and lean concepts to drive change and track performance. We reviewed, added, deleted or changed metrics by team with the new fiscal year.

11. Chief Financial Officer's Report: Ms. Sherfinski reviewed the financial report through the period ending August 30, 2022. Our revenues are evening out a bit, but we still expect some additional Medicaid revenue to bring the small variance in closer.
12. Chief Operations Officer's Report: Ms. Condit highlighted the work we've done over the last year looking at our specialized residential processes to get people into residential placement. Workflows and procedures were developed and tied to newly developed work instructions. All staff were trained to the new processes. The goal work gave us a significant opportunity to practice together and benefit from our Lean implementation.

Ms. Condit reviewed the 3rd quarter MMBPIS report. We met or exceeded the standard for all but one metric. The one we fell below on was related to seeing folks when they come out of inpatient services within seven days. We had one person who wasn't seen within the seven days.

Ms. Condit also reviewed the 4th quarter Strategic Planning report. We exceeded the goal of encounters, the Consumer Net Promoter Score, the year to date financial goals and the number of consumers served using evidence based clinical practices. The Employee NPS score has moved into the satisfactory range. We are confident that we will reach our BHAG of seeing 5,000 people by the end of 2025. Also included is the one-page strategic plan updated to reflect our work this new fiscal year. The BHAG is still the same and we've done a lot of work and identified the things in the year 3 column as the next things we need to work on to achieve the 3–5 year goals – enhancing workplace culture, embedding care coordination into culture, maximizing residential services, and ensuring access to a comprehensive, high quality crisis continuum. In this first quarter of 2022/2023 we will focus on identifying our expectations and behaviors for team members, researching curriculums for our staff around care coordination, diversifying our residential options and alternatives for consumers, and implementing some things for our crisis continuum. We met with our Leadership team to get everyone on the same page and the work has started. Dr. Williams stated that Ms. Condit and her team have done great work to evolve the strategic planning process and link it to our lean work and the SWOT process and create meaningful projects that build us toward our goals. Our work is much more targeted and projects strategically driven because of this work.

13. Lakeshore Regional Entity Update: Dr. Williams reported that the LRE Board meeting is this Thursday. The LRE heard back from the Department that the plan of correction it submitted specific to the request they sent about timeliness of reporting and regional spending was accepted. They would like feedback monthly now as opposed to quarterly. The region continues to work through some tensions amongst the members. CMH CEOs and Mary Marlatt-Dumas are working on communication between the LRE and helping the ROATs work and coordinate together.

14. CEO's Report: Dr. Williams reported that there have been some changes in some CDC guidance around COVID, but OSHA and MI-OSHA have not translated what that means to us as a healthcare organization so we are waiting to see when that guidance actually comes out. We haven't changed any COVID protocols.

Regarding public policy/system redesign, there was rumor that Sen. Shirkey and Rep Whiteford were working on a deal that could potentially put the House and Senate into a consensus recommendation that would pass during lame duck. However, Dr. Williams has heard that those talks have stalled out. We did receive an Action Alert from CMHAM to keep the pressure on the legislature and Governor to not take any action during lame duck on this issue.

Dr. Williams reported that we were awarded the CCBHC IA grant that we applied for back in May. It's something that we advocated for with Sen. Stabenow's office as a bridge until we could solve some of the problems with the demonstration (covering payment for non-Medicaid, covering all CCBHC required services, etc.). The grant is \$1 million a year for four years. It is not intended to build infrastructure but to balance out gaps and create a sustainable model through the demonstration. We have a variety of goals and activities related to this included in our annual strategic goals.

15. Upcoming Committee Meetings:

- LRE Board Meeting – Thursday, October 20th at 1:00 in Muskegon
- Executive Committee – Tuesday, November 8th at noon in Ludington
- CCBHC Committee – Quarterly Meeting to be scheduled in November

16. WMCMH Board Member Comments, Questions, Clarifications and Critique of Meeting: There were none.

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

18. Executive Session: There was none.

19. Adjournment: With no additional business, Mrs. Shafer made the motion, seconded by Mr. Dancz, to adjourn the West Michigan Community Mental Health Board of Directors meeting. The meeting adjourned at 6:14 p.m.

Kimberly Goodrich
Recording Secretary

James R. Prince
Chairperson