

**Committee of the Whole Meeting
Minutes**

June 18, 2020

12:30 PM

1. ATTENDANCE:

Northern Lakes Community Mental Health Authority by remote virtual meeting. Rose Denny called the meeting to order at 12:34 p.m.

Board Members Present: Betty Bushey, Nicole Miller, Randy Kamps, Ben Townsend, Rose Denny, Pam Babcock, Lorelei King, Nina Zamora, Ty Wessell, Sherise Shively, Mary Marois, Al Cambridge, Dan Lathrop, and Dean Vivian.

Board Members Absent: Sherry Powers (advance notice) and Angela Griffis.

Others Present: Karl Kovacs, Chief Executive Officer; Deb Lavender, Executive Secretary; Paul Keller, Director of Recipient Rights; Lauri Fischer, Director of Finance; Tracy Andrews, Director of Integrated and Managed Health Services; Aaron Fader, Executive Administrative Specialist; Carrie Gray, Chief Population Officer for Intellectual and Developmental Disabilities Services; Joanie Blamer, Chief Population Officer for Mental Health Services; Kari Barker, Director of Quality and Compliance; Matt Leiter, Human Resources Director; Darryl Washington, Director of Long Term Care and Support Services; Hannah Driver, Traverse House Director; Amy Kotulski, Interim Club Cadillac Director; Jeremiah Williams, IT Supervisor; Jessica Williams, Performance Improvement Specialist; Alex Cooper, IHC Nurse Practitioner; Deborah Jacob, Clinical Therapist; and Traverse House Clubhouse Members.

2. RECEIVE AND REVIEW MAY 21, 2020 MINUTES:

Moved to Board meeting.

3. PUBLIC COMMENT:

None.

4. UPDATE ON RECIPIENT RIGHTS:

Karl reviewed the Monthly Update on Recipient Rights and shared the statistics. Karl identified that we received acknowledgement that Courtney Russell passed and completed her training with MDHHS ORR. Paul reported that they are reviewing requirements for guardian and recipient training and expect to have completed in July. We are coordinating how to implement the training and inform interested parties. Question about whether RIF timeframe compliance percentages would continue to increase. We have surpassed last year's number of investigations. The numbers and caseloads will be able to be handled with adding Courtney and Brittany who have completed training.

5. CLUBHOUSE PRESENTATION:

Hannah Driver, Traverse House Clubhouse Director introduced Amy Kotulski, Interim Director of Club Cadillac. A Power Point presentation was reviewed sharing information about what is a Clubhouse Psychosocial Rehabilitation Program, How Does the Clubhouse Help?, information about Clubhouse International, a Work Ordered Day, Employment, Education, Community Involvement, Challenges during COVID-19, Successes during COVID-19, and Statistics. She identified that they are preparing to return on July 27th and the preparation week will be July 20th. Clubhouse members spoke about their participation in clubhouse, membership and activities since COVID-19. Board members shared their comments.

6. INTEGRATED HEALTH CARE PRESENTATION:

Tracy Andrews provided a Power Point presentation overviewing the Integrated Health Clinic and goal #1 of our Strategic Plan, reviewed Consumer Ends, staffing, services (primary, mental health, Health Home and potential areas of expansion), persons served, and becoming integrated. Suggested possible areas for additional treatment – partnership with foster care homes, sports physicals, annual physicals for children in foster care, individuals in assisted living. Responded to questions regarding – scope of physical health and behavioral health services, providing minor procedures. Alex Cooper identified types of services that he offers – annual physicals, chronic and acute disease management, minor procedures and other functions of family or primary care practice, preventative care. He noted that we are looking at expanding to pediatrics. Specialty services we refer out. Tracy noted that we are working on moving from co-locating to being fully integrated.

7. COMPLIANCE AND QUALITY REPORT:

Kari Barker referenced the clubhouse presentation and how the services that we provide impact individuals and the importance of maintaining accreditation, remaining in good standing with Medicaid, Medicare and other funding sources for quality improvement and compliance. Kari reviewed the Second Quarter FY 2020 identifying events, outcomes, performance indicators, clinical record reviews and other agency quality projects. Reviewed compliance activities for clinical review/audit, compliance inquiries, outcomes, and Medicaid Verification. We have reached our one-year anniversary with NoLa our electronic health record. It has been very helpful to be able to pull data for quality and compliance from this system. Responded to questions about satisfaction surveys for children and family home-based services. Noted that we are doing over the phone surveys for parents, guardians, and individuals with intellectual developmental disabilities. Comments about effectiveness of doing our job and making sure that we all succeed.

8. COW MEETINGS – POSTING, DISTRIBUTION, ADVERTISE:

Karl referenced how we disseminate the Board Agenda and Minutes and posting of our meetings. He identified that we have not historically done this with the Committee of the Whole Agenda and Minutes. Board Members provided feedback – minutes are the proof of the action what the Board has decided and there is no reason not to include; would be an effort to open up to the community more and put a meeting notice in the newspapers once a month, it could be directed to the website; integral part of the community; learn more at COW meetings than they do at Board meetings and in favor of distributing to counties; post COW meetings – discussion and presentations at this meeting; open to the public. Karl will operationalize.

9. AGENDA PLANNING OPTIONS FOR JULY 16, 2020

Reviewed the agenda topics for July 16, 2020 which will be a remote virtual meeting: Update on Recipient Rights, Recipient Rights Semi-Annual Report, Evidence Based Practices Presentation, MI Choice Waiver Presentation, Board Leadership Journals and distribute and complete the following forms: 1) Conflict of Interest Disclosure, 2) Code of Conduct Declaration, and 3) Board Membership Survey.

10. MEETING EVALUATION/COMMENTS:

The meeting evaluation was not completed and there were no comments provided.

11. OTHER/ADJOURN:

None.

Meeting adjourned at 2:21 p.m.

Respectfully Submitted,

Deb Lavender
Executive Secretary