



**Northern Lakes
Community Mental
Health Authority**

**Board of Directors
Packet**

April 21, 2022



Administrative Office, 105 Hall Street, Suite A,
Traverse City, MI 49684

BOARD AGENDA

The Northern Lakes Community Mental Health Authority Board will meet on April 21, 2022 at 2:15 p.m. Northern Lakes Community Mental Health Authority, Virtual Meeting and 527 Cobb Street, Cadillac Dial 1-810-258-9588 Conference ID

<u>TIME</u>	<u>ID #</u> <u>ITEMS</u>	<u>POLICY #</u>
2:15 p.m.	Roll Call Pledge of Allegiance Appoint Timekeeper Confirmation of Quorum Consideration of Agenda Conflict of Interest Declaration	
2:20 p.m.	Consent Agenda - Board Consideration of Board Consent Agenda* 1 Board of Directors Minutes – March 17, 2022 – <i>Approve</i> 2 Committee of the Whole Minutes – March 17, 2022 – <i>Approve</i> 3 Financial Statements – <i>Receive and File</i> 4 Contract Summary – February 2022 – <i>Approve</i>	
2:30 p.m.	Ownership Linkage A. Citizen Comment (May be limited to three minutes by Board Chairperson) B. Correspondence to the Board-Past Meeting b. Board discussion/action C. Correspondence to the Board -Current Meeting c. Board discussion/action D. Ownership Communication	1.1, 3.1
2:40 p.m.	6 Chief Executive Officer’s Report	
2:55 p.m.	7 Northern Michigan Regional Entity Report NMRE Minutes	3.4
3:05 p.m.	Assurance of Organizational Performance A. Receipt of CEO Monitoring Reports CEO Response to Monitoring Reports 8 1.0 Consumer and Community Ends (Internal Inspection)* (1.0.1 – 1.0.5) B. New Operational Worries C. April Monitoring Assignment 9 2.8 Communication & Support to the Board (Internal Inspection) (1.0.1 – 1.0.5)	3.0, 3.2

3:15 p.m.	Board Means Self-Assessment	3.2, 4.2
	A. Receipt of Board Monitoring Report CEO Response to Monitoring Report	
10	3.3 Board Member Code of Conduct (Direct Inspection)*	
11	3.6 Board Chair Functions (Direct Inspection)*	
	April Monitoring Assignment	
12	3.7 Governance Committees (Direct Inspection)	
13	3.7A Recipient Rights Advisory Committee (Direct Inspection)	
14	3.7B Recipient Rights Appeal Committee (Direct Inspection)	
3:25 p.m.	Governance Policies Discussion and Assessment	3.1
	A. <u>Ends</u>	
	B. <u>Executive Limitations</u>	
	C. <u>Governance Process/Ownership Linkage</u>	3.4
15	-RRAC Minutes – April 5, 2022 - <i>Review and Approve</i> * -Posting Meeting Minutes on Website	
	D. <u>Board/CEO Linkage</u>	
	E. <u>Motion to Rescind Motion to Offer CEO position to Interim CEO</u>	3.1
	F. <u>Interim CEO</u>	2.7, 2.8
	G. <u>Motion to Engage Hiring Solutions LLC</u>	3.1
	H. <u>CEO Search Process and Budget</u>	3.1
3:35 p.m.	Ownership Linkage	1.1, 3.1
	A. Citizen Comment (May be limited to three minutes by Board Chairperson)	
3:40 p.m.	Announcements/Board Members Reports/Board Association	
3:45 p.m.	May 19, 2022 Agenda Planning	
3:50 p.m.	Meeting Evaluation/Comments	
3:55 p.m.	Adjournment	

NOTICE: If any person with a disability needs accommodations, please call the CEO's Office three days prior to the posted meeting date.

NEXT MEETING: May 19, 2022

* Action Items

** Action from Committee of the Whole

*** Action Other

Northern Lakes Community Mental Health Authority
Board of Directors Annotated Agenda
April 21, 2022

2:15 p.m. Call to Order and Start Up

Please note that Consideration of the Agenda has been moved to this section of the agenda and that each meeting Board Members may declare any new conflict of interest.

2:20 p.m. Consent Agenda

Board Members can request any item be removed to allow for discussion as part of the board agenda.

2:30 p.m. Ownership Linkage

Definition - Connecting the authority and accountability to the owners.

As shown, this includes Citizen Comments (May be limited to three minutes by the Board Chairperson), Correspondence to the Board (Past Meeting and Current Meeting) and allows time for planned Ownership Communication with other community agencies or individuals.

2:40 p.m. Chief Executive Officer's Report

The Interim CEO Report will be reviewed with the Board.

2:55 p.m. Northern Michigan Regional Entity Report

The NMRE Board meeting minutes will be shared if available.

3:05 p.m. Assurance of Organizational Performance

Definition – Monitoring of how NLCMHA is complying with policy.

There are three components. 1. Receipt of CEO Monitoring Report – 1.0 Consumer and Community Ends (1.0.1 – 1.0.5 (Internal Inspection). 2. New Operational Worries – This allows time for Board Members to raise and discuss any new concerns they have that are not on the agenda and may be worries that would be added to a future agenda. 3. April 2022 Monitoring Assignment – 2.8 Communication & Support to the Board (Internal Inspection). Please complete in advance and submit to the Chairperson.

3:15 p.m. Board Means Self-Assessment

Definition – Review of policies that the Board is responsible for.

There are two components. 1. Receipt of Board Monitoring Report – 3.3 Board Member Code of Conduct (Direct Inspection) and 3.6 Board Chair Functions (Direct Inspection). 2. April 2022 Monitoring Assignment – 3.7 Governance Committees (Direct Inspection), 3.7A Recipient Rights Advisory Committee (Direct Inspection) and 3.7B Recipient Rights Appeal Committee (Direct Inspection).

3:25 p.m. Governance Policies Discussion and Assessment

Definition – The Board's definition of, and rules, for its own job.

We have placed in bulleted format the four monthly standing policy topics by Policy Governance title. Board Members are encouraged to bring items they would like discussed.

- Ends
- Executive Limitations
- Governance Process/Ownership Linkage
 - RRAC Minutes – April 5, 2022 - *Review and Approve**
 - Posting Meeting Minutes on Website
- Board/CEO Linkage
- Motion to Rescind Motion to Offer CEO position to Interim CEO
- Interim CEO
- Motion to Engage Hiring Solutions LLC

- CEO Search Process and Budget

3:35 p.m. Ownership Linkage

Definition - Connecting the authority and accountability to the owners.

This is the second opportunity for Citizen Comment. (May be limited to three minutes by the Board Chairperson)

3:40 p.m. Announcements/Board Member Reports/Board Association

This is an opportunity for Board Members to report on Board visitations, committee meetings, conferences, meetings attended, events or other specific areas of mental health related interest.

3:45 p.m. May 19, 2022 Agenda Planning

Board Members will discuss topics to include on next month's board meeting agenda.

3:50 p.m. Meeting Evaluation/Comments

Time is scheduled to allow Board Members to evaluate the meeting using the meeting evaluation form.

3:55 p.m. Adjournment

NEXT MEETING – May 19, 2022



Administrative Office, 105 Hall Street, Suite A, Traverse City, MI 49684

Board of Directors Meeting Minutes

March 17, 2022

2:15 p.m.

Northern Lakes Community Mental Health Authority, 527 Cobb Street, Cadillac, MI and Microsoft Teams Meeting (Virtual) Called to order at 2:23 p.m.

Board Members Present: Randy Kamps, Penny Morris, Ben Townsend, Rose Denny, Justin Reed, Barb Selesky, Pam Babcock, Nicole Miller, Sherry Powers, Mary Marois, Ty Wessell, Al Cambridge

Virtual - Greg McMorrow, Angie Griffis

Board Members Absent: Nikki Colechio (advance notice) and Dan Dekorse (advance notice)

Others Present: Cadillac – Joanie Blamer, Interim Chief Executive Officer; Lauri Fischer, Chief Financial Officer; Matt Leiter, Director of Human Resources; Tracy Andrews, Director of Integrated and Managed Health Services; Brian Newcomb, Director of Recipient Rights; Heather Sleight, Administrative Specialist; Jeremiah Williams, Information Technology Supervisor; Deb Lavender, Executive Secretary; Kari Barker, Quality and Compliance Director; Andy; Judy Barrett, NAMI; Cheryl Tolowey, NAMI.

Virtual – Darryl Washington, Director of Long-Term Care and Support Services; Curt Cummins, Medical Director; Carrie Gray, Chief Population Officer for Individuals with Developmental Disabilities Services; Ann Ketchum, Programmer Analyst II; Brie Molaison, Customer Service Specialist; Jessica Williams, Performance Improvement Specialist; Michelle Dosch, Compliance Secretary; Marsha Brown, Home Supervisor; Deb Freed; Chris Biggar, Finance Manager; Kelly Hoag, Administrative Specialist; Kasie Morse, Customer Service Provider; Aaron Fader, Executive Administrative Specialist; Michelle Michalski, Human Resource Specialist; Alyssa Hansen, Human Resources Supervisor; Andrew Waite, Behavioral Health Home Manager; Angela Wilgenhof, RN; April Weinrick, Home Supervisor; Brittany Moen, Recipient Rights Advisor; Dan Mauk, Chief Information Officer; Dave Simpson, Residential Services Administrator; Deborah Bumbalough; Erika Solomonson, Child & Family Manager; Jan Pytlowany, Customer Service Provider; Kaitlyn Reinink, Nursing Supervisor; Kate Dahlstrom; Mardi Link; Melissa Bentgen, Accounts Payable Team Lead; Melissa Trout, Child & Family Manager; Pamela Blue, Justice Diversion Operations Manager; Tiffany Fewins, Administrative Assistant; Trapper Merz, Business Intelligence Specialist; Treasa Cooper, Reimbursement Coordinator; 12 Unknown Public.

Confirmation of a Quorum – yes

Timekeeper – Rose Denny

1. CALL TO ORDER:

The meeting was called to order at 2:23 p.m. by Randy Kamps.

2. AGENDA:

MOTION:	Approve the Agenda of March 17, 2022 as presented
RESULT:	ADOPTED [UNANIMOUS]
MOVER:	Rose Denny
SECONDER:	Ben Townsend

Pam referenced in light of Haider's letter to us I wondered about the items under Governance Policies in item E and F that those be removed from the agenda. Randy asked why? Pam assumed that the agenda was created before we received the determination from Haider about the confusion about the way the motions were handled. As she read this letter I read that all of our motions were in the correct order and everything would stand as is. Given that the letter came after the agenda I thought perhaps this would be hashed out because it was the proper motions and to find out that we did. Randy identified from the chair's perspective there is no correlation between what Haider was looking at and the agenda as presented today. Since now we have a motion and a second and for civility I thought we would get ready to vote. Barb sked for clarification there is an official letter from our legal that is what I read that we have an official response from the official request that both motions were in order. Randy noted absolutely, no question. Any other questions? Justin asked if there is anyway on the governance policies that we can go ahead and have a discussion on E on the agenda. Randy is struggling because this has nothing to do with the agenda. We will get to that agenda item and we will go through it and dispense with it in accordance to Roberts Rules of Order. I can guarantee that. He asked for other questions. All those in favor? Anyone opposed? Motion carries.

3. CONFLICT OF INTEREST DECLARATION:

None.

4. CONSENT AGENDA

Consideration of the Consent Agenda

Randy identified that we can take all as a group or if you so wish we can remove items and vote on those separately. What is your pleasure?

Pam asked to remove the minutes from the last meeting. Barb seconded the motion. Al identified that does not require a motion. Any Board member has the right to remove anything from the Consent Agenda for discussion. Randy asked if there is anything else you would like to remove from the group? Nicole asked for clarification about the date the minutes you are referring? Randy noted I believe, what is the exact date does the speaker wishes to remove from voting on from the entire package? Pam responded February 17. Since the chair gets to participate the chair would like the financial statements removed from the package.

MOTION:	Approve the February 17, 2022 Minutes
RESULT:	ADOPTED [UNANIMOUS]
MOVER:	Ty Wessell
SECONDER:	Rose Denny

Pam noted that I know that we went to the transcript version of this for accuracy. She referenced page 23 going back her voice does not transcript well and she wanted clarity and point out how the transcript can make a difference. It says I would agree with Ben if Joanie would be willing. What it captured in the next sentence "this is no difference". She said she did not say no. The follow-up sentence supports that. When we went through the interviews with Karl the candidates with the full Board I had "for" instead of "four". It put in an extra word in there. She knows how our minutes are being scrutinized she wanted to make sure that people look at what it captures what they said. Randy noted the chair would suggest that you make a motion to amend the minutes of February 17 and if there is a second we will then debate that and move on.

MOTION: Amend the Meeting of February 17, 2022 to correct the word spelled for in the Minutes to four.
RESULT: ADOPTED [UNANIMOUS]
MOVER: Pam Babcock
SECONDER: Penny Morris

Randy identified it was moved and supported. Randy asked for any discussion? Randy identified what we need to do at this juncture is to probably go back to the actual recording and have it transcribed word for word. That is the only thing, in the chair's mind, that will identify exactly what was said. Pam noted what she is sharing that it captures words incorrectly sometimes. Randy noted he understands. If we can do two things. One, if we can go back to the actual transcript and write that down word for word I don't know that this under I can't tell you but I do know is that if we go back to the transcript what we received last time between meetings we received the actual transcript language. Then if that is something you wish to clarify I think it is in good order for you to make at the next meeting to specify exactly how you would like those minutes to be amended but I would defer to the Parliamentarian on this. Minutes are minutes and what you meant to say I am going to defer to the Parliamentarian on this. AI identified the question is are you simply saying the use of the word "for" and meant "four" rather than for? Pam noted in the sentence prior it says that I said there was no difference. I did not say that but I meant to say that the second sentence was verify what I was saying in the first sentence if you say the search committee for Karl brought forth to us. In the second sentence it is the same grammatically on the word four. I probably wouldn't have brought it forward if the second sentence did not verify my meaning of the first sentence. But I have said several times that our search was different this time because with Karl we had four candidates and this time we had two. AI asked if all were corrected was a word that you said then I feel we can go ahead and use that now. If it is a matter of something else that was transcribed then I would say that Randy is right then we should go back and listen. If it is simply correcting something that you said then we should be able to do that. Pam noted that I know that my voice doesn't pick up on the microphone and they misunderstand me all the time. Randy noted that while the chair accepts that the chair will not allow the wording based upon what you intended because we would be at this for 300 years if we did that. I don't mean to be dismissive we have got to stick according to Hoyle and according to Roberts Rules of Order. Are you satisfied at this point with correcting the word for? Would you like to go back and have the actual transcript reviewed in that area and recorded word for word based upon what that says? Pam noted that she would be happy with the word for corrected because the intent is still there regarding the previous sentence. Randy identified then if you would please restate your motion to say exactly that. He is going to put words in your mouth. I move to amend the meetings of February 17 to correct the word spelled for in the minutes to four. He asked if that worked? Pam said that works. Randy noted I want to put words in your mouth. Randy noted as that is put forth in a motion whoever seconded are you willing with that clarification to reissue your second? Penny stated I am. Randy noted it has been moved and seconded. Is there any further discussion? All those in favor say aye. Is there anyone opposed? Motion carries. Thank you.

MOTION: Approve the February 17, 2022 minutes as amended.
RESULT: ADOPTED [UNANIMOUS]
MOVER: AI Cambridge
SECONDER: Ben Townsend

Financial Report – Randy noted that one of the things that this speaker noted was the third line on the right hand side Healthy Michigan Provided Advances versus Expenses or Revenues Earned and that we have this year to date overspent this is just a little blip in the radar then fine. I want this clarified for the record. He asked if you would allow Ms. Fischer to come forward. Lauri identified I guess I am not quite understanding your question but it has been my experience in the last few months that the amount of our spending on Healthy Michigan Plan services has been very close to capitation. Because it is within \$100,000 when we are five months into the year this could go either way by the end of the year. If you look at the NMRE

finance reports that we are pretty consistent with the other CMH Boards that we are all under Medicaid but pretty consistent with the level of capitation on Healthy Michigan Plan dollars. Randy said thank you. It is important for us to be mindful that this is known by some I guess. There is a shift going on and I just wanted to draw the Board's attention to and that is why I asked the question for clarification. Al noted for the benefit of everyone on the Board he referred to page 58 on the right-hand corner where there is a summary it shows our funding sources where we stand in terms of our available versus what we spend. Lauri noted it has been her opinion recently that Healthy Michigan Plan enrollment was enrolling because as people were getting redeterminations on Medicaid the MDHHS has been using the easy method of Healthy Michigan Plan enrollment. As the redeterminations are frozen those movements are non-occurring. The experience that we are having with the Healthy Michigan Plan they are not necessarily folks that we have a relationship with and as they come into our system they are getting a significant level of supports short term and may not continue with us. That is our experience with Healthy Michigan Plan. There are not nearly the dollars but the usage of that is significantly different than Medicaid. Nicole noted that is also an item on page 56 as well as 57 and the middle of the page on the top Medicaid spending as compared to regional funding advances and that was explained in the narrative. Randy identified the other thing on page 58 I want to draw your attention to the very bottom and it says directly provided services 39.2% that was previous month and then current month 38.9%. I draw that to your attention. These are things that we need to be watching and mindful of, etc. Same things holds true for contractually provided services. Those are growing as the others are shrinking. We have issues. I draw it to your attention. Moving on to the next page 57 outlined, thank you, the General Funds in 2021. Go down to line 65 and it says crisis. We have had a lot of discussion on jail services. For the good of the order, I wanted to notate that this includes 1,112 crisis contacts in jails, we don't know in which jail but in jail, totaling \$306,700. The clarification that I would like is one \$342,788 and then we have \$6,784 service dollars to meet Medicaid deductibles. If you could just quickly explain what that means in process terms that would be helpful. Lauri noted on your first comment when we talk about the amount of the percent of the services provided to contractually versus directly employed. That is moving because of the direct care wage increase. The majority of the direct care wage premiums are going to providers so that is growing that percentage. That is the direct connection there. Because we are not decreasing the direct care services. In regards to the crisis I want to make sure you understand that this is only one unit that I am reporting on in the jails. Many other services are provided in the jail. Case management, psychiatric services, ACT, assessments. Many other services. The majority of crisis in General Funds occurs in the jail. Keep that in mind that is not the only service that we do. Now the reason there are deductibles in crisis is that if a person has Medicaid and is entering our services it is important to remember when in my narrative there are two situations where an individual had to meet a deductible. Number one, when they enter our services they did not have Medicaid and therefore they were frozen. The second, would be if a person if they have not met the deductible to begin with then their Medicaid was not frozen or they are new to qualifying for Medicaid. Those are the two areas where the deductibles are still coming through to us. In regards to crisis, if a person is new it is retroactively qualified for Medicaid and has a Medicaid deductible and will not go into effect until they meet their first Medicaid that was frozen because of the public health emergency. Randy noted that the reason he asks these questions because our public needs to have a better understanding as to how we utilize General Funds. The reason I emphasize the words General Funds is because it is my understanding that we have more leeway with General Funds as far as allocation than we do with Medicaid or Healthy Michigan funds Correct? Now I will continue on. Since you have this groovy new accounting package is it possible to have this broken down by county? I don't expect you answer it right this minute but I think that would be to the seekers it would be helpful information as we move down this path. Because we have said rightfully that our allocations are based on per capita. So, counties come up with money they expect understand and we expect some quid pro quo. Then the same thing can maybe be applied to General Funds. This is where you start separating art from science because the science would say strict per capita allocation but we have a difficulty of turning into an art with by which I mean we look at highest need as we determine the methodology we determine need. If we cannot get too over complicated with this let's say if we can see if we can break down by county and that is the first step and I thank you for that. I also thank you for clarifying for all concerned on the prior page that the services percentages were driven by the extra wage that was paid more so than anything else. To the naked eye you can waltz off into all kinds of theories. Thank you very much. Lauri, are you asking then the General Fund page from last year be broken down by counties in the form that it is in? The reason that I ask

that Randy is because when we provide our annual presentation to the counties, and we separate a lot of things into services but we haven't done is to specify the General Fund portion of the types of service. The page is very full of numbers. If I take the same counties and specify it differently it will get fuller. The difference now is that with the EQI or the quality initiative that the Department has taken on our reporting formats have changed significantly. So, I have the ability to report differently, and this would probably be the year to do that. I do not want to be too complicated but specifically a lot of attention is made to local, a lot of attention could be made to General Funds. We have also been reporting service by area. I can devise a method that is the best information for those counties. Randy noted he appreciated that. The reason he asked the question was because General Funds have more discretion than others and for my perspective he would like to see that what he you would talking about.

Randy noted Mary had a question. Mary asked is this, I am confused, is this State General Fund or Local General Fund? Lauri noted State General Fund. Mary wanted to know if we can break down Local General Fund or the Local match? Lauri noted it is important to understand the required 10% local subsidy services is \$153,000. General funds are used to provide services to people who don't have Medicaid or Healthy Michigan Plan or services provided in a method or a location that is not covered by Medicaid or ATP. There are types of services that is provided to people without Medicaid are 100% covered by General Fund and that is residential and community inpatient. Those services can be covered 100% by General Funds without the local percentage requirement. So, the \$153,000 is the portion of General Fund services that I have to match to local money with. Those local monies that is one portion that I have to use it for. The other portion of local services is not reported in here is the state inpatient. So, what you're asking, sorta, but it is not going to fit in a nice little graph like this because I am going to have to pull anything I have to pay such as a local match contribution with local funds that are not a service. The \$458,00 that we currently pay to the NMRE to pay the state to draw down additional Medicaid. Those other categories are not in NOLA for service provision. Mary asked when we pay the \$400,000 some thousand dollars do we get that money back? Lauri noted according to the state we get it back in Medicaid. AI noted we give them unrestricted dollars. Randy recognized Barb. Barb noted my only comment is this in the realm of administration and I can see if we have a definite question we can ask and expect an answer but I don't know whether some of this is need to know stuff as far as I am concerned and we don't need to know. It is getting real cumbersome that we have to know all about. I can hardly wait to get a sheet of paper and leave it in in my car. We are just looking for trouble. That doesn't preclude inquiring for appointed information. Randy said may I respond it is the Board's fiduciary duty to oversee everything related to NLCMH and this certainly falls in our scope and purview.

Randy recognized Nicole. Nicole noted I believe it is one of our main jobs in the Mental Health Code and discuss in an open meeting.

Randy recognized Justin. Justin noted we could also ask our county partners to see what they want as far as questions about our finances.

Randy recognized Joanie. Joanie noted she appreciated what you are saying Barb and it can be cumbersome and confusing. I actually appreciate that we are talking about this and talking about at our last meeting we discussed when the emergency orders expire, telehealth codes expire. We shared that we have some concerns about that. When we have concerns about that we have to let you know and that you have a good understanding of that so you can respond to the public when asked. She would be happy, if the Board wishes, to provide a workshop so that we can answer any questions about finances.

MOTION:	Accept the Financial Reports as written
RESULT:	ADOPTED [UNANIMOUS]
MOVER:	Randy Kamps
SECONDER:	AI Cambridge

Al asked if we approved the rest of the consent agenda? I think when we voted we didn't really approve the Consent Agenda less the financial statements and the February 17 Minutes. Randy noted he would go to the secretary to verify that. He appreciated the need for clarification. Al asked if there was a motion to approve the consent agenda? Deb noted not specifically, no. Randy noted thank you for that clarification.

MOTION:	Approve the Consent Agenda less the Minutes of February 17 and the financial report.
RESULT:	ADOPTED [UNANIMOUS]
MOVER:	Al Cambridge
SECONDER:	Nicole Miller

Randy thanked Al for keeping us between the pipes.

A. *Citizen Comment* – Randy noted we have the first opportunity for public comment. He read the public comment statement. Randy asked public if they want to make public comment to come forward now. He reminded you have three minutes to make your comment. Is there anybody that wants to make public comment at this time?

Judy Barrett she is here from NAMI. She wanted to share what NAMI does and what happened in the last couple of weeks. She wanted to share an experience, so we know what it's like. We had a family in crisis who was picked up by the police. He was an untreated young adult and was picked up with violence going on. He was taken to the ER. The family called NAMI because they didn't want to go through the crisis alone and they were able to offer support. The procedure at ER was long and fussy, of course, with mental health issues. They have to allow enough time if there were substances so they can evaluate. Anyway, it started at 6:30 p.m. on a Friday night. ER staff were clear that this person qualified to be admitted. But before he could be admitted, I didn't know about this before, the ER has to go through a company called ProtoCall. Even though the doctors and Medicare was ready to admit him everything had to get held up. You need to know that this ProtoCall that we are contracting with them knew nothing about this. The ER staff and Behavioral Health Director at Munson don't care for this. It is not helpful. It holds up the process for two to four hours. Staff to have to wait and wait an hour or two for ProtoCall to evaluate with the decision that is going on locally aside whether this person could be admitted or not. So, this family had been there since 5:30 or 6:00 p.m. on a Friday night. Finally, at 1:30 a.m. NAMI had a response from ProtoCall. We don't know whether this is the best thing to be doing offsite instead of our own staff, CMH staff and Munson staff. I asked and talked to a bunch about it and they said they talk to CMH every month. We need to get rid of ProtoCall. I appreciate the chance to tell you about this. Randy thanked them. He asked if there was anyone else to make public comment at this time? Is there anyone on line that wishes to make public comment? None.

B. *Written Public Comment* –

Randy noted that there is a new section on the Board Agenda, item # 9 Written Public Comment Past meeting. Board Discussion. The purpose of this is to address some communication issues and hopefully attempt to resolve some communication issues so that we can move forward in a more, for lack of a better term, pleasant manner. The Carver model tells us or suggests that the Board should speak as one voice. What better way to speak as one voice is during a meeting. During public comment this will give us an opportunity to respond factually based upon what is written. With that we start with written public comment past meeting. Unless anybody else has anything I will forge ahead with what I've got.

Written Public Comment – Past Meeting

Randy identified at the last meeting we discussed a letter from Terri Kelty and you're all familiar with that? We then requested the actual language be provided. You have the actual reported language on page 34 of your packet and the only other thing I noted was in looking at how he might respond on behalf of the Board and what I will do as a practice until you provide to me differently is go ahead and respond but then certainly chime in if there is something you find inappropriate in my response or wish

differently and then we can that pertained to this issue and highlighted the sentence “Mary asked how many of the complaints since the first of the fiscal year came from Munson Healthcare?” That is what was reflected in the minutes. Then we went back to the actual transcript, and you see what was written there. Then he goes back to Ms. Kelty’s requests that we review this and offer a change or apology something of that nature. My personal response to this is I don’t see that this rises to something that could even be close to retaliating or anything of that nature it was an offhand comment in conversation. All I will say is outside the mention of Ms. Kelty’s name in the actual transcript it certainly wasn’t the intent that delve into the matter or anything like that and I appreciate her bringing it to our attention I certainly would be mindful that we not to say anyone’s name. I think that, I guess guidance going forward as far as I am concerned is that we stick to what we have done historically and that is we generalize it. Does this come from a consumer, did this come from a staff member and that kind of thing. But I don’t see anything egregious in what was discussed. That would be my response to Ms. Kelty.

Randy identified the next item in old correspondence which is in page 61 of your packets was a letter from a Deborah Bumbalough. What I am going to refer to is page 61 transparency of the Board. Did not the Board bring up the letter that they received that was signed by at least 50 employees? I have to be absolutely honest, and I believe we already placated that she never saw a letter. I certainly never saw a letter so if there is a letter. I didn’t see it, Mary didn’t see it and in all candor if the writer of this letter would provide us with that letter we would certainly receive it and that is the way I would respond to that. Moving on. Now we go to written public comment current meeting.

Mary asked to be recognized. He responded yes. Mary said there is another allegation that I would like to clear up. There was also in the Deb Bumbalough letter and that was in reference to, I don’t have it in front of me, in reference to a Board member who had supposedly been to Sam’s Club had supposedly said something and at the last Board meeting, that I was not at, and one of my fellow Board members jumped to the conclusion that that was me that was at Sam’s Club and that it was me that had inappropriately said something. I want to clear up for the record that never occurred. It never occurred with me being there. The date in question was the 15th of January. The 15th of January I was in Destin Florida. I did not shop at Sam’s Club, I was not there and would not have been there. I would never said the alleged words. I want to clear that for the record. Nicole addressed the chair the date was before January 10. Mary said that even then she was in Florida. She was in Florida from the 30th of December. I’m sorry I misread that. Randy said he appreciated that and the reason I didn’t bring that up is because my feeling is people deal with anything factual but don’t give us, you can give us anything you want. Mary said for my reputation it was a transcript that was included in the minutes and that is why I wanted to respond to public comment. Randy noted that you have every right, and I am glad you clarified that. Randy went back and reiterated. We will consider everything under the sun but if it has no name attached to it and I can tell you the number of anonymous emails, etc. etc. it just will be disregarded. When you have something fine give it to us. All right. Moving on.

Written Public Comment – Current Meeting

Randy noted unless someone has any comment regarding these I will just go through them and give what I think. I will give you my response and we can go from there. The first is page 63 is sent to us by Ms. Dahlstrom and she questions our By-laws. I did look at the By-laws, our By-laws to the best of my knowledge do not contain any reference to numbers of consumers. It may very well be someplace else but our By-laws, Article 3 Board Membership. Membership of the Board appointed by the county commissioners shall be consistent with that requirement of P.A. 258 of 1974 as amended and as specified in the Enabling Resolution. That is the only way I can respond to that. The chair recognized Nicole to speak. Nicole noted as a practice we have done 30% of our membership as a category of family member or consumer or a primary consumer and that is accurate with the membership. Randy said very good. Next. Moving on.

Randy referenced page 64 we have an email from Mardi Link of the Record Eagle. She asks a question “Can you comment on Dave Pankotai declining to take the offer of employment?” Randy’s response is

no he cannot comment. If the Board wants to comment on it they certainly may. He does not have any comment. Mardi asked "How did his initial job application, submitted through the National Council for Mental Wellbeing get "lost"?" Randy responded honestly I did not know. He does not know whether it was lost or not. I know there was a very very difficult process that we went through and it was what it was. Next. Mardi asked "how did his official job offer, which was supposed to be submitted January 20, not arrive until February 17?" Randy responded there is no rule as when things are to be submitted. Nothing was outlined. I would say. Barb said I thought it said February 1. Randy said your right. Randy restated the question. He said people expect a lot of things but expectations and supposed to's are two different things. Continuing on.

Randy referenced on page 65 you have a letter from BDAI. The second paragraph says "First, you had a motion to begin a new search process when you violated its terms with a motion to hire Ms. Blamer without a proper motion to "reconsider"". Randy noted no the motion to establish a new search project remains with us. It has never been rescinded nor has it been reconsidered. The difference between a reconsider motion is a reconsider motion occurs at the motion has passed during a meeting. A motion to rescind occurs after that meeting and we will go through that in a minute because we will have a motion to rescind. We will talk about that then. Randy referenced "Secondly, serious questions about "backroom dealing" jump to mind with any intelligent reader of the initial coverage of this decision by the Record Eagle – more investigating reporting to come". He reminded Board members that we are subject to the Open Meetings Act. In Article 15.263 (2) All decisions of a public body must be made in a meeting open to the public. Randy noted that there is an accusation here but there is no substantive proof that that did actually occur. If there is substantive proof that that did actually occur I am speaking did folks line up ahead of time and get ready to vote at the last meeting. Did they do that? If that could be proven then those people can be subject to a \$1,000 fine. Next page. Item (3) All deliberations of a public body constituting a quorum of its members must take place at a meeting open to the public except as provided in Sections (7) and (8). Randy said all I can say is there is no proof. All I would suggest is when things like that occur don't be surprised when you get accusations like this and if it actually did occur and can be proved your accountable to yourself at the end of the day. How you operate when no one is looking defines the individual. Take it for what it is worth. Randy noted "Open Meetings Act cries "foul". Randy noted no that is the same thing. Randy referenced "Lost Applications? Inside applicant accused and fired? A secretive selection process? Delay, etc. etc.?" Randy identified it has been no secret that the process that we went through did not work out so well and your going to get accusations like this. If things go right they did. It is what it is and I hear it. What we are going to try to do is rectify that. One way or another we will move forward. Randy referenced "Finally, the inability of NLCMH to work out a contract with GT Jail that would serve the needs of the incarcerated in a more comprehensive way comes immediately and glaringly to mind". Randy responded we have work to do to educate folks on what our limitations are. That is part of the reason I asked for General Fund, how it is split up and discretionary funds. I do that loud and clear. We have work to do.

Randy referenced page 67 "It appears to us and the community that the entire process, beginning with communications to and from David Pankotai, has been somehow corrupted or flawed". Randy noted okay, I accept that. The outcome is tough to swallow and I wouldn't argue with that. Randy referenced "Furthermore, asking staff to publicly vouch for their current supervisor is highly questionable. This process can't help but put undue pressure on employees, whose promotions or job status may be affected by what may be affected by what they either say or do not say". Randy responded point well taken. All I can say from the standpoint of the number of people who are very interested in who we hire this is something that has gone way beyond our borders.

Randy reported I received a phone call, full disclosure, from an individual who suggested that Kip Watson is his name, he is a former player in mental health. He has left the arena. It is Kip Watkins, my apologies. What we are trying to do here is find someone who is a good fit for our area, etc. I can tell you that if you go back and Google "Kip Watkins" you will find he is very outspoken. He used to be, I believe the CEO of Detroit Wayne. Nicole asked to speak. Randy recognized her. Nicole said with this letter I do object to the word "corrupted". To me the definition of corrupted is an act of dishonesty. I

have not seen anything dishonest. The CEO Search Committee we can suggest that there was a flaw in the process but I do not believe there was corruption. I completely do not agree with that word. Randy identified this is healthy. This is a good opportunity for us to say things like that. I'm you're your going along. Anybody else? Al asked to speak. Randy recognized Al. Al likewise objects to knowledge of the Open Meeting Act. If anything we bent over backwards to make sure they were open meetings. I know that Mary let certain people that she knew were interested she called them and let them know. We posted everywhere. If you were in any of our meetings you can certainly see that it was open because we had a lot of people every one of them wanted to talk. Randy identified point of clarification, I believe this letter is addressing the action taken on March 17 as opposed to what occurred in the initial search process. Al noted the same comment with regard to. Randy noted point of clarification. All right. Moving on.

Randy referenced page 68 another letter from Mardi Link. Randy noted that she is asking if Board members are reapplying? Randy noted he has to smile a little bit. Correct me if I am wrong, Isn't this part of open public if someone wants to know who is applying? Can they go to the county website and ask someone at the county who is applying? Isn't that public knowledge? Penny noted I admit I have no idea. She asked to clarify that I know a lot of people had some questions about this process. Because of the search going on and in anticipation of a changeover in leadership being new to the scene decided to skip the process. In retrospect was not a good thing. I said hey let's keep everything the same let's make sure we have a smooth transition and this might be the best thing. Afterwards I was informed that Northern Lakes actually has a guideline that if you have been on the Board for a certain number of years you actually need to go through the process for reappointment and what I suggested was not best practice. It was simply a matter of going back and I said let's go back and follow the process and do it right. If anybody had questions about that that is what happened. Randy identified well being one of those people who got unappointed, if you will. It didn't hurt my feelings. I don't have any problems going back and being reappointed. If it will save the reporter a little digging time I will just say that I know Mary responded in the paper and I will respond now. He noted he has reapplied. Nicole was recognized by the chair to speak. She noted that she too serves Grand Traverse County and when I have been reappointed every single one has been different. I would let you know that it is very confusing because it depends on the county commissioners perspective about what they want to do. In March of 2020 that was in the middle of the pandemic, shut down. They did not do interviews. They simply said we are just reappointing you. Prior to that in 2017 I went through the interview process and got to meet the lovely person in line before me and after me and I don't know how many others there were. At the two times prior to that in 2012 I was appointed mid-term for a gentleman that had passed away. In 2014 the Board was also challenged with some different issues and they reached out to us and you want to be reappointed your on. So every single time with my board it has been different. Randy noted that he has the right message to bring home. Moving on. Randy referenced "Also this is for any board member or the board as a whole, were you aware that the Carver Model does not preclude board members from either speaking to the press or answering questions from the public?" Randy responded he is very aware of that. What the Carver Model says it prohibits us, specifically the chair, for speaking on behalf of the Board. I have never done that nor do I ever intend to do that. Quasi, I will do it in this forum but this is with the full Board present and the beauty of this is everything is in the public sphere everything. Randy noted, then "were you aware that neither the Carver Model nor the board policies listed on Northern Lakes website, state a chair of the board only votes when there is a tie"? Randy responded that is not in the Carver Model it is in the Roberts Rules of Order I will answer that, Randy referenced "Also, is the Board at all concerned that member counties may be discussing or may soon decide to leave Northern Lakes"? Randy noted you know, I have been saying ad nauseum lately that Mark Twain once said I experience many things in my life, some of which actually happened, I got enough trouble worrying about things that are actually happening much less what might happen. He noted in all candor he had a discussion with the chairman of the Grand Traverse County Commission and I smiled and I said that is certainly within your purview. If you decide you want to move forward with the complexities of that be my guest. It is entirely up to the Board. We have too much going on to concern ourselves with that.

That is the end of Ownership Communication.

Joanie requested to speak. She noted that multiple times throughout this process, the CEO Search. It has been noted that staff are coming in support of me. She has been accused of coercion I want to be very clear that I asked one person for their recommendation, Tracy Andrews, and you all know that because her reference letter was included in my initial interest. Every other person that came before you I did not ask them to do that, I did not expect them to do that. There is no coercion. She even spoke with Tracy and said you don't have to. She wanted everyone to know there was no coercion.

6. CHIEF EXECUTIVE OFFICER'S REPORT:

Joanie noted I need to make a correction to my report and I have a few new things to tell you about.

First, the correction for my report is to share, at the Northern Regional Meeting I said we didn't make any recommendations to CMHA Officer positions. That is not true. We in fact did recommend Randy. He reached out to me and as soon as I saw what he wrote I knew that he was right. As I was reflecting on my report I was reflecting on the President's position because we had dialogue about whether we would make a recommendation because someone in another area of the state was considering to apply. She apologized to Randy. It was not an intentional error on my part. Randy noted if he may add to that at the Regional meeting, we also recommended that Catherine Kellerman run for Vice-President. Carl Rice is running again. That is the Northern Michigan recommended slots for the exception of Secretary.

Second, Deb Freed sent some answers to your questions last month. She noted the large response in Hoxeyville are the results of people passing through our geofences in Cadillac and then opening retargeting ads in their home community. She also noted our Vendor, UPNorthLive, doesn't use geofencing at retail place, such as Walmart because not everyone shopping at Walmart is looking for a new job or changing jobs. We are trying to spread it in specific demographics and UpNorthLive doesn't believe it will be the best use of our dollars. Lastly, she acknowledged the coverage of a difficult antenna area in Missaukee County. We have a layered approach to reach individuals via television and streaming devices. So those who do not have local channels will receive the information through our streaming efforts, so we get the most out of the dollars we are spending.

Third, as you now know, we have been approved for \$1.8 Million dollars of congressional monies. These are from the federal level. There are a lot of questions that we don't have answers to. This is the first time NLCMHA has received congressional dollars or congressional money that I am aware of. This is exciting for our expansion of access to care and expanded continuum of crisis care, and I am certain I will learn all about how congressional dollars work! Randy noted I guess I really don't. Mary identified she has questions. Randy said sure absolutely. He has no question at this point but I will say unequivocally is I took a glance at your email response to Mary Marois and everybody else received the same two pdf files. We of course will be deliberate and will go through this with a fine tooth comb making sure that we have that it include all the things. This is big and we will go slowly and carefully through this. We will be looking for very specific details. Mary identified I am not even sure what your talking about. Is that your response? Randy said in response to your question was this a grant? Joanie responded to you, no it is not a grant and here is the verbiage and here is the sheet, one major spreadsheet identifying pieces of wages, etc. Mary didn't realize I thought I would respond here. What I was really looking for is a description of what it says what we are going to do. That is kind of what my question wasn't my question now. My question now I have been hearing from school people that there is this movement, I guess probably is the correct term, with a lot of Northern Michigan schools that are really concerned about mental health impact on our young people because of everything that they have gone through relative to COVID. Isolation, kids being at home not having any socialization, going back into schools not knowing necessarily knowing their classmates and others. There is this movement on the part of school administrators to deal with some of the directly with legislators and others dealing with trying to search up grants to be able to get money? Are we a part of any dialogue at all with any educators about what role we might be able to play in all of this? Joanie noted TCAPs has reached out and is not sure whether they are looking for grant dollars, but there is a health and wellness approach for children and they asked for CMH participation and I am going to do that. Mary said it might be something to bring up at the Community Collaboratives.

Joanie noted on your table you have flyers for Carter Kits. These are the kits that were created by a law enforcement, because when there is contact with people who have autism, law enforcement doesn't know how to respond. At the NMRE Ops meeting on Tuesday, we decided to make a recommendation to NMRE to purchase these kits for our first responders.

Joanie noted, as you know I have been doing the Interim CEO position off and on since August 2020. I have witnessed great commitment to our vision and dedication to the people that we serve in all of the Board members. I truly believe that you are doing what you believe is best for Northern Lakes. I trust you have seen that in me and you can see that demonstrated in the work I have done and have been doing. In January, you received the Annual Review Report, which shared all that we had accomplished in FY 2021. In February, you received the Annual Agency Performance Assessment for FY 2021 noting all that we had accomplished. That doesn't mean everything is perfect and I understand there is room for improvement. There are already some things I am working on. I have had conversations with some of you, and will be scheduling with others to discuss what you would like to see the agency focus on based on what you heard from the community. I am confident we will work together to make great strides in our communities as we work together, united, and I am looking forward to it with this Board. That concludes my report and I will answer any questions.

Randy thanked Joanie. Moving on.

7. NORTHERN MICHIGAN REGIONAL ENTITY REPORT:

Randy noted you had a chance to review the minutes. I must admit I ran into difficulty that day and was not able to attend that meeting. The only thing that I found interesting in the meeting was that Mr. Kurtz indicated his disappointment with Lambert which is the PR firm that the NMRE hired to specifically focus on providing our area regarding public relations and I look forward to talking to him about that. What I can relate back to Lambert though is from the state association they are doing some pretty great work so I don't know where the disconnect is between this region and them. My guess is it is the same old same old. That there is more attention paid than anything south of M-55 than there is north of M-55 and that is what it is. He asked for any other questions regarding those minutes. Will move on.

8. ASSURANCE OF ORGANIZATIONAL PERFORMANCE:

- A. *Receipt of CEO Response to Monitoring Report –2.2 Treatment of Employed Workforce Members (Internal Inspection)*

MOTION:	The Board finds the organization 92% in compliance with Policy 2.2 Treatment of Employed Workforce Members (Internal Inspection)
RESULT:	ADOPTED [UNANIMOUS]
MOVER:	Rose Denny
SECONDER:	Sherry Powers

- B. *New Operational Worries – None.*

- C. *March Monitoring Assignment*

1.0 Consumer and Community Ends (Internal Inspection) Please complete and turn in as usual.

9. BOARD MEANS SELF-ASSESSMENT

A. *Receipt CEO Response to Monitoring Report –3.5 Meeting Agendas and Schedules (Direct Inspection)*

MOTION:	The Board finds the organization 100% in compliance with Policy 3.5 Meeting Agendas and Schedules (Direct Inspection)
RESULT:	ADOPTED [UNANIMOUS]
MOVER:	Nicole Miller
SECONDER:	Barb Selesky

B. *March Monitoring Assignment*

3.3 Board Member Code of Conduct (Direct Inspection) and 3.6 Board Chair Functions (Direct Inspection). Please complete and turn in to Deb as soon as you are able.

Randy noted, I believe, I hope that we will now have a better understanding of these monitoring reports. Go back to our rules of governance and read those and reflect on them. We are starting to get some good input.

10. GOVERNANCE POLICIES DISCUSSION AND ASSESSMENT:

A. *Ends – None.*

B. *Executive Limitations – None.*

C. *Governance Process/Ownership Linkages*

NLD Minutes – March 2, 2022 – Review and Approve

MOTION:	Approve NLD Minutes – March 2, 2022
RESULT:	ADOPTED [UNANIMOUS]
MOVER:	Barb Selesky
SECONDER:	Nicole Miller

Randy noted his only discussion is I think we had a very good meeting and good work. Joanie asked to be recognized and the chair approved. Joanie asked any NLD member and the Board about the slate of officers. Joanie asked if there was any interest so we can talk about that at our next meeting. Pam identified we started the conversation two months ago. I wasn't at the NLD meeting. Yes, the slate of officers is coming up and if there are people that are interested for the chair, vice-chair and secretary. Get names to Pam if you are interested. Vote is in May, I believe, and that is when the term starts. Randy said for clarity sake if anyone is interested for any of those positions send Pam an email indicating or if you want to send to the committee. What is your purpose? Pam noted or nominations if you think someone would be good. Randy said I can nominate you? Pam said yeah you could I'd say no. Randy noted it is good to know ahead of time. All ayes; motion carried.

D. *Board CEO Linkage*

Randy recognized Mary to speak. Mary noted I don't whether this is a time to bring this up at this point or not. I kind of would like to know what our options are in terms of ProtoCall? I would like to know is there another option? Are we stuck with it because everybody else uses it? Do we have a choice? If there is any dissatisfaction with it is there a way for us to communicate that? I am not making any statement one way or the other. I would just like to know if there is something within our control if we are not happy with what we get? Joanie reminded the Board that we have shared some of the dissatisfaction with them, and yes we could look at something different Mary can you give us some information at a future time? That would be great.

Mary noted she had one other remark. Again, I don't think this is the appropriate place to bring it up. I know we talked about this before. We talked about meeting notices, meeting agendas,

meeting minutes being put on our website for people to see. Can we also have a link that would allow them to be in the meeting to see us or can they only join us by phone? Can they join us relative to Teams? I am still hearing from people that they don't see our agenda. I want to see if we can do that. Randy recognized Nicole to speak. Nicole noted she believes that agenda does have a dial in of a conference id and I looked at the website and saw it on there. So, I am not sure if maybe the same piece is that you have to click on About and then Board of Directors. It will not be on the home page. We aren't that important. Randy noted I am glad you brought that up because I errored in number one, in skipping over New Operational Worries. Mary noted that I just missed it. Randy noted no we didn't. You should have said, well, please feel free in the future to say Mr. Chairman we skipped over something, anyone feel free. He asked for any New Operational Worries? Randy noted the other thing he skipped over was Board Procedural Rules. He put that on there. There was, there has been some deception, if you will, gee can I ask a question? What do we do in this situation and what do we do in that situation? I put that on there for the purpose of saying and the notes I made was the NLD will help greatly guide us through the process but not only help us with the structure but also educating us and encouraging us to educate ourselves. I do feel that folks need to understand and please go back our By-laws are posted on our website. Read them. If your having trouble going to sleep read them, it will help you go to sleep. Al noted that we just reapproved them a couple of months ago. Randy noted go read them. Also, as I mentioned last meeting I don't care what question it is let's make sure the question is on the topic at hand but any question let's say during New Operational Worries if there is a question that is in need of clarification please please please you are welcome to ask. As we go through this I will share you something that I live by and I offer it to you. As many of you know he used to be a Rotarian and we live by the four-way test. He referenced that. The purpose of it is every time you make an action or a decision you pass it by the four-way test. If it passes the test you probably made a pretty good decision. He can tell you by personal experience when you put things by the four-way test in my life it has saved me a number of times. With that we will move on.

E. Motion to Rescind Motion to Offer CEO position to Interim CEO

MOTION:	To Rescind the Offer of the CEO Position to Joanie Blamer
RESULT:	Roll Call Vote. 6 ayes: Wessell, Denny, Cambridge, Morris, Marois and Kamps. 6 naves: Townsend, Miller, Reed, Babcock, Selesky and Powers. Tie Vote. Called for a revote. Vote - 6 ayes: Wessell, Denny, Cambridge, Morris, Marois and Kamps. 6 naves: Townsend, Miller, Reed, Babcock, Selesky and Powers. Tie Vote.
MOVER:	Rose Denny
SECONDER:	Mary Marois

Randy identified to clarify this motion. It is to rescind the motion to offer the CEO position to the Interim CEO. Randy recognized Justin to speak. Justin noted I do have a question. This question has to do with the fact that we did our AD Hoc Committee. Our Ad Hoc Committee had two finalists Joanie and Dave. So, we went ahead and did that and we offered to Dave. We did our motion to give the position to Joanie. I do not see what the issue is. We did a vote and it was a six to four. But does it make any sense to have Joanie reapply? Because if Joanie reapplies then what other information is there. I don't see why we have to go through this process. That is my opinion. Randy recognized Nicole is looking for parliamentary clarification. I understand that a motion to rescind requires a 2/3 vote to pass. Is that accurate? Al noted that is not accurate. If properly posted ahead of time it requires a majority. If brought up at the meeting, if it was just brought up today without any prior posting it would require a 2/3 vote.

Ty wanted to read from an email that he sent to Randy. He didn't send to Board Members because he was conscious of the Open Meetings Act. I was not able to attend last Board meeting but I

clearly remember the meeting we had before when we were unsuccessful in negotiating with David and we agreed as a group to reopen the search. Here is what I said to Randy. Randy said may I interrupt you please. I never responded. Ty read after a special meeting I encouraged Joanie to reapply and go through the process. I would like to have another opportunity to consider her qualifications relative to community mental health current needs and challenges. That said, I have concerns about the potential implications of a Board decision on Thursday of a month ago to contract with a new CEO that only six of thirteen Board members voting in the affirmative. As we move forward I believe it is critical that the Board work closely with the CEO to develop specific measurable goals for addressing the many challenges that we consider during the search process. Further, I would suggest that we establish a formal plan for soliciting community and consumer feedback relative to whatever specific expectations that the Board establishes for a new CEO. I sent that to our chair because I was concerned about action taken at a Board meeting, I think, when we had no advance notice and not a majority of Board members voting in the affirmative. Thank you.

Randy recognized Penny. Penny noted that I just want to reaffirm my vote last meeting which is very consistent what I said then, I believe. The process needs to be respectful to Joanie and what I would hate to have happen is for her to be affirmed as CEO and have a process that might be seen as back door dealing however you want to take that. I would hate to have it follow her for that be disrespectful to her. Randy asked for any other comment?

Randy recognized Ben to speak. Ben noted he cannot speak for anyone else. He can only speak for himself. I know nothing about any back door deals that they are reporting. If there were any he would reject them as no one has approached him of concern and this just from his perspective. He voted because it came up and there was a vote and a second and the chairman called for a vote and that is how I voted. I didn't feel there was any back door deals. Randy noted sure. Anybody else?

Randy noted that he wanted to wait for anyone else before you get to speak again. He recognized Justin. Justin noted we went ahead with our special meeting while we voted it was not a surprise because we were going to talk about this that is what he wanted to say.

Randy recognized Barb. Barb noted first I am not smart enough to connive with you guys. I hope you realize that pretty soon. I am totally disenchanted with community mental health when we have a person that we have been told that she has every credential that she needs to continue on as our leader. She is very willing, she fits perfect the culture of gentleness. I think it is pretty interesting that I kind of got the community involved in back room deals and all of that kind of stuff. The Board has to be a little more honest with what we are doing. This means we will wait six months before we can get anybody that we might like picked out by someone from Lansing and who knows may have a recommendation from another guy from Detroit. You know we have a culture that we embrace in Northern Michigan that is why we live here. So I would say my heart might not be broken if you don't offer Joanie the job but my confidence in your judgment has just gone to hell.

Randy recognized Ty. Ty said he just wanted to say I am going to support the motion and if it passes, I am going to also encourage our Interim CEO to apply, and we will go through the process again. Al noted he agrees with Ty's comment.

Randy noted all right. It is my turn. There are three reasons why I implore you to vote to rescind. First, the vote to offer was not fair to all concerned. That it heard and the Board knew that certain members were going to be absent thus disregarding their right to vote. I spoke to this at the last meeting and my position remains unchanged. I realize today there are people not present and I hope you realize that. Barb said okay, I wondered if you did. Randy said please don't interrupt me. Second, the rationale to support was based upon a motion rather than pragmatic rationale. Board

members were rightfully upset as to how the CEO Search process played out and based their decisions on how I believe how they felt about the process rather than what we have at stake here. Third, the Board voted unanimously to adopt a new search. The previous search garnered only four applicants. Of the four of them, one has separated from Northern Lakes Community Mental Health. If you go back and read past minutes you will discover who that was and the circumstances surrounding it. One was advocate for privatizing the mental health system. One associated with one and in graciousness and in accepting what you mentioned about support but also reading about how it was received in the general public. There was a campaign for one hire which caused a political event and one was encouraged to apply and one the final one was encouraged to apply the now known fact that he had no intention of accepting the position for less than \$200,000. Had the Search Committee known that at that time he would never passed muster. Our advertisement clearly identified the salary range. In reading past minutes it reflected that there was not one of the Search Committee members who clearly understood what he was looking for. All are welcome to reapply. Mr. Pankotai is welcome to reapply. That is not the issue here. But we should have better process to arrive at two viable candidates than what was utilized prior. We propose that if this motion passes. We have responsibility for the lives of approximately 5,000 citizens. From this point forward I have decided to refer to the people that we serve as citizens because they are no different than any other citizen in the State of Michigan. We oversee a budget of over \$83 million. We owe it to the citizens that perform the due diligence required to assure that we hire a leader that we all agree on or at the least a majority of voting representatives on this Board so that we can go forward with a better opportunity for stability and trust for our organization across all facets bearing in mind the current climate we are in mental health and substance use disorder in Michigan. We have too much at stake to be distracted from our vision and mission. I am telling you the chirping, which is when another hockey guys go around and give each other a hard time. They call it chirping. We have had more chirping in the last couple of months than we have had almost since I have been here. Peck, peck, peck. We even have a communication from one individual in the community that is suggesting how we decide our lobby. It is all the distracts. We have to address it. We spent about an hour today responding to chirping. Now it is valid or some of it is not. We have a responsibility in the public eye. I go back to \$83 million and 5,000 citizens and that is a phenomenal responsibility. We owe it. That past process of 74 same yet. It was flawed. It wasn't fair to Joanie or anybody. It really wasn't. We owe it to the citizens to get this right. Thank you.

Randy recognized Al. Al noted he wants to just recheck one comment that you made. Right at the beginning I think you said we resulted in four applicants. He asked if that is what you said? Al noted that Mary can probably say it more specific, but we resulted in 40 some applicants of which we selected four for final interviews. Al asked Mary listen to me and tell me if I am wrong. We did telephone interviews with two other people. Mary noted but we did not interview someone who formerly worked for Northern Lakes. Randy said not formerly we interviewed someone who no longer works for us. Al said that was an applicant but we did not interview. Mary said we did not, that was screened out. Randy noted that he personally got the application and forwarded on to the Search Committee. Al noted there was an understatement that one of the four was an applicant for supporting the bills and that person was initially selected as one of the four until we found out and he was not interviewed. Randy noted my point in that, point of clarification, if we decide to redo the search process the next item on the agenda points towards a professional search. etc, etc. etc. I do recall Mary saying to me we don't have the applicants. We just don't have it. She was pulling her hair out and I empathized with her, and I guess my point of this is I believe if we utilize a search process like we will get to there. I believe that gives the process justice. At the end of the day, if Joanie Blamer is the successful candidate, then just like Penny said we are all moving in the same direction. There is no qualms, no question and you have 100% of my whatever I've got. But until that point, I don't see those things on the horizon. That is the reason why the motion to rescind has been put forth. He asked if there was anyone else for the good of the order? Very good.

Randy recognized Ben. Ben called for a secret ballot vote. Randy identified I don't think you can do that. Nicole stated the public has to see you vote. Randy noted after that argumentation Roll Call Vote please. He restated the question if you vote yes you move that we rescind the motion to offer the job to Joanie Blamer. Everybody clear with that? By voting yes you are voting to rescind. Please proceed.

(The vote was noted above – tie vote) Randy noted in this case there is a majority vote. We end up at a tie. Which means that we now entertain a second motion to rescind the motion to offer Joanie the position of CEO. We are at the point, which the Parliamentarian can verify. We are at a point where we have a tie which the motion does neither succeeds nor fails.

Randy recognized Ty. Ty asked don't we have 13 Board members in attendance today? Randy noted we have, unfortunately Nikki was supposed to be here and is not here presently.

Al noted I believe Randy that you can call for a revote of the same motion multiple times. We could redo the motion and if we get support it would prevail. I believe you can call for the revote. Randy stated at this point I will call for a revote.

(The vote was noted above – tie vote) Randy noted what we will do, since it is my understanding and of the Parliamentarian confirms that we will revisit this again. It is obvious to the chair that we will address it at our next meeting. Moving on. There is no since going on to Hiring Solutions. Nicole addressed the chair isn't it an item on the agenda we approved? Randy noted okay.

F. Motion to Engage Hiring Solutions LLC

Randy called for a motion to engage Hiring Solutions LLC

MOTION:	Engage Hiring Solutions LLC
RESULT:	The motion stands
MOVER:	Penny Morris
SECONDER:	Mary Marois

Randy recognized Justin. Justin asked if we support this and we have our next meeting and the motion to rescind the next meeting fails and we do this CEO Search that does not make any sense at all. I may be wrong. Mary asked if it would be out of order to table the motion until the next meeting? The reason for doing that is I don't want to get into a situation where we need 2/3 vote.

MOTION:	Motion to table the motion to Engage Hiring Solutions LLC
RESULT:	ADOPTED [UNANIMOUS]
MOVER:	Mary Marois
SECONDER:	Barb Selesky

Deb stated there is already a motion on the floor can that be done. Al noted that there needs to be no discussion and if it is voted on it comes up at the next meeting. Deb asked for clarification. If voted on approved it will be automatically appear on next meeting's agenda. Deb asked if it would be first on the agenda. Al noted it isn't necessary or at least appropriately on the agenda. Deb asked if that is what Roberts Rules reads. Al noted I don't think so.

Randy recognized Ben. Ben stated point of clarification Mr. Chair. Will it be reflected in the minutes that there are two votes to rescind and both of those votes failed? Randy noted it didn't fail. It was a tie. Ben asked if it didn't fail then why are we taking our vote? Al noted that is not the motion we are voting on. Ben is saying for the record when we voted to rescind with a tie isn't that not a failure? Isn't a tie a failure? It failed because there was no rescind. Al noted the motion did not pass. Ben noted correct. Randy noted that doesn't mean it failed. Al noted that isn't what we are tabling. Ben noted I know that this is a point of clarification for the previous one. I can ask for a

point of clarification at any time. I just want to make sure that is going in the minutes and how it was going to be noted in the minutes the vote to tie caused of failure of that or. He noted the second vote was a new vote. Like the second one was a new vote. We only voted new because the first one failed. Randy noted the second one was a tie. Ben said so the second one failed. He just wanted to make it clear in the minutes. Randy noted the second one did not fail. He noted the first one did not pass and the second one did not pass. Al noted the chair can vote as long as they want to. Our chair chose to determine the result over and over. Ben noted right right. Al noted he decided to let stand as a tie vote in the minutes. Ben noted that is what will be in the minutes a tie vote.

11. OWNERSHIP LINKAGE:

a. Citizen Comment – Randy asked for the second opportunity for citizen comment at this time. Deborah Bumbalough noted the only comment that everyone is that listening as staff to understand the letter that you said you did not receive with the 50 signatures in support of Joanie Blamer on it was turned in. Deb Lavender received and I got confirmation from her and she put in a large Board packet and everyone received it. That is my understanding and I just wanted staff to understand it that it was turned in. Randy noted thank you. He asked for other public comment.

Tracy Andrews, Director of Integrated and Managed Care. I have a question and I don't know if you have gotten to it. With public comment as it has been standing for the past nine years that I have been here is one thing that has been consistent with this Board with public comment the practice is not to respond. You give direction to the CEO to respond. What I have noticed the past couple of months and it is great with we have public comment to email to the Board included in the Board packet. The distinction I have seen is that your not responding to public comment when it is provided orally in person. But your responding to public comment that is written. So, I am wondering the distinction is between the two that you have decided to respond to written. I don't know whether you are confused by responding that today. Point of clarification to me because it may incentivize people to come and make a comment in person if they know there won't be a response but having a response in writing. Randy asked for anyone else. Al noted Randy the only thing I can say that we are responding to communications to the Board. I don't know if that doesn't necessarily make it public comment. We as a Board have decided to discuss those as a Board because we want a Board response. We have decided to discuss those in our public meeting because of the Open Meetings Act. It is really, they are asking us something about our Board it was decided to discuss it openly. We are not discussing community mental health issues internally which is what most of the Open Meetings Act. That is the only distinction I can think of. Randy noted that the reason I did not respond right at this moment is I personally have never been good at instant response. I think it's, maybe I am from the past on the public comment related to an issue that either a citizen or someone else mentions some of our operational issues. What I don't do is to offer to any of you the opportunity to send me your thoughts on this and I certainly don't prepare the rational that I utilize to put it there and bring it back to the next meeting because it is an off point and years of replication. I like this to be able to read things a couple of times before I respond to become to understand what the true issue are, the true issue is. That is the reason why. Randy responded yes.

Justin noted that may I suggest that this opinion does not represent the Board. I have been to almost every city and county commission meeting and I would say this every single issue has been referred to the chair so that chair can do the research so that can be on the next agenda on that agenda to respond to the rest of the community or the city in question. That is what I have known. Like I said, as a citizen going to those meetings that is what has to happen and that is pretty much how any Board operates. That is what I have to say about that. Randy noted very good. Thank you. Randy recognized Al. Al noted I again, I think the clarification even if we got an email we have something that it has happened in CMH our position would be not to respond to that and refer it to our chair. If it is a question about a Board action then it is our responsibility to respond. Randy noted that we will clarify it and needs to be clarified. I am glad the question was asked because we need to continue to

clarify procedures and policies so that we can continue to operate and give trust within the community for what we do to reduce the chirping. All right. He asked for any other public comment.

Lauri noted that Northern Lakes has a policy where if there was any expenditure greater than \$600 need a bid. I was just wondering if you all have a policy that would not preclude you to have an RFP on something such as Hiring Solutions to have additional bids. She noted that she has not experienced that in the past. Randy reported he would make the distinction between Board policy and company policy. He noted that we would process that bridge when we get there if we get there. He asked for any other public comment?

12. ANNOUNCEMENTS/BOARD MEMBER REPORTS:

Mary asked Deb when is the date of your retirement? I missed the date. Deb identified December 29 or possibly before. Mary said I just want to say something nice. Randy said your welcome to say anything nice. Mary said I tell you it will be awful tough replacing Deb Lavender. She has been very very supportive of this Board. She has not always agreed with what this Board has done but she is a professional. She is good at what she does, tenacious, she has been here when she has not been in her best health. It doesn't seem to matter. She has stood by us thick and thin and it will be hard pressed to find someone else like her.

Randy recognized Justin. Justin noted that this is just a little reminder due to the fact that the Cherry Festival is right around the corner. The Traverse House Clubhouse is starting their parking lot fund raiser. The Traverse City Clubhouse sell lots. We sell parking spots in the CMH parking lot for the Cherry Festival. He wanted to inform us of that. Thank you.

Randy said getting to the bottom of my packet. I want to remind the Board that the CEO Evaluations forms are due. I have received some but not many. I want to remind you that we have that on the agenda. I would also we will be referring only to the \$1,100 per month, I believe it is or whatever it is. The \$1100 we approved as extra compensation above and beyond the Chief Population Officer in that review.

Randy gave a heads up, there was a question about our minutes and availability and we will be looking to have an item on our agenda next month regarding a change on our current procedure. I read the letter like everyone else that Haider said we are in compliance with the Open Meetings Act. The term, however, was made and I think we owe it to everybody to clarify so be looking for something in that regard in the next month agenda.

Randy noted finally, I read in the paper about an upcoming wage study by Networks Northwest. I know that I cannot push Lauri to direct the CEO but I would encourage us, me, to ask the CEO to see that our personnel staff and Northern Lakes that we survey because we will not only receive the results of the survey I mean it will be very valuable information and probably there won't be anything specific and would be a good thing for us to participate in. He can suggest or direct. He doesn't believe that they will be starting the study any time soon. I bring that to your attention.

Randy recognized Joanie. Joanie asked if you can hear me. Also I have been asking as an Interim for a Job Description. She asked what the measures are? Randy responded the measures would be, you are in the shoes of the CEO. But your current compensation is based on an amount that we approved for the Interim CEO and my understanding to this point is what we are going to utilize to determine a wage. The Chief Population Officer's wage is determined in the budget, etc. That is the way I approached it. Joanie noted she has another question. When we look at the CEO Job Description we really did not go over that. That is what I want to know what you will be looking at. Randy responded the measures are what we asked the Board to approve. Al asked Joanie if she has seen the form that the Board completes for the CEO? Joanie responded in the Board Packet. Joanie said she wanted to be more clear when you said you were referring to the \$1100 it gave me the impression that you were only a portion that you were only going to look at because I was doing two jobs so that is my question what portion not about the measures of the whole survey. Randy noted we are looking at your performance in the position of CEO, Interim CEO

for the past months. I am just clarifying that should we decide to say hey we want to give 5% increase or 10 or 20% or whatever. Fair enough. Okay.

13. MARCH 17, 2022 AGENDA PLANNING:

Referenced the agenda and he will look at the agenda and will get out to you in due course.

Ben requested to speak. Ben noted that the latest Open Meetings Act in the State of Michigan. Dana Nessel. The very last page references tie vote, page 20. He requested that the record reflect that the motions failed. Thank you. Randy asked for his research. Ben noted that is Rouse vs Rogers. Ben noted the case from Charlevoix in 1934. Randy noted we will do our own research. Ben noted that he will send to you if you want. Randy noted if you will please.

14. MEETING EVALUATION:

- #1 – We spent our time on the most important governance topics – excellent
- #2 – We encouraged diversity of viewpoints – excellent
- #3 – Our decisions were made collectively – fair
- #4 – The Board used it's time effectively – satisfactory
- #5 – What is the most important thing the Board could do to improve our function as a Board?

Comment – None.

15. ADJOURNMENT:

The meeting adjourned at 4:53 p.m.

Respectfully Submitted,

Randy Kamps, Chairperson

Sherry Powers, Board Secretary

Deb Lavender, Recording Secretary



Administrative Office, 105 Hall Street, Suite A, Traverse City, MI 49684

Committee of the Whole Meeting Minutes

March 17, 2022

12:30 PM

1. ATTENDANCE:

Northern Lakes Community Mental Health Authority, 527 Cobb Street, Cadillac and remote virtual meeting.

Rose Denny called the meeting to order at 12:30 p.m.

Board Members Present: Randy Kamps, Penny Morris, Ben Townsend, Rose Denny, Justin Reed, Barb Selesky, Pam Babcock, Nicole Miller, Sherry Powers, Mary Marois, Ty Wessell, Al Cambridge

Virtual - Greg McMorrow, Angie Griffis

Board Members Absent: Nikki Colecchio (advance notice) and Dan Dekorse (advance notice)

Others Present: Cadillac – Joanie Blamer, Interim Chief Executive Officer; Lauri Fischer, Chief Financial Officer; Matt Leiter, Director of Human Resources; Tracy Andrews, Director of Integrated and Managed Health Services; Brian Newcomb, Director of Recipient Rights; Heather Sleight, Administrative Specialist; Jeremiah Williams, Information Technology Supervisor; Deb Lavender, Executive Secretary; Kari Barker, Quality and Compliance Director; Andy; Heather Pollington, Customer Service Provider.

Virtual – Darryl Washington, Director of Long-Term Care and Support Services; Curt Cummins, Medical Director; Carrie Gray, Chief Population Officer for Individuals with Developmental Disabilities Services; Ann Ketchum, Programmer Analyst II; Brie Molaison, Customer Service Specialist; Jessica Williams, Performance Improvement Specialist; Michelle Dosch, Compliance Secretary; Deb Freed; Chris Biggar, Finance Manager; Kelly Hoag, Administrative Specialist; Kasie Morse, Customer Service Provider; Aaron Fader, Executive Administrative Specialist; Alyssa Hansen, Human Resources Supervisor; Andrew Waite, Behavioral Health Home Manager; April Weinrick, Home Supervisor; Brittany Moen, Recipient Rights Advisor; Dan Mauk, Chief Information Officer; Dave Simpson, Residential Services Administrator; Jan Pytlowany, Customer Service Provider; Kaitlyn Reinink, Nursing Supervisor; Michelle Michalski, Human Resources Specialist; Mardi Link; Melissa Bentgen, Accounts Payable Team Lead; Trapper Merz, Business Intelligence Specialist; Treasa Cooper, Reimbursement Coordinator; Mindy Pepsnik, Service Information Specialist; Dean Baldwin, Network Administrator; Sue Hamel, OBRA Clinical Therapist; 3 Unknown Public.

2. RECEIVE AND REVIEW FEBRUARY 17, 2022 MINUTES:

The minutes were moved to the Board meeting.

3. PUBLIC COMMENT:

Heather Pollington identified that she has worked in reception for 11 years. She has been watching the Board meetings and wanted to address the accusation of culture of fear that has been presented. After 11 years I have never felt that culture of fear. It has always been a great

working environment and always very friendly. Joanie has an open-door policy here. When she is in our office, she sits with her door wide open and several times I have gone in her office and talked with her and addressed her. She has always been good about talking with us. Email she is always good about getting back to us and the communication I feel she has done an amazing job keeping us informed. What I appreciate about Joanie always puts the clients and her employees first in everything that she does. That is her number one thing. The amount of knowledge that she knows is just so valuable to this agency. The years that she has, and the knowledge is unreplaceable. She wanted to share a little bit being up front in reception they get a lot of traffic and a lot of people and it has not been a fearful place at all everybody and addressed and I have a supervisor and we have all had a good rapport between staff and administration. I just wanted to share my feelings with you about that. I am proud working at Northern Lakes, and I don't feel that way. I have been here for 11 years and I thought that needs to be told. Thank you for your time board.

Joanie noted that I did speak with Deb before this, and she agreed to have me read a statement. Deb is retiring and I would like to read her retirement memo. After 40 years of working at Northern Lakes and previously North Central CMH I am providing you my retirement date of approximately December 29, 2022. By the time I retire I will have worked 41 years. I have seen so much change and worked with wonderful staff. It is hard for me to leave although I am excited about the next chapter of my life. If there is a change in my health and I need to leave prior to that date, I will inform you. Joanie noted she wanted to share with the Board that 41 years is quite the accomplishment. She has done great work. Pam asked if there is an instruction manual. Ben noted that the difference has made in our society that 41 years ago that Northern Lakes could hire a 12 year old. It is just amazing.

4. UPDATE ON RECIPIENT RIGHTS:

Brian referenced in the packet you have seen his report for the month, and he took some suggestions from the last Board meeting when he presented the yearly report. He also gave some historical data for our office for the last three years. You can see the complaints are back to where they were in 2019 and 2020. The same with our investigations and our completion rate we are at 100% to this day. Our office is doing great, and we are fully staffed which has been a blessing. The substantiation rate, we are averaging around 43%. I did receive the state report from every CMH in the state last week and the average substantiation rate is at 42% for the state. We are right in the same area as everyone else is in the state. We noticed that a lot of them are currently achieving the 60-day investigation. This is one of my goals for the 60-day status. Today we have three that are past 60 days. We are still compliant with three over and it just happened in the reporting that they are just over the 60-day status. That was a pretty major step to get to the 60 days which they were able to get to investigate a little bit harder. Because they did that, they can get into the homes and being in sites and providing services that we haven't done in the past. That is where we are at in the Office of Recipient Rights. He asked for questions.

Question - Pam noted that this isn't about today's report. Last month do you recall how many staff would have been let go due to rights? **Response** – I want to say it was close to 77 or 80 but I could pull. Pam thought that was what I was thinking because when the topic came up that people from the homes fearing for their jobs. I thought there probably was a connection.

Question - What does it take for someone to lose their job over rights? **Response** – If it was due to Abuse or Neglect the main factors but mostly what we are seeing are cases where there were substantiations the employee has already quit, we don't even get through the investigation before the staff are quitting. It is either that they don't want to go through the investigation. It is not just Northern Lakes it is all of our provider staff. Only one or two that were fired it wasn't just one incident they probably had five or six rights investigations before that happened.

Randy wanted to express his appreciation for the three different time frames. It has been very helpful and meaningful at least to me and he appreciates a much better picture of how we are doing and more importantly to him is really struggling what may be the seasonality. The moon causes tides and this is interesting.

5. FY 2022 NLCMHA QUALITY ASSURANCE AND IMPROVEMENT, REGULATORY COMPLIANCE, AND CUSTOMER SERVICES REPORT

Kari noted that she is happy to be here and is the Director of Quality and Compliance. In your packets are the 2022 Regulatory Compliance, Quality Assurance and the agency work plan for you to review. We won't be reviewing those today due to the time, but they are there for you to review. She provided the Quality, Compliance and Customer Services Report for the First Quarter of 2022 (October through December). We met our Medicaid Verification Audit and the NMRE Internal Audit at 100%. This audit is to ensure that every element of that claim by documentation for an entire year at 100%. We had no inappropriate access to clinical records or staff that were sanctioned regarding their ability to provide Medicaid services or to collect Medicaid funds. There was a total of four compliance reports two made of which were handled by human resources. None of these were a major complaint and were no OIG which is the Office of Inspector General. There were two privacy inquiries received and were no HIPAA violations although we did educate the individuals regarding best practices. Sometimes people don't know the difference in a HIPAA violation and a confidentiality violation. You can have a substantiated confidentiality issue because you have disclosed information it may not be a HIPAA issue. Everyone who works for the agency is covered by the rule. If I sent an email to Penny M and I sent to Penny S it wouldn't be a HIPAA violation, but it could be a confidentiality issue. Sometimes we may think they are the same and they are not. We will offer six trainings per year in addition to the Relias training beginning in April. These trainings we will be reaching out to all of the teams in the agency. We will include the basics of abuse, fraud, and waste information. It will also include topics specific to some of the trainings that we see in internal audits and external surveys. Those are some of the things that are coming up on our radar. In Quality, I mentioned last time that the PIPs Performance Improvement Projects we do with the NMRE in our region. We are all invested in this. We were very successful in our diabetes one and we are struggling with the ADHD meds. We are developing projects targeting health and cultural equity. We are still working on that and as a region we will finalize at our next quality oversight meeting next month. We did receive news from CARF (Commission on Accreditation for Rehab Facilities) we received a three-year accreditation. It is a big deal. We prepared for this for 18 months. It takes all staff to prepare for this. It touches every department. It is something our consumers, community and staff can all be proud of. The surveyors are possibly employed in CARF accredited facilities. So, they are doing what we do. They come in knowing what has to be done. They know what still needs to be done and they are looking at our policies. That is very useful information that we gain from them. They came up with numerous comments about our strengths and what we were doing. They were particularly fond of our outreach, the things that we do, what Cindy Petersen and her group do (Communications group), prevention, education in the community and were very pleased about that. They felt it was excellent work and above what is required. Kari referenced the critical incident reporting; there were two with non-serious behavior, two sentinel reviews looking at more severe events. When I was reviewing those, something struck me and it was the absence of something. It was the absence of physical management. We cannot include physical management of individuals in plans but if there is necessity for immediate harm or immediate danger we can use it. People are trained to use it. It has been almost three years since someone in our Board operated homes who is a staff member had to physically manage a person in an effort to control a situation that was dangerous. That is amazing. That says to me that the Culture of Gentleness is working and has been internalized by the staff. It is kind of like the severe behaviors have just stopped. They haven't. We still work with severely needed individuals and those individuals feel respected, included, and regarded just who they are. The philosophy of Culture of Gentleness is one of our agency's pillars. It is also reserved by our specialized residential homes. You might think that any and all individuals that come to us, whether they are in need of services or are becoming staff members, should be welcomed as they are included and treated with respect, no matter their challenges, their background, the color of their skin, religious beliefs should be welcomed for who they are. The Communications and Public Relations Committee has spent time this last year delving into what that means as far as translating the Culture of Gentleness outside of working with challenging behaviors. How are we welcoming everyone? How do we have open arms for everyone? We took recommendations to ETeam and it was supported. We have continued to look at what we are doing. When CARF came in they were also impressed. We thought the direction we were heading was going to be very beneficial to the agency and they thought we had become pretty progressive practices, and it would probably be a requirement in the future. When we hear

about diversity, equity, culture of diversity. What does that mean for us? What it means for us is that it's about cultural intelligence. That means we are equipping staff with the skills and abilities to work in diverse environments. Now Northern Michigan is not really diverse, that's just an element but I see more diversity every day and so we have to be ready, and we have to be equipped to serve anyone that walks through our doors and no matter what their situation is, and we have to do in a highly skilled manner. This is different than actual diversity training you know where we do that in our area, and we answer a quiz. But it's more about looking at the information, educating yourself, educating each other and then really about ourselves and our own beliefs and our own potential biases and, and how do we account for that when we are relating to other people? Then you know like our residential staff, internalizing that knowledge and having the ability to provide the utmost of care and make sure that all are welcome here. I will continue to update you on our progress. So then lastly, we have our Customer Service Report. During the first quarter of 2022, there were a total of 17 grievances and 7 local appeals, and there were 8 second opinions received. They were completed within the timeframe requirements. Most of the grievances were change of provider requests from outpatient in psychiatric services. One of the reasons our grievances have increased in the last few years is that used to be that if somebody just wanted to request a change of provider, they would just ask for it. Say "I would like a change of provider" and so then we would do our best to accommodate it. The state then changed that request to be a grievance. Which automatically sounds like there is something wrong that person, wrong with that relationship or somebody feels like they weren't treated well and that may not be the case. It could be that somebody wasn't available on or the hours they needed, or somebody just wanted somebody with a different gender. It is easy to think that these individuals were all dissatisfied with their provider. That may not be the case. Then we have majority of second opinions requested were regarding denial of inpatient hospitalization and accommodation for a foreign language interpreter was the most prevalent accommodation requested. We are seeing an increase in diversity. Because in the last probably six months, I think we have had more requests for interpretation services than we have had since I have been in this role. I know and high five them too. This is great. We are doing satisfaction surveys. They are being completed and more individuals are going to complete them now that it's a 5-question survey instead of a 26-question survey. There were more responses in the 1st quarter of 22 than in all of 21, so we are getting cooperation. Overall satisfaction of services after discharge is a solid 4 out of 5. Satisfaction surveys for recipients and families receiving IDD services began in January, so there's a lot of data to report but overall, the satisfaction is at 3.8 out of 5. Some of these though have also shown as grievances. As the persons completing the survey has heard some dissatisfaction, disappointment, say would you like to send a grievance and then we are doing that as well. We've been receiving really good feedback thus far and we will continue to conduct those surveys.

As a follow up, Randy, last time we provided our report, you had a follow up question. That question was how we compare to our regional partners in regards to the number of appeals you see in the report. We have that information for you. Northern Lakes had 28 appeals, North Central has had 11, Northeast has had 7, and Centra and Ausable Valley both have had 0. We clearly do have more appeals than our neighbors. Just a friendly reminder, we have a 24/7 ethics hotline that is completely anonymous. I don't even know who the report is from. When I am looking something up from the external website, I can't see who made the complaint, it's like a double blind – the system goes between. The individual reports to the system, the system cleans it up, sends me a report if I need to communicate to the individual making the report, it goes back through the system. Where I say what I needed to ask in the system passes, and it comes back to me. If someone's feeling concerned, or just nervous, it's an excellent way to get something off your chest and not feel like it's a risk. That information is all over and available. I cut and pasted the number here off the website and it is still not very clear and somehow overlapped. I will send that to Deb, and she can make note of it in the minutes. 855-560-0008 Please feel free to use it. This isn't just for staff either. Some people might think it's for staff. It's for our consumers, it's for our families, it's for, external providers or board members or the community. Anyone who feels that, that there is a conflict then they can use the ethics hotline. That is my report for you today and I appreciate your time. Rose asked if anyone has questions for Kari. Rose recognized Randy.

Randy thanked Kari for providing the comparative data. Now it makes it another question.

Question - In the spirit of trying to look at apples vs apples, and I appreciate the fact that when the survey was cut down to 5 questions that, that would then simplify the process. The point is, are our questions comparative or very similar to the rest of the region and taking it beyond the region, maybe to a point, because you really have a different culture in urban areas versus rural areas. Do you have any sense of how our questions compare to others etc? Thank you. **Response** – That’s a good question. I would say to you, just being on the NMRE quality oversight committee/regional committee with all the boards attending is that we have, in general, across the Boards used the NMRE satisfaction survey, to get feedback from our consumers and that has been really the model of that solicitation of satisfaction. I am not aware that other boards are additional satisfaction surveys. We began doing surveys through a CARF recommendation in our last accreditation that was completed following up with people after discharge and finding out how they are doing, and did we get them what they needed. We additionally started looking at this and realized that we don’t see the satisfaction from people that received IDD services or their families. Why is that missing? Why is there a gap there? We spoke in the QOC meeting about that and we just decided we’re just going to start doing something. So, I would agree with you the 5 questions is enough right now but the questionnaires that go out through the NMRE and the ones that we did previously from discharge were very long and it certainly was the same questions reworded to ask the five questions five different ways to make sure we get to the answers. I did look at that and I see value in that. But what we were hearing from people is “I’m tired of doing surveys”. The computer conks out halfway through, or spins for thirty minutes and so we thought, let’s just get in there. Did we do what you wanted? Are you better off than you were? What could we do better? What did you really like about us? Let’s just see if we can baseline that and get a feeling of what is working. That was the reasoning behind it.

Randy – if I could continue. **Question** - I am curious about two other things. One is I noted that Northern Lakes is taking back or taking over some functions from the NMRE and so my comment or curiosity is as to how smoothly, how clearly, how that process is going so, and if there’s anything that we can do over at the, the individuals at the NMRE, please feel free to say “hey, something is not working here.” It may be too early in the process for that but, that is one thing. Then my other, you indicated a hotline so to speak. Where does one, remind me please, where does one access that? I’ve spent a limited amount of time on the Northern Lakes website. I’m looking for specific things, so I am not usually looking for that. Does that portal exist on the Northern Lakes website? Is it prominent? That’s my question. **Response** – Everything we have is on the external website. We have the information posted all through the offices. We have business cards. Why don’t we resend it with our contracts and our compliance materials. You may have missed it. I would say we should make it more prominent. Because we should just be looking through the website and being able to see it. We certainly want it seen. So, I’ll look myself and see if it is prominent. Randy noted I will too but you get the point. Randy noted I don’t ever want to hear anybody say “gee whiz, I had a complaint and I can’t figure out where to place it.” Kari said absolutely. Randy said my retort to them should obviously be “then you ain’t looking!” Kari noted you missed the red blinking light right? Randy noted no one is suggesting that we go looking for trouble, but we have to be prepared when trouble comes looking for us. Kari noted yes because it will, and I tend to get into trouble. Randi noted sure. Thank you.

Kari noted what I would say is that I think that the process with the NMRE is going well. It did come about as far as us taking away exclusionary reporting. What that is, is every month we are required by law to run through, run the names of former employees and board members that are contracted providers through the state that indicate that somebody has sanctions against them for being able to provide Medicaid services or even receive Medicaid funds. When I run these through, and it comes back and they say “you’re all clear”. Which it always comes back for us all clear. Sometimes it comes back with somebody from Arizona who has the exact same name, the exact same license type as somebody on ours and that happened or it will tell us “hey, your provider, that so and so on the corner, he can’t receive Medicaid funds and so then we put it into that system that any kind of pending contract, etc. We have to do that every month. They were going to go back and delegate that to all CMHSP’s. They did it for us for several years and they had been running that. That came about quick and there was a little like “boy, how are we going do this?” But I think the communication’s have been real good. Tema is the NMRE Quality Compliance person I have thoroughly enjoyed working with her, she’s incredibly knowledgeable. She communicates very well as far as like if she says something, you know exactly what she wants and how it’s supposed to be wrapped up. She

has been included in this process and very patient actually about when do you think's a good start date, and what you have to do. On our end, IT has gone out and invented the software. So that all of us will be using the same software as the NMRE uses and so we do have that IT has been on board. We have got all the contracts signed, from our provider. And all we have to do is get the training and we'll be ready to roll this month. So, we'll be doing our first one this month and I anticipate it will be taking a little getting used to, but I think it will go well. But I think the collaboration has been great.

Joanie noted we the NMRE Ops team spoke about some challenges in the process of delegating the function Kari spoke about. Some tension was noted and Eric said he was going to follow up with it.

Question - I was wondering, do people sometimes get confused between your office and Recipient Rights? Do you like sometimes maybe have to, identify this maybe should go, to Brian's office? Does that happen? **Response** - it does happen. It's happened a few times and luckily, I think, that our offices work together well because sometimes we work in tandem. Sometimes we have a situation that isn't only a compliance issue, it is also a rights issue and we work in teams and we try to merge our languages to people so that we're not doubling up on it and we're both doing the same thing and share information. I think we're really good at redirecting them and letting them know this isn't covered under my jurisdiction, but it is covered under ORR and I usually include a name of a prior person on an email and say "I know that so and so will help you", and so I think that our offices work very well together. Kari said Thank you very much, I appreciate it.

6. SECURITY ANNUAL REPORT:

Jeremiah Williams introduced himself as the IT Supervisor for NLCMH and will be giving the annual Security report this year. If you have any questions, feel free to just ask right away or you can wait until the end. The good news is we didn't have any reportable security breaches last year for the year 2021. We haven't had any instances in the six years that I've been at CMH which I'm happy to report on.

We also have moved over to a new product called Artic Wolf that is providing real time network scanning of our network traffic as well as scanning of our logs. Which allows us to determine and catch any kind of security issues as they crop up. Before, we had to dedicate more time to look at logs when you have a huge network like we do, on both sites with all of the cloud applications that we have we had to inspect logs and go over through the security reports on all of them and with Artic Wolf, it's just a third party that is doing all of this, using artificial intelligence, deep learning of our network, and it does that all inclined to do more with computer technology that they have than what it would take probably a staff of ten full time.

We continue to run phishing campaigns with Microsoft security, or Microsoft attack simulation. Which is to train staff, I will get into that a little bit later. These are the summaries at the top of the packet. We have deployed many hardware upgrades in the last twelve months. We've replaced over 380 cellular devices, we are in the process of upgrading a router in Traverse City. It takes a lot of hardware in this day and age and we are working on deploying over 50 laptops now and 50 laptops later this fiscal year.

Jeremiah referenced page one, with the analysis that Artic Wolf details in their Tuesday reports, and as a sys admin we can actually log in and do these reports in real time. At that page you can see that it says that our network security, our current risk score is at a 726, where the industry average is 722 and then we currently at the time of this printing had 1,344 unresolved risks. That really doesn't give too much, but it does, give you a good snapshot of that day. Because I checked it a couple of days ago, we were down to just over 12,000 unresolved risks and our security score was a 7.7 and the industry score was now down to 7.1, so it's pretty fluid and today I checked, we're at 7.9 for a current risk score as of today and we have 1,321 unresolved risks. Doesn't mean that they are attacks, doesn't mean, it is, it is a vulnerability but some of those are very, very low level and Dan goes on in his report to describe different levels and like I said, just checking it the other day, we were down 120 unresolved risks then. If there is a new vulnerability that comes out, Microsoft Office patch, you know that's why it can fluctuate by the hundreds every day. Some of these risks, we actually have to

accept. We have our old system, Avatar, that runs on a very old platform. We are in the process of getting that off our network but we still need that for certain reports. We access that with a very old program call Java. Some of you might be familiar with Java and how unsecure it is but we have a lot of filters in our network router and firewall to block traffic externally. But just because we have that on our network, it is a risk. So, we are in the process of getting rid of those.

Jeremiah referenced page two where there's a chart there, that's a base score of zero, low is 1.1 to 3.9. You're never going to have zero unless if we got rid of all of our cellular devices and turned off the internet and went back to typewriters. Then I don't even think we could get a base score of zero. You'll see that we are currently in the high (the low high) severity range for our average score. The nice thing about Artic Wolf is that it will shed light on some of the issues we had with the third party not patching our Windows on time. That's why our current score is a little higher than we would like. We will get this down into the medium. Artic Wolf says that it's impossible, but we will get it down to the medium and I hope that Dan or myself can report on that next year that we will be down there. Artic Wolf says it's impossible because there's just no way to patch and maintain a network, but that is our goal and if we set that goal, we are going to get it. So, right now we are at 7.9 as of today and considering the medium is at 6.9 and we had a goal of 4, so we have a pretty lofty goal in IT but if we make a game of it, I think we can do it. When we got Artic Wolf and they reported on our current risk assessment, we were at a 9.1 and that was to do with our software, our (we call it our mobile device appointment platform) wasn't pushing out a feature update, which is a huge update to push out, especially on a mobile workforce like we have. Some people are using cellular for internet and some people have faster internet. The people with faster internet get the updates a little quicker and the people with cellular were struggling. Since Artic Wolf has been able to bring these more to the forefront, we have been able to get these results a lot quicker, you can find the systems a lot faster than in the past of going through all the devices and figuring out which devices are running behind on their system updates. He referenced page three; he already covered this a little bit. It goes into certain types of things that Artic Wolf helps us track and log ins from Microsoft Office 365 from anything externally in the United States, foreign or domestic, any suspicious activity. So, say the CEO signs in in Michigan and then in a span of five hours signed into Office 365 in California then that would be flagged and could be potentially blocked quickly. We actually had this, we had a third-party supplier of the phone system, they remoted into our Office environment, Office 365 environment because we have TEAMS voice, and he is from Bulgaria and we knew this and we allowed his login from Bulgaria but once we got Artic Wolf, they automatically blocked his logins. That's just one instance of how Artic Wolf works.

Jeremiah referenced page four, we're using our attack simulator to do our phishing campaigns, send out spam that way, we do spear phishing and if you guys need to know I'd be more than happy to provide that. But before we ran any kind of campaign to train our staff on fraudulent emails, what to look for, we had a very, very high failure rate when we would send these out. Now, I don't have the current numbers on the attack simulator, but they are very low. I get people asking me on legit emails now just because they weren't expecting that email to come from a user and I'll check it out and I, and I discuss it with them what to look for. But ultimately, I say "well then, let's go ahead and contact this person, not through this email and see if they meant to send it." It's things like that that really makes our network environment more secure. Most of the texts you see today they're going to attack people with security questions, or the social engineering attack as opposed to somebody hacking into our network. That's where most of your attacks come from these days. It's much easier to trick people than it is to get in through a network.

Hardware upgrades, the final thing we want to cover. We've upgraded our devices. We had old iPhone 7's for the most part in the agency and now we're on iPhone 12's. We're also on a company called FirstNet, which is like a third party on top of AT&T. So, they use AT&T's towers, but FirstNet is a first responder's network. It is a privilege to be on their network. Essentially, all first responders in Michigan can be on either FirstNet or Verizon has their own as well. But basically, if we are in a time of crisis, or anything like that with a high volume of cyber traffic, we actually will get priority. We get this priority because we do a lot of crisis work with the police, a lot crisis work with the EMS system as well, as well as the emergency departments in the four hospitals. The three or four hospitals. So, with TEAMS, we do remote calls. Crisis will tell you all about that. I had the privilege when I delivered all the iPads to the local jails and hospitals, I got really good feedback on that. I've gotten really good

feedback on the new FirstNet in Roscommon where they were previously on Verizon and now, they are on FirstNet and their coverage has been much better. At times when Cherry Festival is in full swing in Traverse City, it's hard to get a cell call through. Well, our traffic is priority on the network so it's more likely that our calls will go through (crisis calls) which is amazing. That was kind of the selling feature for making the migration. That pretty much wraps it up. If anybody has any questions, feel free to ask. No? Going to let me off the hook? Thank you. Ty said we are going to hold you accountable having that down to 6. Jeremiah said alright. Rose noted next on our agenda is the Administrator Paper. She asked if Ben would like to talk about that?

7. ADMINISTRATOR PAPER:

Ben noted he was surprised this topic was on the agenda just by the graciousness of our chairperson. He was supposed to just forward it to everybody else's email and then I find it in the packet. So, now I have to explain myself and some of it is kind of delicate. I was concerned this last summer when I found out that some of the commissioners were looking for a way to get rid of our Administrator. He noted he is in research, or I've been a researcher since well most of my life. 2004 Library of Congress researcher, ever since, so I could write the books that I write. Lexus Nexus is the law group I was with ever since 1991, and it has both the legal research plus it has all kinds of corporate research. I took off December completely from work and delved into this to see if there were studies done. I found out right away there's so many studies being done for county administrators as to their longevity or why there's a turnover and how that reciprocates with the board members and the kind of boards and turnover of boards, and this is kind of the thumbnail sketch of all the research that I was into. I wrote this paper in late January this year and gave it out to the other commissioners. I got some very good feedback from about three of them and didn't hear a word from the others. I think it struck a nerve. Then about three weeks later, our administrator resigned, and I know the behind-the-scenes of that resignation and it's more of a (if you read the paper), it was a push-induced. For example, it's the type thing where, well, if I resign graciously, as the attorney told her to do, then I can at least get three month's pay and I can look for another job, which by the way, she already has a better-quality job, because I don't know if you know her, but she was brilliant. In speaking with board things, with the entire board there, everyone could tell she was the smartest person in the room. But nonetheless, I did this really on behalf of that to try and help the board understand a few things. I was looking for ways that we could, by the way, I used two different studies. There are 15 different studies in this area from all across the country. One from Colorado dealt with larger counties, and the one from Wisconsin, which I used mainly, dealt with more counties like we have here and the turnover rate there. There was a lot of research on this, and I could actually write a book on it, but nobody would buy one. I was trying to think what could we learn as board here from this? From what I have researched, just number one, just off the top is write a contract of trust when we get a CEO. We got to trust them that they're going to implement their own procedures and we got to be patient with them as a board. The studies say at least three years, at least a three-year contract. Five years is the normal or is the average, national average for an administrator, to be an administrator. We had one 26 years ago for 9 years and I delved into that also. I also had to delve into past commissioners and talked to them about the administrators. Larry Huebner back 30 years ago was there for 9 years and there were reasons he was there for 9 years. I have all the contracts here in front of me for every administrator back then. I saw how the contracts changed over the years to where when the board was burned by a couple of administrators that were only there for three months each, then they restructured the contracts to where they had full control over getting rid of someone when they wanted to and they did not have to pull the knob for another year or two years to the end. I went back and got the newspaper it helped me out quite a bit with the past articles, and in this area.

So, contractor trust secondly, having an administrator for more than 5 years builds trust throughout the whole county. Through the county offices mainly, that's the Sheriff's Department, that's all the way through. An administrator really is the coordinator of all the different functions of the county and if you have someone, you're all automatically going to have a head-to-head with the county clerk and the administrator because the county clerk, we all know, is basically the one that runs the county. There's always going to be a head-to-head there. They've got to learn to work together, and the board needs to help them to learn to work together. Having one for five years or more is a good thing. Long term administrator (and I was thinking of Karl in this too since I've been here for a while), long term administrator equals a healthy board. Because it's a board that trusts the process and

knows their limits and does not overreach the limits. You know I was thinking that AI helps Lauri and that's a normal thing because of his expertise. If I helped Lauri, that would be a problem with Lauri because I would be overstepping anything that I am supposed to do. But you know, so there's a difference obviously with each board. Then fourthly, train board members. One trained board member equals twenty, twenty one percent decrease in a push induced turnover of administrators. In other words, if a board member gets trained on how to be a board member, how not to overstep their bounds, how to understand that everything goes through the chairman or vice chair, chairperson. Then it's better for a pull induced environment. The difference between push induced is we want to get rid of the administrator, and so we just start suggesting that they get another job somewhere. A pull induced is when another county sees that the administrator has been here for at least five years and they think, "wow, we're a much larger county, we can pay them more. Let's court them!" That's very positive thing for a for a small county such Wexford is a small county. That's basically the bottom line and I'd be glad to answer any questions even though I wasn't expecting this, but I'd be glad to answer your questions. I don't know if it applies to this or not, for what it is, there you go.

Randy noted first, for clarity, you all need to know that I asked permission to share this. I received permission to share this with you. I intended to share this with you at a different venue and it didn't work out and I thought it was so important to share with you. I wanted to share it with you at our next opportunity and today is our next opportunity, so that is why it is on the agenda. I am ever grateful for the talent around the table that brings things to bear. This was very timely because of our current path. For our current, where we are on our journey together. So, I personally look at it from a couple of different perspectives. First and foremost, I looked at it from the standpoint of how the Carver Model lends itself to creating a structure that allows us to manage our one employee effectively. Yet, I guess I'll go back here and just underline the word effectively because what I've experienced in other boards, and what I read about other boards it's outlined in this paper, many times, boards tend to micromanage. That is death to the administrator of our CEO. It creates such havoc, and problems and I have a feeling none of us want that. I know there's been a lot of criticism or commentary (probably both) of the Carver Model. But this paper drove home, the benefit frankly of the Carver Model when used effectively. In which goes to your point of training. So, if I may, I'm going, I went through the paper as you might imagine a number of times. Thank you again, for sending it. I think that's important as we go along our journey, that we focus on fact. So, the research, and I'll just run through what I highlighted. On page one, which is page 67 of your packet, I highlighted the final sentence. I'll just read it. "What this actually reveals is that a long-lasting administrator is no guarantee. Especially if the administrator is not allowed the freedom to build their own system of guiding the county under the helpful guidance of the full body of the county commissions."

Now, I believe that us, the system, or better said, the setup of Ends and then Executive Limitations is the guidance we currently have right now. So, that allows our CEO to operate and build as long as they operate within the of Executive Limitations. The Ends is what we all want. So, that's the fruit.

Next, on page two of 68, I highlighted, it says, DeHoog and Whitaker found that this agreement between elected board members and administrators directly influenced turnover. DeSantis and Newell solidified this view by estimating that one half of all administrator turnovers are attributed to political conflict. We have our politics here, and we like to keep our disagreements simple, but nevertheless, we have conflict. We've got to figure out a way to dispel that conflict in a continuing civil manner, so that we don't end up losing a person that we pay good money to run the organization. Then later on, the elected body is responsible for establishing jurisdictional missions and policies, the administrators are responsible for carrying them out. Again, the Carver sets that up beautifully for us.

Next page, page 3 or 69 of your packets. "Any deviation from this model such as board meddling in operational aspects of the jurisdiction may lead to increased conflict between board members and administrators." How many times have we seen that? You may look at further down "not taking measures to help the administrator succeed but instead turns into a board that causes conflict, this conflict can be used as an accurate predictor of county administrator turnover." So, that's what I highlighted there. Then we got into our recent search, what's the right wage? It says in the second paragraph "wages just aren't high enough," this would be false. Going down to the final paragraph. "There are six predictors of push induced" and Ben touched on that so I won't dwell on that. Then

later on, it says "this instability only increases after two years if the board culture is not corrected." So, we have a very fragile, if you will, that that is probably not the way to put it but it's the only way I can put it right now. We have to be mindful of how, what we do and how we do it because it takes a long time. I recall how long it took us to return this organization after we had a really difficult time a number of years ago with Recipient Rights.

On the next page, this is beautiful. Very top last sentence on the first paragraph. "As trust in the administrator increases, the trust in the County Board also increases." We touched on trust. Many people touched on trust, trust the board. We have to get there together. Then, in conclusion, or in the conclusion piece, I highlight "it leaves the department heads with no assurance (in other words, it's talking about short term contracts or that type of thing), it leaves the department heads with no assurance of any stable leadership or help. Forcing them to be more independent from the administrator's office for fear of losing budgetary items, including pay raises." So, did you, another word for it is anarchy. We've all got to go together. It all has to work together. We're all human beings, we're not going to be perfect but the more we strive to work together the better we are going to succeed. Then, finally, each member of the board must ask themselves a question, "am I part of the problem, or will I be part of the solution?" Those are my takeaways from this. I appreciate the time. I appreciate Dr. Townsend bringing this to my attention. I certainly appreciate your willingness to allow this to be shared with everyone. I found it very, very thoughtful. Thank you. Rose recognized Ty and then Al.

Ty noted Ben, thank you very much. I found this interesting too and our county is facing retirement of our administrator and on our agenda next month is "how do we keep and attract our administrators", and this will be shared with them, with your permission. Ben noted I'm really in trouble now! Ty noted it was very informative, very helpful, insightful. Thank you.

Al noted I would just like to correct one word to this. You said Al helps Lauri. I work with Lauri to help the board better understand our complex financial situation. Ben responded that's exactly right. That's true, yes. But if I tried to do that, I would be overstepping. Randy noted well, I guess to pile onto Al's point, within the Carver Model, Al, like everybody else in the room and this table helps. Rose asked for anymore comments? She thanked Ben.

8. BOARD RETREAT:

Rose noted next on our agenda is our board retreat planning. We've been talking about this a lot in our NLD meetings. We're really hoping for some input from people about, you know, just about how you guys want to go about it. She asked Barb, did you take the notes about what exactly we are looking for. Barb noted I think our question because it there's several ideas on the table like having two half days, having a board training, maybe we were talking about bringing somebody in to do the Carver Model with us all? Barb noted we're at the point of trying to clarify how much time you need Randy for bringing the information to all of us together? Do you want to call that a retreat, or do you want to call it an informational meeting? That is one of our questions. Because we determined by our committee that we do need a retreat. Randy noted I read your minutes. One of the things that was said in the minutes contradicted what I had said in the previous minutes. So, I'll just clarify. I have not made any plans, inquiries, nothing regarding a facilitator for a learning session on the Carver Model. None. Zero. I guess I'd like also to clarify, I am, I know we said we but I want to emphasize we, it's what we want. Right? Now, what if you would ask me specifically, I would say that years ago, we had a retreat and Dave Stephenson, Dave Stephenson was the local Carver expert. I believe it was a full day session. We also had a retreat where we had a Carver facilitator. This was 7 years ago, 8 years ago, something like that. For me, that had mixed results. What I would propose is that we, for schedule purposes, and okay now, now you get a lot of feedback when you're in my position because you say well, we're going do this on this day and this day and somebody says well that doesn't work for me or I've got to schedule things. They're right, I mean me too, I've got a business to run. To take two from my perspective, and you know everybody's not going to agree on this, but from my perspective, I would say one day, period. Rather than two days and the only reason I say that is for me, running a business, it's easier for me to say I'm going to be out of pocket all day rather than half days. You know, you want to have, you would prefer to have this session off site, away from all the distractions from everything under the sun. So, there's those things to be considered. But that's just me. The other comment, regarding that one of the most impactful sessions

I've gone to in my whole life was I labeled it as a brainwashing session. The only reason it was effective is because I was locked in, and I couldn't get out. It was literally forbidden to leave. So, if you have one session and you say, you know, "ya'll come on in, we're going to lock the door and you can't leave" and this is got to be Carver is a very, very complex, very complex, very high level but very structured. It's so beautiful in its construct to me, that to gain an appreciation of what the Carver Model can do, in my humble opinion, you're going to need A- the standard Carver Model diagram. But to me, for people to be able to understand it, you've got to have a couple more things. You got to have the ability to have real life application. People will say "oh, now I get it! Now I understand how that connects the that!" A real, real simple example of that would be, our sheets that we fill out. On the sheet, it says "was this reported? Was this report submitted?" Well, that connects to the calendar that we all have that says, "this is supposed to occur at that time". That's a real-life explanation as to why that question is there, how that links to the calendar we have, etc. I think for us to be really at least start being able to use the Carver Model effectively, we need to know the power we have. We, somebody says "I don't like the way we handle this." Well, the response to that would be, alright, well, let's first identify what this is. Meaning, is it an End, or teach people how to write an End. So, perhaps we could have a session of End writing. Then from there, Executive Limitations and then from there we can become.

Ty asked if he could respond to Randy? I'm sitting here and I want to respect our governance process but for me, what I need is some learning how then not to have it be so cumbersome, so paper dependent. So, I feel like we get bogged down in all the things that don't matter and we lose focus about Ends. We're more inclined to worry about our governance process than we are our institutional mission. I've been on a number of boards and I find the Carver Model, at least as we use it is very cumbersome, very awkward. I think it hurts us in some of the public communications. I think we've seen a piece of it when we've struggled with some issues in the last couple of years. For me, before we have instruction on the Carver Model, I want to make sure we're committed to the Carver Model, if that's the right model. If I'm alone I apologize. I'm not committed that it's serving us well. Rose recognized Justin.

Justin – I guess, if anybody can on the Board, come to a better solution, you know we can criticize the Carver Model as you want to. On the other hand, if any Board member here wants to do some sort of research to figure out a better model and bring it to the Board I understand that if we commit to the Carver Model, then we commit to the Carver Model. Thank you.

Barb asked did we cover what we needed for the NLD question or are we at a point where we just need to not deal with it today and go back to our meeting again?

Rose noted no I think we need this this input. It's what we wanted. Just in general, because we were pretty confused in talking about it at the NLD, what exactly people wanted.

Randy asked if I may, Ty I hear you loud and clear, I really do. I think it is a function of two things. Number one, we're a public body and what the Carver Model really sets a wonderful structure for beyond even small things like how to do an agenda, how to interact, how to review, all of these things. I think we owe it to ourselves to learn how to use it. I truly believe that other than one very insignificant Executive Limitation change, since I've been here, there have been opportunities formed but when it came up against it, folks felt uncomfortable or they were unwilling to proceed. I don't know, it doesn't make any difference. But had they been comfortable using the Carver Model, I believe we would have had a better outcome than what we did. So, I think it needs worked on. Rose recognized Al.

Al noted I think that before we dump the Carver Model, we need to really understand it. Randy, I agree with Randy, that we don't want that presentation we had 7 years ago which explains the mechanics of it. We don't need that. I would make a title of "Living with the Carver Model." Then develop an agenda around that. I think that piece, a half a day on that is something that we really need to do. We can figure out who the presenters are and so on, but I think a good topic is Living with the Carver Model. So, that we completely all understand it and then we can go from there. For example, a full day or half a day, I personally love the half day sessions. My experience with first days is about three o'clock in the afternoon somebody's got to leave, and it starts drifting off, so I'm all for

half day morning sessions. Rose recognized Mary.

Mary noted I have a tendency to agree with Ty and also with Al. But I think that the beginning place is to look at all of the responsibilities that we have as a Board. Responsibilities that are laid out in the administrative rules, responsibilities that are laid out in the Mental Health Code. Any other sources of Board responsibilities that are out there and then that is the starting place. That we figure out a model that will allow us to ensure that we are doing what we are required to do under the law. Rose thanked Mary and recognized Penny.

Penny noted so maybe you will answer this question right now or maybe you can give me some required reading and I'd be glad to do that. But, when you sit on as many boards as I do, it does tend to get a little muddled as to what models does which and if, maybe someone with more experience than I could suggest some compare-and-contrast, this model versus that model, that would be extremely helpful. Then I do agree with Ty and I agree with Al, and I think the best thing that we can do as a Board is to just find whatever it is that works for us and, and get happy with it.

Randy noted building on Al's comment, and I think Mary makes a very valid point. Of a half day on Mental Health Code/By-laws and whatever else. That's the foundation of our house. Then we go into how we live in our house. The Carver Model at this point. As far as Penny, I'm going. I will inundate anybody that wants to be inundated with governance model options. Give me some time. I can say this to you, my experience is you have a choice between the Carver Model or controlled chaos. That's been my experience. That's my knee-jerk reaction but you're going to find out what you find out. How about that first day that we have Mental Health Code/By-laws and different governance models and then the next day Living the Carver Model? That's gives you how about that for structure? If that sounds good, I'll shut up. Rose recognized Justin.

Justin noted can I also say, probably should we look at Open Meetings Act of the state statutes?

Rose thanked Justin. Absolutely. That would be a good for that first day and the By-laws. Rose noted moving on.

9. AGENDA PLANNING OPTIONS:

April 21, 2022 meeting we have on our agenda: Update on Recipient Rights; CEO Evaluation; Financial and Compliance Audit; Code of Conduct and Conflict of Interest Forms. Rose recognized Nicole.

Nicole noted that on our calendar she is noticing that next month the meeting is listed as Traverse City. She noted that she is just checking in with the Board if we're maintaining coming to Cadillac or are we going to resume traveling to our Traverse City offices. Rose noted I thought I read we were going to stick to coming to Cadillac until all of the COVID was lifted? Joanie note that is what I thought. Joanie noted that we had decided to stay in Cadillac until the COVID restrictions were lifted because we are still using the conference rooms in other offices to provide treatment. Nicole suggested that we update what is on our web-page for the Board. Randy, point of clarification, question asked COVID has not been lifted? I see no more mask mandates. I just need clarity. I like most, I can't speak for anyone else. Coming to Cadillac is all good and fine but we need to start traveling around and getting back to whatever the new normal. Is there any indication as to when?

Joanie noted that we fall under the Emergency Orders. I have been told it is due to expire April 17. We should know more. In our treatment areas we are required to wear masks.

10. MEETING EVALUATION/COMMENTS:

- #1 – We spent our time on the most important governance topics – excellent
- #2 – We encouraged diversity of viewpoints – excellent
- #3 – Our decisions were made collectively – excellent
- #4 – The Board used it's time effectively – excellent
- #5 – What is the most important thing the Board could do to improve our function as a Board?

Comment – None.

11. OTHER/ADJOURN:

Meeting adjourned at 2:16 p.m.

Respectfully Submitted,

Deb Lavender
Executive Secretary

Heather Sleight
Administrative Specialist

DRAFT

**Northern Lakes Community Mental Health Authority
Financial Reporting for 3/31/2022**

Overview:

Two block grants NLCMHA was awarded this year included media campaigns. The Integrated Health Clinic grant included \$16,800 to increase census and the Covid Supplemental included \$30,000 to increase awareness of NLCMHA and improve the positive image of the Agency. The metrics that will be used are traffic counts to the website and then the response to the telephone survey which has been conducted every 2-3 years. The expectation is to complete the phone survey in December of 2022. The survey has been conducted since 2006 and administered by CS Research and Consulting, LLC. Please watch for upcoming media promotions of NLCMHA.

Michigan Department of Health and Human Services published the Encounter Quality Initiative reporting package on March 31st. This reporting is due May 31st and covers the October 1, 2021-January 31, 2022, time frame. The newest template has been expanded from 4,150 lines to 7,169 lines. This template is used to drive reporting files within NoLa. IT has used the template to add additional fields of look up for the purpose of County of Origin of people served, the category as defined by Milliman, and the location of the service. Each of these additional 3 indicators are imperative to report County level data by fund source. At the present time the NoLa software developers, Peter Chang Enterprises (PCE), are modifying the reports to accommodate the latest templates. For that reason, reports that were created to pull county, source, and location data are currently broken. Further county level reporting will be researched in the coming months.

NLCMHA has received approval from the City of Cadillac and Wexford County to divide the land being purchased for Northern Health Care Management development of assisted living apartments. It is anticipated to close on the property this month. Progress will be provided monthly on this very exciting opportunity.

Finance staff have implemented the first step in transitioning to Paychex payroll and human resources from the old Sage software product, HRMS. On April 1st, staff retrieved their first pay stub from the Paychex portal. Finance and HR staff will continue implementing additional modules incrementally the next several months.

The NMRE is beginning the process of requesting recruitment and retention plans to address the surplus the Affiliation is experiencing this fiscal year. Executive staff will begin discussing the needs of the Agency for service provision, recruitment, and retention of staff and providers.

NLCMHA finance staff have accomplished one of the best audit seasons ever experienced. Each of the three audits covering finance, compliance, and single are clean opinions with no findings. Great work to the hard-working accounting staff. Your efforts are greatly appreciated.

Medicaid Spending as compared to Regional Funding Advances:

Services provided to individuals with traditional Medicaid coverage will be reported at \$28,083,842 with \$361,814 available in coordination of benefit reimbursements. This is \$3,271,064 below capitated advances provided by the NMRE.

Services provided to individuals with Healthy Michigan Plan coverage will be reported at \$3,576,148. This is \$246,044 above capitated advances provided by the NMRE.

Services which must be paid for by General Funds total \$785,415. This is \$706,540 below the year's allocation. General Funds include the carryforward earned in FY 2021 of \$127,597.

Residential/Inpatient Usage:

At the end of March, it is expected there were 254 people in contractual specialized residential placements and semi-independent homes representing a net decrease of one. The average SRS per diem decreased \$1.16 to \$209.37. NLCMHA has been notified of a closing of one more specialized residential home. Four people reside at the home. Two people will move to another home ran by the provider with two people needing residential placement in the coming weeks. Staffing has been the challenge at the home.

The amount paid to community inpatient hospitals, on a cash basis, was \$499,891 in the month of March.

Revenues and Spending:

Revenues exceed expenses by \$1,744,121 as of March 31st. This is a combination of Northern Health Care Management, Behavioral Health Home, local funds, and general funds.

Cash on hand increased by \$5,214,104 in March. NMRE paid March capitation in March.

Northern Lakes Community Mental Health Authority
Finance Report As of 3/31/2022
Fiscal Year Ending September 30, 2022

Revenues	2022-#1	2022-#1	Actual	Actual	Percentage	Capitated Category	Provided Advances	(Expenses)	Worries (Over)/Under
	Total Budget	YTD Budget	YTD Revenues	Over/(Under)	YTD			Earned Revenues	
State Sources	\$ 6,355,628	3,177,814	2,873,732	(304,082)	45%				
Local Sources	\$ 1,961,800	980,900	748,868	(232,032)	38%	General Funds	1,491,955	785,415	706,540
Medicaid Sources	\$ 62,919,411	31,459,706	31,845,845	386,139	51%	Medicaid	30,993,092	27,722,028	3,271,064
Reimbursements	\$ 964,244	482,122	852,847	370,725	88%	Healthy Michigan	3,330,104	3,576,148	(246,044)
MI Choice HCBW	\$ 11,652,407	5,826,204	5,534,724	(291,479)	47%	Behavioral Health Home	182,855	64,982	117,873
Total Revenues	\$ 83,853,490	41,926,745	41,856,016	(70,729)	50%	Northern Health Care Mgm	5,518,724	4,995,319	523,405
						Local Requirements	748,868	606,084	142,785
							42,265,600	37,749,976	4,515,624

Expenditures	Total Budget	YTD Budget	Actual	Actual	Percentage
	Total Budget	YTD Budget	YTD Expenses	(Over)/Under	YTD
Personnel	\$ 29,673,756	14,836,878	13,182,452	1,654,427	44%
Direct Operations	\$ 2,521,322	1,260,661	1,302,395	(41,734)	52%
Contractual Services	\$ 11,146,558	5,573,279	5,410,701	162,578	49%
Contract Agencies	\$ 7,218,481	3,609,241	3,689,572	(80,332)	51%
Residential Contracts	\$ 24,069,294	12,034,647	12,039,881	(5,234)	50%
Inpatient Services	\$ 6,264,208	3,132,104	3,000,067	132,037	48%
Transportation	\$ 1,348,564	674,282	727,874	(53,592)	54%
Occupied Space	\$ 1,611,307	805,654	758,953	46,700	47%
Total Expenses	\$ 83,853,490	\$ 41,926,745	\$ 40,111,896	\$ 1,814,850	48%

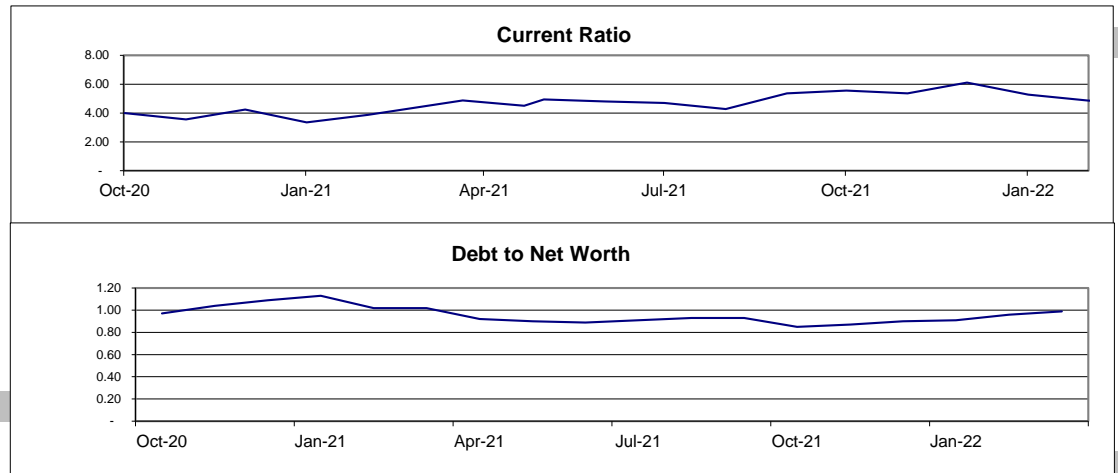
Net Revenues over Expenditures **\$ 1,744,121**

Medicaid and Healthy Michigan Plan expenses are expected to be covered by Medicaid savings and internal service fund dollars from the NMRE.

General Funds spent on services to individuals without insurance coverage must be covered by excess local funds or NLCMHA Fund Balance

Monthly Indicators	Previous Month	Current Month
Current Ratio	4.85	5.47
Cash on Hand	\$ 28,019,886	\$ 33,233,990
Short Term Liabilities	\$ 5,776,824	\$ 6,070,451
<i>According to Financial Performance Indicators the goal is greater than 2.</i>		
Debt to Net Worth	0.96	0.99
Short Term Liabilities	\$ 5,776,824	\$ 6,070,451
Long Term Liabilities	\$ 6,070,615	\$ 6,070,615
Compensated Absences	\$ 1,341,519	\$ 1,341,519
Net Pension Liability	\$ 4,729,096	\$ 4,729,096
Unrestricted Fund Balance	\$ 5,021,992	\$ 5,021,992
Net Assets (Undepreciated Value)	\$ 7,257,546	\$ 7,257,546
<i>According to Financial Performance Indicators the goal is less than 2.5.</i>		

Directly provided services	38.9%	39.5%
Contractually provided services	61.1%	60.5%



Northern Lakes Community Mental Health Authority		
List of Contracts and Agreements Entered Into		
For the Month of March 2022		
	Vendor by Category	Estimated Annual Financial Value
1	Specialized Residential Services and Community Living Supports	
*	Pine Rest 3rd Amendment	\$ 130,000
*	Beacon Specialized Living Services 10th Amendment	\$ 2,750,000
*	Hope Network Behavioral Health 4th Amendment	\$ 283,500
2	Inpatient and Hospital Contracts Including Single Case Agreements	
*	McLaren Bay SCA	\$ 10,000
3	County of Financial Responsibility (COFR) - Provider (Purchase of Services)	
*		
4	Independent Contractors and Leases	
*	Grand Valley State University Program Affiliation Agreement	\$ -
5	MI Choice Waiver Contracts	
*		
6	Grants-Revenue Contracts	
*	Merit Award Trust Fund-State of Michigan (operated by NHCM for Caregiver Respite)	\$ 89,374

CORRESPONDENCE TO THE BOARD – CURRENT MEETING

Sent from Kate Dahlstrom Thursday, March 17 at 4:08 p.m.

Hello Board,
This relates to my prior email. Please see page 9 of the Enabling Resolution.
Also I believe the 2nd attachment, which comes directly from your website, needs updating.
Thanks so much,
Kate Dahlstrom

Attachments CMH2003EnablingResolution

4b-Terms 04192021

ENABLING RESOLUTION

And

AGREEMENT

by & between

**Crawford, Grand Traverse, Leelanau, Missaukee,
Roscommon & Wexford Counties**

Establishing

**Northern Lakes
Community Mental Health Authority**

October 1, 2003

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Signature Page

Attachment 1 – Schedule of Appointments to the Board by the Counties

ENABLING RESOLUTION
and
AGREEMENT
between

**Crawford, Grand Traverse, Leelanau, Missaukee,
Roscommon & Wexford Counties**

Establishing

Northern Lakes Community Mental Health Authority

WHEREAS, Act 290 of the Public Acts of 1995, as amended, provides that any combination of counties may elect to establish a Community Mental Health Authority (hereinafter referred to as "CMH Authority" or "Authority", "if it is approved by a majority of the commissioners elected and serving in each county creating the Authority" (MCL § 330.1205, (1)), and

WHEREAS, MCL § 330.1205 requires an enabling resolution adopted by the Board of Commissioners of each creating county establishing the CMH Authority and

WHEREAS, Crawford, Grand Traverse, Leelanau, Missaukee, Roscommon and Wexford Counties have each conducted three (3) separate public hearings on the issue of creating a Community Mental Health Authority, with notice of the hearings given pursuant to the Open Meetings Act, being MCL § 15.261 et seq., and

WHEREAS, Crawford, Grand Traverse, Leelanau, Missaukee, Roscommon and Wexford Counties desire to write and implement such an Agreement to establish and create a

Agreement for Community Mental Health Authority

Community Mental Health Authority, which will function as an independent and separate public legal entity, known as the Northern Lakes Community Mental Health Authority serving the public behavioral health needs of persons in Crawford, Grand Traverse, Leelanau, Missaukee, Roscommon and Wexford Counties, hereinafter sometimes referred to as the "Authority", and to specify the powers and duties under which the Authority will operate; and

WHEREAS, the Counties of Crawford, Grand Traverse, Leelanau, Missaukee, Roscommon and Wexford desire to merge the existing Great Lakes CMH Authority and the North Central CMH Authority;

THEREFORE, for and in consideration of the mutual covenants hereinafter contained, each of the participant Counties hereby approves the Enabling Resolution creating a joint Community Mental Health Authority and enters into this Agreement as follows:

I.

Establishment

Pursuant to the Mental Health Code, PA 258 of 1974, as amended, Section 205 (MCL § 330.1205) and pursuant to the Michigan Constitution of 1963, Article 7, Section 28, the duly elected legislative bodies of the Counties of Crawford, Grand Traverse, Leelanau, Missaukee, Roscommon and Wexford, State of Michigan, through this Agreement establish the Northern Lakes Community Mental Health Authority, which is a separate legal and administrative public governmental entity distinct from the counties that establish it to operate as a Community Mental Health Authority.

This new Authority, the Northern Lakes CMH Authority, is in effect a merger of the two pre-existing Authorities, Great Lakes CMH Authority, serving the counties of Grand Traverse and Leelanau, and the North Central CMH Authority, serving the counties of Crawford, Missaukee, Roscommon and Wexford. This merger is in accordance with MCL § 330.1219. By this action of the counties creating this Authority, the prior Authorities are hereby merged.

Agreement for Community Mental Health Authority

To the extent required by law, the Authority, as a public governmental body, is subject to the Open Meetings Act, 1976 PA 267, MCL § 15.261 to 15.275, and the Freedom of Information Act, 1976 PA 442, MCL § 15.231 to 15.246, except for those documents produced as a part of the Peer Review Process required in MCL § 330.1143a and made confidential by MCL § 330.1748(9).

II.

Definitions

The following terms for this Agreement shall have the meanings attached to them:

"Authority" refers to the Northern Lakes Community Mental Health Authority serving the counties of Crawford, Grand Traverse, Leelanau, Missaukee, Roscommon and Wexford.

"Chief Executive Officer" refers to the Chief Executive Officer (CEO) of the Authority.

"Service" means a mental health or substance abuse service.

"Department" refers to the Department of Community Health of the State of Michigan.

"Director" refers to the Director of the Department of Community Health of the State of Michigan.

III.

Purpose of the Authority

1. The purpose of the Northern Lakes Community Mental Health Authority, hereinafter referred to as the "Authority", is to provide a comprehensive array of mental health services appropriate to the conditions of individuals who are located within its geographic service area, regardless of an individual's ability to pay as required by and permitted under PA 258, of 1974, as amended, and hereinafter referred to as the Mental Health Code (MCL § 330.1001 et seq.). The array of mental health services shall include, at a minimum, all of the following, unless otherwise amended by statute:

Agreement for Community Mental Health Authority

- (a) Crisis stabilization and response including a 24-hour, 7-day per week, crisis emergency service that is prepared to respond to persons experiencing acute emotional, behavioral, or social dysfunctions, and the provision of inpatient or other protective environment for treatment.
 - (b) Identification, assessment, and diagnosis to determine the specific needs of the recipient and to develop an individual plan of services.
 - (c) Planning, linking, coordinating, follow-up, and monitoring to assist the recipient in gaining access to services.
 - (d) Specialized mental health recipient training, treatment, and support, including therapeutic clinical interactions, socialization, and adaptive skill and coping skill training, health and rehabilitative services, and pre-vocational and vocational services.
 - (e) Recipient rights services.
 - (f) Mental health advocacy.
 - (g) Prevention activities that serve to inform and educate with the intent of reducing the risk of severe recipient dysfunction.
 - (h) Services designed to divert persons with serious mental illness, serious emotional disturbance, or developmental disability from possible jail incarceration when appropriate.
 - (i) Any other service approved by the Department, or authorized by statute.
2. Services shall promote the best interests of the individual and shall be designed to increase independence, improve quality of life, and support community integration and inclusion. Services for children and families shall promote the best interests of the individual receiving services and shall be designed to strengthen and preserve the family unit if appropriate. The Authority shall deliver services in a manner that demonstrates they are based upon recipient choice and involvement, and shall include wrap-around services when appropriate.
 3. The Authority shall carry out the applicable provisions of the Mental Health Code, subject to the rules designated by the Michigan Department of Community Health. Its services shall

Agreement for Community Mental Health Authority

be directed to individuals who have a serious mental illness, serious emotional disturbance, or developmental disability.

4. Services provided pursuant to this Agreement may be directed to individuals who have other mental disorders that meet criteria specified in the most recent Diagnostic and Statistical Manual of Mental Health Disorders published by the American Psychiatric Association and may also be directed to the prevention of mental disability and the promotion of mental health. Resources that have been specifically designated to community mental health services programs for services to individuals with dementia, alcoholism, or substance abuse or for the prevention of mental disability and the promotion of mental health shall be utilized for those specific purposes.
5. Priority shall be given to the provision of services to individuals with the most severe forms of serious mental illness, serious emotional disturbance, and developmental disability. Priority shall also be given to the provision of services to individuals with a serious mental illness, serious emotional disturbance, or developmental disability in urgent or emergency situations.
6. The Authority shall continue to provide, upon its creation and thereafter, mental health services to all the county correctional facilities, at no cost to the counties, appropriate to the needs of the inmates or any other qualified recipient, consistent with the statutory mandates.

IV.

Area Served

The Authority shall ensure the provision of services set forth herein to persons located in Crawford, Grand Traverse, Leelanau, Missaukee, Roscommon and Wexford Counties and as otherwise provided by law (see MCL 330.1306 (2)).

Agreement for Community Mental Health Authority

V.

Composition of the Authority Board

The Counties hereby establish a new Community Mental Health Authority which, at the time of establishment, October 1, 2003, will consist of the twenty four (24) Board members (twelve (12) from each of the two pre-existing Authorities), as appointed by the participant counties... Each County shall appoint initial Board members to staggered terms ending March 31, 2005, March 31, 2006 and March 31, 2007. By April 1, 2005, the Authority will have 18 Board members. Within three (3) years of establishment of the Authority, by April 1, 2006, the Board will consist of sixteen (16) members, if permitted by law, to serve for the term and upon the conditions set forth in Article VI.

<u>County</u>	<u>Board Members</u> 10/1/03 – 3/31/05 <u>1st Year</u>	<u>Board Members</u> 4/1/05 – 3/31/06 <u>2nd Year</u>	<u>Board Members</u> 4/1/06 – 3/31/07 <u>3rd Year</u>
Crawford	2	2	2
Grand Traverse	9	7	6
Leelanau	3	2	2
Missaukee	2	2	2
Roscommon	4	2	2
Wexford	4	3	2
Total	24	18	16

A number of fourteen (14) Board members would be in accordance with current law MCL § 330.1222 (2), which states that when a Board represents five (5) or more counties, the Board membership shall be increased by number of County Commissioners serving on the Board that exceeds four (4). This allows for one (1) commissioner from each county.

Agreement for Community Mental Health Authority

The Counties, however, approve a sixteen (16) member Board, if permitted by law, in the third year of operation, pending legislative approval to accomplish this. There is legislation pending that states that when five (5) or more counties join together, the membership of the Board for each of the Counties shall be divided among the Counties in proportion to each County's population, except that each County shall be entitled to at least two (2) Board memberships, which would allow, in this case, a sixteen (16) member board. The members of the Authority from each County shall be approved by majority vote of the Boards of Commissioners of the participant Counties.

<u>County</u>	<u>Population*</u>	<u>Percent</u>	<u>Member(s) by %</u>	<u>Members***</u>
Crawford	14,273	7.78%	1	2
Grand Traverse	77,654	42.32%	6	6
Leelanau	21,119	11.51%	2	2
Missaukee	14,478	7.89%	1	2
Roscommon	25,469	13.88%	2	2
Wexford	30,484	16.61%	2	2
Total	183,477		14**	16

(* Population based on 2000 Census)

(** Addition of two (2) Members to have one (1) Commissioner per county)

(*** Additional Members to allow a minimum of two (2) representatives per county)

The allocation of Board members by county shall be re-established, if necessary, subsequent to each decennial census, with each county assured at least two (2) representatives.

VI.

Term of Board Membership Vacancies, Removal From Office

The term of office of a Board member shall be three (3) years from April 1st of the year of appointment. Vacancies shall be filled for unexpired terms in the same manner as original

Agreement for Community Mental Health Authority

appointments. A Board member may be removed from office by the appointing Board of Commissioners for either neglect of official duty or misconduct in office after being given a written statement of the reasons and an opportunity to be heard thereon. The County Boards of Commissioners will appoint Board members to the new Authority, who shall serve staggered terms, under the terms and conditions set forth herein. In accordance with MCL § 330.1219 (4), the Authority will adopt a plan to reduce the number of Board members to sixteen (16), if permitted by law, within three (3) years of the establishment of the Authority. The counties will coordinate their Board appointments so that on April 1, 2006 five (5) of the appointments will be made; on April 1, 2007 six (6) of the appointments will be made; on April 1, 2008 five (5) of the appointments will be made. This rotation of Board member terms will continue thereafter. The following is illustrative of appointments by County. Attachment 1 is a complete schedule of appointments by each of the Counties, by year.

Counties	# Appointments April 1, 2006	Apr-07	Apr-08	Apr-09	Apr-10	Apr-11	Apr-12
Crawford	1	1		1	1		1
Grand							
Traverse	2	2	2	2	2	2	2
Leelanau	1	1		1	1		1
Missaukee	1		1	1		1	
Roscommon		1	1		1	1	
Wexford		1	1		1	1	1
	5	6	5	5	6	5	5

VII.

Qualifications for Board Members

1. The composition of the Community Mental Health Authority shall be representative of providers of mental health services, recipients or primary consumers of mental health services, agencies and occupations having a working involvement with mental health

Agreement for Community Mental Health Authority

services, and the general public. In the first year of operation, at least eight (8) of the Board members shall be primary consumers or family members, and of those eight (8) Board members at least four (4) of the Board members shall be primary consumers. In the second year of operation, six (6) of the Board members shall be primary consumers or family members, and of those six (6) Board members at least three (3) of the Board members shall be primary consumers. In the third year of operation, five (5) of the Board members shall be primary consumers or family members, and of those five (5) Board members at least three (3) of the Board members shall be primary consumers. All Board members shall be 18 years old or older.

2. Not more than six (6) members of the Board may be county commissioners. Not more than one (1) county commissioner may serve from each County. No more than half of the total Board members may be state, county or local public officials. For purposes of this section, public officials are defined as individuals serving in an elected or appointed public office or employed more than 20 hours per week by an agency of federal, state, city or local government.
3. A Board member shall have his or her primary place of residence in the county he or she represents.
4. An individual shall not be appointed to and shall not serve on the Board if he or she is one or more of the following:
 - a) Employed by the Department or the Authority.
 - b) A party to a contract with the Authority or administering or benefiting financially from a contract with the Authority.
 - c) Serving in a policy-making position with an agency under contract with the Authority.

Agreement for Community Mental Health Authority

5. On an annual basis, not later than February 1st, the Authority will notify each county of the vacancies on the Board and let each county know of the types of vacancies needing to be appointed by the counties. The intent is to allow the rotation of the types of appointments among the participant counties.
6. If a Board member is an employee or independent contractor in other than a policy-making position with an agency with which the Authority is considering entering into a contract, the contract shall not be approved unless all of the following requirements are met:
 - a) The Board member shall promptly disclose his or her interest in the contract to the Board.
 - b) The contract shall be approved by a vote of not less than 2/3 of the membership of the Board in an open meeting without the vote of the Board member in question.
 - c) The official minutes of the meeting at which the contract is approved shall contain the details of the contract, including but not limited to the names of all parties and the terms of the contract, and the nature of the Board member's interest in the contract.

VIII.

Compensation & Expenses for Board Members

1. Authority Board members shall be paid per diems for meetings attended in an amount established by said Board pursuant to the Mental Health Code, as amended (see MCL § 330.1224). Said Board members shall receive a mileage reimbursement at a rate not in excess of the rate determined by the State Officers' Compensation Commission. A Board member shall not receive more than one per diem payment per day, regardless of the number of meetings attended relating to Authority business.
2. The Authority Board members shall be eligible for necessary other expenses and reimbursements as are authorized for the County Boards of Commissioners with respect to conferences, seminars and other related activities. (see MCL § 330.1224)

Agreement for Community Mental Health Authority

IX.

Board Duties

The Authority shall:

1. Annually conduct a needs assessment to determine the mental health needs of the residents of the counties it represents and identify public and nonpublic services necessary to meet those needs. Information and data concerning the mental health needs of individuals with developmental disability, serious mental illness, and serious emotional disturbance shall be reported to the Department in accordance with procedures, and at a time, established by the Department, along with plans to meet identified needs. It is the responsibility of the Authority to involve the public and private providers of mental health services located in the counties served by the Authority in this assessment and service identification process. The needs assessment shall include information gathered from all appropriate sources, including community mental health waiting list data and school districts providing special education services.
2. Annually review and submit to the Department a needs assessment report, annual plan, and request for new funds for the Authority. The standard format and documentation of the needs assessment, annual plan, and request for new funds shall be specified by the Department.
3. Provide a copy of its needs assessment, annual plan, and request for new funds to the Board of Commissioners of each county creating the Authority.
4. Submit the needs assessment, annual plan, and request for new funds to the Department by the date specified by the Department. The submission constitutes the Authority's official application for new state funds.
5. Provide and advertise a public hearing on the needs assessment, annual plan, and request for new funds before providing them to the County Boards of Commissioners.

Agreement for Community Mental Health Authority

6. Submit to each Board of Commissioners for its approval an annual request for county funds to support the program. The request shall be in the form and at the time determined by the Boards of Commissioners.
7. Annually approve the Authority's operating budget for the year.
8. Take those actions it considers necessary and appropriate to secure private, federal, and other public funds to help support the Authority.
9. Approve and authorize all contracts for the provision of services.
10. Review and evaluate the quality, effectiveness, and efficiency of services being provided by the Authority. The Board shall identify specific performance criteria and standards to be used in the review and evaluation. These shall be in writing and available for public inspection upon request.
11. Appoint a Chief Executive Officer of the Authority to supervise and administer the Authority's community mental health services program who shall meet standards of training and experience established by the Department.
12. Establish general policy guidelines within which the Chief Executive Officer shall execute the community mental health services program.
13. Require the Chief Executive Officer to select a physician, a registered professional nurse with a specialty certification issued under section 17210 of the Public Health Code, Act No. 368 of the Public Acts of 1978, being MCL § 333.17210, or a licensed psychologist to advise the Chief Executive Officer on treatment issues.
14. Deposit directly State and local contributions and all other funds, which the Authority has the duty to ensure are banked and accounted for consistent with requirements of the laws for local governmental units.
15. Invest when appropriate surplus funds or proceeds of grants, gifts or bequests in generally accepted depositories or investments and account to the counties in accordance with the Accountability section (Article XVIII).

Agreement for Community Mental Health Authority

X.

Powers of the Authority

In addition to other powers of a Community Mental Health Services Program (CMHSP) as set forth in the Mental Health Code, the Authority has all of the following powers (MCL § 330.1205 (4)):

1. To fix and collect charges, rates, rents, fees, or other charges and to collect interest.
2. To make purchases and contracts.
3. To transfer, divide, or distribute assets, liabilities, or contingent liabilities. During the interim period between notification by a county under MCL § 330.1220 of its intent to terminate participation in a multi-county Authority and the official termination of that participation, the Authority's power under this subdivision is subject to any Agreement between the Authority and the county that is terminating participation, if that Agreement is consistent with the enabling resolution that created the Authority.
4. To accept gifts, grants, or bequests and determine the manner in which those gifts, grants, or bequests may be used consistent with the donor's request.
5. To acquire, own, operate, maintain, lease, or sell real or personal property. Before taking official action to sell residential property, however, the Authority shall do all of the following:
 - a) Implement a plan for alternative housing arrangements for recipients residing on the property.
 - b) Provide the recipients residing on the property or their legal guardians, if any, an opportunity to offer their comments and concerns regarding the sale and planning alternatives.
 - c) Respond to those comments and concerns in writing.
6. To do the following in its own name:
 - a) Enter into contracts and Agreements.

Agreement for Community Mental Health Authority

- b) Employ staff.
 - c) Acquire, construct, manage, maintain, or operate buildings or improvements.
 - d) Subject to subdivision 5, above, acquire, own, operate, maintain, lease, or dispose of real or personal property. During the interim period between notification by a county under MCL § 330.1220 of its intent to terminate participation in a multi-county Authority and the official termination of that participation, the Authority's power under this subdivision is subject to any Agreement between the Authority and the county that is terminating participation, if that Agreement is consistent with the enabling resolution that created the Authority.
 - e) Incur debts, liabilities, or obligations that do not constitute the debts, liabilities, or obligations of the creating county or counties.
 - f) Commence litigation and defend itself in litigation.
7. To invest funds in accordance with statutes regarding investments.
8. To set up reserve accounts, utilizing state funds in the same proportion that state funds relate to all revenue sources, to cover vested employee benefits including but not limited to accrued vacation, health benefits, the employee payout portion of the accrued sick leave, if any, and worker's compensation. In addition, the Authority may set up reserve accounts for depreciation of capital assets and for expected future expenditures for an organizational retirement plan.
9. To develop a charge schedule for services provided to the public and utilize the charge schedule for first and third-party payers. The charge schedule may include charges that are higher than costs for some service units by spreading non-revenue service unit costs to revenue-producing service unit costs with total charges not exceeding total costs. All revenue over cost generated in this manner shall be utilized to provide services to priority populations.
10. To be responsible for all executive administration, personnel administration, finance, accounting, and management information system functions. The Authority may discharge this responsibility through direct staff or by contracting for services.

Agreement for Community Mental Health Authority

11. To borrow money:

- a) The Authority may borrow money to finance or refinance the purchase of real property or tangible personal property of the Authority. These contractual obligations shall be secured by a mortgage on the real property or a security interest or other lien on the tangible property. MCL § 330.1205 (10).
- b) The Authority may enter into an installment purchase agreement for the purchase or refinancing of personal property for public purposes. The installment purchase agreement for the purchase of personal property shall not be for a longer term than the useful life of the tangible personal property. MCL § 330.1205 (11)
- c) The Authority may borrow money and issue notes by resolution of a majority vote of its governing board, which notes shall not exceed 20% of the previous year's annual income and shall mature not more than 18 months from the date of their issuance. Notes shall be issued for the purposes of meeting expenses of the Authority, including the expenses of operation and maintenance of its facilities, and payments due to its contracted service providers. Moneys borrowed under this section must conform to MCL § 330.1205 (13).

12. To engage in or perform all other functions as authorized by statute or rule consistent with the function and purpose of the Authority.

13. Additional Powers: All powers, duties, obligations, rights and protections not mentioned herein but otherwise provided by the Mental Health Code are included herein by reference.

XI.

Personnel

1. The employees of the Authority are public employees. The Authority and its employees are subject to Act No. 336 of the Public Acts of 1947 (PERA), being Sections 423.201 to 423.217 of the Michigan Compiled Laws, as amended. The employees of the Authority are not county employees. The Authority is the employer with regard to all laws pertaining to employee and employer rights, benefits and responsibilities.

Agreement for Community Mental Health Authority

2. The employees of the former Community Mental Health Services Programs, who were employees of the predecessor Authorities (Great Lakes and North Central), shall be transferred to the new Authority and appointed as employees subject to all rights and benefits for one (1) year. Such employees of the new Authority shall not be placed in a worse position by reason of the transfer for a period of one (1) year with respect to worker's compensation, pension, seniority, wages, sick leave, vacation, health and welfare insurance, or any other benefit that the employees enjoyed of the former Community Mental Health Services Program. Employees who are transferred shall not by reason of the transfer have their accrued pension benefits or credits diminished.

3. The new Authority, upon its establishment, shall assume and be bound by the provisions of all the existing collective bargaining Agreements of the predecessor Authorities. The formation of this Authority shall not adversely affect any existing rights and obligations contained in the existing collective bargaining Agreements.

XII.

Liability

1. The Authority is a Community Mental Health Authority and by MCL § 330.1100a, (13); MCL § 330.1204; is a separate legal and administrative public governmental entity from the county or counties that established it and created it under MCL § 300.1205; to operate as a community mental health program. The Authority as a public governmental body corporate has those powers herein defined and defined in the Mental Health Code, PA 258 of 1974, as amended, as well as those generally applicable to a separate legal entity, including the power to sue and be sued in its own name.

Agreement for Community Mental Health Authority

2. The participating counties creating the Authority are not liable for any intentional, negligent, or grossly negligent act or omission, for any financial affairs, or for any obligation of the Authority, its Board, employees, representatives, or agents.
3. All the privileges and immunities from liability and exemptions from laws, ordinances, and rules that are applicable to county Community Mental Health Agencies or Community Mental Health Organizations and their Board members, officers, and administrators, and county elected officials and employees of county government are retained by the Authority and the Board members, officers, agents, and employees of the Authority created under Section 205 of PA 290 of 1995, as amended. (MCL § 330:1205)
4. The Authority shall not levy any type of tax or issue any type of bond in its own name or financially obligate any unit of government other than itself.
5. The Authority is precluded from using the word "county" or "counties" in its name or in any contracts, letter or other written document.
6. The revenues and full faith and credit of the counties are not pledged or available for any liability of the Authority.
7. The Authority shall procure and maintain all risk insurance in the amount of \$10,000,000 liability limit, workers compensation, errors and omissions and any other insurance coverage appropriate or necessary for proper coverage of the Authority, its Board, Employees, and Agents to properly insure the Authority, considering its nature, purpose and function.

Agreement for Community Mental Health Authority

XIII.

Funding

1. The Counties agree to annually fund the Authority's program at the amount of funds as appropriated by the Counties in calendar year 2003, at the funding level prescribed by MCL § 330.1308, (2):

- Crawford County \$ 35,600
- Grand Traverse County \$682,200
- Leelanau County \$139,700
- Missaukee County \$ 35,272
- Roscommon County \$ 57,425
- Wexford County \$ 76,543

2. The County funds will be payable to the Authority on a quarterly basis, in the first week of the quarter. The Authority will then be responsible for all county charges for public mental health services.

3. If the Department reduces its annual contribution to the Authority more than 10% below the base year funding for fiscal year 2002-2003, then the Counties may consider their termination of the counties' participation in the Community Mental Health program, in accordance with MCL § 330.1220.

XIV

Transfer of Assets & Liabilities

Upon the effective date of the establishment of the new Authority all assets, debts, liabilities and obligations of the two pre-existing Authorities are transferred to the new Authority. This transfer includes, but is not limited to, equipment, furnishings, supplies, cash, investments and other personal property, which shall be transferred to the Authority. The Authority shall indemnify and hold harmless the counties from any and all liability in regard thereto. The fixed assets to be transferred to the new Authority have a cash value, purchase price or donated value of

Agreement for Community Mental Health Authority

\$2,246,293 for the North Central Authority and \$1,725,477 for the Great Lakes Authority. The value of these assets is established in the Audited Financial Statements of both organizations as of 9/30/02. The documentation of individual asset valuations may be obtained at the respective Community Mental Health Administrative Offices. The above listed values do not include the value of properties of these Authorities.

The property to be transferred to the new Authority includes the following:

1. Property at 2715 Townline Road, Houghton Lake, Michigan: A Quit Claim Deed will be executed transferring the ownership of the property to the Authority from North Central Community Mental Health Authority.
2. Property at 1620 Wright Street, Cadillac, Michigan: A Quit Claim Deed will be executed transferring the ownership of the property to the Authority from North Central Community Mental Health Authority.
3. Property at 204 Meadows Drive, Grayling, Michigan: A Quit Claim Deed will be executed transferring the ownership of the property to the Authority from North Central Community Mental Health Authority.
4. Property at 527 Cobbs Street, Cadillac, Michigan: A Quit Claim Deed will be executed transferring the ownership of the property to the Authority from North Central Community Mental Health Authority.
5. Property at 200 Toepfer Road, Houghton Lake, Michigan: A Quit Claim Deed will be executed transferring the ownership of the property to the Authority from North Central Community Mental Health Authority.
6. Property at 3137 Cedar Valley Dr., Traverse City, Michigan: A Quit Claim Deed will be executed transferring the ownership of the property to the Authority from Great Lakes Community Mental Health Authority.
7. Property at 1265 Harvest West, Traverse City, Michigan; A Quit Claim Deed will be executed transferring the ownership of the property and the bank loan for the property to the Authority from Great Lakes Community Mental Health.

Agreement for Community Mental Health Authority

8. Property at 2105 6th Street, Cadillac, Michigan; a Quit Claim Deed will be executed transferring the ownership of the property to the Authority from North Central Community Mental Health Authority.

All the leases of the existing Authorities will be transferred to the new Authority. This includes but is not limited to the lease with the Foundation for Mental Health for the property at 105 Hall St., Traverse City, Michigan, which is transferred to the Authority from Great Lakes Community Mental Health Authority.

All contracts and agreements including contracts for mental health services will be transferred and assigned to the Authority. The Authority, where necessary, shall obtain a novation of contracts.

XV.

Information

The Authority shall provide Crawford, Grand Traverse, Leelanau, Missaukee, Roscommon and Wexford Counties, separately and/or jointly, an Annual Report and, as requested, any and all information related to the operations of the Authority, on a timely basis. Refer also to Article XVIII, Accountability.

XVI.

Duration of This Agreement and Rights Upon Termination

1. The duration of this Agreement shall be perpetual, unless dissolved as hereinafter provided. Any of the Counties participating pursuant to this Agreement may accomplish a termination by a resolution passed by a majority of the County Board of Commissioners with official notice from the County Board of Commissioners to the State Department of Community

Agreement for Community Mental Health Authority

Health, the Authority and the other participant County Boards of Commissioners (MCL 330.1220). The date of termination shall be one (1) year following the receipt of such notification by the State Department of Community Health, unless the Director of the Department consents to an earlier termination. In the interim between notification and official termination, the County participation in the community mental health services program pursuant to this Agreement shall be maintained in good faith. Upon the termination of participation by any County, the Authority shall be dissolved on the effective date of termination.

2. Upon the termination or dissolution of the Authority, all assets net of liabilities shall be transferred to the successor Community Mental Health Services Program or Programs that replace the Authority. (MCL § 330.1205 (2) (c)).
3. Upon the termination or dissolution of the Authority and in the event that there is no successor organization or organizations providing mental health services, all other remaining assets net of liabilities shall be transferred to the Counties in proportion to the county population. The real property of the Authority, to the extent that it is not needed to satisfy any liabilities, will be transferred to the Counties in which the property is located.

XVII.

Amendment Procedures

This Agreement may be amended only by the mutual Agreement of all the contracting counties pursuant to a resolution authorized by all of the County Boards of Commissioners and entered into in writing.

Agreement for Community Mental Health Authority

XVIII.

Accountability

1. The Authority shall account to the participating counties and the Department in the following manner:
 - a) Provide to each county creating the Authority and to the Department a copy of an annual independent audit performed by a certified public accountant in accordance with governmental auditing standards issued by the comptroller of the United States.
 - b) An annual statement of revenue and expenses; and a report that indicates the amounts and cost of services provided to residents of each participating county.

XIX.

Conflict of Provisions

If there is any conflict between this Agreement and the Mental Health Code, as existing or as subsequently amended, the Mental Health Code shall prevail, and those provisions of this Agreement inconsistent therewith shall be deemed of no effect.

XX

Effectuation of Agreement

1. This Agreement shall not take effect until at least three (3) public hearings on this Agreement have been held in each county and until this Agreement is approved by the Counties of Crawford, Grand Traverse, Leelanau, Missaukee, Roscommon and Wexford, and the State Department of Community Health as provided for in MCL § 330.1205. Subsequent to the three (3) public hearings, approval by the Counties, and upon receipt of certification by the State Department of Community Health (MCL § 330.1232a), this Agreement shall become effective on the first day of January, April, July, or October

Agreement for Community Mental Health Authority

immediately following the date of final approval (MCL § 330.1219 (1)), after it has been filed with the Secretary of State and with the County Clerk of each county creating the Authority.

2. The main business address of the Authority:

Northern Lakes Community Mental Health Authority

105 Hall Street, Suite A

Traverse City, Michigan 49684

Any subsequent change thereof by the Authority shall be reported in writing to the forming Counties, the State Department of Community Health and the Secretary of State.

NOTE: Signatures, following pages.

CRAWFORD COUNTY

Northern Lakes CMH Authority Agreement

Attachment I Schedule of Board Appointments by County

The following Schedule of Appointments is intended

- To stagger appointments, so that one third of appointments expire each year.
- After initial appointments, all appointments are 3-year appointments
- Initial appointments (24) are established to allow for reductions
 - To 18 in second year, and
 - To 16 in third year (and thereafter)

Types of Appointments

	Bd Member Type	Max/Min	1st yr	2nd yr	3rd yr
maximum	Commissioners	8	8	7	6
minimum	Family Members	4	4	3	2
	Primary				
minimum	Consumers	4	4	3	3
	MH Professional				
	General Public				
	Public Officials				
	(includes				
maximum	Commissioners)	(12)	(12)	(9)	(8)
	total				
	members		24	18	16

The intent is to have a balanced Board having all types represented.

In the attached sheets the categories are interchangeable, except for those indicated as maximum or minimum above.

- This means that for the maximum items, appointments should not exceed that number.
- For those types that have a minimum, appointments should have at least that number.
 - Where there are minimums indicated, the counties may appoint more than the minimum (as long as there is a balance among the types of appointments).
- The types that have no maximum or minimum are interchangeable.
 - The listing of these types is purely illustrative.

Northern Lakes CMH Authority Board Appointments

Bd Member Type	Appointment 10/1/2003	Term Expires (x = expires)								
		3/31/2005	3/31/2006	3/31/2007	3/30/2008	3/30/2009	3/30/2010	3/30/2011	3/29/2012	3/29/2013
Crawford										
Commissioner	2 yr	0	x	0	0	x	0	0	x	0
General Public	3 yr	0	0	x	0	0	x	0	0	x
Missaukee										
Commissioner	2 yr	0	x	0	0	x	0	0	x	0
Family Member	1 yr	x	0	0	x	0	0	x	0	0
Roscommon										
Commissioner	1 yr	x	0	0	x	0	0	x	0	0
Family Member	3 yr	0	0	x	0	0	x	0	0	x
Consumer	1 yr	x								
General Public	1 yr	x								
Wexford										
Commissioner	3 yr	0	0	x	0	0	x	0	0	x
MH Professional	2 yr	0	x							
Family Member	1 yr	x								
Consumer,	1 yr	x	0	0	x	0	0	x	0	0
subtotal members	12	12	9	8	8	8	8	8	8	8
Total Members	24	24	18	16	16	16	16	16	16	16
No of Appointments that Expire		11	7	6	5	5	6	5	5	6
No of Appointments made April 1		4	5	6	5	5	6	5	5	6

Northern Lakes CMH Authority Board Appointments

Bd Member Type	Appointment	Term Expires (x = expires)								
	10/1/2003	3/31/2005	3/31/2006	3/31/2007	3/30/2008	3/30/2009	3/30/2010	3/30/2011	3/29/2012	3/29/2013
Grand Traverse										
Primary Consumer	1 yr	x	0	0	x	0	0	x	0	0
Family Member	1 yr	x								
MH Professional	3 yr	0	0	x	0	0	x	0	0	x
MH Professional	2 yr	0	x	0	0	x	0	0	x	0
County Comm	1 yr	x	0	0	x	0	0	x	0	0
General Public	3 yr	0	0	x	0	0	x	0	0	x
County Comm	2 yr	0	x							
General Public	1 yr	x								
Primary Consumer	2 yr	0	x	0	0	x	0	0	x	0
	9	9	7	6	6	6	6	6	6	6
Leelanau										
County Comm	3 yr	0	0	x	0	0	x	0	0	x
Family Member	1 yr	x								
Family Member	2 yr	0	x	0	0	x	0	0	x	0
	3	3	2	2	2	2	2	2	2	2
subtotal members	12	12	9	8	8	8	8	8	8	8

Note: After Initial appointment, all appointments are 3 years

Crawford County Appointments to new CMH Authority

The County will appoint a new Board effective, October 1, 2003.

- The first appointments will run for 1 & 1/2 years
 - Oct 1, 2003 to March 31, 2005
- Thereafter, all appointments will be made effective April 1st.
- Initial Appointments to the Board (total of 2 appointments)
 - 1 – 2 year appointment
 - 1 – 3 year appointment
 - One of the seats may be a Commissioner (recommended)
 - Recommendation is to maintain current appointments

Example:

<u>Bd Member Type</u>	<u>Appointment</u>
Crawford	<u>10/1/2003</u>
Commissioner	2 yr term
Family Member	<u>3 yr term</u>
	2 Members

Agreement for Community Mental Health Authority

Crawford County

The persons signing this Agreement hereby verify by their signatures that they are authorized to execute this Agreement pursuant to the appropriate County Boards of Commissioners resolutions.

IN THE PRESENCE OF:

Karen Martella

Janette L. Houge

County Seal

CRAWFORD COUNTY

By: Lynnette Corlew

Chairperson, Crawford
County Board of Commissioners

Date: 08-20-03

By: Sandra Moore

Crawford County Clerk

Date: Aug 20, 2003

Date Approved by County 8-20-03

FILED WITH:

Department of Community Health
Janet Olszewski, Director
Date: September 26, 2003

Crawford County Clerk
Sandra Moore, Clerk
Date: September 26, 2003

Secretary of State
Terri Lynn Land, Secretary of State
Date: September 9, 2003

RESOLUTION:

Crawford County Board of Commissioners

Be it resolved that the Crawford County Board of Commissioners, having held three public hearings on the issue of creating a Mental Health Authority, hereby formally endorses and supports in accordance with MCLA-330.1205 the creation of the Northern Lakes Community Mental Health Authority in conjunction with Grand Traverse County, Leelanau County, Missaukee County, Roscommon County, and Wexford County to meet the mental health needs of the residents of Crawford County.

By this resolution the Commission authorizes the Board Chair to execute the attached Enabling Resolution and Agreement with Grand Traverse County, Leelanau County, Missaukee County, Roscommon County, and Wexford County. This Enabling Resolution and Joint Agreement details the role, function, powers, duties and responsibilities of the Authority that is hereby approved by the Crawford County Board of Commissioners.

STATE OF MICHIGAN)
) SS
COUNTY OF CRAWFORD)

Certification: I, Sandra Moore, County Clerk, do hereby certify that the foregoing resolution was adopted at a regular meeting of the Crawford County Board of Commissions on the 20th day of Aug, 2003, after three (3) properly noticed public hearings were held on the issues contained therein and that said meetings were conducted and public notice of said meetings were given pursuant and in full compliance with the Open Meetings Act, being Public Act 267 of the Public Acts of Michigan (1976), and that the minutes of said meetings were kept and will be or have been available as required by said Act.

Sandra Moore
Sandra Moore, Crawford County Clerk

Date: 8-20-03

County Seal

GRAND TRAVERSE COUNTY

Northern Lakes CMH Authority Agreement

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- To stagger appointments, so that one third of appointments expire each year.
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 - To 18 in second year, and
 - To 16 in third year (and thereafter)

Types of Appointments

	Bd Member Type	Max/Min	1st yr	2nd yr	3rd yr
maximum	Commissioners	8	8	7	6
minimum	Family Members Primary	4	4	3	2
minimum	Consumers MH Professional General Public Public Officials (includes Commissioners)	4	4	3	3
maximum	Commissioners)	(12)	(12)	(9)	(8)
	total members		24	18	16

The intent is to have a balanced Board having all types represented.

In the attached sheets the categories are interchangeable, except for those indicated as maximum or minimum above.

- This means that for the maximum items, appointments should not exceed that number.
- For those types that have a minimum, appointments should have at least that number.
 - Where there are minimums indicated, the counties may appoint more than the minimum (as long as there is a balance among the types of appointments).
- The types that have no maximum or minimum are interchangeable.
 - The listing of these types is purely illustrative.

Northern Lakes CMH Authority Board Appointments

Bd Member Type	Appointment 10/1/2003	Term Expires (x = expires)								
		3/31/2005	3/31/2006	3/31/2007	3/30/2008	3/30/2009	3/30/2010	3/30/2011	3/29/2012	3/29/2013
Crawford										
Commissioner	2 yr	0	x	0	0	x	0	0	x	0
General Public	3 yr	0	0	x	0	0	x	0	0	x
Missaukee										
Commissioner	2 yr	0	x	0	0	x	0	0	x	0
Family Member	1 yr	x	0	0	x	0	0	x	0	0
Roscommon										
Commissioner	1 yr	x	0	0	x	0	0	x	0	0
Family Member	3 yr	0	0	x	0	0	x	0	0	x
Consumer	1 yr	x								
General Public	1 yr	x								
Wexford										
Commissioner	3 yr	0	0	x	0	0	x	0	0	x
MH Professional	2 yr	0	x							
Family Member	1 yr	x								
Consumer,	1 yr	x	0	0	x	0	0	x	0	0
subtotal members	12	12	9	8	8	8	8	8	8	8
Total Members	24	24	18	16	16	16	16	16	16	16
No of Appointments that Expire		11	7	6	5	5	6	5	5	6
No of Appointments made April 1		4	5	6	5	5	6	5	5	6

Northern Lakes CMH Authority Board Appointments

Bd Member Type	Appointment	Term Expires (x = expires)								
	10/1/2003	3/31/2005	3/31/2006	3/31/2007	3/30/2008	3/30/2009	3/30/2010	3/30/2011	3/29/2012	3/29/2013
Grand Traverse										
Primary Consumer	1 yr	x	0	0	x	0	0	x	0	0
Family Member	1 yr	x								
MH Professional	3 yr	0	0	x	0	0	x	0	0	x
MH Professional	2 yr	0	x	0	0	x	0	0	x	0
County Comm	1 yr	x	0	0	x	0	0	x	0	0
General Public	3 yr	0	0	x	0	0	x	0	0	x
County Comm	2 yr	0	x							
General Public	1 yr	x								
Primary Consumer	2 yr	0	x	0	0	x	0	0	x	0
	9	9	7	6	6	6	6	6	6	6
Leelanau										
County Comm	3 yr	0	0	x	0	0	x	0	0	x
Family Member	1 yr	x								
Family Member	2 yr	0	x	0	0	x	0	0	x	0
	3	3	2	2	2	2	2	2	2	2
subtotal members	12	12	9	8	8	8	8	8	8	8

Note: After Initial appointment, all appointments are 3 years

Grand Traverse County Appointments to new CMH Authority

The County will appoint a new Board effective, October 1, 2003.

- The first appointments will run for 1 & 1/2 years
 - Oct 1, 2003 to March 31, 2005
- Thereafter, all appointments will be made effective April 1st.
- Initial Appointments to the Board (total of 9 appointments)
 - 4 – 1 year appointments
 - 3 – 2 year appointments
 - 2 – 3 year appointments
- After the first round of appointments, April 1, 2005
 - Grand Traverse County will have 7 seats on the Board.
 - Two of the seats may be Commissioners (recommended)
- On April 1, 2006, Grand Traverse County will have 6 seats on the Board
 - One of the seats may be a Commissioner (recommended)

<u>Bd Member Type</u>	<u>Appointment 10/1/2003</u>
Grand Traverse	
Primary Consumer	1 yr term
Family Member	1 yr term
MH Professional	3 yr term
MH Professional	2 yr term
County Comm	1 yr term
General Public	3 yr term
County Comm	2 yr term
General Public	1 yr term
Primary Consumer	2 yr term
9 Members	

Agreement for Community Mental Health Authority

Grand Traverse County

The persons signing this Agreement hereby verify by their signatures that they are authorized to execute this Agreement pursuant to the appropriate County Boards of Commissioners resolutions.

IN THE PRESENCE OF:

Christine J. Cramer

Jonnie Scheele
County Seal

GRAND TRAVERSE COUNTY

By: Peter Strom
Peter Strom
Chairperson, Grand Traverse
County Board of Commissioners

Date: 9-3-03

By: Linda Coburn
Linda Coburn
Grand Traverse County Clerk

Date: 9-3-03

Date Approved by County August 27, 2003

APPROVED AS TO FORM:

BY Dennis LaBelle
Dennis LaBelle, Prosecuting Attorney
Grand Traverse County

FILED WITH:

Department of Community Health
Janet Olszewski, Director
Date: September 26, 2003

Grand Traverse County Clerk
Linda Coburn, Clerk
Date: September 26, 2003

Secretary of State
Terri Lynn Land, Secretary of State
Date: September 9, 2003

RESOLUTION: 223-03 Grand Traverse County Board of Commissioners

Be it resolved that the Crawford County Board of Commissioners, having held three public hearings on the issue of creating a Mental Health Authority, hereby formally endorses and supports in accordance with MCLA-330.1205 the creation of the Northern Lakes Community Mental Health Authority in conjunction with Crawford County, Leelanau County, Missaukee County, Roscommon County, and Wexford County to meet the mental health needs of the residents of Crawford County.

By this resolution the Commission authorizes the Board Chair to execute the attached Enabling Resolution and Agreement with Crawford, Leelanau County, Missaukee County, Roscommon County, and Wexford County. This Enabling Resolution and Joint Agreement details the role, function, powers, duties and responsibilities of the Authority that is hereby approved by the Crawford County Board of Commissioners.

STATE OF MICHIGAN)
) SS
COUNTY OF GRAND TRAVERSE)

Certification: I, Linda Coburn, County Clerk, do hereby certify that the foregoing resolution was adopted at a regular meeting of the Grand Traverse County Board of Commission on the 27th day of August, 2003, after three (3) properly noticed public hearings were held on the issues contained therein and that said meetings were conducted and public notice of said meetings were given pursuant and in full compliance with the Open Meetings Act, being Public Act 267 of the Public Acts of Michigan (1976), and that the minutes of said meetings were kept and will be or have been available as required by said Act.



Linda Coburn, Grand Traverse County Clerk

Date: 9-3-03

County Seal

LEELANAU COUNTY

Northern Lakes CMH Authority Agreement

Attachment I Schedule of Board Appointments by County

The following Schedule of Appointments is intended

- To stagger appointments, so that one third of appointments expire each year.
- After initial appointments, all appointments are 3 year appointments
- Initial appointments (24) are established to allow for reductions
 - To 18 in second year, and
 - To 16 in third year (and, thereafter)

Types of Appointments

	Bd Member Type	Max/Min	1st yr	2nd yr	3rd yr
maximum	Commissioners	8	8	7	6
minimum	Family Members Primary	4	4	3	2
minimum	Consumers MH Professional General Public Public Officials (includes Commissioners)	4	4	3	3
maximum		(12)	(12)	(9)	(8)
	total members		24	18	16

The intent is to have a balanced Board having all types represented.

In the attached sheets the categories are interchangeable, except for those indicated as maximum or minimum above.

- This means that for the maximum items, appointments should not exceed that number.
- For those types that have a minimum, appointments should have at least that number.
 - Where there are minimums indicated, the counties may appoint more than the minimum (as long as there is a balance among the types of appointments).
- The types that have no maximum or minimum are interchangeable.
 - The listing of these types is purely illustrative.

Northern Lakes CMH Authority Board Appointments

Bd Member Type	Appointment 10/1/2003	Term Expires (x = expires)								
		3/31/2005	3/31/2006	3/31/2007	3/30/2008	3/30/2009	3/30/2010	3/30/2011	3/29/2012	3/29/2013
Crawford										
Commissioner	2 yr	0	x	0	0	x	0	0	x	0
General Public	3 yr	0	0	x	0	0	x	0	0	x
Missaukee										
Commissioner	2 yr	0	x	0	0	x	0	0	x	0
Family Member	1 yr	x	0	0	x	0	0	x	0	0
Roscommon										
Commissioner	1 yr	x	0	0	x	0	0	x	0	0
Family Member	3 yr	0	0	x	0	0	x	0	0	x
Consumer	1 yr	x								
General Public	1 yr	x								
Wexford										
Commissioner	3 yr	0	0	x	0	0	x	0	0	x
MH Professional	2 yr	0	x							
Family Member	1 yr	x								
Consumer,	1 yr	x	0	0	x	0	0	x	0	0
subtotal members	12	12	9	8	8	8	8	8	8	8
Total Members	24	24	18	16	16	16	16	16	16	16
No of Appointments that Expire		11	7	6	5	5	6	5	5	6
No of Appointments made April 1		4	5	6	5	5	6	5	5	6

Northern Lakes CMH Authority Board Appointments

Bd Member Type	Appointment	Term Expires (x = expires)								
	10/1/2003	3/31/2005	3/31/2006	3/31/2007	3/30/2008	3/30/2009	3/30/2010	3/30/2011	3/29/2012	3/29/2013
Grand Traverse										
Primary Consumer	1 yr	x	0	0	x	0	0	x	0	0
Family Member	1 yr	x								
MH Professional	3 yr	0	0	x	0	0	x	0	0	x
MH Professional	2 yr	0	x	0	0	x	0	0	x	0
County Comm	1 yr	x	0	0	x	0	0	x	0	0
General Public	3 yr	0	0	x	0	0	x	0	0	x
County Comm	2 yr	0	x							
General Public	1 yr	x								
Primary Consumer	2 yr	0	x	0	0	x	0	0	x	0
	9	9	7	6	6	6	6	6	6	6
Leelanau										
County Comm	3 yr	0	0	x	0	0	x	0	0	x
Family Member	1 yr	x								
Family Member	2 yr	0	x	0	0	x	0	0	x	0
	3	3	2	2	2	2	2	2	2	2
subtotal members	12	12	9	8	8	8	8	8	8	8

Note: After Initial appointment, all appointments are 3 years

Leelanau County Appointments to new CMH Authority

The County will appoint a new Board effective, October 1, 2003.

- The first appointments will run for 1 & 1/2 years
 - Oct 1, 2003 to March 31, 2005
- Thereafter, all appointments will be made effective April 1st.
- Initial Appointments to the Board (total of 3 appointments)
 - 1 – 1 year appointment
 - 1 – 2 year appointment
 - 1 – 3 year appointment
- After the first round of appointments, April 1, 2005
 - Leelanau County will thereafter have 2 seats on the Board.
 - One of the seats may be a Commissioner (recommended)

<u>Bd Member Type</u>	<u>Appointment</u> <u>10/1/2003</u>
Leelanau	
County Comm	3 yr term
Family Member	1 yr term
Family Member	<u>2 yr term</u>
	<u>3 Members</u>

Agreement for Community Mental Health Authority

Leelanau County

The persons signing this Agreement hereby verify by their signatures that they are authorized to execute this Agreement pursuant to the appropriate County Boards of Commissioners resolutions.

IN THE PRESENCE OF:

LEELANAU COUNTY

Michelle L. Crocker
Michelle L. Crocker

By: Robert L. Hawley
Robert L. Hawley
Chairperson, Leelanau County
Board of Commissioners

Date: August 19, 2003

Rosanne Schaub
Rosanne Schaub
County Seal

By: Michelle L. Crocker
Michelle Crocker
Leelanau County Clerk

Date: August 19, 2003

Date Approved by County August 19, 2003

APPROVED AS TO FORM:

BY _____
Sarah Brubaker, Prosecuting Attorney
Leelanau County

FILED WITH:

Department of Community Health
Janet Olszewski, Director
Date: September 26, 2003

Secretary of State
Terri Lynn Land, Secretary of State
Date: September 9, 2003

Leelanau County Clerk
Michelle Crocker, Clerk
Date: September 26, 2003

RESOLUTION:

Leelanau County Board of Commissioners #2003-012

Be it resolved that the Leelanau County Board of Commissioners, having held three public hearings on the issue of creating a Community Mental Health Authority, hereby formally endorses and supports in accordance with MCLA-330.1205 the creation of the Northern Lakes Community Mental Health Authority in conjunction with Crawford County, Grand Traverse County, Missaukee County, Roscommon County, and Wexford County to meet the mental health needs of the residents of Leelanau County.

By this resolution the Commission authorizes the Board Chair to execute the attached Enabling Resolution and Agreement with Crawford County, Grand Traverse County, Missaukee County, Roscommon County, and Wexford County. This Enabling Resolution and Joint Agreement details the role, function, powers, duties and responsibilities of the Authority that is hereby approved by the Leelanau County Board of Commissioners.

STATE OF MICHIGAN)
) SS
COUNTY OF LEELANAU)

Certification: I, Michelle Crocker, County Clerk, do hereby certify that the foregoing resolution was adopted at a regular meeting of the Leelanau County Board of Commissions on the 19 day of August, 2003, after three (3) properly noticed public hearings were held on the issues contained therein and that said meetings were conducted and public notice of said meetings were given pursuant and in full compliance with the Open Meetings Act, being Public Act 267 of the Public Acts of Michigan (1976), and that the minutes of said meetings were kept and will be or have been available as required by said Act.

Michelle G. Crocker

Michelle Crocker, Leelanau County Clerk

Date: 08/19/2003



**LEELANAU COUNTY BOARD OF COMMISSIONERS
REGULAR SESSION – AUGUST 19, 2003
Meeting taped.**

Meeting called to order by Chairman Hawley at 7:00 p.m.

Pledge of Allegiance led by Chairman Hawley.

Roll Call: District #1 - Jean I. Watkoski PRESENT
 #2 - Mark Walter PRESENT
 #3 - Richard A. Schmuckal ABSENT/EXCUSED
 #4 - Mary P. Tonneberger PRESENT
 #5 - Thomas F. Evans PRESENT
 #6 - Robert L. Hawley PRESENT
 #7 - Melinda C. Lautner PRESENT

...

COMMUNITY MENTAL HEALTH MERGER RESOLUTION:

Commissioner Walter read resolution into the record.

MOTION BY WALTER THAT RESOLUTION #2003 – 12 BE APPROVED. SUPPORT TONNEBERGER.

RESOLUTION #2003 – 12

Be it resolved that the Leelanau County Board of Commissioners, having held three public hearings on the issue of creating a Community Mental Health Authority, hereby formally endorses and supports in accordance with MCLA-330.1205 the creation of the Northern Lakes Community Mental Health Authority in conjunction with Crawford County, Grand Traverse County, Missaukee County, Roscommon County, and Wexford County to meet the mental health needs of the residents of Leelanau County.

By this resolution the Commission authorizes the Board Chair to execute the attached Enabling Resolution and Agreement with Crawford County, Grand Traverse County, Missaukee County, Roscommon County, and Wexford County. This Enabling Resolution and Joint Agreement details the role, function, powers, duties and responsibilities of the Authority that is hereby approved by the Leelanau County Board of Commissioners.

**ROLL CALL: WATKOSKI – YES; EVANS – YES; LAUTNER – NO; SCHMUCKAL – ABSENT; TONNEBERGER – YES; WALTER – YES; HAWLEY – YES.
AYES – 5 NO – 1 ABSENT – 1 MOTION CARRIED.**

State of Michigan
County of Leelanau

I, Michelle L. Crocker, Clerk of said County and Clerk of Circuit Court for said County, the same being a Court of record having a seal, do hereby certify that the above is a true copy of the Record now remaining in my office and of the whole thereof. In Testimony whereof, I have hereto set my hand and affixed the seal of the Circuit Court the 19th day of August 2003.


Michelle L. Crocker, Leelanau County Clerk

MISSAUKEE COUNTY

Northern Lakes CMH Authority Agreement

Attachment I Schedule of Board Appointments by County

The following Schedule of Appointments is intended

- To stagger appointments, so that one third of appointments expire each year.
- After initial appointments, all appointments are 3 year appointments
- Initial appointments (24) are established to allow for reductions
 - To 18 in second year, and
 - To 16 in third year (and thereafter)

Types of Appointments

	Bd Member Type	Max/Min	1st yr	2nd yr	3rd yr
maximum	Commissioners	8	8	7	6
minimum	Family Members Primary	4	4	3	2
minimum	Consumers MH Professional General Public Public Officials (includes Commissioners)	4	4	3	3
maximum		(12)	(12)	(9)	(8)
	total members		24	18	16

The intent is to have a balanced Board having all types represented.

In the attached sheets the categories are interchangeable, except for those indicated as maximum or minimum above.

- This means that for the maximum items, appointments should not exceed that number.
- For those types that have a minimum, appointments should have at least that number.
 - Where there are minimums indicated, the counties may appoint more than the minimum (as long as there is a balance among the types of appointments).
- The types that have no maximum or minimum are interchangeable.
 - The listing of these types is purely illustrative.

Northern Lakes CMH Authority Board Appointments

Bd Member Type	Appointment 10/1/2003	Term Expires (x = expires)								
		3/31/2005	3/31/2006	3/31/2007	3/30/2008	3/30/2009	3/30/2010	3/30/2011	3/29/2012	3/29/2013
Crawford										
Commissioner	2 yr	0	x	0	0	x	0	0	x	0
General Public	3 yr	0	0	x	0	0	x	0	0	x
Missaukee										
Commissioner	2 yr	0	x	0	0	x	0	0	x	0
Family Member	1 yr	x	0	0	x	0	0	x	0	0
Roscommon										
Commissioner	1 yr	x	0	0	x	0	0	x	0	0
Family Member	3 yr	0	0	x	0	0	x	0	0	x
Consumer	1 yr	x								
General Public	1 yr	x								
Wexford										
Commissioner	3 yr	0	0	x	0	0	x	0	0	x
MH Professional	2 yr	0	x							
Family Member	1 yr	x								
Consumer.	1 yr	x	0	0	x	0	0	x	0	0
subtotal members	12	12	9	8	8	8	8	8	8	8
Total Members	24	24	18	16	16	16	16	16	16	16
No of Appointments that Expire		11	7	6	5	5	6	5	5	6
No of Appointments made April 1		4	5	6	5	5	6	5	5	6

Northern Lakes CMH Authority Board Appointments

Bd Member Type	Appointment	Term Expires (x = expires)								
	10/1/2003	3/31/2005	3/31/2006	3/31/2007	3/30/2008	3/30/2009	3/30/2010	3/30/2011	3/29/2012	3/29/2013
Grand Traverse										
Primary Consumer	1 yr	x	0	0	x	0	0	x	0	0
Family Member	1 yr	x								
MH Professional	3 yr	0	0	x	0	0	x	0	0	x
MH Professional	2 yr	0	x	0	0	x	0	0	x	0
County Comm	1 yr	x	0	0	x	0	0	x	0	0
General Public	3 yr	0	0	x	0	0	x	0	0	x
County Comm	2 yr	0	x							
General Public	1 yr	x								
Primary Consumer	2 yr	0	x	0	0	x	0	0	x	0
	9	9	7	6	6	6	6	6	6	6
Leelanau										
County Comm	3 yr	0	0	x	0	0	x	0	0	x
Family Member	1 yr	x								
Family Member	2 yr	0	x	0	0	x	0	0	x	0
	3	3	2	2	2	2	2	2	2	2
subtotal members	12	12	9	8	8	8	8	8	8	8

Note: After Initial appointment, all appointments are 3 years

Missaukee County Appointments to new CMH Authority

The County will appoint a new Board effective, October 1, 2003.

- The first appointments will run for 1 & 1/2 years
 - Oct 1, 2003 to March 31, 2005
- Thereafter, all appointments will be made effective April 1st.
- Initial Appointments to the Board (total of 2 appointments)
 - 1 – 1 year appointment
 - 1 – 2 year appointment
 - One of the seats may be a Commissioner (recommended)
 - Recommendation is to maintain current appointments

Example:

<u>Bd Member Type</u>	<u>Appointment</u>
Missaukee	<u>10/1/2003</u>
Commissioner	2 yr term
Consumer	<u>1 yr term</u>
	2 Members

Agreement for Community Mental Health Authority

Missaukee County

The persons signing this Agreement hereby verify, by their signatures that they are authorized to execute this Agreement pursuant to the appropriate County Boards of Commissioners resolutions.

IN THE PRESENCE OF:

Dawn M. Muel

Dean Vinnai



WITNESSED WITH:

Department of Community Health
Janet Olszewski, Director
Date: September 26, 2003

Missaukee County Clerk
Carolyn Flore, Clerk
Date: September 26, 2003

MISSAUKIE COUNTY

By: *[Signature]*

Chairperson, Missaukee
County Board of Commissioners

Date: 8-27-03

By: *[Signature]*

Missaukee County Clerk

Date: 8-27-03

Date Approved by County 8-27-03

Secretary of State
Terri Lynn Land, Secretary of State
Date: September 9, 2003

RESOLUTION: Missaukee County Board of Commissioners

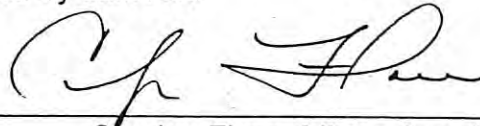
Be it resolved that the Missaukee County Board of Commissioners, having held three public hearings on the issue of creating a Mental Health Authority, hereby formally endorses and supports in accordance with MCLA-330.1205 the creation of the Northern Lakes Community Mental Health Authority in conjunction with Crawford County, Grand Traverse County, Leelanau County, Roscommon County, and Wexford County to meet the mental health needs of the residents of Missaukee County.

By this resolution the Commission authorizes the Board Chair to execute the attached Enabling Resolution and Agreement with Crawford County, Grand Traverse County, Leelanau County, Roscommon County, and Wexford County. This Enabling Resolution and Joint Agreement details the role, function, powers, duties and responsibilities of the Authority that is hereby approved by the Missaukee County Board of Commissioners.

STATE OF MICHIGAN

COUNTY OF MISSAUKEE

Certification: I, Carolyn Flore, County Clerk, do hereby certify that the foregoing resolution was adopted at a regular meeting of the Missaukee County Board of Commissions on the 27 day of Aug, 2003, after three (3) properly noticed public hearings were held on the issues contained therein and that said meetings were conducted and public notice of said meetings were given pursuant and in full compliance with the Open Meetings Act, being Public Act 267 of the Public Acts of Michigan (1976), and that the minutes of said meetings were kept and will be or have been available as required by said Act.



Carolyn Flore, Missaukee County Clerk

Date: 8-27-03



ROSCOMMON COUNTY

Northern Lakes CMH Authority Agreement

Attachment I Schedule of Board Appointments by County

The following Schedule of Appointments is intended

- To stagger appointments, so that one third of appointments expire each year.
- After initial appointments, all appointments are 3 year appointments
- Initial appointments (24) are established to allow for reductions
 - To 18 in second year, and
 - To 16 in third year (and thereafter)

Types of Appointments

	Bd Member Type	Max/Min	1st yr	2nd yr	3rd yr
maximum	Commissioners	8	8	7	6
minimum	Family Members Primary	4	4	3	2
minimum	Consumers MH Professional General Public Public Officials (includes Commissioners)	4	4	3	3
maximum		(12)	(12)	(9)	(8)
	total members		24	18	16

The intent is to have a balanced Board having all types represented.

In the attached sheets the categories are interchangeable, except for those indicated as maximum or minimum above.

- This means that for the maximum items, appointments should not exceed that number.
- For those types that have a minimum, appointments should have at least that number.
 - Where there are minimums indicated, the counties may appoint more than the minimum (as long as there is a balance among the types of appointments).
- The types that have no maximum or minimum are interchangeable.
 - The listing of these types is purely illustrative.

Northern Lakes CMH Authority Board Appointments

Bd Member Type	Appointment 10/1/2003	Term Expires (x = expires)								
		3/31/2005	3/31/2006	3/31/2007	3/30/2008	3/30/2009	3/30/2010	3/30/2011	3/29/2012	3/29/2013
Crawford										
Commissioner	2 yr	o	x	o	o	x	o	o	x	o
General Public	3 yr	o	o	x	o	o	x	o	o	x
Missaukee										
Commissioner	2 yr	o	x	o	o	x	o	o	x	o
Family Member	1 yr	x	o	o	x	o	o	x	o	o
Roscommon										
Commissioner	1 yr	x	o	o	x	o	o	x	o	o
Family Member	3 yr	o	o	x	o	o	x	o	o	x
Consumer	1 yr	x								
General Public	1 yr	x								
Wexford										
Commissioner	3 yr	o	o	x	o	o	x	o	o	x
MH Professional	2 yr	o	x							
Family Member	1 yr	x								
Consumer,	1 yr	x	o	o	x	o	o	x	o	o
subtotal members	12	12	9	8	8	8	8	8	8	8
Total Members	24	24	18	16	16	16	16	16	16	16
No of Appointments that Expire		11	7	6	5	5	6	5	5	6
No of Appointments made April 1		4	5	6	5	5	6	5	5	6

Northern Lakes CMH Authority Board Appointments

Bd Member Type	Appointment	Term Expires (x = expires)								
	10/1/2003	3/31/2005	3/31/2006	3/31/2007	3/30/2008	3/30/2009	3/30/2010	3/30/2011	3/29/2012	3/29/2013
Grand Traverse										
Primary Consumer	1 yr	x	0	0	x	0	0	x	0	0
Family Member	1 yr	x								
MH Professional	3 yr	0	0	x	0	0	x	0	0	x
MH Professional	2 yr	0	x	0	0	x	0	0	x	0
County Comm	1 yr	x	0	0	x	0	0	x	0	0
General Public	3 yr	0	0	x	0	0	x	0	0	x
County Comm	2 yr	0	x							
General Public	1 yr	x								
Primary Consumer	2 yr	0	x	0	0	x	0	0	x	0
	9	9	7	6	6	6	6	6	6	6
Leelanau										
County Comm	3 yr	0	0	x	0	0	x	0	0	x
Family Member	1 yr	x								
Family Member	2 yr	0	x	0	0	x	0	0	x	0
	3	3	2	2	2	2	2	2	2	2
subtotal members	12	12	9	8	8	8	8	8	8	8

Note: After Initial appointment, all appointments are 3 years

Roscommon County Appointments to new CMH Authority

The County will appoint a new Board effective, October 1, 2003.

- The first appointments will run for 1 & 1/2 years
 - Oct 1, 2003 to March 31, 2005
- Thereafter, all appointments will be made effective April 1st.
- Initial Appointments to the Board (total of 4 appointments)
 - 3 – 1 year appointments
 - 1 – 3 year appointments
 - One of the seats may be a Commissioner (recommended)
- After the first round of appointments, April 1, 2005
 - Roscommon County will thereafter have 2 seats on the Board.
 - One of the seats may be a Commissioner (recommended)
 - Recommendation is to maintain current appointments and fill current vacancy with primary consumer.

Example:

<u>Bd Member Type</u>	<u>Appointment</u>
Roscommon	<u>10/1/2003</u>
Commissioner	1 yr term
Family Member	3 yr term
Consumer	1 yr term
MH Professional	<u>1 yr term</u>
	4 Members

Agreement for Community Mental Health Authority

Roscommon County

The persons signing this Agreement hereby verify by their signatures that they are authorized to execute this Agreement pursuant to the appropriate County Boards of Commissioners resolutions.

IN THE PRESENCE OF:

Cindy E. Cool

B. Jeanne Jausse
County Seal

ROSCOMMON COUNTY

By: Walter A. McFadden

Chairperson, Roscommon
County Board of Commissioners

Date: 8-27-03

By: Ann M. Bonk

Roscommon County Clerk

Date: 8-27-03

Date Approved by County 8-27-03

FILED WITH:

Department of Community Health
Janet Olszewski, Director
Date: September 26, 2003

Roscommon County Clerk
Ann Bonk, Clerk
Date: September 26, 2003

Secretary of State
Terri Lynn Land, Secretary of State
Date: September 9, 2003

RESOLUTION: Roscommon County Board of Commissioners

Be it resolved that the Roscommon County Board of Commissioners, having held three public hearings on the issue of creating a Mental Health Authority, hereby formally endorses and supports in accordance with MCLA-330.1205 the creation of the Northern Lakes Community Mental Health Authority in conjunction with Crawford County, Grand Traverse County, Leelanau County, Missaukee County, and Wexford County to meet the mental health needs of the residents of Roscommon County.

By this resolution the Commission authorizes the Board Chair to execute the attached Enabling Resolution and Agreement with Crawford County, Grand Traverse County, Leelanau County, Missaukee County, and Wexford County. This Enabling Resolution and Joint Agreement details the role, function, powers, duties and responsibilities of the Authority that is hereby approved by the Roscommon County Board of Commissioners.

STATE OF MICHIGAN)
) SS
COUNTY OF ROSCOMMON)

Certification: I, Ann Bonk, County Clerk, do hereby certify that the foregoing resolution was adopted at a regular meeting of the Roscommon County Board of Commissions on the 27 day of August, 2003, after three (3) properly noticed public hearings were held on the issues contained therein and that said meetings were conducted and public notice of said meetings were given pursuant and in full compliance with the Open Meetings Act, being Public Act 267 of the Public Acts of Michigan (1976), and that the minutes of said meetings were kept and will be or have been available as required by said Act.

Ann M Bonk
Ann Bonk, Roscommon County Clerk

Date: 8-27-03

County Seal

WEXFORD COUNTY

Northern Lakes CMH Authority Agreement

Attachment I Schedule of Board Appointments by County

The following Schedule of Appointments is intended

- To stagger appointments, so that one third of appointments expire each year.
- After initial appointments, all appointments are 3 year appointments
- Initial appointments (24) are established to allow for reductions
 - To 18 in second year, and
 - To 16 in third year (and thereafter)

Types of Appointments

	Bd Member Type	Max/Min	1st yr	2nd yr	3rd yr
maximum	Commissioners	8	8	7	6
minimum	Family Members	4	4	3	2
	Primary				
minimum	Consumers	4	4	3	3
	MH Professional				
	General Public				
	Public Officials				
	(includes				
maximum	Commissioners)	(12)	(12)	(9)	(8)
	total				
	members		24	18	16

The intent is to have a balanced Board having all types represented.

In the attached sheets the categories are interchangeable, except for those indicated as maximum or minimum above.

- This means that for the maximum items, appointments should not exceed that number.
- For those types that have a minimum, appointments should have at least that number.
 - Where there are minimums indicated, the counties may appoint more than the minimum (as long as there is a balance among the types of appointments).
- The types that have no maximum or minimum are interchangeable.
 - The listing of these types is purely illustrative.

Northern Lakes CMH Authority Board Appointments

Bd Member Type	Appointment 10/1/2003	Term Expires (x = expires)								
		3/31/2005	3/31/2006	3/31/2007	3/30/2008	3/30/2009	3/30/2010	3/30/2011	3/29/2012	3/29/2013
Crawford										
Commissioner	2 yr	0	x	0	0	x	0	0	x	0
General Public	3 yr	0	0	x	0	0	x	0	0	x
Missaukee										
Commissioner	2 yr	0	x	0	0	x	0	0	x	0
Family Member	1 yr	x	0	0	x	0	0	x	0	0
Roscommon										
Commissioner	1 yr	x	0	0	x	0	0	x	0	0
Family Member	3 yr	0	0	x	0	0	x	0	0	x
Consumer	1 yr	x								
General Public	1 yr	x								
Wexford										
Commissioner	3 yr	0	0	x	0	0	x	0	0	x
MH Professional	2 yr	0	x							
Family Member	1 yr	x								
Consumer,	1 yr	x	0	0	x	0	0	x	0	0
subtotal members	12	12	9	8	8	8	8	8	8	8
Total Members	24	24	18	16	16	16	16	16	16	16
No of Appointments that Expire		11	7	6	5	5	6	5	5	6
No of Appointments made April 1		4	5	6	5	5	6	5	5	6

Northern Lakes CMH Authority Board Appointments

Bd Member Type	Appointment	Term Expires (x = expires)								
	10/1/2003	3/31/2005	3/31/2006	3/31/2007	3/30/2008	3/30/2009	3/30/2010	3/30/2011	3/29/2012	3/29/2013
Grand Traverse										
Primary Consumer	1 yr	x	0	0	x	0	0	x	0	0
Family Member	1 yr	x								
MH Professional	3 yr	0	0	x	0	0	x	0	0	x
MH Professional	2 yr	0	x	0	0	x	0	0	x	0
County Comm	1 yr	x	0	0	x	0	0	x	0	0
General Public	3 yr	0	0	x	0	0	x	0	0	x
County Comm	2 yr	0	x							
General Public	1 yr	x								
Primary Consumer	2 yr	0	x	0	0	x	0	0	x	0
	9	9	7	6	6	6	6	6	6	6
Leelanau										
County Comm	3 yr	0	0	x	0	0	x	0	0	x
Family Member	1 yr	x								
Family Member	2 yr	0	x	0	0	x	0	0	x	0
	3	3	2	2	2	2	2	2	2	2
subtotal members	12	12	9	8	8	8	8	8	8	8

Note: After Initial appointment, all appointments are 3 years

Wexford County Appointments to new CMH Authority

The County will appoint a new Board effective, October 1, 2003.

- The first appointments will run for 1 & 1/2 years
 - Oct 1, 2003 to March 31, 2005
- Thereafter, all appointments will be made effective April 1st.
- Initial Appointments to the Board (total of 4 appointments)
 - 2 – 1 year appointments
 - 1 – 2 year appointment
 - 1 – 3 year appointment
- After the first round of appointments, April 1, 2005
 - Wexford County will have 3 seats on the Board.
 - One of the seats may be Commissioners (recommended)
- On April 1, 2006, Wexford County will have 2 seats on the Board
 - One of the seats may be a Commissioner (recommended)
 - Recommendation is to maintain current appointments.

Example:

<u>Bd Member Type</u>	<u>Appointment</u>
Wexford	<u>10/1/2003</u>
Commissioner	3 yr term
General Public	2 yr term
Family Member	1 yr term
Consumer	<u>1 yr term</u>
	4 Members

Agreement for Community Mental Health Authority

Wexford County

The persons signing this Agreement hereby verify by their signatures that they are authorized to execute this Agreement pursuant to the appropriate County Boards of Commissioners resolutions.

IN THE PRESENCE OF:

Cynthia Stambaugh
Cynthia Stambaugh

Lucinda Rathbun
Lucinda Rathbun
County Seal

WEXFORD COUNTY

By: Darrell Kelley
Darrell Kelley
Chairperson, Wexford
County Board of Commissioners

Date: August 06, 2003

By: Elaine L. Richardson
Elaine L. Richardson
Wexford County Clerk

Date: August 06, 2003

Date Approved by County 08/06/03

FILED WITH:

Department of Community Health
Janet Olszewski, Director
Date: September 26, 2003

Secretary of State
Terri Lynn Land, Secretary of State
Date: September 9, 2003

Wexford County Clerk
Elaine Richardson, Clerk
Date: September 26, 2003


RESOLUTION: Wexford County Board of Commissioners

Be it resolved that the Wexford County Board of Commissioners, having held three public hearings on the issue of creating a Mental Health Authority, hereby formally endorses and supports in accordance with MCLA-330.1205 the creation of the Northern Lakes Community Mental Health Authority in conjunction with Crawford County, Grand Traverse County, Leelanau County, Missaukee County, and Roscommon County to meet the mental health needs of the residents of Wexford County.

By this resolution the Commission authorizes the Board Chair to execute the attached Enabling Resolution and Agreement with Crawford County, Grand Traverse County, Leelanau County, Missaukee County, and Roscommon County. This Enabling Resolution and Joint Agreement details the role, function, powers, duties and responsibilities of the Authority that is hereby approved by the Wexford County Board of Commissioners.

STATE OF MICHIGAN)
) SS
COUNTY OF WEXFORD)

Certification: I, Elaine Richardson, County Clerk, do hereby certify that the foregoing resolution was adopted at a regular meeting of the Wexford County Board of Commissions on the 6 day of August, 2003, after three (3) properly noticed public hearings were held on the issues contained therein and that said meetings were conducted and public notice of said meetings were given pursuant and in full compliance with the Open Meetings Act, being Public Act 267 of the Public Acts of Michigan (1976), and that the minutes of said meetings were kept and will be or have been available as required by said Act.



Elaine Richardson, Wexford County Clerk

Date: 08/06/03

County Seal

Name	Public Official (6)	Consumer/ Family Member (5)	Provider MH Services (represent)	General Public (represent)	Agency Occupation (represent)	Term
Crawford (2)						
Lorelei King				X		3/31/22
Sherry Powers ***	X					3/31/23
Grand Traverse (6)						
Nicole Miller		FM				3/31/23
Penny Morris ***	X					3/31/24
Nina Zamora		C				3/31/21
Dan Lathrop		C				3/31/22
Randy Kamps				X		3/31/22
Mary Marois				X		3/31/22
Leelanau (2)						
Ty Wessell ***	X					3/31/22
Greg McMorrow			X			3/31/24
Missaukee (2)						
Dean Vivian *	X					3/31/23
Pam Babcock		FM				3/31/24
Roscommon (2)						
Angela Griffis *, **	X					3/31/24
Al Cambridge		FM				3/31/22
Wexford (2)						
Ben Townsend ***	X					3/31/22
Rose Denny				X		3/31/22
Representation - 16	6	5	1	4		
C - Consumer						
FM - Family Member						
* County Commission Designee						
** Public Official						
*** County Commissioner						
4/19/21						

CORRESPONDENCE TO THE BOARD – CURRENT MEETING

March 15, 2022 at 9:15 p.m.

Members of the Board,

Previously I spoke at a meeting expressing my complete confidence and support in Joanie Blamer for the CEO position with Northern Lakes Community Mental Health Authority. As an experienced former mental health advocate with a strong background in NAMI (Board Member, State Representative, Walk Manager, State Office Manager), a parent of Recipients of Mental Health Services, and the President of the Board of Club Cadillac, I feel well qualified to speak as to the professional demeanor, collaborative attitude, honesty and integrity I have experienced in my interactions with Joanie. Her efforts as an Interim CEO are a testament to these positive traits and demonstrate her capability to perform CEO duties successfully. I was thrilled to hear a Motion had been passed to offer her the job following the withdrawal of the previous out-of-area candidate because I believe Joanie is the right person for the job.

Now I see an item on the Agenda to reverse that Motion and another Motion to hire an agency to do a new candidate search. As an experienced, successful business professional prior to my retirement, this requested Motion is baffling. This was in no way a failed candidate search that would warrant starting over, as Joanie was one of the top two candidates finalized by you. Assuming the expense of utilizing a company to perform a candidate search as well as waiting additional months to finalize this CEO position seems illogical and possibly mismanagement. To propose a new candidate search while Joanie continues as Interim most certainly takes her dedication for granted. You now have the final best candidate in position, performing the job and up to speed. Indeed, her performance through these delays and at times faction attacks has been an exemplary display of resilience, above and beyond what would crumble a lesser person. This is truly a dedicated professional worthy of the CEO position that I believe will take the Agency to a new level.

Whatever the motivations are to prevent Joanie from receiving a well deserved offer for the CEO position do not come from the voices of the masses, but rather a small faction of the community, staff, and Board. These delays and affronts are hurting this Board and they are hurting the Agency at large. I would propose that this Board approve a Motion at this meeting to offer Joanie at a minimum the exact same contract that was presented to the former selected candidate. This should be done immediately and allow Northern Lakes Community Mental Health Authority to move forward securely with Joanie as the highly qualified and committed CEO.

Respectfully,

Kristen Kenny

**Chief Executive Officer's
Report to the Board
April 21, 2022**

Board Membership Topics: Nikki has resigned from the Board, and we will have a new Board Member representing Missaukee County.

Dan Mauk, Chief Information Officer, is recommending the use of Webinar Teams for the Board Meetings. He noted this will allow us to minimize the external noise and recognize people during public comment. IT will be onsite to oversee this process each month. We can move forward with this if you like, or if you have questions or concerns, we can ask Dan to come and speak about it in more detail in the May meeting as he is off next week.

The Public Health Emergency Order has been extended through July 15, 2022.

Need approval: We have two block grants that include marketing costs to increase awareness of our Integrated Health Clinic and usage of these services. This cost was included in our annual budget you approved last August but is over the set Executive Limitation, so your approval is needed. The total cost is \$46,800.00. The breakdown of services being purchased include:

- 40 Broadcast commercials and 25,000 Digital OTT/CTV commercials (COVID-19 SMI grant)
- 64 Broadcast commercials and 16,675 OTT/CTV Commercials (IHC Adult Block grant)

Lauri has included this in the financial report as well because we will need an approved motion to proceed. The metrics that will be used are traffic counts to the website and then the response to the telephone survey which has been conducted every 2-3 years. The expectation is to complete the phone survey in December of 2022. The survey has been conducted since 2006 and administered by CS Research and Consulting, LLC. Please watch for upcoming media promotions of NLCMHA.

Citizen Comments: Judy shared a story about a family in the Munson Emergency Department who weren't satisfied with services. I emailed Judy to ask for the name so I could investigate the situation. This was her response: "Thank you for the follow up on the family and the Protocall situation in the ER last month. I think the follow up is probably with Munson rather than the specific family as I understand Protocall is consistently used. Perhaps communication with Terri LaCroix about the system would be best."

NLCMHA has regular meetings with Terri and other Emergency Department staff and ProtoCall Services are discussed in that meeting. As I have shared with you all in past Board Meetings, there have been some concerns in wait times. ProtoCall has increased staffing and undergoing an update in their phone system as measures to improve their wait times.

At the last Board Meeting Mary asked if we could do an RFP for crisis on-call services and the answer to that is yes, we can do that.

May is Mental Health Month! May is Mental Health Awareness month and together, Northern Lakes CMH and North Country CMH are offering 12 virtual "lunch and learn" type

presentations with time for questions and answers (with one evening panel discussion). These are all FREE and virtual around the theme #Tools4Resilience. You can use the QR code on the attached flyer to register, or use this direct link: <https://forms.office.com/r/hHGbh032uh>

Also, there are two opportunities in May to take a Mental Health First Aid class. These are in Traverse City and will be in person. One day for Adult Mental Health First Aid and one day focused on Youth Mental Health First Aid, for those who work with or have youth in their lives.

Since the pandemic, people are recognizing the importance of their mental health and are also more willing to talk about these issues. People are also struggling more now than ever, so it is important for all of us to know how to support ourselves and others in our lives.

Psychiatry Residency Program: The collaborative efforts with Pine Rest, Michigan State University, and Munson Medical Center resulted in a finalized agreement for Northern Lakes being added to the residency rotation. We will have two physicians starting with us July 1, 2022. This is exciting news and brings a scarce resource to our region!

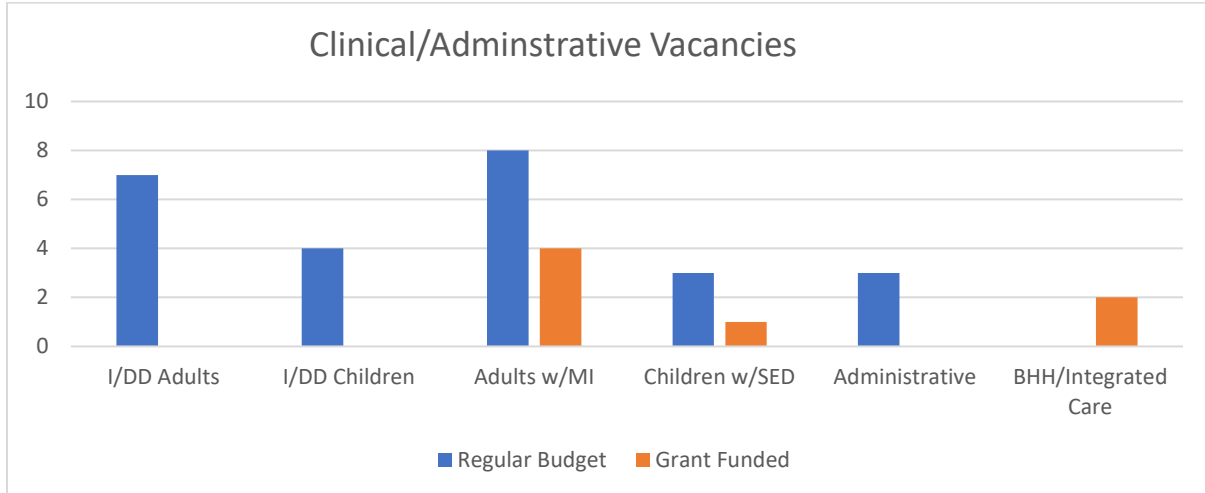
Legal Case: We received a petition filed in the Circuit Court for the County of Grand Traverse to review an order from an Administrative Law Judge (ALJ) that petitioner cannot fulfill. It was ordered that recipients of care needed to provide a denial of services from the health plan before NLCMHA would be responsible for covering any items of enhanced pharmacy, specialized equipment, and supplies.

Staffing: At the NMRE Finance Committee earlier this week the region's CFO's spoke about staff retention. We expect this conversation to continue in the next month and will likely have a recommended plan for you to consider in May or June.

We continue to have success in recruiting, and Dave Simpson reported that as of March 29th the Specialized Residential Homes are currently staffed at 73%. He reported this has had a significant impact on the Board Operated Homes. He specifically noted the following:

- Number of hours worked per RCA is dropping.
- Premium overtime paid out is dropping.
- Regular time off for RCAs and HS/AHS I and IIs is becoming the norm.
- Stress levels are dropping.
- Med errors are dropping.
- IR frequency is dropping.

The vacancies for other positions are noted in the graph below.



Community Connections/Meetings:

- March 18th, NMCHIR Organizational Development Discussion
- March 21st, Grand Traverse County Collaborative Executive Committee
- March 21st, Crisis Welcoming Center Advisory Meeting
- March 22nd, Wexford/Missaukee Human Leadership Collaborative
- March 23rd, NMRE Board Meeting
- March 23rd, MDHHS relating to Juvenile Justice Diversions
- March 24th, Grand Traverse Family/Probate Court
- March 24th, Wexford County Commissioners, Prosecuting Attorney, Defense Attorney, & Judge
- March 30th and 31st, CMHAM Director's Forum
- March 30th, NAMI Wexford
- April 1st, NLCMHA's first Staff Town Hall Meeting
- April 4th, Northwest CHIR Steering Committee
- April 5th, GT Family Court/CMH Steering Committee
- April 5th, RRAC Meeting
- April 6th, Meeting with Kevin Fischer, NAMI Michigan
- April 6th, Meeting with Grand Traverse County Commission Chair, Rob Hentschel, Randy Kamps, and Lauri Fischer
- April 6th, Meeting with Kristen K. about NAMI services in Wexford County
- April 7th, Meeting with VA Community Engagement & Partnership Coordinator, Angela Linsenman
- April 7th, Meeting with Wexford County Commissioners, Sheriff, Jail Administrator, Prosecuting Attorney, Defense Attorney and Judge relating to Justice Diversion
- April 8th, Meeting with Traverse Health Clinic
- April 8th, Meeting with Crisis Action Team (Community Wellness Center)
- April 11th, Behavioral Health Summit
- April 13th, NMRE Finance Committee
- April 13th, Meeting with Jim Harrington from Bear River Health relating to SUD services

I would like to thank Mary for attending the Behavioral Health Summit on the 11th. If others attended and I missed you, thanks for joining in this effort. Mary shared with me that she wasn't aware of the Behavioral Health Summit until the day before. I want to let you all know this is a regional behavioral health summit that covers all six of our counties. We have staff involved in the Behavioral Workforce recruitment and retention group and the Crisis Continuum of care group (working on the Community Wellness Center). There is a lot of work occurring and I welcome any of you who are interested and can attend to do so. Action groups are meeting and while we don't have an exact date yet, the summit is planned for September.

Crisis Welcoming Center: We continue to meet with community partners to develop the crisis welcoming center. Our next meeting is scheduled April 25th. Many of the people attending this group are also attending the Community Wellness Center group so at the Summit we spoke about merging these two groups.

I am continuing to work with Senator Stabenow's office on the congressional funding. It is still in process, and we hope to have contact with the fiduciary soon. I have had conversations with Lauri about contracting vs. internal crisis residential unit(s). I plan to discuss this at our next advisory meeting on the 25th as well. I welcome input from any of you as I understand there are pros and cons for each option.

Media Coverage: All news stories that I am aware of have been sent to you.

Mental Health Code (MH Code), and Administrative Rules: I have heard some Board Members asking about the MH Code and Administrative Rules, and some noting concerns that the Board isn't meeting the requirements. After speaking with Deb and Dan it appears the best way to get the information out is to email in a pdf format to your iPads. If you want to review the Michigan Mental Health Code the link is [http://www.legislature.mi.gov/\(S\(brsr4aou31dicjytjn2pxnwo\)\)/mileg.aspx?page=GetObject&objectname=mcl-Act-258-of-1974](http://www.legislature.mi.gov/(S(brsr4aou31dicjytjn2pxnwo))/mileg.aspx?page=GetObject&objectname=mcl-Act-258-of-1974)

The link to the Administrative Rules is

https://www.michigan.gov/documents/mdhhs/Administrative_Rules_687772_7.pdf

Next week I will have Deb work with Jeremiah to push out this information in pdf files. Chapters 1 and 2 speak to the responsibilities of MDHHS, PIHPs, and CMHSPs. We are an Authority, which has differing responsibilities than a program, in some instances. I hope you will find this information helpful as you think about the Board Retreat and governance models.

Client Success Story: Anthony wanted to share his success story this month, so please see the attached Cadillac News Article that highlights his resilience and recovery journey! It is amazing, and we are very fortunate to hear of success stories and all that people with developmental disabilities and/or mental illness can accomplish!

Respectfully submitted,

Joanie Blamer, Interim CEO



Cadillac News

cadillacnews.com

COVID-19 Hotline: (888) 535-6136, 7 days a week from 8am - 5pm

\$1

THE INSIDE



Cadillac girls win MHSAA Division 2 state title

ON PAGE B1



Childhood friends reunite after 73 years

ON PAGE A6

MSP posts offering inventory forms for your home

ON PAGE A3

TWO-DAY FORECAST

Wednesday Thursday
33 | 10 24 | 9
Snow

Deaths

Ruth Ellen Cross, 78, of Leroy
Dale D. Herring, 86, of Reed City
Kelly S. Holmes, 54, of Luther

See obituaries on A5

OPINION	A4
OBITUARIES	A5
SENIOR	A6
CONSERVATION	A7
WEATHER	A7
SPORTS	B1
PUZZLES	B5
COMICS	B6
CLASSIFIEDS	B7

Vol. 150 No. 220



Cadillac News

'Our biggest success story'

After 26 celebrating transition of project worker to janitorial staff at local factory

BY CHRIS LAMPHERE
CADILLAC NEWS

CADILLAC — The After 26 Depot Cafe recently lost one of their best dishwashers.

But they're not upset about it; on the contrary, they're ecstatic about the success of 37-year-old Anthony McKean, who was able to make the transition from his position at After 26 Depot Cafe to a local manufacturer — a monumental achievement for any Depot project worker.

"He's our biggest success story," said After 26 General Manager Kelly Hondorp, who added that the goal of the organization isn't just to give adults with developmental disabilities somewhere to work after they turn 26 years old, it's to give them an opportunity to showcase their talents.

"Getting them noticed in the community," Hondorp said. "So the community notices their abilities instead of their disabilities."

Hondorp said during the several years McKean worked at the depot, he was a model employee — hard-working, reliable, conscientious and someone who always took pride in his work.

"He always kept everyone informed about what he had left to do," Hondorp said. "He sometimes asked questions but not very often, because he always knew what he had to do."

McKean was such

a good employee that he became the only project worker in the After 26 Depot Cafe's history to train other workers how to do his job.

"He was fantastic," Hondorp said. "I'm not surprised he was able to move on. I give him a lot of credit for getting out of his comfort zone. It says a lot about him. There wasn't a doubt in my mind he could."

McKean's mother, Kristen Kenny, recently chronicled her son's journey in response to a request from Hondorp to describe how the Depot has made an impact in

his life. The following is that chronicle, along with an update on how McKean is doing at his new job.

Success Story

"Anthony was born with birth defects as a result of a gene mutation that caused Siderius Syndrome. This diagnosis also causes cognitive impairments. Over more than 20 years, a series of surgeries were completed to correct the deformities to his right hand and face. Along the way, the evolution of Anthony's developmental disability slowly clarified in scope. Unfortunately, we recently confirmed that he also has a form of muscular dystrophy and another gene mutation causing challenges.

SEE **AFTER 26**
ON A2



COURTESY PHOTO

Anthony McKean recently started his new job in the janitorial department of Fiamm. McKean for several years had worked as a dishwasher at the After 26 Depot Cafe.



IMAGE PROVIDED BY ERICA HENRY

An example of Henry's merchandise from her business ERK Crafts.

Evart's new downtown pop-up shop

BY RILEY CONNELL
CADILLAC NEWS

EVART — For small business owners, taking the leap to establish a brick-and-mortar storefront can be daunting. It often goes beyond simply locating a building and includes sorting out equipment, spacial needs and staffing.

With a new Main Street pop-up shop, the Evart Downtown Development Authority (DDA) is hoping to provide community business owner's with the opportunity to test run a physical, downtown location.

In 2017, the Evart DDA began the application process to become a Michigan Main Street, and through that experience, their director at the time noticed that many other main streets had their own pop-ups.

"So purchasing a building and doing a pop-up shop to help businesses see if they could get into business at a low cost and to figure out if their business plan worked and what business is about," said Evart DDA Secretary, June-Marie Essner.

SEE **EVART SHOP** ON A3

Wexford board to tackle T-house closure talk, interim co-administrator pay

BY RICK CHARMOLI
CADILLAC NEWS

CADILLAC — It appears the fate of the transition houses used by Wexford-Missaukee Community Corrections is sealed, but now the Wexford County Board of Commissioners will weigh in.

Information in Wednesday's board of commissioners' agenda packet states that the community corrections board voted to close the transition houses last week. It is being forwarded to the county board of commissioners and is scheduled to be discussed to determine the next steps taken.

The goal of the transition house is to place inmates who are released from jail in a temporary, structured setting so they can look for work, continue treatment programs and have a roof over their heads. In a transition house, the person is



RICK CHARMOLI | CADILLAC NEWS

The Wexford County Board of Commissioners discussed the resignation of former county administrator Janet Koch during its Feb. 16 meeting. The board is scheduled to discuss compensation for the two interim co-administrators at its upcoming meeting Wednesday.

monitored by Wexford-Missaukee Community Corrections and required to stay in the home unless a pre-approval to leave is

granted.

In 2009, community corrections purchased a men's transition house in the city of Cadillac

and in 2010 a women's house that serves much of the same purpose as the men's house was purchased. When the first transition house opened it was expected to save \$50,000 to \$100,000 each year in housing costs at the jail.

Both T-houses were purchased by community corrections but are owned by Wexford County. Although community corrections is a joint department for Missaukee and Wexford counties, no purchase money came from either county's general funds.

Approximately five years ago, state grant operating funding ceased, leaving only offender-generated revenue to operate the houses, which has not led to sustainable funding for maintenance, operations and staffing of the houses.

SEE **WEXFORD BOARD** ON A3

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After 26

CONTINUED FROM PAGE 1A

“Both are also linked to cognitive impairments. Anthony certainly has been dealt a challenging hand in life, but it has never stopped him from trying to be his best.

“Anthony’s experiences during his six years working at After 26 highlight how his efforts have created more opportunities for himself as well as others. It was 2016 when Anthony was able to secure a spot at After 26 by boasting of his experience as a dishwasher when interviewing. The fact that he truly enjoys dishwashing didn’t hurt either: Anthony was one of the first dishwashers that The After 26 Depot Cafe had hired. Along with a couple others individuals, these project workers were instrumental in the development of the program, thus paving the way for the opportunity that is still in place today.

“Anthony learned the value of work and community on the way to achieving the rank of Eagle Scout in the Boy Scouts of America. His first real job was at the age of 14, before the disabilities really set in on his development and cognitive capacities. When his health prevented him from working at a paid position, like a true Boy Scout he continued to volunteer in any way he could and be a contributor to the community at large. When we moved to Cadillac in 2013, Anthony was just returning to mainstream life after an extended period of severe disability. He learned of After 26 and felt it could be a place where he could begin to reach his goals; returning to work, right in our community, and in a place that was accepting of the types of challenges



Anthony McKean’s duties now include sweeping, mopping, vacuuming, taking out the garbage, cleaning offices and his favorite activity — running the floor scrubber.

he had begun to come to terms with in his life.

“For six years, Anthony has faithfully fulfilled his duties as a dishwasher at After 26. Over the years he would be sure to keep the boss advised of his availability, appointments, and other activities should they need him to come to work outside his scheduled hours. His reliability was so good that management knew he could be called in if ever there is a need.

“When asked what he most liked about working at After 26, Anthony shared several things. He enjoyed the steady pace, the consistent challenge, and seeing and meeting the regulars. He also liked

the many new friends he made with staff. Given his tenure, at times he felt a bit like a regular fixture. He said his best, most fulfilling days were the ones in which he had the opportunity to train new project worker dishwashers.

“When asked what challenges Anthony had on the job, he struggled to answer. Eventually he decided that the pandemic changed some of his well-established routines, resulting in more responsibilities. But, it was a stretch for him to call it challenging. He would grieve when staff moved on as he really enjoyed their acquaintances. Losing those coworkers was always a sad change for Anthony but a reality in the work community, especially restaurants.

“Thanks in large part to

the acceptance, environment, and team at After 26, Anthony’s comeback has proven to be more than he ever imagined. Never one to put all his eggs in one basket, Anthony has many supports and services in play to help him meet his goals. After just a short time working with another local rehabilitative program, his potential was noticed and he was given an opportunity to do something different. In July of 2021, Anthony was offered a staff position on a janitorial crew performing contract cleaning at Fiamm. Working five days a week part-time, he started above minimum wage. Still, it wasn’t easy to convince Anthony it was time to leave After 26 even though stay-

ing would have him continuing to work seven days a week. He finally relented to the idea when I explained that he had achieved his original work goals. By letting his job go, he would be allowing another Project Worker the opportunity to achieve theirs.

“Months later, Anthony is still working successfully at Fiamm — and there’s been an additional five project workers hired and successfully working at After 26. Sharing this story will hopefully inspire others to follow in Anthony’s footsteps of setting a goal and working steadily to achieve it. Anthony also hopes his story will inspire others who may own businesses or be in management to give other project

workers like him a chance. After all, that is the real mission behind After 26, providing developmentally disabled adults employment in the public eye so that their true aptitude and ability can be recognized.”

McKean told the Cadillac News that his duties now include sweeping, mopping, vacuuming, taking out the garbage, cleaning offices and his favorite activity — running the floor scrubber. McKean finds his new job duties to be a “nice challenge” and “very fulfilling.” He added that the work also carries minimal risk of exposure to coronavirus — something that factored heavily into his decision to take the job in the first place.

clamp@cadillacnews.com

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1920's Framed Sepia Tone Canal picture from Brinks Custom Framing

A beautifully framed, circa 1920's, 25" x 19.5" sepia tone picture.

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Retail Value: \$325

Opening Bid: \$98



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Michigan Silver Ring from Wexford Jewelers

Both the lower and upper peninsulas were hand sculpted in fine detail.

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Retail Value: \$129

Opening Bid: \$39



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10' X 12' Painted Gable Shed from Mid Michigan Barns

Cream siding, white trim, charcoal metal roof, 6' double doors. Two 2' x 3' white windows.

ITEM#: 1081

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Opening Bid: \$878



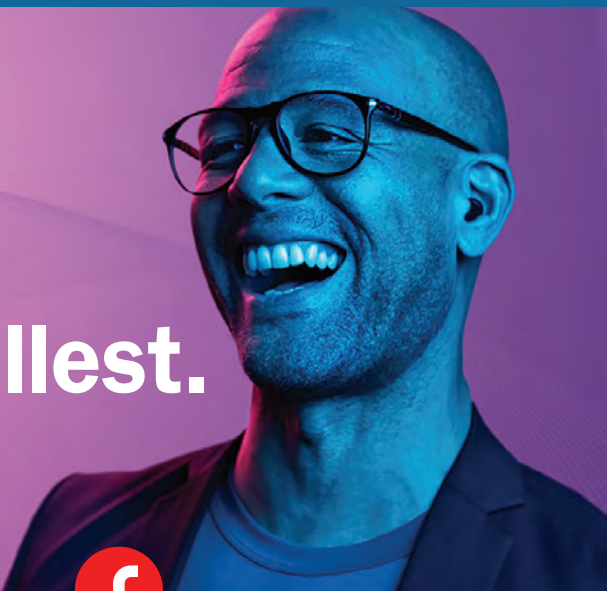
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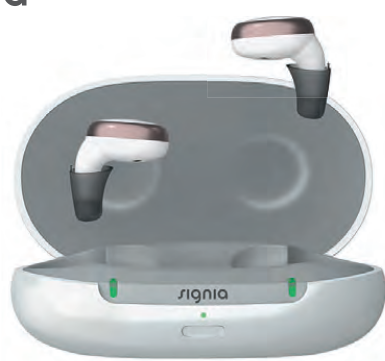
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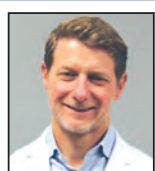


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AFFORDABLE PAYMENT PLANS

Online bidding starts
MARCH 2ND @ 6PM!
at cadillacnews.com

Look for a complete list of items and rules inserted into the Wednesday, March 2nd edition of the Cadillac News.



*The Cadillac News serves as a 3rd party in this exchange and is not responsible to purchaser for any goods or services rendered. The business offering the product, service or gift certificate is solely responsible to the purchaser of the item. The Cadillac News, its employees, or other agents and representatives shall assume no liability for faulty merchandise, inability or unwillingness to supply the product, service or gift certificate value to the purchaser.

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MENTAL HEALTH FIRST AID

WHY MENTAL HEALTH FIRST AID?

Mental Health First Aid (MHFA) teaches you how to identify, understand and respond to signs of mental health and substance use challenges among adults or youth.

On average,

130

people die by suicide every day.

Source: American Foundation for Suicide Prevention

From 1999 to 2019,

841,000

people died from drug overdoses.

Source: Centers for Disease Control and Prevention

Nearly

1 in 5

in the U.S. lives with a mental illness.

Source: American Foundation for Suicide Prevention

WHO NEEDS TO KNOW MENTAL HEALTH FIRST AID

Employers
 Police officers
 Hospital staff
 First responders
 Faith leaders
 Teachers and coaches
 Parents
 Caring individuals

WHAT IT COVERS

- Common signs and symptoms of mental health challenges.
- Common signs and symptoms of substance use challenges.
- How to interact with a person in crisis.
- How to connect a person with help.
- Expanded content on trauma, substance use and self-care.

HOW IT WORKS

- Trainers have over 60 years combined training experience.
- Adult Mental Health First Aid is 7.5 hours in-person.
- Youth Mental Health First Aid is 7.5 hours in-person.
- Registration information on reverse side.
- Complete and return today as space is limited!

Learn how to respond with the Mental Health First Aid Action Plan (ALGEE):

- A**ssess for risk of suicide or harm.
- L**isten nonjudgmentally.
- G**ive reassurance and information.
- E**ncourage appropriate professional help.
- E**ncourage self-help and other support strategies.



MENTAL HEALTH FIRST AID REGISTRATION FORM

FEE: \$50 per session includes a training manual, lunch, and snacks.
Each session runs from 8:00 a.m. to 5:00 p.m.
Cash or checks accepted. Make checks payable to Northern Lakes CMHA, ATTN:
Beth Burke, 527 Cobb Street, Cadillac MI 49601.

REGISTRATION: Registrations taken on first-come, first served basis. The registration fee needs to accompany this form. The registration fee is non-refundable but we will accept substitutions.

PLEASE CHECK THE DATE(S) YOU WISH TO ATTEND BELOW.

ADULT Mental Health First Aid

- ___ **Wednesday, May 11, 2022** at:
The Gateway Center
10783 E Cherry Bend Rd
Traverse City, MI 49684
- ___ **Wednesday, August 31, 2022** at:
The Gateway Center
10783 E Cherry Bend Rd
Traverse City, MI 49684
- ___ **Wednesday, October 26, 2022** at:
Northern Lakes Community Mental Health
527 Cobb St
Cadillac, MI 49601

YOUTH Mental Health First Aid

- ___ **Thursday, May 12, 2022** at:
The Gateway Center
10783 E Cherry Bend Rd
Traverse City, MI 49684
- ___ **Thursday, September 1, 2022** at:
The Gateway Center
10783 E Cherry Bend Rd
Traverse City, MI 49684
- ___ **Thursday, October 27, 2022** at:
Northern Lakes Community Mental Health
527 Cobb St
Cadillac, MI 49601

Name _____

Phone _____

Email Address _____

Each session is approved by NASW-Michigan Social Work CE Collaborative for 7.5 continuing education hours (included with the registration fee). If you wish to receive continuing education credits, please include your License Number below:

#TOOLS4RESILIENCE

Virtual Education Series

Celebrating **Mental Health Awareness Month** May 2022

12-1 PM EVERY TUES•WED•THUR | EXCEPT EVENING PANEL ON MAY 5 AT 6 PM

Register for a link to one or all!



- May 3 **Strong Foundation, Bright Futures: Building a Healthy Tomorrow.** An overview of the parent-infant relationship and its impact on mental health, wellbeing, and resiliency.
- May 4 **Mind Your Own Business: A Guide to Mindfulness for a More Peaceful World** (Panel). A video presentation and panel discussion about using mindfulness as a method for personal and community wellness.
- May 5 **Bridging the Access Gap: Intellectual/ Developmental Disabilities and Mental Health Treatment** (Panel) – EVENING 6 PM-7PM. A panel discussion on the gap people living with intellectual or developmental disabilities face when looking for mental health treatment.
- May 10 **Sleep is Your Super Power.** Even super heroes need sleep. A presentation to learn different techniques on how to get a better night's rest.
- May 11 **Prevention Coalitions and Youth Resilience.** A presentation highlighting youth resiliency and offering peer-to-peer coping strategies to prevent youth substance use.

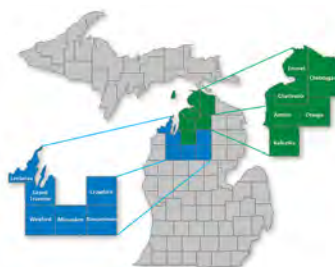
- May 12 **Music for the Soul.** A presentation exploring how music can relax the mind, energize the body, and help promote general mental health wellness.
- May 17 **Facing Down the Dinosaur.** A presentation on the fight/flight/freeze responses to stress. Stress busters that can help you move forward.
- May 18 **Rockin', Rollin' and Strollin': Taking the Next Step to Wellness.** A presentation exploring new ways to get more joyous movement into your life.
- May 19 **Dealing with Depression: From Darkness into the Light.** A presentation on the history of depression, physical, behavioral, psychological signs and risk factors, and coping strategies.
- May 24 **Suicide Awareness and Prevention.** A presentation on how to ask the difficult questions about suicide and explore alternative treatments in prevention.
- May 25 **Somewhere Over the Rainbow, in Search of Health, Humor, and Happiness.** A presentation to learn how humor, laughter, and positive attitude can have a healing effect on mental wellness.
- May 26 **Being in Nature and Mental Well-Being.** A presentation exploring how being immersed in the beautiful nature of Northern Michigan improves our sense of wellbeing.



northernlakescmh.org

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FEATURING



North Country
Community Mental Health

norcocomh.org

MyStrength Code:
NCCMHcomm



105 Hall St
Traverse City MI 49684
(231) 922-4850



1420 Plaza Dr
Petoskey MI 49770
(231) 347-7890

FOR IMMEDIATE RELEASE

April 7, 2022

Contact:

Joanie Blamer, Northern Lakes CMH Interim CEO, (231) 876-3309, joanie.blamer@nlcmh.org
Amy Christie, North Country Chief Clinical Officer, (231) 439-1282, achristi@norcocmh.org

#Tools4Resilience: Two Mental Health Agencies Team Up to Offer Virtual Education Series this May

Northern Lakes Community Mental Health (NLCMH) and North Country Community Mental Health (NCCMH) are teaming up to present a free series of virtual education webinars this May to celebrate National Mental Health Awareness Month.

The webinars will take place each Tuesday, Wednesday, and Thursday throughout May from 12:00 to 1:00 p.m., except for one evening panel discussion on Wednesday, May 5, from 6:00 to 7:00 p.m. The programs will feature mental health professionals from both organizations as well as community partners.

The collaboration will focus on mental health issues around the theme #Tools4Resilience and emphasize a variety of tools that individuals can use to promote their own mental health and self-care. After the presentations there will be time for questions and answers with the speakers.

To register and receive links to attend one or more sessions, visit <https://forms.office.com/r/hHGbh032uh>.

The schedule of #Tools4Resilience offerings is:

May 3: **Strong Foundation, Bright Futures: Building a Healthy Tomorrow.** An overview of the parent-infant relationship and its impact on mental health, wellbeing, and resiliency.

May 4: **Mind Your Own Business: A Guide to Mindfulness for a More Peaceful World** (Panel). A video presentation and panel discussion about using mindfulness as a method for personal and community wellness.

May 5: **Bridging the Access Gap: Intellectual/Developmental Disabilities and Mental Health Treatment** (Panel) – EVENING 6 PM-7PM. A panel discussion on the gap people living with intellectual or developmental disabilities face when looking for mental health treatment.

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May 25: **Somewhere Over the Rainbow, in Search of Health, Humor, and Happiness.** A presentation to learn how humor, laughter, and positive attitude can have a healing effect on mental wellness.

May 26: **Being in Nature and Mental Well-Being.** A presentation exploring how being immersed in the beautiful nature of Northern Michigan improves our sense of wellbeing.

Amy Christie, NCCMH Chief Clinical Officer, indicated that the series was developed this year in response to the increase in demand for services since the pandemic. "We hope the overall effect is to decrease stigma and encourage self-help activities. Both our agencies subscribe to the MyStrength self-help health and wellness app to benefit the community. In each webinar,

people will learn how to access that free service which is available 24/7 in the privacy of their own homes.”

“In Michigan, one in four adults will experience a mental health disorder at some point in their life, yet many of them cannot access the treatment they need,” said NLCMH Interim CEO Joanie Blamer. “Since the pandemic, people are much more willing to seek help and talk about mental health issues. This virtual education series is intended to provide more opportunities for people to learn, share, and have conversations about how to help yourself and how and when to access professional help.”

In addition, both organizations are offering Mental Health First Aid training to anyone in the community interested in learning how to identify, understand and respond to signs of mental health and substance use challenges.

North Country CMH is offering two virtual Adult Mental Health First Aid sessions, each broken into two parts. The first session will be 9:00 a.m. to 12:00 p.m. on May 4 and 5. The second session will be May 18 and 19 from 1:00 to 4:00 p.m. Participants should plan to attend either both morning sessions or both afternoon sessions. NCCMH is providing these sessions at no cost to the participant, thanks to a state mental health block grant. Space is limited. Email Jacqueline Conger at jconger@norcocomh.org at least one week in advance to register in order to allow time for pick up of required manual and to confirm space availability.

Northern Lakes CMH is offering a full day Adult Mental Health First Aid session on May 10 and a full day Youth Mental Health First Aid session on May 11. Participants may sign up for one or both sessions. Both will be held in person from 8:00 a.m. to 5:00 p.m. at the Gateway Center, 10783 E Cherry Bend Rd, Traverse City. The cost is \$50 per session. Each session is approved by NASW-Michigan Social Work CE Collaborative for 7.5 continuing education hours. Space is limited. Contact Beth Burke at Beth.Burke@nlcmh.org to register.

Northern Michigan Regional Entity (NMRE) is hosting “Bridging the Gap,” a day of mental health education for people who are receiving treatment/supports for a mental health issue and their guests, who can be a friend, family member, employer, or other person who would like to learn how they can help support those in their lives with a mental illness. The event will be held at Treetops Resort in Gaylord on Friday, May 20, from 10:00 a.m. to 3:00 p.m. and will include a plated lunch, health checks, door prizes, information displays, and entertainment. All attendees must register with their Clubhouse, Drop-in Center, or Community Mental Health by May 6. For more information contact Mari Hesselink at 833-285-0050.

###

Northern Lakes Community Mental Health Authority provides services to residents of Crawford, Grand Traverse, Leelanau, Missaukee, Roscommon, and Wexford Counties, including adults

with serious mental illness, children with serious emotional disturbance, persons with intellectual and developmental disabilities, and those with co-occurring substance use disorder. Persons wishing to know more about Northern Lakes Community Mental Health are encouraged to visit www.northernlakescmh.org. For general questions call Customer Services (800) 337-8598 or to access services call (800) 492-5742. For 24/7 crisis intervention call (833) 295-0616.

North Country Community Mental Health provides services to residents of Antrim, Charlevoix, Cheboygan, Emmet, Kalkaska and Otsego Counties experiencing a serious mental illness, severe emotional problem, or intellectual/developmental disability, including individuals with co-occurring substance use disorder. Persons wishing to know more about North Country Community Mental Health are encouraged to visit www.norcocmh.org or to access services call (877) 470-7130. For 24/7 crisis intervention call (877) 470-4668.

The Northern Michigan Regional Entity is the Prepaid Inpatient Health Plan (PIHP) for 21 counties in northern Lower Michigan. This means the NMRE manages the Medicaid funding for the behavioral health and substance use disorder services in the region. The NMRE is jointly owned by five Member Community Mental Health Services Programs (including NLCMH and NCCMH) which provide mental health services and supports to individuals with a mental health diagnosis or an intellectual disability. The NMRE also manages and coordinates prevention, treatment, and recovery support services individuals with a substance use disorder. For more information please visit <https://www.nmre.org/>.

**NORTHERN MICHIGAN REGIONAL ENTITY
BOARD OF DIRECTORS MEETING
10:00AM – MARCH 23, 2022
GAYLORD BOARDROOM**

ATTENDEES:	Roger Frye, Randy Kamps, Ed Ginop, Terry Larson, Christian Marcus, Mary Marois, Gary Nowak, Jay O’Farrell, Justin Reed, Richard Schmidt, Karla Sherman, Don Smeltzer, Don Tanner
VIRTUAL ATTENDEES:	Gary Klacking (West Branch), Gary Nowak (Rogers City), Jay O’Farrell (Whittemore), Joe Stone (Belleville, KS)
NMRE/CMHSP STAFF:	Jodie Balhorn, Joanie Blamer, Eugene Branigan, Christine Gebhard, Eric Kurtz, Brian Martinus, Diane Pelts, Denise Switzer, Deanna Yockey, Carol Balousek, Lisa Hartley
PUBLIC:	Tom Bratton, Marie Fielder, Chris Frasz, Kassondra Glenister, Susan Pulaski, Kara Steinke
GUESTS:	Brandon, Hausbeck, Justin Severs

CALL TO ORDER

Let the record show that Chairman Don Tanner called the meeting to order at 10:05AM.

ROLL CALL

Let the record show that all NMRE Board Members were in attendance for the meeting on this date, either in Gaylord or remotely.

PLEDGE OF ALLEGIANCE

Let the record show that the Pledge of Allegiance was recited as a group.

ACKNOWLEDGEMENT OF CONFLICT OF INTEREST

Let the record show that no Conflicts of Interest to any of the meeting Agenda items were declared.

APPROVAL OF AGENDA

Mr. Tanner stated that a Nominating Committee is needed for upcoming election of officers; this will be added under “New Business”.

MOTION BY RANDY KAMPS TO APPROVE THE NORTHERN MICHIGAN REGIONAL ENTITY BOARD OF DIRECTORS MEETING AGENDA FOR MARCH 23, 2022 AS AMENDED; SUPPORT BY RICHARD SCHMIDT. MOTION CARRIED.

APPROVAL OF PAST MINUTES

Let the record show that the February minutes of the NMRE Governing Board were included in the materials for the meeting on this date. Mr. Kamps noted one error which will be corrected.

MOTION BY ROGER FRYE TO APPROVE THE MINUTES OF THE FEBRUARY 23, 2022 MEETING OF THE NORTHERN MICHIGAN REGIONAL ENTITY BOARD OF DIRECTORS AS AMENDED; SUPPORT BY RANDY KAMPS. MOTION CARRIED.

CORRESPONDENCE

- 1) Center for Healthcare Integration & Innovation and Community Mental Health Association of Michigan (CMHAM) 2021/2022 Summary Report dated February 2022.
- 2) MDHHS FY23 Budget Executive Recommendation for the State Hospital Administration presentation dated March 9, 2022.
- 3) MDHHS FY23 Budget Executive Recommendation for Behavioral and Physical Health and Aging Services Administration presentation dated March 9, 2022.
- 4) Draft minutes of the March 9, 2022 NMRE Regional Finance Committee meeting.

ANNOUNCEMENTS

Let the record show that there were no announcements during the meeting on this date.

PUBLIC COMMENTS

Let the record show that the members of the public attending the meeting virtually were recognized.

REPORTS

Executive Committee Report

Let the record show that no meetings of the NMRE Executive Committee have occurred since the February Board Meeting.

CEOs Report

The NMRE CEO Monthly Report for March 2022 was included in the materials for the meeting on this date. Mr. Kurtz thanked AuSable Valley for the invitation to present to its Board of Directors on February 28th.

Financial Report

January 2022

- Traditional Medicaid showed \$66,440,248 in revenue, and \$58,063,977 in expenses, resulting in a net surplus of \$8,376,271. Medicaid ISF was reported as \$9,298,368 based on the unaudited FSR. Medicaid Savings was reported as \$11,296,867.
- Healthy Michigan Plan showed \$10,338,832 in revenue, and \$7,570,183 in expenses, resulting in a net surplus of \$2,768,649. HMP ISF was reported as \$7,059,749 based on the unaudited FSR. HMP savings was reported as \$5,061,250.
- Net Position* showed net surplus Medicaid and HMP of \$11,144,920. Medicaid carry forward was reported as \$16,358,117. The total Medicaid and HMP Current Year Surplus was reported as \$25,125,545. Medicaid and HMP combined ISF was reported as \$16,358,117; the total Medicaid and HMP net surplus, including carry forward and ISF was reported as \$41,483,662.
- Health Home showed \$399,719 in revenue, and \$316,653 in expenses, resulting in a net surplus of \$83,066.
- SUD showed all funding source revenue of \$7,846,427, and \$6,230,947 in expenses, resulting in a net surplus of \$1,615,480. Total PA2 funds were reported as \$5,723,748.

Ms. Yockey reported that additional columns were added to the "Schedule of PA2 by County" page per the Board's request. Clarification was made that PA2 can be spent on prevention and treatment of substance use disorders. Mr. Kamps asked whether it makes sense to encourage counties with excess funds to reduce their balances by putting funds into services. Mr. Kurtz explained that part of the reason for the current high balances is the implementation of Healthy Michigan Plan; prior to HMP, liquor tax funds would have been used to pay for services to uninsured, indigent individuals. Mr. Kamps requested that Mr. Kurtz work with the Substance Use

Disorder Oversight Board to examine the issue. The annual anticipated revenue was reported as \$1,487,584 which will come to the NMRE from the counties in three payments, the first of which is expected in April.

MOTION BY CHRISTIAN MARCUS TO APPROVE THE NORTHERN MICHIGAN REGIONAL ENTITY MONTHLY FINANCIAL REPORT FOR JANUARY 2022; SUPPORT BY MARY MAROIS.

Discussion: Mr. Kamps noted eligibility trends are up in all categories; however, revenue remains flat. Mr. Kamps also recognized that the region currently has 19 open HSW slots and a very large surplus (partly due to the pandemic and the halt in Medicaid redeterminations); he is fearful that the actuary will reduce rates based on unspent funds.

Voting took place on Mr. Marcus’s motion. MOTION CARRIED.

Operations Committee Report

The draft minutes from March 15, 2022 were included in the materials for the meeting on this date. A discussion of the Department’s salary and wage survey and Milliman’s Standard Cost Allocation reporting occurred. Pursuant to MSA policy 21-39, CMHSPs are required to comply with the Standard Cost Allocation methodology, which “will fulfill the detailed reporting requirement for providers.”

PRESENTATION

Carter Kits

During its March 15th meeting, the Operations Committee recommended using surplus funds to purchase Carter Kits Sensory Bags for communities in region. Brandon Hausbeck, Carter Kits President and CEO and Justin Severs, Vice President of Operations, joined the meeting virtually. Carter Kits were designed to help first responders when they arrive at a scene with a special needs individual, particularly someone with an autism spectrum disorder. Each Sensory Bag contains a weighted blanket, sunglasses, noise reducing earmuffs, sensory toys, and non-verbal cue cards at a cost of \$80. More information can be found at [Carter Kits - Home](#).

MOTION BY MARY MAROIS TO AUTHORIZE THE NORTHERN MICHIGAN REGIONAL ENTITY TO PURCHASE UP TO TWO THOUSAND (2000) CARTER KITS SENSORY BAGS AT A TOTAL COST NOT TO EXCEED ONE HUNDRED SIXTY THOUSAND DOLLARS (\$160,000.00) INCLUDING TRAINING AND SUPPORT; SUPPORT BY ROGER FRYE. ROLL CALL VOTE.

“Yea” Votes: R. Frye, E. Ginop, R. Kamps, T. Larson, C. Marcus, M. Marois, J. Reed, R. Schmidt, K. Sherman, D. Smeltzer, D. Tanner

“Nay” Votes: Nil

Voting took place on Ms. Marois’s motion. MOTION CARRIED.

The suggestion was made that the 500 kits currently in stock be distributed during the April 27th Board meeting to coincide with Autism Acceptance month; media coverage will be arranged.

NMRE SUD Oversight Board Report

The draft minutes from March 7, 2022 were included in the materials for the meeting on this date. Liquor tax requests will be presented for approval under “New Business.”

NEW BUSINESS

Liquor Tax Requests

- 1) Drug Free Northern Michigan 21-County Alliance – Marijuana Media Campaign – All 21 Counties - \$64,500.
- 2) Emmet County Sheriff's Office – Polycom System to Support SUD Services for Emmet County Inmates – Emmet County - \$5,974.03
- 3) Bear River Health – Charlevoix Recovery House – Charlevoix County - \$133,199.
- 4) Bear River Health – Peer Recovery Coach Services – Otsego County - \$22,232.
- 5) Bear River Health – Jail Medication Assisted Treatment (MAT) Services – Otsego County - \$20,156.
- 6) Community Recovery Alliance – Recovery Support Services – Otsego County - \$16,642.

The total dollar amount requested was \$262,703.03.

MOTION BY MARY MAROIS TO APPROVE THE REQUESTS FOR LIQUOR TAX FUNDS RECOMMENDED BY THE NORTHERN MICHIGAN REGIONAL ENTITY SUBSTANCE USE DISORDER OVERSIGHT BOARD ON MARCH 7, 2022 IN THE TOTAL AMOUNT OF TWO HUNDRED SIXTY-TWO THOUSAND SEVEN HUNDRED THREE DOLLARS AND THREE CENTS (\$262,703.03); SUPPORT BY KARLA SHERMAN. ROLL CALL VOTE.

“Yea” Votes: R. Frye, E. Ginop, R. Kamps, T. Larson, C. Marcus, M. Marois, J. Reed, R. Schmidt, K. Sherman, D. Smeltzer, D. Tanner

“Nay” Votes: Nil

Voting took place on Ms. Marois’s motion. MOTION CARRIED.

MDHHS Behavioral Health Reorganization

The MDHH Behavioral Health Restructuring Presentation dated March 3, 2022 was included in the materials for the meeting on this date.

- The Division of Chronic Disease was created (Linda Scarpetta), which includes SUD Prevention; the Office of Recovery Oriented Systems of Care was dissolved.
- The Bureau of Children’s Services was formed (Lindsay McLaughlin) partially in response to the KB lawsuit and to put more focus on children services.
- Farrah Hanley was named Chief Deputy of Health, overseeing Behavioral and Physical Health and Aging Services (Kate Massey) and the State Hospital Administration (Dr. George Mellos).
- The Bureau of Community-Based Services (Jeff Wieferich) is a pared down version of the former Behavioral Health and Developmental Disabilities Administration containing four divisions:
 - 1) Adult Home and Community Based Services (Belinda Hawks)
 - 2) Division of Contracts and Quality Management (Jackie Sproat)
 - 3) Behavioral Health Customer Services Section (Kendra Brinkley)
 - 4) Service Delivery Transformation Section (Vacant) will include Health Home and Certified Community Behavioral Health Clinics (CCBHC).

Mr. Kamps expressed great pride in the fact that PIHP Regions 1 and 2 (NorthCare Network and NMRE) are engaged in both the Behavioral and Opioid Health Homes; since FY21, enrollment has increased by 368%.

NMRE Nominating Committee

The Election of Board Officers will occur during the May 25th meeting. A nominating committee was formed to consist of: Roger Frye, Randy Kamps, Christian Marcus, Jay O'Farrell, and Don Smeltzer. A Nominating Committee meeting will occur via Teams prior to the May Board meeting.

OLD BUSINESS

Senate Bills 597 & 598/House Bills 4925 – 4929 – The Latest

Included in the materials for the meeting on this date were:

- 1) A Press Release from CMHAM titled “New Poll Finds Two out of Three Likely Michigan Voters and More Than 100 Michigan-Based Groups Prefer Public-led Mental Health System” dated February 21, 2022.
- 2) Document from CMHAM titled “A New Day for Behavioral Health in Michigan: Roles of the Key Partners”
- 3) Document from the Michigan Association of Health Plans titled “Locals are Fearful of Competition & Choice”.

A discussion about a rural exception occurred. Mr. Kurtz clarified that the rural exemption is a law put in place to allow states to exempt rural areas from multiple Health Plans as competition for services is basically limited to current providers. Mr. Kurtz has learned that in the development of both the Senate and House bills consideration was given to allow for a rural exceptions but have not made it in either bills.

It was noted that Rep. Whiteford will be attending the Northern Counties Association meeting on April 18th.

COMMENTS

Board

- Mr. Tanner encouraged attendees to think about Ukrainians.
- Mr. Reed apologized for being late to the meeting. He reminded the Board that after two years of COVID isolation, re-engaging has been difficult for some individuals.

MEETING DATES

The next meeting of the NMRE Board of Directors was scheduled for 10:00AM on April 27, 2022.

ADJOURN

Let the record show that Mr. Tanner adjourned the meeting at 11:55AM.

**CEO Response to March 17, 2022 Board Monitoring Report Evaluation
April 21, 2022**

Policy 1.0 – Consumer and Community Ends – Internal Inspection - CEO

Nine (9) out of the twelve (12) board members who attended the meeting completed the report.

Question 1 - Was this report submitted when due? – 9 Yes

Question 2 - Did the report lay out the CEO's interpretation of the request? – 9 Yes

Question 3 - Was I convinced that the interpretation is justified and reasonable? - 9 Yes

Question 4 - Did the interpretation address all aspects of the subject? - 8 Yes , 1 No
Comment – It doesn't address our current disconnects and what is truly at the heart of it.

Question 5 - Does the information show compliance with Board direction/policy? – 8 Yes, 1 No

Comment – Merely offering more “talk” rather than concrete solutions isn't cutting it.

Other Comment: 1) The suggestions for additional opportunities for stakeholder meetings will need suggestions on how we get people to attend.

CEO Response: 2022

I appreciate the Board's assessment that we are 89% compliant with this policy. Thank you for the comment in Question #4. I am not sure what it meant by “...current disconnects and what is truly at the heart of it.” In the CEO interpretation provided last month I noted several activities that may help improve relationships with community partners and citizens. I shared the work we were doing to meet quarterly with County Commissions interested in doing so. I also suggested having 2 public forum meetings to gain input from stakeholders. I also noted we could use 4 townhall type meetings to help build a bridge between NLCMHA and all community members and stakeholders. I welcome any other feedback and partnering with Board members to overcome the disconnect.

The second comment speaks to offering more talk rather than concrete solutions. Actions are required if we are to overcome challenges in the community. I have been action oriented in the regional Behavioral Health Summit, developing, and implementing a psychiatry residency program by partnering with MSU, Pine Rest, and Munson, and seeking a marketing campaign for staff recruitment that has been helpful with recruitment of staff over the past couple of months. I would also refer to the Annual Review Report and Agency Performance Assessment Report as they both demonstrate the actions NLCMHA completed last year. As I noted in the prior interpretation, in my humble opinion, we have work to do in this area. In addition to the actions I noted, I welcome your thoughts on the work you would like to see this coming year.

Respectfully Submitted

Joanie Blamer
Interim CEO

**ASSURANCE OF ORGANIZATIONAL PERFORMANCE
POLICY 2.8 COMMUNICATION AND SUPPORT TO THE BOARD
INTERNAL REPORT - CEO
April 21, 2022**

2.8 Communication and Support to the Board

The CEO shall not withhold information or data that the CEO knows, or in the exercise of sound business judgment should know, is necessary for the Board to make informed decisions and to carry out its obligations properly. By way of example and not by way of limitation, the CEO shall not:

- 2.8.1 Fail to submit monitoring data required by the Board in a timely, accurate and understandable fashion directly addressing provisions of Board Governance Policies being monitored.
- 2.8.2 Fail to advise the Board of anticipated adverse media coverage, threatened or pending lawsuits, material changes in federal and state laws or regulation, material changes in the terms of MDHHS and NLCMHA provider contracts and material changes in assumptions upon which existing Board Governance Policies are predicated.
- 2.8.3 Fail to advise the Board if, in the opinion of the CEO or the Compliance Officer, the Board is not in compliance with Board Governance Policies or is in violation of laws and regulations applicable to the governing body of a governmental entity constituted as an Authority under the Michigan Mental Health Code.
- 2.8.4 Fail to advise the Board if, in the opinion of the CEO, the Authority is or may become noncompliant with a Board Governance Policy.
- 2.8.5 Fail to advise the Board if, in the opinion of the CEO or the Compliance Officer, a compliance violation has been substantiated and the violation, if and when disclosed to regulators or law enforcement, may subject the Authority to criminal, civil or administrative liability or sanction.
- 2.8.6 Fail to advise the Board Chairperson if one or more members of the Board engages in conduct that is or may be detrimental to the working relationship of the Board and the CEO.
- 2.8.7 Fail to present information and data to the Board in clear and concise format that identifies the relevance of the information to discrete Board obligations such as monitoring and decision preparation.
- 2.8.8 Fail to deal with the Board as a single unified whole by communicating with individual Board members outside of established formal channels. [A request by an individual Board member to the CEO for facts or data is not subject to this prohibition.].
- 2.8.9 Fail to provide a mechanism for official Board, officer or committee communications.
- 2.8.10 Fail to supply for the consent agenda all items delegated to the CEO that are subject to Board Approval.
- 2.8.11 Failure to maintain official minutes of Board committees and meetings.

CEO Interpretation - 2022

The monitoring of Board Policy follows the Governance Policy Monitoring Schedule. There is a plethora of information to review and analyze, including monitoring data, media coverage, lawsuits, rules and regulations, and federal and state laws. I work diligently to provide updates to assist the Board in making informed decisions and properly carry out its obligations.

Information and data are submitted in a variety of forms. Some monthly monitoring reports contains data points. Financial Statements are presented each month for the Board. Our formal financial audit findings are provided in April of each year. Clinical, operational, and administrative information is provided in my CEO report each month. Additionally, the FY 2021 Annual Review Report was provided in January 2022, and the Agency Performance Assessment for 2021 was provided in February 2022.

Each month I share any media coverage that I am aware of with the Board via email and in my monthly report. I have made Board members aware of pending lawsuits and significant compliance concerns. NLCMHA continues to use an anonymous compliance hotline and I work closely with our Director of Quality and Compliance to ensure we remain in compliance with Board Governance Policies and do not violate laws and regulations applicable to our governing of a governmental entity. I am not aware of any violations or non-compliance by the Board regarding laws or regulations pertaining to Mental Health Authorities. Thus far this year we have not experienced any material changes in the terms of MDHHS and NLCMHA provider contracts.

In the last 6 weeks I received questions or concerns from Board Members regarding compliance with Board Governing Policy, Robert's Rules of Order, and the Open Meetings Act. I have sent the questions and concerns to our attorney for assessment and clarification to ensure we have not and do not violate the laws, rules, and/or regulations.

As you may recall, Kari Barker, Director of Quality and Compliance did report a significant concern to you in the fall of 2021, which resulted in a retraction of dollars.

I appreciate the Board's willingness to work with myself and staff in meeting the requirements of this policy. For example, Board Members have assisted Executive Team Members in presenting data and/or training in their respective areas of work. In the last six weeks Board members have met with the Interim CEO to share community information and feedback on what the concerns are and their vision in moving forward. The information gathered will be used to create a grid of potential action steps for the Board to consider as a whole, and then prioritize the activity to speak with one voice moving forward.

I appreciate any receiving any suggestions from the Board to improve my compliance in meeting expectations.

Respectfully Submitted,

Joanie Blamer
Interim CEO

Board Policy being monitored

2.8 Communications & Support to the Board

April 21, 2022

1. Was this report submitted when due?
Yes No (requires comment)

Comment:

2. Did the report lay out the CEO's interpretation of the request?
Yes No (requires comment)

Comment:

3. Was I convinced that the interpretation is justified and reasonable?
Yes No (requires comment)

Comment:

4. Did the interpretation address all aspects of the subject?
Yes No (requires comment)

Comment:

5. Does the information show compliance with board direction/policy?
Yes No (requires comment)

Comment:

6. Other Comment: _____

**CEO Response to March 17, 2022 Board Means Self-Assessment
Board Monitoring Report Evaluation
April 21, 2022**

Policy 3.3 - Board Member Code of Conduct - Direct Inspection

Nine (9) out of the twelve (12) Board Members who attended the meeting completed the report.

For Question One: Do you believe we are in strict compliance with the policy as stated for each provision? – 6 Yes, 1 No, 1 both yes and no, 1 ?

For Question Two: If you indicated that the Board is not in full compliance with the policy as stated, please indicate what areas and what you notice that gives evidence that we are not in compliance? –
1) Accusations from the public about OMA violations 3.3.3.1 – Marois ethics complaint 3.3.4 – Marois – EEOC complaint
2) 3.6.8 Chair does not interfere with hiring/firing CEO

For Question Three: How do you think we could improve our process to be in full compliance? – 1) Review the rules and clearly understand the rules by/through we must conduct ourselves
2) Follow Board rules.

For Question Four: What do we need to learn or discuss in order to live by this policy more completely? – 1) That what we do is not about us individually but rather us as a whole.
2) How does Grand Traverse Commissioners talk of pulling out of NLCMH play into this?
3) Stop chirping – go the proper route.

For Question Five: Does this policy remain in compliance with the Policy Governance model in annual terms of content and format? - 9
Yes

CEO Response: 2022

The Board's direct inspection assessment indicates that we are in 89% compliance with this policy. Response 1 to "Question Two" speaks to an accusation from the public about violations of the Open Meetings Act (OMA). There is no evidence of these accusations to support a violation of the OMA has occurred. This comment also references section 3.3.1 of the Board Governance policies, which states "Members' interaction with the Chief Executive Officer or with staff must recognize the lack of authority vested in individuals except when explicitly board authorized." I am not aware if any Board Members acting with Board Authority when interacting with staff or the Chief Executive Officer. Lastly, section 3.3.4 is referenced in relation to an anonymous ethics complaint filed through the Agency's Ethics Hotline. The complaint did not involve consumers and was turned over to the Board Chair

for follow-up. The Board Chair did follow Board Governance Policy section 3.3.6 and the matter was resolved.

The second comment to “Question Two” speaks to section 3.6.8 to the role of the Board Chair in the hiring and firing of the Chief Executive Officer. This question was raised following the March 2022 Board meeting and legal clarification was obtained. The legal clarification noted the Board Chair did not interfere with the hiring of the CEO.

Comments to “Question Three” revolve around knowing the policies which govern Board actions and follow them. The discussion surrounding a Board Retreat at the March 17, 2022 addressed governing policy. I believe the plan to review the Michigan Mental Health Code, Administrative Rules, the Open Meetings Act and various governance policy models will be beneficial as the Board commits to living with the model chosen.

“Question 4” also had comments relating to following the Governance Policies would be helpful as we live by the Carver Model of Governance. These comments included going the proper route and to remember the importance of thinking as whole Board vs. individuals. I believe the Board Retreat will help in this area as well. The final comment to review is a question asking how does Grand Traverse Commissioners talk of pulling out of NLCMHA play into this? This particular policy is reviewing Board Member Conduct and if the Board has loyalty to the ownership that is unconflicted by loyalties to staff, other organizations, and any personal interest as a consumer it will remain in compliance with this policy

Respectfully Submitted,

Joanie Blamer
Interim CEO

**CEO Response to March 17, 2022 Board Means Monitoring Report Evaluation
April 21, 2022**

Policy 3.6 - Board Chair Functions - Direct Inspection

Nine (9) of the twelve (12) Board Members who attended the meeting completed the report.

Question One (Do you believe we are in strict compliance with the policy as stated for each provision?) 8 Yes, 1 No So far

Question Two (If you indicated that the Board is not in full compliance with the policy as stated, please indicate what areas and what you notice that gives evidence that we are not in compliance?) – 1) 3.6.8 Cannot interfere with CEO hiring/firing process
2) I am not sure the vote to remove Joanie is within the role if the Agenda stands as she was approved in a valid vote

Question Three (How do you think we could improve our process to be in full compliance?) – None.

Question Four (What do we need to learn or discuss in order to live by this policy more completely?) – None.

Question Five (Does this policy remain in compliance with the Policy Governance model in annual terms of content and format?) – 9 Yes

Other Comment – 3.6.8 – To preclude Board consideration of a decision to employ or terminate a CEO

CEO Response: 2022

The Board's direct inspection assessment indicates that we are in 89% compliance with this policy. In response to the comments, questions about Governance Policy 3.6.8 and the motion to rescind the offer to the Interim CEO arose after the March 17, 2022, Board meeting, and legal clarification was obtained. The legal clarification noted the Board Chair did not interfere with the hiring of the CEO as Board consideration of a decision to employ the CEO was allowed and did occur.

Respectfully Submitted

Joanie Blamer
Interim CEO

BOARD MEANS SELF-ASSESSMENT
SUMMARY OF BOARD COMPLIANCE MONITORING EVALUATION
3.7 GOVERNANCE COMMITTEES – DIRECT INSPECTION – BOARD
April 21, 2022

3.7 Governance Committees

This Policy shall not apply to committees appointed by the CEO.

Subject to Board bylaws, the Chair of the Board shall have exclusive authority to determine the size, membership, duration, authority and jurisdiction and charge of all Board committees, all of which information shall be recorded in Board minutes. No Board committee shall have or exercise authority or jurisdiction exceeding that granted at the time of its creation without further action by the Chair of the Board, and no Board committee may exercise authority or jurisdiction inconsistent with Board Governance Policies.

Standing Committees. The Board shall have only those standing committees established herein. The membership and chair shall serve at the pleasure of the Board Chair. Membership on standing committees, other than the Recipient Rights Advisory Committee, or other Board created advisory committees, is limited to members of the Board.

Committee of the Whole. The Committee of the Whole is charged with:

- 3.7.1 Receipt and consideration of monitoring reports and data;
- 3.7.2 Consideration of the need for new or amended Governance Policies and formulating substantive recommendations to the Board concerning same;
- 3.7.3 Formulation of recommendations to the Board Chair for items to be included on the Board Consent Agenda;
- 3.7.4 Hosting joint activities with the governing bodies of other public and private entities;
- 3.7.5 Provision of a forum for the presentation of the views and concerns of stakeholders in the mental health system;
- 3.7.6 Provision of a forum for Board development programs not included as part of the Annual Work Plan; and
- 3.7.7 Provision of a forum for the consideration of legislative, political, and regulatory changes on the delivery of mental health services
- 3.7.8 The Committee of the Whole shall serve as the CEO Compensation Committee.

Nominating & Leadership Development Committee. The Nominating and Leadership Development Committee is charged with:

- 3.7.9 Assisting the counties as needed in identifying potential board members. Screening shall be completed not later than 60 days before the terms opens up;
- 3.7.10 Planning Board training and education; and
- 3.7.11 Assuring ongoing orientation regarding the Board Governance Policies.

Recipient Rights Advisory Committee. The Board shall appoint a Recipient Rights Advisory Committee, which shall have and exercise those powers granted to such committees by the Michigan Mental Health Code. The Recipient Rights Advisory Committee shall hold its meetings in accordance with the Michigan Open Meetings Act. See also Policy 3.7A Recipient Rights Advisory Committee.

Recipient Rights Appeals Committee. The Board designates the Recipient Rights Advisory Committee as the Recipient Rights Appeals Committee, which shall have and exercise those powers granted to such committees by the Michigan Mental Health Code. Recipient Rights Appeals Committee meetings are confidential, privileged, and separate from the Recipient Rights Advisory Committee and are not subject to the Michigan Open Meetings Act. See also 3.7B Recipient Rights Appeals Committee.

Audit Committee. The Audit Committee is charged with:

- 3.7.12 Presenting a selection of at least two independent outside auditors at least once every five years. Ensure that lead auditor Rotation will occur if the present auditor is one of the firms selected.
- 3.7.13 Receiving and reviewing copies of the annual Management Representation Letter(s).
- 3.7.14 Ensuring that results of the Annual Audit and Management Letter are reviewed with the Independent Auditor by the Committee of the Whole.
- 3.7.15 Ensuring that the scope of an outside audit is sufficient to meet the legal obligations of the Authority and the responsibilities of the Board with respect to CMHSP financial matters; and
- 3.7.16 Ensuring that outside audits are conducted in a timely manner;

Ad Hoc committees shall be appointed only to the extent and only for so long as necessary to assist the Board in carrying out its governance responsibilities.

The Board Chair may from time to time appoint ad hoc committees. Membership in an ad hoc committee is not limited to members of the Board. Where the membership of an ad hoc committee includes individuals that are not members of the Board, the minutes of the committee shall separately show the votes of each committee member.

A Board ad hoc committee whose work product includes recommendations later adopted in whole or in part by the Board shall not thereafter be charged with monitoring the recommendations as adopted and implemented.

BOARD MEANS SELF-ASSESSMENT
Board Means Policy Being Monitored:

3.7 Governance Committees

April 21, 2022

Review all sections of the policy listed and evaluate our compliance with policy.

1. Do you believe we are in strict compliance with the policy as stated for each provision?
Yes No (requires comment)

2. If you indicated that the Board is not in full compliance with the policy as stated, please indicate what areas and what you notice that gives evidence that we are *not* in compliance?

3. How do you think we could improve our process to be in full compliance?

4. What do we need to learn or discuss in order to live by this policy more completely?

5. Does this policy remain in compliance with the Policy Governance model in terms of content and format? Yes No (requires comment)

BOARD MEANS SELF-ASSESSMENT
SUMMARY OF BOARD COMPLIANCE MONITORING EVALUATION
3.7A RECIPIENT RIGHTS ADVISORY COMMITTEE – DIRECT INSPECTION-BOARD
APRIL 21, 2022

3.7A Recipient Rights Advisory Committee

The Recipient Rights Advisory Committee, defined by the Michigan Mental Health Code as “a committee of a community mental health program services board” (sec. 330.110c) is a committee of the Northern Lakes Community Mental Health Authority, appointed by the Board of the Authority in accordance with section 757 of the Michigan Mental Health Code. The Recipient Rights Advisory Committee shall hold its meetings in accordance with the Michigan Open Meetings Act, and shall act in accordance with the policies and by-laws of the Northern Lakes Community Mental Health Board Authority. Meetings shall be held according to the latest edition of Robert’s Rules of Order, Newly Revised. A simple majority of the members must be present to conduct a meeting. An annual list of meetings shall be presented to the Northern Lakes Community Mental Health Authority Board of Directors and be made available to individuals upon request. Northern Lakes Community Mental Health Authority Board policies and by-laws supersede Robert’s Rules of Order. A simple majority of the members must be present in person or by other visual electronic means to conduct a meeting”.

FUNCTIONS:

The Recipient Rights Advisory Committee (RRAC) is granted the authority, in accordance with sections 755, 757, and 774 of the Michigan Mental Health Code, to carry out the following functions:

- 3.7A.1 Meet at least semiannually or as necessary to carry out its responsibilities.
- 3.7A.2 Maintain a current list of members’ names to be made available to individuals upon request.
- 3.7A.3 Maintain a current list of categories represented to be made available to individuals upon request.
- 3.7A.4 Keep the NLCMH Board of Directors informed of RRAC membership needs.
- 3.7A.5 Protect the Office of Recipient Rights from pressures that could interfere with the impartial, even-handed, and thorough performance of its functions.
- 3.7A.6 Recommend candidates for Recipient Rights Director to the Chief Executive Officer, and consult with the Chief Executive Officer regarding any proposed dismissal of the Recipient Rights Director.
- 3.7A.7 Serve in an advisory capacity to the Chief Executive Officer and the Recipient Rights Director.
- 3.7A.8 Review and provide comments on the report submitted by the Chief Executive Officer to the Northern Lakes Community Mental Health Authority under section 755.
- 3.7A.9 Review the process for funding the office of recipient’s rights and make recommendations concerning resources.
- 3.7A.10 Receive education and training in recipient’s rights policies and procedures.
- 3.7A.11 As designated by the Northern Lakes Community Mental Health Authority, serve as the Appeals Committee for a recipient’s appeal under section 784.

MEMBERSHIP CRITERIA:

In accordance with section 757 of the Michigan Mental Health Code, membership of the committee shall be broadly based so as to best represent the varied perspectives of the community mental health services program's geographic area. At least 1/3 of the membership shall be primary consumers or family members, and of that 1/3, at least 1/2 shall be primary consumers.

3.7A.12 For the purpose of consistency with the Michigan Mental Health Code, RRAC shall consist of a minimum of 7 members and a maximum of 9 members as the Board determines: at least 2 of which are primary consumers (currently receiving or have previously received services provided by or under contract with Northern Lakes Community Mental Health Authority), at least 1 of which is a family member of a consumer, 2 of which are Northern Lakes Community Mental Health Authority Board members

3.7A.13 With the intent of best representing the varied perspectives of the Northern Lakes Community Mental Health Authority's geographic area, of the 5 to 7 non-board members appointed to the committee, at least: member shall reside in Wexford/Missaukee counties, one member shall reside in Grand Traverse/Leelanau counties, AND one member shall reside in Roscommon/Crawford counties.

3.7A.14 None of the members shall be employed by the Michigan Department of Health and Human Services (DHHS), Northern Lakes Community Mental Health Authority, another community mental health services program, or a provider under contract with DHHS.

APPOINTMENTS:

Board members appointed to RRAC shall be appointed for 1-year terms by the Chairperson of the Northern Lakes Community Mental Health Authority, with appointments occurring each year at the May Board meeting. The Chairperson of the Board shall appoint one of the Board members as the Chairperson of RRAC. Non-board members appointed to RRAC shall be appointed for 3-year staggering terms. Committee members may reapply for multiple terms. The appointment process for non-board members shall occur as follows:

3.7A.15 Board approved RRAC applications can be obtained at any time by verbal or written request to the NLCMH Executive Office or the Office of Recipient Rights.

3.7A.16 If there is a vacant seat on the committee, either because a member's term will/has expired or due to a member's resignation or dismissal, the Northern Lakes Community Mental Health Authority will assure, via the Chief Executive Officer, that the vacancy is advertised in a timely and public manner.

3.7A.17 All applications shall be turned in to the Executive Office. At the end of the posting period, the Executive Office shall forward all applications to the Chairperson of the Northern Lakes Community Mental Health Authority Nominating & Leadership Development Committee.

3.7A.18 At the end of the posting period, the NLD Committee shall review all applications received and interview eligible applicants in a meeting or meetings held in accordance with the Open Meetings Act. The NLD Committee will provide a recommendation of candidates to the Northern Lakes Community Mental Health Authority for consideration of appointment to RRAC. Candidates will be invited to attend the Board meeting and will be recognized by and given an opportunity to address the Board prior to the Board's decision for appointment.

MEMBER EXPECTATIONS

- 3.7A.19 Members are expected to attend all committee meetings or give notice in advance if an absence is unavoidable.
- 3.7A.20 Three consecutive absences without notice will be considered resignation.
- 3.7A.21 Members are expected to read all materials sent in advance of meetings and to be actively engaged in discussions at meetings.
- 3.7A.22 Committee members will be paid per diem and mileage reimbursement in accordance with Board policy and procedure.

BOARD MEANS SELF-ASSESSMENT
Board Means Policy Being Monitored:

3.7A Recipient Rights Advisory Committee

April 21, 2022

Review all sections of the policy listed and evaluate our compliance with policy.

1. Do you believe we are in strict compliance with the policy as stated for each provision?
Yes No (requires comment)

2. If you indicated that the Board is not in full compliance with the policy as stated, please indicate what areas and what you notice that gives evidence that we are *not* in compliance?

3. How do you think we could improve our process to be in full compliance?

4. What do we need to learn or discuss in order to live by this policy more completely?

5. Does this policy remain in compliance with the Policy Governance model in terms of content and format? Yes No (requires comment)

**BOARD MEANS SELF-ASSESSMENT
SUMMARY OF BOARD COMPLIANCE MONITORING EVALUATION
3.7B RECIPIENT RIGHTS APPEALS COMMITTEE – DIRECT INSPECTION-BOARD
APRIL 21, 2022**

3.7B Recipient Rights Appeals Committee

The Northern Lakes Community Mental Health Authority Board of Directors has designated the Recipient Rights Advisory Committee as its Recipient Rights Appeals Committee consistent with the Mental Health Code (PA 258 of 1974, MCL 330.1774). The Northern Lakes Community Mental Health Authority Office of Recipient Rights shall provide education and training in recipient rights policies and procedures to the Appeals Committee. The Appeals Committee may request consultation and technical assistance from the Michigan Department of Community Health Office of Recipient Rights. A simple majority of the members must be present in person or by other visual electronic means to conduct a meeting”.

The Recipient Rights Appeals Committee shall do all of the following:

- 3.7B.1 Review appeals in accordance with Northern Lakes Community Mental Health Authority Policy 105.106 Complaint, Investigation, and Appeal.
- 3.7B.2 Ensure that any member who has a personal or professional relationship with an individual involved in an appeal shall abstain from participating in that appeal as a member of the committee.
- 3.7B.3 Ensure that Appeals Reviews, as well as all documentation resulting from Appeals Reviews, are confidential and shall not be open to public disclosure or inspection, except as allowed by law.

BOARD MEANS SELF-ASSESSMENT
Board Means Policy Being Monitored:

3.7B Recipient Rights Appeals Committee

April 21, 2022

Review all sections of the policy listed and evaluate our compliance with policy.

1. Do you believe we are in strict compliance with the policy as stated for each provision?
Yes No (requires comment)

2. If you indicated that the Board is not in full compliance with the policy as stated, please indicate what areas and what you notice that gives evidence that we are *not* in compliance?

3. How do you think we could improve our process to be in full compliance?

4. What do we need to learn or discuss in order to live by this policy more completely?

5. Does this policy remain in compliance with the Policy Governance model in terms of content and format? Yes No (requires comment)

**Recipient Rights Advisory Committee Meeting
Minutes**

April 5, 2022

1:30 PM

1. CALL TO ORDER/ROLL CALL:

Northern Lakes Community Mental Health Authority located at 527 Cobb Street, Cadillac as well as virtual. Nicole called to order at 1:30 p.m.

Recipient Rights Advisory Committee Members Present: Nicole Miller, Rose Denny and Marleen Cassidy. Virtual - Carol Oldenburg and Armandina Zamora.

Recipient Rights Advisory Committee Members Absent: Chuck Corwin (advance notice).

Others Present: Joanie Blamer, Interim Chief Executive Officer; Brian Newcomb, Director of Recipient Rights; Deb Lavender, Executive Secretary; Lisa Jones, Recipient Rights Advisor; Ian Pegan-Naylor, Recipient Rights Advisor; Brittany Moen, Recipient Rights Advisor; Alyssa Heider, Recipient Rights Specialist.

Nicole identified that we do not have a quorum and unless Nina joins us we will not be able to take any action. Nina joined us while the meeting was in progress and we returned to areas in the agenda to include motions.

Conflict of Interest Declaration – None.

2. REVIEWED AND APPROVED AGENDA:

The agenda was included in the packet.

MOTION:	Approval of the April 5, 2022 Meeting Agenda.
RESULT:	ADOPTED [UNANIMOUS]
MOVER:	Rose Denny
SECONDER:	Nina Zamora

3. RECEIVE AND FILE DECEMBER 7, 2021 MEETING MINUTES AND FEBRUARY 1, 2022 MINUTES:

MOTION:	Receive and File December 7, 2021 and February 1, 2022 Meeting Minutes.
RESULT:	ADOPTED [UNANIMOUS]
MOVER:	Rose Denny
SECONDER:	Marleen Cassidy

4. PUBLIC COMMENT:

None.

5. RECIPIENT RIGHTS DIRECTOR’S REPORT:

Brian Newcomb provided the updated report completed for April 2022. He reviewed the historical data covering the first part of the year for the last three years. He wanted to document and show where we stand the last couple of years. Brian indicated that we are not over the 90-day mark and are at 100% compliance as of this report. However, one RIF was completed on time but was not sent for Joanie’s review within the 10 days. We are still in compliance as an office. We had NLCMHA staff 18 allegations against them and five of those being within one year of hire.

Brian indicated there was a question that came up before at one of the meetings of our substantiation rate being 42.6%. You can see the state average for the state is 42.6% and our average is 43% this year. In FY 2019 we were at a substantiation rate of 51% so the number was a little bit higher what our numbers are in tracking about what the state is currently tracking.

We are at a 70-day completion rate. At the start of the fiscal year, he set a goal of 60-days to have our reports completed. We are just over that. We are between 60 to 70 days. The advisors have been doing a really good job completing those early and that has been a collaborative effort on their part. He wanted to recognize all of them since they are all here today.

Brian reported that we continue to work closely with one provider. It came out in a bulletin from one of their staff members that they were implementing a restriction and limitation on property for some of their recipients. Brian sent them the language as to how he understood the law and requested that they stop that practice. They refuted that. He went to the state, and they agreed with him that was correct so he reiterated that to the provider that they had to change their policy to not limit the recipients on what they were asking them to do. The state said they were going to look into this further because they also have residents at that provider. We are waiting for the provider to change their policy and send him the new updated policy. He wanted the RRAC to know that has come up as a concern and we’ve worked closely with the state and this provider to change that.

6. REQUIRED PROTECTIONS OF THE ORR:

Nicole asked if there were any required protections of the ORR and Brian stated no.

MOTION:	The RRAC has counseled with the Director of the ORR and there is no need for additional protections for the Office at this time.
RESULT:	ADOPTED [UNANIMOUS]
MOVER:	Rose Denny
SECONDER:	Marleen Cassidy

7. REVIEW RRAC SELF-EVALUATIONS:

Nicole referenced the response to the individual self-evaluation of which there were two responses turned in. Joanie referenced the comment about becoming more familiar with the Mental Health Code. She asked as an agency what can we do to help with that? Nicole identified that previously in our orientation manual we had a physical copy of the Mental Health Code section that applies to recipient rights. Confirmation that RRAC members received. It was identified that there is nothing on-line that contains recipient rights. Joanie indicated that she has been working on for the full Board because they had questions. She has the Administrative Rules and each Chapters of the Mental Health Code downloaded in a PDF format. She indicated that she is happy to forward to RRAC members. There was discussion as

to whether the information would be available on the Board's iPads. Alyssa identified that she updated the orientation manual last year. Joanie asked her to forward the manual to Deb electronically. Deb suggested that we add to the Agenda Plan for education for RRAC members. Joanie identified she asked Brian to have Raymie Postema provide a Recipient Rights training at the May 19 meeting. Deb suggested that this be added to the Committee of the Whole meeting. Nicole suggested that we review Chapter seven and the Administrative Rules. She noted that the RRAC reviews the policies as it pertains to the Administrative Rules and the Mental Health Code.

Nicole referenced the self-evaluation of which there were two responses turned in. She referenced the areas that were marked as fair and asked for ideas about the fair rating. Nicole identified that we want to ensure that everyone understands the process and that reviewing the Mental Health Code that activities of the committee are understood.

Nicole referenced the ORR Annual Evaluation of the RRAC. There are four who responded as either excellent or satisfactory to the questions with a lot of comments.

8. SITE REVIEW PROCESS AND GUIDELINES:

Brian introduced Alyssa Heider who completes the bulk of the site reviews and paperwork and will be doing the presentation. Alyssa shared the timeline of the process, the site visit monitoring form, site review result letters, what a corrective action plan/remedial action may look like, and fun facts.

9. PUBLIC COMMENT:

None.

10. MEETING AGENDA – JUNE 7, 2022:

The June 7 meeting is scheduled for Cadillac and noted the items for the agenda and will be meeting until further notice in Cadillac. Agenda Items - Recipient Rights Refresher Training and ORR Policies. We will also be looking at the Administrative Rules and Chapter 7 of the MH Code.

11. MEETING EVALUATION:

Comments – Nina noted that this is her first meeting and Nicole noted she was glad to have her back.

12. OTHER/ADJOURN:

None.

Adjourned at 2:07 p.m.

Respectfully Submitted,

Deb Lavender
Executive Secretary

dsl 4/8/2022