

**Committee of the Whole Meeting  
Minutes**

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**December 15, 2022**

**12:30 PM**

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The Gateway Center Microsoft Teams Meeting (Virtual) Called to order at

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

**Board Members Present:** Tony Lentych, Dan Dekorse, Penny Morris, Ben Townsend, Rose Denny, Barb Selesky, Al Cambridge, Greg McMorrow, Mary Marois, Tom Bratton, Kate Dahlstrom, Sherry Powers, Ty Wessell

**Absent:** Lynn Pope

**Virtual:** Pam Babcock, Angela Griffis

**Others Present:** Brian Martinus, Interim Chief Executive Officer; Joanie Blamer, Chief Population Officer for Mental Health Services; Lauri Fischer, Chief Financial Officer; Tracy Andrews, Director of Integrated and Managed Health Services; Heather Sleight, Administrative Specialist; Deb Lavender, Executive Secretary; Stacy Maiville, Executive Secretary; Jeremiah Williams, Information Technology Supervisor; Matt Leiter, Director of Human Resources; Brian Newcomb, Recipient Rights Director; Dave Simpson, Residential Services Administrator; Kari Barker, QI Compliance Director;

**Virtual** –Ann Ketchum, Programmer Analyst II; Jessica Williams, Performance Improvement Specialist; Aimee Horton Johnson, Office Administrator; Brie Molaison, Customer Service Specialist; Dean Baldwin, Network Administrator; Kellee Hoag, Administrative Specialist – Finance; Michelle Dosch, Compliance Secretary; Chris Biggar, Finance Manager; Curtis Cummins, Medical Director

**1. Public Comment:**  
No public comment

**2. Update on Recipient Rights:** Brian Newcomb –. From 10/1 to present, complaints have slowed down. FY 22 investigations wrapping up with only 14 to be completed. NLCMHA will finish FY 22 at 100% time frame compliance. Currently hiring for an upcoming opening. Triennial review Corrective Action Plan has been submitted for approval. FY 23 site visits are going well. The agency has moved to all digital tracking.

There was Discussion as to why there is so much turnover in Recipients Rights and what would keep people in the positions. No complaints about pay or benefits. Different things contribute to why people leave these positions – personal needs/reasons, burnout factor, among others. No concerns as a supervisor as it appears to be the natural flow of things.

Once the Corrective Action Plan is approved by the state, it can be distributed.

**3. Discussion with Attorney:** Questions regarding email communications between board members/CEO as well as board members/board members. There is currently no email policy in place for the board. **Answer:** typically, with governmental entities, it revolves around what is acceptable and what is not. You can't send anything that contains inappropriate, harassing, bullying, or threatening content. Basic rule is that as board members, you cannot engage in any conduct that leads to any deliberation on any matter that is currently

before the board or is going to be brought before the board. Deliberation (as defined by the OMA) is discussion or debate that leads to a decision. You can send/forward an email to other board members strictly for the purpose of making them aware of an issue/complaint, but board members are NOT allowed to communicate back and forth about actions that the board should take regarding the issue/complaint. If you send out an email to all board members stating that you want to change a policy and you ask for recommendations, the recommendations received must be discussed in a meeting. It is okay to send an email to solicit input on an issue, you just cannot discuss the issue amongst board members via email. Also, emails sent for informational purposes only, such as updates on a particular issue are acceptable. The board should not use private email addresses to communicate for board related issues as anything communicated becomes a public document. A separate email account should be set up to use strictly for board related communications. It was also recommended to have a policy in place that regulates Board emails.

4. **Presentation: –Compliance, Quality, and Customer Service:** Kari Barker – In April, the NRME delegated the Exclusionary Reporting to the CMHSPs. Professional Credentialing was moved from HR to our team. Anything that was behind is now up to date as of two weeks ago. We are now credentialing in real time. 100% of appeals were resolved within 30 days and 100% of inquiries were resolved within 1 day. We are gearing up for review season - February is our annual NMRE review, the waiver review will be in April and CMH recertification submission at the end of summer. There was discussion about the consumer objectives not being met and why. There was additional discussion about the patient portal, the information it offers to consumers and whether or not it is a compliance issue. Kari will look into this.
5. **Board Member Terms:** For those board members whose terms expire in March of 2023. NLCMHA needs to know by January the intentions of those board members. If you are one of those six, please let the Executive Secretary know so she can reach out to the prospective counties if necessary.
6. **Recipient Rights Limitations:** Brian Newcomb – Freedom of Movement/Limitation – The freedom of movement for a recipient shall not be restricted more than is necessary to provide mental health services to prevent injury to the individual or others.

Services Suited to Condition – the appropriate treatment or support for the recipient's unique condition by which the recipient is legally entitled. Services are provided in compliance with any/all standards of care required by law, rules, policies, procedures, written guidelines, written directives, and/or the recipient's IPOS.

Freedom of expression in residential settings includes communication by phone, mail and in person. They shall have access to newspaper, magazines, music, internet, etc. Communication shall be private, unimpeded, uncensored, and accessible. Limits on times and places for phone and visits are allowed only if they are reasonable, in writing and posted. Additional restrictions are allowed only if they are authorized in the plan of services. A limit can never be placed on legal inquiries, including ORR.

Freedom of movement may not be restricted unless it is necessary to prevent injury to the recipient or others. Absolutely no mechanical or chemical restraint is allowed. Physical management may be used but only after positive approaches have failed. Only approved techniques may be used and in the least restrictive manner. Seclusion – placing or requiring a recipient to stay in a room alone and preventing egress by any means is also prohibited. Time out is voluntary.

Property and financial rights – recipients have the right to us, possess and access all personal property including money. Certain types of property such as weapons, illegal drugs, alcohol, and undeclared medications may be prohibited by a facility, but it must be posted in writing. Other restrictions are allowed only if authorized in the IPOS. Search and seizure of a recipient's personal property is allowed only with reasonable cause to suspect, a witness present, resident given the choice to be present, receipt given to recipient and the search must be documented in the recipient's record.

Privacy – Recipient must have “personal” space, no intrusive interventions unless stated in their IPOS. There must be ample space for each recipient in the home, no overcrowding. Must use a knock before entering approach. Recipient’s information must be kept confidential.

BTRC – Behavior Treatment Review Committee review and approve/disapprove the plans that include intrusive interventions or interventions that restrict or limit the recipient’s rights. This is in accordance with Administrative Rule 330.7199(2)(g). The plans must receive special consent of the recipient’s legally empowered representative prior to implementation. It is required that plans utilizing intrusive or restrictive interventions be developed as a formal behavior treatment plan. All approved plans are reviewed on a quarterly basis to ensure a continued need for the approved procedures.

**7. Letter to NLCMHA from the six counties:** The NLCMHA board received a letter from the Chairs of the Board of Commissioners requesting that the board hold off on the CEO search until the Enabling Agreement is complete. It is expected that the Enabling Agreement will be complete and ratified in April. This was placed on the BOD agenda for today’s meeting for discussion/vote.

**8. Agenda Planning:**  
Next meeting is January 19<sup>th</sup>, 2023, at Northern Lakes Community Mental Health, 527 Cobb Street, Cadillac, MI 49601

**9. Meeting Evaluations/Comments:**  
#1 – We spent our time on the most important governance topics – good  
#2 – We encouraged diversity of viewpoints – good  
#3 – Our decisions were made collectively – good  
#4 – The Board used it’s time effectively – good  
#5 – What is the most important thing the Board could do to improve our function as a Board?

**10. Other/Adjourn:**  
  
Meeting adjourned at 2:15 p.m.  
  
Respectfully Submitted,  
  
Heather Sleight,  
  
Administrative Specialist