



**Northern Lakes
Community Mental
Health Authority**

**Board of Directors
Packet**

July 20, 2023



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

BOARD AGENDA

The Northern Lakes Community Mental Health Authority Board will meet on July 20, 2023 at 2:15 p.m. NLCMHA Grayling Office- 204 Meadows Drive, Grayling
Virtual: 1-810-258-9588 ID: 986 665 315#

<u>TIME</u>	<u>ID #</u>	<u>ITEMS</u>	<u>POLICY #</u>
2:15 p.m.		Roll Call Confirmation of Quorum Pledge of Allegiance Appoint Timekeeper Consideration of Agenda Conflict of Interest Declaration	
2:20 p.m.		Consent Agenda - Board Consideration of Board Consent Agenda* 1 Board of Directors Minutes – June 15, 2023 2 Committee of the Whole Minutes – June 15, 2023	
2:30 p.m.		Ownership Linkage A. Citizen Comment (May be limited to three minutes by Board Chairperson) B. Ownership Communication	1.1, 3.1
2:35 p.m.	3	Chief Executive Officer’s Report - Interim Chief Executive Officer, Brian Martinus	
2:45 p.m.	4	Chief Financial Officer’s Report - Chief Financial Officer, Lauri Fischer	
3:05 p.m.		Northern Michigan Regional Entity Report NMRE Minutes - (Unavailable) & Update	3.4
3:15 p.m.		Assurance of Organizational Performance A. Receipt of CEO Monitoring Reports CEO Response to Monitoring Reports: 5 - 2.7 Continuity of Executive Functions (Internal Inspection) * B. New Operational Worries C. July Monitoring Assignment: 6 - 2.4 Financial Management (Internal Inspection) D. NLCMHA Fiduciary for Grand Traverse Center for Mental Wellness* E. Employee Retention Payment*	3.0, 3.2
3:25 p.m.		Board Means Self-Assessment A. Receipt of Board Monitoring Report CEO Response to Monitoring Report:	3.2, 4.2

- 7 - 4.3 Delegation of Mgt Powers to the CEO (Direct Inspection) *
July Monitoring Assignment:
- 8 - 4.1 Unity of Control (Direct Inspection)

- 3:35 p.m. **Governance Policies Discussion and Assessment** 3.1
 - A. Ends

 - B. Executive Limitations

 - C. Governance Process/Ownership Linkage 3.4
 - a. NLD Minutes & Update:
 - 9 March 1, 2023 – Approve & File*
 - 10 April 5, 2023 – Approve & File*
 - July 6, 2023 – Draft Minutes (Desk Packet)
 - RRAC Applicants*
 - b. Ad Hoc Budget Committee Minutes & Update:
 - 11 June 1, 2023 - Approve & File*
 - July 6, 2023 – Draft Minutes (Possibly Desk Packet)
 - Ad Hoc Budget Committee Chair, AI Cambridge
 - D. Board/CEO Linkage

- 3:45 p.m. **Ownership Linkage** 1.1, 3.1
 - A. Citizen Comment
(May be limited to three minutes by Board Chairperson)

- 3:50 p.m. **Announcements/Board Members Reports/Board Association**

- 3:55 p.m. **August 17, 2023 Agenda Planning**

- 4:00 p.m. **Meeting Evaluation/Comments/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: August 17, 2023

* Action Items, ** Action from Committee of the Whole, *** Action Other



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

Board of Directors Meeting Minutes

June 15, 2023

2:15 p.m.

Board Members Present: Penny Morris, Ben Townsend, Greg McMorrow, Mary Marois, Al Cambridge, Sherry Powers, Pam Babcock, Kate Dahlstrom, Ruth Pilon, Dean Smallegan, Tom Bratton, Carol Blake, David Freedman

Absent: Tony Lentych, Ty Wessell, Eric Ostergren - all advance notice.

Others Present: Tracy Andrews, Director of Integrated and Managed Health Services; Heather Sleight, Administrative Specialist; Stacy Maiville, Executive Secretary; Dean Baldwin, Network Administrator; Joanie Blamer, Chief Population Officer, Jeremiah Williams, Information Technology Supervisor

Virtual –Ann Ketchum, Programmer Analyst II; Kari Barker, QI Compliance Director; Curtis Cummins, Medical Director; Darryl Washington; Northern Health Care Management Director, Daniel Mauk, Chief Information Officer; Brian Newcomb, Director of Recipient Rights; Jessica Williams, Performance Improvement Specialist; Aimee Horton Johnson, Office Administrator; Amy Kotulski, Clubhouse Director

Call to Order:

The meeting was called to order at 2:15 p.m. by Ben Townsend

Timekeeper: Sherry Powers

Confirmation of a Quorum: Yes

Conflict of Interest Declaration: No

Consideration of the Agenda: Approved.

MOTION: Accept the consent agenda with the Board of Directors minutes removed.

RESULT: ADOPTED. [UNANIMOUS]

MOVER: D. Smallegan

SECONDER P. Morris

It was requested to remove the Board of Directors May minutes from the consent agenda to make the following changes:

Ms. Dahlstrom would like the minutes to read that she met with Debbie Stabenow’s Northern Michigan representative and encouraged Northern Lakes to consider CCBH certification.

Ms. Dahlstrom also requested that under the CEO report, a line is added to read:

“Ms. Dahlstrom asked about transportation, the CEO responded we do not provide transportation. Services recipients are supposed to call DHHS”.

Ms. Blake would also like the minutes to reflect that she was not absent but attended the meeting virtually.

MOTION:	Approve the May 18, 2023, Board of Directors Minutes with the requested changes.
RESULT:	ADOPTED. [UNANIMOUS]
MOVER:	C. Blake
SECONDER	K. Dahlstrom

Ownership Linkage:

A. Citizen Comment:

Samantha Garcia, resident of GT County - Commented that she would like to address that the Board is tasked under the Mental Health Code to review and evaluate the quality of the effectiveness and efficiency of the services provided by the community mental health program. Ms. Garcia commented that there that there is currently no way for recipients to bring grievances to the board while protecting the recipient’s private information.

Ms. Garcia recognized a grievance that she will be filing. She stated that she believes there has been an ongoing issue of interference with her advocacy efforts. She also stated that a recipient being left in the emergency room for days or weeks on end is not crisis stabilization nor is calling the police when the individual does not have the capacity to understand the consequences of not following the officer’s directives. She claimed that Northern Lakes will argue that this recipient has other insurance, but Northern Lakes has billed and received payments for these services. Ms. Garcia listed her expectations of services and stated that the recipient has been denied specific services. She noted that the Office of Recipient Rights requires affirmative actions.

Ms. Garcia requests that the Board consider developing a process for which grievances can be heard without requiring recipients or their allies to disclose health information in a public meeting.

The Chair commented that he will ask the CEO to investigate this.

Chief Executive Officer’s Report:

The Chairman of the Board, Ben Townsend, gave the CEO’s report which was written by Interim CEO, Brian Martinus. The Chair highlighted on:

- Grants of significant value, the Hope Network CRU.
- Next month the CEO & COO, will give an update on the CRU & CSU development.
- Staff retention pay.
- Quality & Compliance update. Ms. Barker will give an update on this next month.
- Looking to fulfill the HR vacancy.

Ms. Marois commented that she would like to see more advertisement for the Public Hearing. She also mentioned that she appreciates that the Interim CEO has listed his community meetings in the report this month and hopes that he has staff attending the community collaborative meetings.

Mr. Cambridge asked for clarification of Kari Barker’s section in the CEO Report, which she provided. Ms. Barker also clarified that her numbers do not reflect financial numbers.

There was a question of providing a report regarding ongoing legal cases to the Board. The Chair stated that he will ask the CEO to include a list of outstanding legal action in the CEO Report.

Chief Financial Officer’s Report:

The Chief Financial Officer, Lauri Fischer, gave the CFO report. Ms. Fischer commented that the agency has successfully enrolled twelve people in the habilitation support waivers. Up to 170 individuals enrolled. The CFO sang the praises of employee, Jennifer Hemmes for her hard work on these waivers.

MDHHS is in full swing of Medicaid redetermination. Ms. Fischer emphasized the importance that individuals be prepared for this.

The CFO spoke about the Medicaid spending as compared to regional funding advances. She also touched on the updates of revenue and spending; and residential/patient usage.

Northern Michigan Regional Entity Report:

The Chairman stated that the NMRE CEO, Eric Kurtz, will be at July’s meeting and will provide important updates about the contractual agreement and the CEO search.

Assurance Of Organizational Performance:

A. Receipt of Board Monitoring Report & CEO Response to Monitoring Report:

MOTION:	The Board finds the organization 75% in compliance with Policy 1.0 Consumer and Community Ends
RESULT:	ADOPTED. [UNANIMOUS]
MOVER:	S. Powers
SECONDER:	K. Dahlstrom

MOTION:	The Board finds the organization 100% in compliance with policy 2.9 Investments
RESULT:	ADOPTED. [UNANIMOUS]
MOVER:	S. Powers
SECONDER:	D. Freedman

B. New Operational Worries:

There was stated concern that there is no strategic plan for the authority and the Board.

Discussion occurred about the current governance model. Mr. Townsend suggested that this be discussed during the COW meeting in August. It was suggested by a Board member to consult Oakland County as to how they made their transition from one governance model to another.

Concern for the safety of the mobile crisis team was discussed. The Chairman of the Board would like Mr. Martinus to follow-up and address this matter.

C. June Monitoring Assignment:

The June monitoring assignment, 2.7 Continuity of Executive Functions was given to the Board for members to complete.

Board Means Self-Assessment:

A. Receipt of Board Monitoring Report & CEO Response to Monitoring Report:

MOTION:	The Board finds the organization 87% in compliance with policy 3.8 Cost of Governance – Policy (Direct Inspection)
RESULT:	ADOPTED. [UNANIMOUS]
MOVER:	M. Marois
SECONDER	S. Powers

MOTION:	The Board finds the organization 100% in compliance with policy 3.8 Cost of Governance – Budget (Internal inspection)
RESULT:	ADOPTED. [UNANIMOUS]
MOVER:	M. Marois
SECONDER	K. Dahlstrom

B. June Monitoring Assignment:

The Board was given 4.3 Delegation of Mgt Powers to the CEO for their June monitoring assignment.

Governance Policies Discussion and Assessment:

A. Ends:

Ms. Dahlstrom said a goal she would have, is to provide transportation to consumers or if the agency is unable to do that, then they are referred to DHHS for their transportation needs.

B. Executive Limitations:

Ms. Dahlstrom asked for clarification about the procedure as to how to make request of the CEO. She commented: “it appears that the CEO is only supposed to take directions from the Board as a whole, and not from an individual member”. Mr. Townsend, the Chairman of the Board responded that that is correct and part of the governance model.

Governance Process/Ownership Linkage:

The Board discussed and voted to change By-Law Article 7, section 4.

MOTION:	By-Law Article 7, section 4: Add at the end of the paragraph: “A majority of the entire membership is required to elect the Chief Executive Officer”.
RESULT:	ADOPTED. [UNANIMOUS]
Yes-	C. Blake, T. Bratton, A. Cambridge B. Townsend S. Powers, D. Smallegan, R. Pilon, P. Babcock, K. Dahlstrom, P. Morris, M. Marois, G. McMorrow, D. Freedman
No-	0
MOVER:	A. Cambridge
SECONDER	M. Marois

Board/CEO Linkage: None.

Ownership Linkage:

A. **Citizen Comment:** None.

Announcements/Board Member Reports/Board Association:

It was announced that the wife of former Board member, Herb Lemcool recently passed. Ms. Marois spoke about the great character of his wife (Barb) and expressed her admiration of her and that she will be missed deeply.

Two members commented on the recent CMHA conference and their positive experience. Ms. Dahlstrom also commented that she visited the new Hope Network CRU.

Ben reminded the Board that they can complete the Boardworks and become Board certified through their Teams portal.

Mr. Townsend reminded the Board not text during Board meetings.

Agenda Planning

July (COW):

- Update on CSU
- Update on Quality & Compliance
- Mi Choice Waiver
- Recipient Rights Semi-Annual Report

August:

- Board Education Session - Chip Johnson to educate the Board about CCBHC
- COW – Governance model discussion

Meeting Evaluation/Comments:

- #1 – We spent our time on the most important governance topics – Satisfactory
- #2 – We encouraged diversity of viewpoints – Excellent
- #3 – Our decisions were made collectively – Excellent
- #4 – The Board used it’s time effectively – Excellent

Adjournment:

The meeting adjourned at 3:30 p.m.

Respectfully Submitted,

Ben Townsend, Chairperson

Sherry Powers, Board Secretary

Stacy Maiville, Executive Secretary



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

**Committee of the Whole Meeting
Minutes**

June 15, 2023

12:30 PM

Ben Townsend called the meeting to order at 12:30

Board Members Present: Penny Morris, Ben Townsend, Greg McMorrow, Mary Marois, Al Cambridge, Sherry Powers, Pam Babcock, Kate Dahlstrom, Ruth Pilon, Dean Smallegan, Tom Bratton, Carol Blake, David Freedman

Absent: Tony Lentych, Ty Wessell, Eric Ostergren - all advance notice.

Others Present: Tracy Andrews, Director of Integrated and Managed Health Services; Heather Sleight, Administrative Specialist; Stacy Maiville, Executive Secretary; Dean Baldwin, Network Administrator; Joanie Blamer, Chief Population Officer, Jeremiah Williams, Information Technology Supervisor; Brian Newcomb, Director of Recipient Rights; Lauri Fischer, Chief Financial Officer; Darryl Washington, Northern Health Care Management Director; Amy Kotulski, Clubhouse Director; Hannah Driver, Clubhouse Director - Traverse Club House; Stacey Kaminski, Adult Operations Manager - Crisis Services; Andrew Waite - BHH Operations Manager; Josette Hoch, Peer Support Supervisor

Virtual –Nancy Stevenson, Chief Operations Officer; Ann Ketchum, Programmer Analyst II; Kari Barker, QI Compliance Director; Curtis Cummins, Medical Director; Jessica Williams, Performance Improvement Specialist; Aimee Horton Johnson, Office Administrator; Lisa Jones, Recipient Rights Advisor; Terri Henderson, Service Information Specialist; Treasa Cooper, Reimbursement Coordinator

Public Comment:

Judy Barrett – Parent of a consumer. Shared a recent encounter at the Crisis Welcoming Center and she was very pleased with the services received. Ms. Barrett also stated that there were issues with the mobile crisis unit. Ms. Bennett’s concern is that the person who arrived on the scene was a young female and was alone; she feels that this is a work in progress and the process could be safer.

Office of Recipient Rights Director’s Report –

Recipient’s Rights has received 267 complaints so far for FY 2023, with 227 of them having been completed. The agency continues to remain 100% compliant with closing reports within the required 90-day time frame. Advisors are doing a great job. 13 site inspections left for the season – we are way ahead of the game in that regard. Mr. Newcomb reviewed the breakdown of complaints by population as well as source of complaint. Mr. Newcomb spoke about the Rights conference coming up in September in Thompsonville.

Clubhouse/Drop-In Center Presentation –

Gayle Bottoms, member of Club Cadillac spoke about her history and life experience. Ms. Bottoms explained how she came to be a member of Club Cadillac and how Club has benefited her.

Ms. Driver spoke about what a clubhouse is, what it is not, and the many ways it helps our consumers by focusing on strengths and talents as well as who the member is rather than on the diagnosis. There are several

long-time members (25-30 years) at both Club Cadillac and Traverse House. Ms. Bottoms talked about what a day looks like for club members, Club schedule and hours. Ms. Driver talked about the Traverse House employment numbers for June and states that they are currently developing new employment partnerships for Traverse House. Ms. Kotulski also spoke about employment numbers for Club Cadillac stating that they currently have 26 members employed with one being totally self-sufficient, and 2 drivers which work closely with Northern lakes Community Mental Health. Ms. Kotulski spoke about the effect of the pandemic on transitional employment and explained that they are working to rebuild the programs. Ms. Driver and Ms. Kotulski both spoke about the many benefits that clubs offer consumers such as a supported education program which offers career development, in-house tutoring, scholarship opportunities, and GED study materials/preparation. Also discussed were the many ways that the clubs are involved in the community, including partnerships with Chamber of Commerce, Sunrise Rotary of TC, Clubhouse International, Michigan Clubhouse Coalition. Both Ms. Kotulski and Ms. Driver reviewed clubhouse statistics for the last year. Michael spoke about how long he has been a member of Traverse House and explained how club has helped him and how much he enjoys it. There was additional discussion about fundraising, how Northern Lakes can help club, who is eligible to be a member of club, and what types of volunteer work the clubs participate in.

Kandu Island Drop-In Center –

Ms. Jill Johnson, director of Kandu Island presented an overview of what her facility looks like, the services offered, and the activities and events they provide to consumers. She talked about the funding that Kandu receives, and some of the activities that this allows the members to do, specifically mentioning a recent trip to Fish Town in Leland. Ms. Johnson discussed the food pantry that Kandu Island operates, as well as some of the affiliations she has in the community. Testimony of two specific members was read by Ms. Johnson, explaining where they had come from, where they are and how the drop-in center has helped them improve their lives.

Integrated Health Clinic (IHC) Presentation –

Mr. Waite presented on the Integrated Health Clinic at Northern Lakes. He spoke about what overall wellness means, why they offer the services they do, and who is eligible. Mr. Waite then discussed in depth current statistics for the clinic such as unduplicated clinic users, the growth of the clinic from FY 2020 to present, the consumer profile (including age groups, other medical coverage, top health diagnosis, and top mental diagnosis). There was also an overview of the financial status of the clinic given for FY 2022. Mr. Waite shared future goals for the clinic which include integration of Behavioral Health Home and Opioid Health Home into the Integrated Health Clinic, expanding services to the Cadillac office, seeking additional funding sources to increase sustainability of IHC, and to manage growth to maintain quality of services as enrollment numbers increase. Mr. Waite then gave two detailed examples of consumers who have succeeded because of the IHC program/services.

CEO Voting Discussion –

This topic was deferred for discussion at the board meeting.

Budget Committee Update –

Mr. Cambridge reviewed the Direct Personnel Projected Budget as well as the Agency Budget with Board members. This information was from Ms. Fischer's presentation to the Ad Hoc Committee on June 1st. The total projected budget for the agency for FY 2024 is approximately \$39 million, with roughly \$32.6 million of that being for personnel and \$6.5 million covering other expenses such as staff development, supplies, vehicle repairs/fuel, etc.

Agenda Planning:

Next meeting is July 20, 2023, at 204 Meadows Drive, Grayling, MI

Meeting Evaluations/Comments:

#1 – We spent our time on the most important governance topics – Satisfactory

#2 – We encouraged diversity of viewpoints – Excellent

#3 – Our decisions were made collectively – Satisfactory

#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? AI would like names of speakers/presenters listed on the agenda.

Other/Adjourn:

Meeting adjourned at 2:15 p.m.

Respectfully Submitted,

Heather Sleight,

Administrative Specialist

Interim Chief Executive Officer's

Report to the Board

July 20th, 2023

Citizen Comment:

Mobile Crisis Concern - Leadership Team is looking to revise policies and procedures to ensure the safety of our employees responding to crisis calls. Safety is always our top priority for our employees.

Client Care Citizen Comment- Our Chief Operations Officer for Grand Traverse and Leelanau Counties is working with the IDD Management Team and the Case Manager to address the concerns brought forth to the Board.

Grants of Significant Value: None.

Update on Legal Issues: One outstanding legal issue dating back to August 25, 2022 (EEOC).

Update on Name change: Moving forward, I have changed the name of Executive Team to be called the Leadership Team. Leaders are not self-serving and will do what is best for the organization. I do not want the Leadership Team to be exclusive, I want them to lead the people within the organization and put the staff needs and those of our consumers above their own.

Public Hearing Update: - July 19, 2023 (verbal update)

NMRE/ Saginaw VA Co-Sponsored Training: July 25 & July 26th (see attachment for information). I encourage people to attend if possible.

Staff Update:

Congratulations to **Darryl Washington, D.Ed.**, who has been selected out of a field of hundreds of applicants to be a 2024 CQ Fellow. This is an extension of the training and certifications he has received for cultural intelligence and unconscious bias. Each fellow will learn from pioneering researchers in cultural intelligence and deepen their expertise in cultural intelligence to emerge as one of the leading thought leaders in cultural intelligence globally.

In the fellowship, Darryl will be in a Mastermind group of 5-6 individuals that will meet virtually throughout the year. He will also receive individual coaching sessions and participate in a retreat in Singapore next March.

The purpose is to: 1) learn how to translate rigorous research into relevant insights for real-world results; 2) identify the audience, context, and domain where he can have the most impact; 3) develop a plan to create a new CQ resource, such as a book, podcast, or a tool designed for our organization; and 4) gain tools for marketing his thought leadership in a way that is true to him and will expand his influence and impact.

We are very proud and excited for Darryl to be part of this elite group and look forward to his bringing back his learning to help us at NLCMHA to make changes in our own culture. As we continue to work through the suggestions and information gleaned from our organizational climate survey, we are grateful for Darryl's leadership and assistance as we strive to be a stronger organization and employer of choice.

Community Connections/Meetings:

- July 6th, NLD Meeting, 10:00-11:30 - Cadillac
- July 6th, Ad Hoc Budget Committee Meeting – 12:00-1:30
- July 10th, NMRE SUD Meeting
- July 13th, Law Enforcement Meeting
- July 18th, NMRE Operations Committee Meeting
- July 18th, MDHHS Meeting
- July 19th, NLCMHA Public Hearing – Traverse City
- July 19th, NLCMHA Public Hearing - Cadillac
- July 20th, NLCMHA Board Meeting
- July 26th, NMRE Board Meeting
- July 31st, NLCMHA All Managers Meeting - Cadillac
- August 3rd, Ad Hoc Budget Committee Meeting – 10:00-11:30
- August 3rd, RRAC Meeting – 1:30-3:30
- August 3rd - 18th, Military Training – Northern Strike – Camp Grayling
- August 5th, Wexford CO – Veterans Fair
- August 10th, Law Enforcement Meeting
- August 15th, NMRE Operations Committee Meeting
- August 17th, NLCMHA Board Meeting

NLCMHA Email Blast: In our most recent staff email blast we shared information on the following topics:

- **Staff Changes & Updates**
- **Staff Anniversaries**
- **Public Hearing Announcement**
- **Office & Townhall Meeting Information**
- **Board Of Directors Meeting Information**
- **Employee Recognition**
- **Darryl Washington's Fellowship**

Currently looking to fill the Human Resource Director vacancy: Job has been posted and applications have closed on July 17, 2023. Interviews will be set up and a hiring team will be put in place to hire our next HR Manager.

Board Request for Strategic Plan:

See attached NLCMHA Strategic Plan dated 2022-2024. This is also posted on our website under Organizational Planning.

<https://www.northernlakescmh.org/about-us/organizational-planning/>

Media Coverage: There were some articles in the last month. I am attaching a word document of that article to this report and links are included below should you want to access them yourselves:

<https://upnorthlive.com/news/local/health-community-organizations-team-up-to-expand-mental-health-services>

https://www.cadillacnews.com/news/mental-health-authority-reaches-agreement-ending-year-of-uncertainty/article_b6adde72-0929-11ee-8e2e-6f8b758993f1.html

https://www.record-eagle.com/news/local_news/counties-sign-off-on-revised-agreement-for-mental-health-services/article_3e7d2586-0936-11ee-b31f-0f63d2569bf4.html

<https://www.9and10news.com/2023/06/14/mental-wellness-center-would-bring-traverse-city-services-under-one-roof/>

NEW MENTAL HEALTH CRISIS RESIDENTIAL FACILITY EXPANDS CONTINUUM OF CARE

Hope Network and Northern Lakes CMHA partner to bring much needed help to area (Press Release, no link, see attachment)

https://upnorthlive.com/news/local/mental-wellness-center-in-the-works-in-grand-traverse-county?utm_source=sfmc&utm_medium=email&utm_id=146553&utm_guid=1cc2fcbd-1a6b-4e35-82b3-72604e58ef6a&utm_campaign=

https://www.record-eagle.com/opinion/editorials/editorial-make-enabling-agreement-start-a-new-chapter/article_a2b08bd6-0bb8-11ee-b877-537a417b4446.html

https://www.record-eagle.com/news/local_news/under-one-roof-mental-wellness-center-starts-with-5-million-arpa-request/article_e7c8c2e0-0c69-11ee-8487-9fd1ed04d277.html

<https://upnorthlive.com/news/local/for-those-struggling-with-their-mental-health-hope-is-here>

<https://stateofreform.com/featured/2023/06/michigans-ccbhcs-health-homes-helping-thousands-receive-quality-whole-person-care/>

Location Identified, \$5 Million in ARPA Funding Approved for Mental Health Center - (no web link, see attachment).

https://www.record-eagle.com/news/local_news/former-munson-behavioral-building-site-of-new-mental-health-center/article_d6317704-1045-11ee-8936-0b97d6b2cff7.html

https://www.record-eagle.com/opinion/opinion-call-to-action-for-mental-health/article_23375f02-1125-11ee-b9a4-cbe7be49eb26.html

<https://www.interlochenpublicradio.org/ipr-news/2023-06-22/various-healthcare-organizations-to-develop-a-mental-health-center-in-traverse-city>

Public Hearing Link: <https://www.northernlakescmh.org/news-room/annual-public-hearing-july-19-youre-invited/>

Respectfully submitted,
Brian Martinus, Interim CEO

The David Woods-Bartley Northern Michigan Tour

*"From Mental Hellness to
Mental Wellness"*

July 25, 2023

Huron Shores Fellowship (All Welcome)
3558 M32 W. Alpena, MI
8:30 a.m. - 10:00 a.m.

EFree Church
(Service Members, Families, and Veterans)
1649 E M32 Gaylord, MI
12:00 p.m. - 1:30 p.m.

EFree Church (All Welcome)
1649 E M32 Gaylord, MI
2:30 p.m. - 4:00 p.m.



David Bartley is known as a dynamic speaker, storyteller, and trainer. With real-life anecdotes that evoke laughter and tears, David informs and captivates audiences. Along the way, David provides insights that enable listeners to see mental illness from a different point of view; a fresh perspective that creates an opening for mental wellness for those who suffer, their family, friends, and members of the community where they live, work and fellowship.



VA



U.S. Department
of Veterans Affairs
Veterans Health
Administration
Alda E. Lutz VA Medical Center,
Saginaw, MI



The David Woods-Bartley Northern Michigan Tour

*“From Mental Hellness to
Mental Wellness”*

July 26, 2023

YMCA

(All Welcome)

3700 Silver Lake Rd. Traverse City MI

9:00 a.m. - 10:30 a.m.

Preregister: Angela.Linsenman@va.gov/989-980-8893

REIGNING LIBERTY RANCH

(Service Members, Families, and Veterans)

4656 Silver Pines rd. Traverse City, MI

11:30 a.m. - 1:00 p.m.

VFW POST 2780

(Service Members, Families, and Veterans)

3400 Veterans Drive Traverse City MI (VFW

dinner following till 7pm)

2:00 p.m. - 4:00 p.m.



David Bartley is known as a dynamic speaker, storyteller, and trainer. With real-life anecdotes that evoke laughter and tears, David informs and captivates audiences. Along the way, David provides insights that enable listeners to see mental illness from a different point of view; a fresh perspective that creates an opening for mental wellness for those who suffer, their family, friends, and members of the community where they live, work and fellowship.



VA



U.S. Department
of Veterans Affairs

Veterans Health
Administration
Aleda E. Lutz VA Medical Center,
Saginaw, MI





Strategic Plan 2022-2024

SERVING THE COUNTIES OF
CRAWFORD, GRAND TRAVERSE, LEELANAU, MISSAUKEE, ROSCOMMON AND WEXFORD

MESSAGE FROM CEO

Currently, the COVID-19 virus continues to wreak havoc with our community members' mental health and has increased the stress on the behavioral health system locally and across the nation. It was very clear that people suffered through the loss of connection with their family and friends. Further, the pandemic has brought to the forefront a growing awareness of the importance of the Social Determinants of Health. Factors such as poverty, housing, childcare, nutrition, and transportation have all negatively impacted the health and welfare of people in our communities.


It is important to understand how social determinants influence a person's mental health. Currently, Northern Lakes Community Mental Health Authority (NLCMHA) uses evidence-based practices to treat behavioral health challenges as well as to address the social determinants of health. Through integrating physical and mental health care, and addressing the social determinants at the same time, we can transform the lives of persons served. We understand that addressing the wide range of concerns takes the entire community and we view Northern Lakes as serving in a lead role to rally the community to pull together to overcome challenges in the years to come.

In addition to the challenges inherent to a pandemic, our agency and the public mental health system in Michigan are also faced with legislative challenges. While some may favor wholesale change and privatizing mental health care, we favor keeping what is working well and making permanent enhancements that will improve the system overall.

Some improvements we support include:

- providing adequate, stable funding.
- allowing rural exemptions which recognize the unique challenges of life in Northern Michigan.
- moving responsibility for people with mild to moderate mental health conditions from private arrangements to public mental health system with the necessary funding.
- advocating for the Certificate of Need of inpatient beds to be altered or eliminated so hospitals can meet the need of their local area.

In addition to the challenges mentioned above, most healthcare organizations nationally and internally are facing unprecedented staffing shortages occurring in a phenomenon known as the Great Resignation. According to the U.S. Bureau of Statistics, 4 million Americans quit their jobs in July 2021. Given this challenge and those noted above, NLCMHA has decided to focus on healthy clients, healthy staff, and healthy communities as it developed the Strategic Plan for 2022-24.



Joanie Blamer
Interim CEO

OUR VISION

Communities of informed, caring people living and working together.

OUR MISSION

To improve the overall health, wellness, and quality of life of our individuals, families, and communities that we serve.

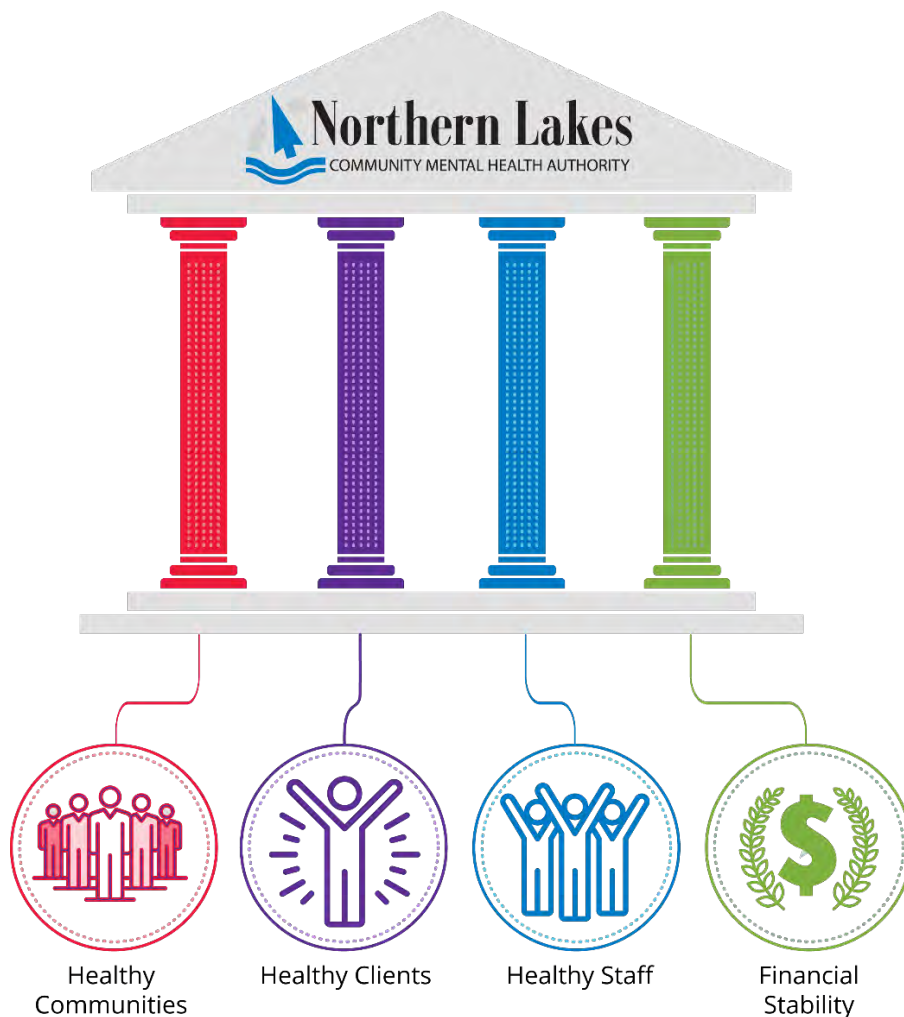
OUR VALUES

We shall carry out our responsibilities consistent with our Values:

In treating all people with compassion, dignity, and respect.

In respecting diversity and individuality.

In visionary public leadership, local decision-making, and accountability for our actions and decisions.



Goal: To demonstrate operational excellence in achieving our Vision and Mission, in accordance with our Values.

o **Objective 1: NLCMHA will improve overall health opportunities for people served (Healthy Clients) by:**

- Maximizing treatment options and ensuring coordination of holistic care of all populations across the lifespan and diagnoses including:
 - Maximizing the use of Evidence Based Practices (EBPs) for all populations (Adults with Mental Illness [MIA], Youth/Children with Serious Emotional Disturbance [SED], Individuals with Intellectual/Developmental Disabilities [I/DD], and Persons with Co-occurring Substance Use Disorders [COD]).
 - o NLCMHA will hire at least one peer to work with individuals with I/DD by 12/31/22.
 - o NLCMHA will hire at least one youth peer to work with children and adolescents with SED by 8/31/22.
 - o NLCMHA will provide Eye Movement Desensitization and Reprocessing (EMDR) services to 10% more individuals, above baseline data pulled the week of January 3, 2022, across the lifespan for Fiscal Year (FY) 22, 23 and 24.
 - o NLCMHA will increase provision of evidenced based care to 25% more individuals, above baseline data pulled the week of January 3, 2022, with co-occurring substance use disorders across the lifespan for FY 22, 23, and 24.
 - Expanding staffing capacity to maximize treatment options, including adding COD/SUD credentialing for 40% of clinicians by 8/31/24.
 - Increasing the number of Integrated Health Clinic enrollees by 25% by the end of each fiscal years, 22, 23, and 24.
 - Increasing the number of Behavioral Health Home enrollees by 25% each year, including individuals with mild to moderate behavioral health concerns, as assessed annually for FY 22, 23, and 24.
 - Expanding the growth of our Northern Health Care Management program by filling a minimum of 25% of open slots allotted per annum through 8/31/24.

o **Objective 2: NLCMHA will improve overall health opportunities for staff (Healthy Staff) by:**

- Strengthening and employing successful recruitment strategies through the recruitment advertising campaign.
 - A 10% Increase in applications received by 9/30/2022, 5% increase in FY 23 and FY 24.
 - A 10% decrease in position vacancies by 9/30/2022, 5% decrease in FY 23 and FY 24.

- Communicating the positive aspects of working for NLCMHA, by 3/31/22 in 100% of the job postings to include:
 - Employee benefits (such as health insurance, paid holidays).
 - Growth opportunities (professional development and training, mentoring).
 - Family-oriented environment.
 - Meaningful and rewarding work.
 - Servant leadership, supportive management:
 - Your voice is heard.
 - Staff are equally valued.
 - Teaching environment.
 - Exploring incentives including retention and longevity pay during the development of the annual personnel budget for FY 23 and 24.
 - Developing a new salary structure to better represent the workforce by 12/31/2022.
- **Objective 3: NLCMHA will improve overall health opportunities for community members (Healthy Communities) by:**
 - Increasing awareness and understanding about behavioral health and disability issues among citizens of the catchment area.
 - Updating the marketing, advertising, and community outreach plan of NLCMHA by 12/31/22.
 - Implementing the marketing, advertising, and community outreach plan in 2023-24.
 - Building Relationships and strengthening partnerships by including each in the NLCMHA marketing, advertising, and community outreach plan in 2023-24:
 - National (Substance Abuse and Mental Health Services Administration [SAMHSA], National Council for Mental Wellbeing).
 - State (Michigan Department of Health and Human Services [MDHHS] and legislators).
 - Regional (Northern Michigan Regional Entity [NMRE], Northern Michigan Health Innovation Region [NMCHIR], Region 7 Healthcare Coalition).
 - Local (County Commissions, Provider Network, Community Collaboratives, Systems of Care, Social Determinant Coalitions).
- **Objective 4: NLCMHA will maintain Financial Stability by:**
 - Maximizing billing opportunities, for all payor types, by teaching staff the appropriate code to use for billing and increasing the amount of third-party revenue by 25% each fiscal year for 22, 23, and 24.

- Maximizing compliance by meeting performance indicators 95% of the time; meeting quality assurance review requirements 95% of the time; and monitoring Medicaid encounter verifications on a quarterly basis, quarterly through 8/31/24.
- Seeking grant funding as necessary to enhance or expand current services, as well as support services to treat individuals with mild to moderate behavioral health conditions ongoing in FY 22, 23, and 24.

<https://upnorthlive.com/news/local/health-community-organizations-team-up-to-expand-mental-health-services>

Organizations team up to expand mental health services

GRAND TRAVERSE COUNTY, Mich. (WPBN/WGTU) -- There's a new proposal to develop a facility for mental wellness in Grand Traverse County.

Munson Healthcare, Northern Lakes Community Mental Health Authority, and a group of community partners filed a proposal with the Grand Traverse County commission Wednesday.

The proposal requests American Rescue Plan Act (ARPA) federal funding to develop the Grand Traverse Center for Mental Wellness.

Representatives from Northern Lakes Community Mental Health Authority, Munson Healthcare, Northern Michigan Regional Entity, Northwest Michigan Community Health Innovation Region (CHIR), Grand Traverse County and United Way of Northwest Michigan have been at work on the next phase of a plan to bring mental health, substance abuse disorder and crisis services to one location in Traverse City.

The community partners highlighted an uptick in suicidal and mental health-related emergency room visits or 911 calls since Covid.

In 2021 alone, more than 950 people were treated at Munson Medical Center's Emergency Department in Traverse City for a suicidal-related diagnosis.

Grand Traverse 911 took more than 800 suicidal or mental health-related calls and the Grand Traverse County Sheriff took nearly 500 separate calls that same year.

The group requested \$5 million in funding from ARPA funds to help the project's first phase, which will bring existing access and crisis services under one roof, 24-hours-a-day, seven days a week, providing a coordinated, systemic response for children, youth, and adults regardless of insurance or ability to pay.

Services would be added or expanded in additional phases as the center is developed, staff are hired, and resources are secured.

Phase Two would add nursing and psychiatric assessments.

Phase Three would incorporate a Crisis Residential Unit (CRU) and/or Crisis Stabilization Unit (CSU) beds for youth and adults.

https://www.cadillacnews.com/news/mental-health-authority-reaches-agreement-ending-year-of-uncertainty/article_b6adde72-0929-11ee-8e2e-6f8b758993f1.html

Mental health authority reaches agreement, ending year of uncertainty

- By Rick Charmoli Cadillac News

CADILLAC – After a year full of ups and downs, the six counties of Northern Lakes Community Mental Health Authority have each formally recommitted to the entity.

NLCMHA encompasses Crawford, Grand Traverse, Leelanau, Missaukee, Roscommon and Wexford counties and recently all six county boards of commissioners voted unanimously to support a revised enabling resolution and agreement. NLCMHA now is in the process of being recognized by the state.

Although the duration of the agreement between the six counties is perpetual, according to the authority's previous enabling resolution, it can be dissolved if any of the member counties pass a resolution to do so by a majority of the board of commissioners. An official notice also must be given from the county commissioners to the state department of community health, according to the authority's enabling resolution.

Once the resolution to dissolve membership is received by the state department of community health, the authority's enabling resolution states the date of termination of the authority shall be one year following that notice's receipt. That is, however, unless the director of community health consents to earlier termination.

Similar verbiage is contained in the new agreement.

With the agreement signed by all member counties, Brian Martinus, NLCMHA Interim Chief Executive Officer, expressed pride and gratitude for the Northern Lakes staff.

“Throughout this period of uncertainty, staff remained committed to providing world-class service and did not lose focus on the families in our community. They have remained steadfast in accomplishing the mission of the organization, which is improving the overall health, wellness and quality of life of our individuals, families and communities we serve,” Martinus said. “Our services and supports help some of the most vulnerable in our communities. This process really reinforced just how much these services are prized by the community. We are gratified that the counties came together and collaborated for the good of the people of northern Michigan.”

The uncertainty Martinus referenced had to do with disagreements between member counties and the real possibility that the entity was going to be disbanded.

On May 4, 2022, that process to dissolve NLCMHA started when Grand Traverse commissioners voted to pursue terminating its relationship with Northern Lakes. The action, however, was the only one taken.

If things had proceeded, the authority would have ceased to exist as an entity and all six counties would have had one year to build new mental health systems, including new agreements and legal structures to provide behavioral health services as required by law.

Dissatisfaction with Northern Lakes expressed by Grand Traverse County was mostly connected with services provided to inmates of the Grand Traverse County Jail and the feeling that more services are needed.

The new agreement also contains a new dispute resolution process, which will strengthen the organization’s capacity to continue to serve people in its six counties without interruption in the future.

The \$1.2 million contributed by the six counties to NLCMHA, along with federal and state service reimbursements, and supplemental grant funding awarded to the

organization, allows NLCMHA to provide and manage a total of \$90 million for services and supports.

This includes crisis intervention services for anyone within the six counties experiencing a mental health crisis, regardless of insurance. Additionally, as a community mental health service program defined by the Michigan Mental Health Code, NLCMHA annually serves about 3,500 adults with serious mental illness, 950 individuals with intellectual and developmental disabilities and 900 children with serious emotional disturbance.

NLCMHA is the only community mental health agency in Michigan that also acts as a MI Choice agent for the state, helping an additional 400 disabled and/or elderly individuals remain living in the community instead of a nursing facility through its Northern Health Care Management division. Other benefits to the community include Integrated Health Clinics open to anyone in the community with any or no insurance, in Traverse City and Grayling.

Northern Michigan Regional Entity CEO Eric Kurtz assisted with communications and coordination throughout the process of getting the new enabling agreement in place. With that job complete, he indicated he was happy to help provide oversight to the entity and the member counties.

“A healthy CMH bolsters services across northern Michigan and helps strengthen the network of partners serving the 21 counties in the (Northern Michigan Regional Entity) catchment area with mental health, intellectual/developmental disabilities and addiction services. We are all stronger together.”

With the enabling agreement done, the focus will be turned to finding a new CEO for NLCMHA.

Late last year it was decided to pump the brakes and wait to finish finding the CMH's new leader. The discussion hinged on if the CEO search could be done effectively if

there were changes to the enabling agreement. Some members of the NLCMH authority believed it could not, and ultimately, so did all the members.

Martinus was appointed as the new interim CEO of NLCMH on Oct. 3.

https://www.record-eagle.com/news/local_news/counties-sign-off-on-revised-agreement-for-mental-health-services/article_3e7d2586-0936-11ee-b31f-0f63d2569bf4.html

Counties sign off on revised agreement for mental health services

By Patti Brandt Burgess pburgess@record-eagle.com

TRAVERSE CITY — A new enabling agreement between the six counties that make up Northern Lakes Community Mental Health Authority is in place after about six months spent rewriting it.

Each county voted unanimously to approve the agreement and was signed by clerks and board chairs from each county. It is now in the process of being recognized by the state. Northern Lakes is also working on a new set of bylaws to accompany the agreement.

"I am very satisfied with the process we applied to update the agreement," said county Administrator Nate Alger. "Going forward the proof is going to be in the pudding."

Along with Grand Traverse, the other five counties include Crawford, Leelanau, Missaukee, Roscommon and Wexford. Together, the six counties provide \$1.2 million in funding to Northern Lakes, which manages about \$90 million in services. The cost for Grand Traverse, the most populous of the six, is \$682,200 per year.

Grand Traverse County had not been getting good services from Northern

Lakes for decades, according to county board members, and in May 2022 voted to leave the agency and create its own. The move would have dissolved the authority.

Alger said the enabling agreement had not been touched since 2003, when the authority was formed. The six counties later agreed to rewrite the agreement, a process that was rocky in the beginning, but later improved.

"But what we avoided was a devastating collapse of our mental health structure," Alger said. "It's now on Northern Lakes to take that mandate and provide better services."

Rob Hentschel, county board chairman, said that, like in any negotiation, there was some give and take.

"Now we've got some tools to work with Northern Lakes and the other counties to ensure our citizens get what they need going forward," Hentschel said.

One such tool is a new dispute resolution process in which disputes that can't be resolved will be presented to a seven-member Dispute Resolution Committee that will have two members from Grand Traverse County and one each from the other five counties.

The committee will be chaired by the CEO of Northern Michigan Regional Entity that manages Medicaid funding for mental health, developmental disabilities and addiction services in its 21-county region, though the CEO will not have a vote.

"The biggest victory is that now when we feel we are not getting the

services we need and Northern Lakes is turning a deaf ear, we have a recourse," Hentschel said. "Years ago we had jail services reduced. Now we can do something about it."

The annual fee paid to Northern Lakes pays for crisis services for people, including those in jail, but does not pay for counseling and other types of services many incarcerated people need. Estimates are that 30 percent to 40 percent of people in jail have mental illness, substance use disorder or both.

Advanced Correctional Healthcare was hired in November and will be paid \$1.223 million under a one-year contract. The company is to provide medical and mental health services. It is the third healthcare company to work in the jail in as many years.

In Michigan, person has their Medicaid insurance cut off when they are in jail. Hentschel said he'd like to see Michigan become a state where they can stay on Medicaid until their case is adjudicated.

"We're supposed to be innocent until proven guilty and this is like a punishment," he said.

Across the six counties, Northern Lakes serves about 3500 adults with serious mental illness, 950 individuals with intellectual and developmental disabilities, and 900 children with serious emotional disturbance.

"Throughout this period of uncertainty, staff remained committed to providing world class service and did not lose focus on the families in our community," said Brian Martinus, Northern Lakes interim CEO.

"Our services and supports help some of the most vulnerable in our communities. This process really reinforced just how much these services are prized by the community."

<https://www.9and10news.com/2023/06/14/mental-wellness-center-would-bring-traverse-city-services-under-one-roof/>

Mental Wellness Center Would Bring Traverse City Services Under One Roof

Three groups in Grand Traverse County are working together to create a Center for Mental Wellness.

Munson Healthcare, Northern Lakes Community Mental Health Authority, and a group of community partners submitted a proposal for American Rescue Plan Act (ARPA) funds to help develop the center.

These groups have been working to bring mental healthcare, substance abuse disorder care and crisis services under one roof in Traverse City. They say the need for these services rose during COVID-19 and continues to rise.

If their request is granted, \$5 million in ARPA funds would be used for the first phase of the project: moving existing services to a new 24/7 Grand Traverse Center for Mental Wellness. The plan is to have services available to kids and adults, regardless of insurance or ability to pay.

Phase two would add nursing and psychiatric assessments, and phase three would add Crisis Residential Unit and/or Crisis Stabilization Unit beds for kids and adults.

“Each day, members of our northern Michigan community struggle to find and access needed mental health services, leading them to seek care in our emergency departments or go without care which quickly escalates to a crisis,” said Munson Healthcare Chief Operating Officer Laura Glenn. “This funding proposal marks a significant next step toward expanding much-needed mental and behavioral health services for children, youth and adults in our region.”

If funds are approved, the plan is to choose a site and open the center by the end of next year.



FOR IMMEDIATE RELEASE

Contact:

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NLCMHA: Deb Freed, deb@freedcommunications.com, 231.499.0313

NEW MENTAL HEALTH CRISIS RESIDENTIAL FACILITY EXPANDS CONTINUUM OF CARE

Hope Network and Northern Lakes CMHA partner to bring much needed help to area

TRAVERSE CITY, Mich. (June 21, 2023) – Hope Network and Northern Lakes Community Mental Health Authority (NLCMHA) announced that they are partnering in the opening of North Hope Crisis, a new inpatient facility which will provide much-needed urgent care for people experiencing a mental health crisis.

North Hope Crisis is a six-bed crisis residential facility serving individuals age 21 and older facing a mental health issue such as depression, anxiety, suicidal thoughts, psychosis and mania. Expert staff at the facility will use a combination of individual and group sessions to give people ample opportunity to share their story and participate in the recovery process. Most people will stay three to seven days to resolve the immediate crisis and allow the individual to return to a less intensive living situation as soon as possible.

Across the U.S., one in 20 adults experience serious mental illness each year, according to the National Alliance on Mental Illness. NLCMHA received funding from Congress for the costs of starting up and staffing North Hope Crisis after identifying a lack of access to crisis care in the area. The new funding allows for renovation and operational costs to be supported through September 30, 2023.

“This is the latest step in NLCMHA’s efforts to expand the continuum of care in northern Michigan,” said Brian Martinus, NLCMHA Interim Chief Executive Officer.

“As we continue to work with our key community partners on the next phase of planning for the Grand Traverse Center for Mental Wellness, the new North Hope Crisis resource will provide an appropriate, safe place for people who need more intensive crisis stabilization services to receive the care they need,” said Martinus.

“Many people came together to fill this and other gaps in our local mental health system of care. We appreciate the community’s engagement and commitment to addressing this complex problem and are thankful to Senators Debbie Stabenow and Gary Peters for their assistance in obtaining the Congressional funding to support this next step,” said Martinus.

Hope Network, a health provider which has been providing crisis services since 1986, purchased the building and renovated it. Hope Network will operate the facility under a recovery-oriented environment as part of its therapeutic approach to treatment.

“At Hope Network, our focus is providing the services the community needs and right now there is no greater need than mental health services,” said Bob Von Kaenel, Hope Network President and CEO. “This partnership



with Northern Lakes Community Mental Health Authority will enable us to provide services to people who need it the most in a timely manner.”

North Hope Crisis aims to reduce emergency room visits, hospital admissions, time spent by law enforcement responding to behavioral crises and jail stays. North Hope Crisis staff will also help patients find needed resources after they leave the facility and will follow up with them for up to 90 days to help them develop skills to avoid crises in the future.

NLCMHA provides crisis intervention services for anyone and everyone in the community experiencing a mental health crisis, regardless of insurance. As a community mental health service program (as defined by the Michigan Mental Health Code), NLCMHA also serves adults with serious mental illness, individuals with intellectual and developmental disabilities, children with serious emotional disturbance, and those with co-occurring substance use disorders in Crawford, Grand Traverse, Leelanau, Missaukee, Roscommon, and Wexford Counties.

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About Hope Network:

[Hope Network](#) is a leading statewide non-profit organization that provides healthcare and life services to 34,000 people in more than 240 Michigan communities annually. Based in Grand Rapids, Michigan, the organization’s scope of services is deep and broad, spanning mental health, rehabilitation, transportation, autism, affordable housing, and more. Through a faith-centered mission and the efforts of 2,800 staff members, Hope Network goes to incredible lengths to help people overcome the physical, social, or mental barriers standing in their way.

About Northern Lakes Community Mental Health Authority:

[Northern Lakes Community Mental Health Authority](#) provides and manages behavioral health care services and supports for 6,000 people in six northern Michigan counties, an [Integrated Health Clinic](#) in Traverse City and Grayling, and MI-Choice waiver and other navigator services for the disabled and elderly in 22 counties through its [Northern Health Care Management](#) division.

24/7 Crisis Line 833-295-0616

Access to Services 800-492-5742

Customer Services 800-337-8598

https://upnorthlive.com/news/local/mental-wellness-center-in-the-works-in-grand-traverse-county?utm_source=sfmc&utm_medium=email&sfmc_id=146553&utm_guid=1cc2fcdb-1a6b-4e35-82b3-72604e58ef6a&utm_campaign=

Mental Wellness Center in the works in Grand Traverse County

by Nicole Long

Thu, June 15th 2023, 6:43 PM EDT

GRAND TRAVERSE COUNTY, Mich., (WPBN/WGTU) -- Grand Traverse County is taking a big step in addressing the mental healthcare system and the lack of resources that are now available.

UpNorthLive News spoke to those involved increasing the Grand Traverse Center for Mental Wellness and what the next steps are to make it a reality.

Through the American Rescue Plan Act process, the county set aside \$6.8 million for mental health projects.

The proposed 24-7 wellness center will be taking up almost all of those funds.

"We expected this to happen. We've been waiting now for a little while for the application," said Grand Traverse County Administrator Nate Alger.

"The commissioners addressed this in December 2022, and they set aside \$5 million for mental health infrastructure, knowing that it's going to be likely that this application would come to them," Alger said.

Several entities that deal with mental health services like Munson Medical Center and Northern Lakes Community Mental Health are spearheading the project and have made the official ask for the money.

"This application is going to change the way Grand Traverse County and the surrounding communities experience mental healthcare," Alger said.

What happens now, is that people dealing with a mental health crisis either end up in emergency departments like Munson or jail, which can delay their access to care.

"This will be a place that both youth and adults can go when they're seeking mental health and substance use disorder services," said Terri LaCroix-Kelty, the director of Behavioral Health at Munson Medical Center.

"Also a place they can go through in crisis so that we can help mitigate that crisis, do an assessment and create a plan and connect them with the services and resources that they need," LaCroix-Kelty said.

The hope is for the building to be located on a medical campus in the case of emergencies.

Services will be available to anyone, regardless of age or their ability to pay.

"It's a key piece to the solution. It's not going to be the end all solution," LaCroix-Kelty said. "There's a continuum that we have to address, so this will be a known place to go where people can get information where they can get support, and get started with their treatment as soon as possible."

The project will have three phases: access to recourses, adding nursing and psychiatric assessments, and crisis and residential and stabilization units for both adults and youth.

"And then also focusing in making sure that we create resources on the back end, so when people need treatment, they're not waiting at all, that they can get right into various types of treatment," LaCroix-Kelty said.

The Grand Traverse County Board of Commissioners will be looking at the application at their meeting on June 21.

https://www.record-eagle.com/opinion/editorials/editorial-make-enabling-agreement-start-a-new-chapter/article_a2b08bd6-0bb8-11ee-b877-537a417b4446.html

Editorial: Make enabling agreement start a new chapter

Mental health is the crisis of our era.

Although mental illnesses have existed long before now, we are only beginning to learn more about these historically stigmatized conditions. And, as is so often the case with problems we ignore, when we finally stop ignoring them, we start to recognize them everywhere.

The numbers are staggering: The suicide rate for adults in their early 20s is the worst in more than 50 years, according to Centers for Disease Control and Prevention researchers.

The homicide rate for older U.S. teenagers rose to its highest point in nearly 25 years, and suicide and homicide are the No. 2 and 3 causes of death for 10- to 24-year-olds.

Higher rates of depression, a limited availability of mental health services and the number of guns in U.S. homes are driving this destructive trend, experts told the Associated Press.

And so we must put our own numbers to the task: Six. \$90 million. 275,000.

This past week, six counties — Grand Traverse, Crawford, Leelanau, Missaukee, Roscommon and Wexford — signed a new enabling agreement to work with Northern Lakes Community Mental Health.

Northern Lakes has a \$90 million budget to provide mental health services to 3,500 adults with serious mental illnesses, 950 individuals with intellectual and developmental disabilities, and 900 children with serious emotional disturbances.

But unsatisfactory care, in addition to issues with leadership and management, drove Grand Traverse County to drop its support of Northern Lakes and consider starting a new agency, which would have dissolved the multi-county approach.

Instead, the six counties agreed to sign a new agreement, which we hope will usher in a new chapter. It will, importantly, provide more oversight through a seven-member Dispute Resolution Committee.

This recourse can address problems such as reduced mental health services in the jail, where they are badly needed.

The enabling agreement, along with momentum on opening a crisis center, a mental health center, expanding residential substance use services for women with children, opening clinics in schools, and other initiatives involves enormous community, state and federal investments.

Enter the 275,000 — that's the estimated number of people in the six-county region.

Addressing the mental health crisis is going to take as many of us as possible – pulling together as effectively as we can – to make a difference for the better.

https://www.record-eagle.com/news/local_news/under-one-roof-mental-wellness-center-starts-with-5-million-arpa-request/article_e7c8c2e0-0c69-11ee-8487-9fd1ed04d277.html

UNDER ONE ROOF': Mental wellness center starts with \$5 million ARPA request

- By Patti Brandt Burgess pburgess@record-eagle.com and Rebecca Particka WCMU – Record-Eagle

TRAVERSE CITY — Grand Traverse County residents will have a chance Wednesday to weigh in on an application for \$5 million in American Rescue Plan Act money to create a mental wellness center.

Such a center has long been needed in the region, county officials say, and ARPA funding would help initiate Phase One of the creation of the Grand Traverse Center for Mental Wellness. This would bring currently available mental health services to one location that would be open 24/7.

Munson Healthcare, Northern Lakes Community Mental Health Authority, and their community partners, Northern Michigan Regional Entity, Northwest Michigan Community Health Innovation Region and United Way of Northwest Michigan, recently filed the application with the county.

“Having mental health, substance abuse, and crisis services under one roof, we believe will be a very efficient, effective way to coordinate a response for those who need these services,” said Megan Brown, chief marketing and communications officer for Munson Healthcare.

The Grand Traverse County board will hold a public hearing on the ARPA application during its regular meeting at 9 a.m. Wednesday at the county government center. A board vote on the request is expected after the hearing.

In December, the county board divvied up about \$18.1 million in ARPA money, but set aside \$5 million — the largest award — for mental health services. At that time, it was not clear which entity would run the center or where it would be located.

Brown said site selection is underway. Organizations are leaning toward repurposing an existing Munson Medical Center building for the project. [County Administrator Nate Alger visited a possible sight earlier this year](#) and later said the building was sufficient.

Munson would own the building, with services provided by Northern Lakes. There also would be room for offices of other agencies, such as Addiction Treatment Services, National Alliance on Mental Illness, Before During and After Incarceration, Child and Family Services and more.

In Phases Two and Three, the project would expand existing services to include the addition of nursing and psychiatric assessment. Phase Three would add a crisis residential unit and a crisis stabilization unit with beds for youth and adults.

The mental health hub is intended to act as a diversion center to keep people who need help out of jails and emergency rooms.

It also will address a regional lack of mental health beds for children. Young people have to be taken to the Munson emergency department until beds become available downstate — and that sometimes takes several days.

Brown said outpatient therapy, hospital pre-admission screenings, peer support services, assessments and referrals would be added over all three phases.

A press release from Munson Healthcare stated that a key point of this project is to provide care, regardless of insurance coverage or the patient's ability to pay.

“There will be a number of funding sources tapped into in order to cover services for all,” Brown said.

Since the pandemic, they are seeing a critical need for expanded mental health services in Northern Michigan, she said.

In 2021, more than 950 people were treated at Munson Medical's Emergency Department in Traverse City for a suicidal-related diagnosis, according to the healthcare organization.

In that year, Grand Traverse 911 received more than 800 mental health-related calls, while the county sheriff reported receiving 500 separate calls related to mental health issues.

The Crisis Welcoming Center in Traverse City, which Northern Lakes opened last year in its downtown offices on Hall Street, was one of the first steps in

expanding mental health care. But that center does not have a [psychiatrist and cannot give out medication](#).

“It shouldn’t take a crisis for folks to receive the kind of mental health services they need,” Brown said. “We want to make sure that we’ve expanded services across the whole continuum of a patient’s journey with mental services.”

Phase One of the project is estimated to be completed in 2024.

Brown said funding and construction timelines will have an impact on when Phases Two and Three begin.

<https://upnorthlive.com/news/local/for-those-struggling-with-their-mental-health-hope-is-here>

For those struggling with their mental health, Hope is here

by Marc Schollett

Wed, June 21st 2023, 7:01 PM EDT



For those struggling with their mental health, Hope is here (UpNorthLive News)

GRAND TRAVERSE COUNTY, Mich., (WPBN/WGTU) -- After years of talk about the need and possible solutions, there's some action to address a mental health treatment need in northern Michigan.

And on Wednesday, there's a new \$5 million commitment to care.

"This is the first one in Traverse City, it opened June 14," said Brain Martinus, the interim CEO of Northern Lakes Community Mental Health.

And not a day too soon according to Brian Martinus, with Northern Lakes Community Mental Health.

"One of the distinct needs within northern Michigan is the placement of people that need psychiatric inpatient," Martinus said.

To most people, North Hope is just a red house tucked into a Traverse City neighborhood.

To Northern Lakes, it's partner [Hope Network](#) and to patients, it's so much more.

"We're able to give them the care that they need," Martinus said.

6 beds inside for patients 21 and older to get the urgent care they need.

"Mental health services, decompression if they're having anxiety, suicidal ideation, they get stabilized, and they get help," Martinus said.

But the benefit of having a place like this now, may not be limited to the patient.

"It gives us an option not to put them in the ER at Munson," Martinus said.

Which reduces the strain on the ER for everyone.

This is up and running today. But Northern Lakes, Munson, and mental health advocates are looking farther down the road and even larger in scale.

"Many of you know access to behavioral health services has always been an issue, but the impacts of the pandemic over the last 3 years have really exacerbated that issue," said Laura Glenn, the chief operating officer at Munson Healthcare.

Grand Traverse County Commissioners voted unanimously to authorize Northern Lakes, Munson and community partners to spend \$5 million in ARPA funds to launch the development of the Grand Traverse Center for Mental Wellness to be housed in this building on Munson's campus – mental health, substance abuse disorder, and crisis services.

"This is not one organization alone who's going to make this happen, it really is going to require us coming together to achieve our vision," Glenn said. "And we are fully committed to seeing this through."

Steps, smaller and bigger to address a challenge.

Steps, not a solution.

"I wouldn't say problem solved. I would say this is just a steppingstone, because there is a vast need within the community," Martinus said.

While the Northern Hope Home is up and running right now, much work still needs to be done before the facility with Munson will be. There's a goal to have it operational by the end of 2024.

<https://stateofreform.com/featured/2023/06/michigans-ccbhcs-health-homes-helping-thousands-receive-quality-whole-person-care/>

Michigan's CCBHCs, Health Homes helping thousands receive quality whole-person care

[Shane Ersland](#) | Jun 21, 2023 | [Michigan](#)

The [Certified Community Behavioral Health Clinic](#) (CCBHC) model has helped thousands of Michiganders achieve successful whole-person healthcare outcomes. Professionals who work with CCBHCs discussed their impact on the state during the 2023 Michigan State of Reform Health Policy Conference.

The Michigan Department of Health and Human Services' (MDHHS) request to become a CCBHC demonstration state was approved by CMS in 2020. The demonstration provides whole-person care by integrating patients' physical health with behavioral health and substance use disorder services to residents regardless of their income or insurance coverage.

Lindsey Naeyaert, state administrative manager at MDHHS, said the demonstration served over 53,000 unique individuals between Oct. 1st, 2021—when the demonstration began—through September 2022. Of those people, 77% were adults on Medicaid, while 24% were children under 18.

[“The portion of children that did not have Medicaid was higher than the percentage of children that did have Medicaid,” Naeyaert said. “So we are seeing that children without Medicaid are really coming in to get services at CCBHCs, which is telling in terms of improving access.”](#)

Naeyaert said 7.7% of the individuals without Medicaid coverage seen by CCBHCs came from a different county than where the CCBHC was located.

[“And that’s compared to only 1% of folks who saw a CCBHC that lived in the county with a CCBHC,” she said. “So we’re seeing that non-Medicaid folks are traveling to CCBHC locations to get services.”](#)

There are 13 behavioral health service providers participating in the demonstration program, serving 16 Michigan counties.

“Our next steps are continuing to improve and monitoring our oversight at our current sites to implement the new CCBHC criteria that CMS just released,” she said. “And we’re really focused on our demonstration expansion, which we announced in April, to expand CCBHC to more sites starting in October.”

Panelists also discussed Michigan’s [Integrated Health Homes](#) for Medicaid beneficiaries. The program allows the state to develop innovative, integrative, and sustainable care management/coordination programs for high-need, high-cost Medicaid beneficiaries with chronic health conditions. Michigan has two integrated health homes for the specialty behavioral health population—Behavioral Health Homes for serious mental illness, and Opioid Health Homes for opioid use disorders.

“We’ve seen enrollment picking up in the last year because providers are able to shift their priorities from COVID to other things,” Naeyaert said. “We’re still looking at our outcomes for Behavioral Health Homes, but we are seeing some promising things.”

Tracy Andrews, director of managed and integrated care services at Northern Lakes Community Mental Health Authority, said Northern Lakes was one of the pilot programs for the Health Homes initiative in 2014. Following the program’s expansion in 2020, Northern Lakes now serves six counties, she said.

“The intent of Health Homes was to meet people with a specific eligibility criteria to assist them in achieving better health outcomes,” Andrews said. “It’s a little bit of a wraparound because we’re not providing a direct service. But we’re assisting them with their physical health needs, their natural healthcare needs, and social determinants of health (SDOH).”

Northern Lakes also helps patients with transitional care, Andrews said.

“If someone is coming out of the hospital, we’ll do a follow-up with them within a few days of them being discharged from the hospital, whether it be for acute care or inpatient mental health services,” she said. “If they’re coming out of the hospital, and have increased physical needs, we’ll make sure the location or home they’re returning to is a safe environment. And provide that extra level of care and support, and make sure they have transportation to their follow-up appointments.”

Four of the six counties Northern Lakes serves are in rural areas, Andrews said.

“So many of our challenges include just identifying providers,” she said. “Part of our focus had to be on identifying people who had serious SDOH needs so we could help their health by helping them improve their life situation. Just identifying those folks was a bit tricky. In year two, we were fortunate to be able to take advantage of some of the COVID grant funds that were available. We were able to build up our staffing, and hire staff who were dedicated to this program.”

Washtenaw County Community Mental Health Executive Director Trish Cortes said the county's program utilizes peer support services to help patients.

"Those peers really focus on physical health issues," Cortes said. "They do walking groups and go to grocery stores [for patients]. In our Health Homes program, we use peers in that function."

Location Identified, \$5 Million in ARPA Funding Approved for Mental Health Center

By Beth Milligan

A location has been identified and \$5 million in American Rescue Plan Act (ARPA) funding approved for a new regional mental health center. Grand Traverse County commissioners Wednesday unanimously approved an ARPA application from Northern Lakes Community Mental Health Authority (CMH) to create a center providing 24-hour behavioral health crisis services for both adults and children, regardless of insurance or ability to pay. The new Grand Traverse Center for Mental Wellness is proposed to be located at 420 Brook Street in Munson Healthcare's behavioral health services building (pictured), which would be renovated and repurposed for the project.

County commissioners previously voted last December to set aside up to \$5 million in ARPA funding for mental health services/infrastructure. A new wellness center was discussed as a possible use for those funds, but commissioners left the exact projects/funding recipients to be decided in the future once plans were more concrete. CMH and Munson are part of a leadership team with Grand Traverse County, Northern Michigan Regional Entity (NMRE), Community Health Innovation Region, and United Way of Northwest Michigan that have been working to put a specific proposal together for the center. That proposal was presented to commissioners Wednesday, who agreed to make CMH the recipient of the \$5 million in ARPA funding.

According to CMH and Munson representatives, the new center will be developed in three phases. Phase one will bring "existing access, substance use disorder, and crisis services into a single building with services available 365/24/7 to all residents, regardless of age, insurance type, or ability to pay," according to project documents. Munson COO Laura Glenn clarified that residents means anyone in need of services, even if they live outside of Grand Traverse County or are just visiting the area.

Phase one services will include CMH Access services, crisis phone screening, a crisis hotline, mobile crisis services, a new CMH Welcoming Center, referrals/scheduling, and intervention services. Brief outpatient therapy, peer support services, and care coordination will also be offered. The center will provide space for partner community organizations – such as Addiction Treatment Services – to promote access to resources/support while "also allowing for improved care collaboration," according to the proposal. "Services not directly provided at the center will be accessible through partnerships and preferred referral relationships." Staff including master's level clinicians, peer specialists, resource specialists, and care coordinators like community health workers will be at the center during phase one.

Services would be added or expanded in additional phases as the center is developed, staff are hired, and resources are secured. "In phase two, nursing and psychiatric assessments will be added, and phase three would incorporate a Crisis Residential Unit (CRU) and/or Crisis Stabilization Unit (CSU) beds for youth and adults," according to project documents.

The ARPA funding will help cover renovations at 420 Brook Street to prepare it to serve as the new center. Munson will continue to own the building, with CMH providing programming. The total price tag for the phase one launch – including renovations and start-up costs – is estimated at \$9.8 million. Grants, including some already awarded and some that have been applied for, will help close the funding gap, project representatives said. They noted that significant grants are currently

available on the state and national level for mental health services, with private insurance providers also increasingly willing to cover crisis services. The goal is to use grant funding in the beginning to launch the center and build toward a self-sustaining model that will include insurance payments from insured clients. However, representatives reiterated that anyone will be able to get help at the center, regardless of insurance status.

Glenn said repurposing Munson’s behavioral health services building – which is approximately 20,000 square feet – offers the “best option for services,” since it’s in close proximity to the emergency room. One of the main goals for the Grand Traverse Center for Mental Wellness is connecting people with specialized crisis services instead of those individuals going to the emergency room or jail, locations where they often end up today that are ill-equipped to provide mental healthcare. Numerous staff from Munson’s emergency department spoke in favor Wednesday of the project, citing the stress on emergency rooms from behavioral health patients and the lack of adequate resources for them there.

Representatives shared statistics to demonstrate local demand. In 2021 alone, more than 950 people were treated at Munson Medical Center’s Traverse City emergency department for a suicidal-related diagnosis. “Grand Traverse 911 took more than 800 suicidal or mental health-related calls, and the Grand Traverse County Sheriff took nearly 500 separate calls that same year,” according to project documents. “The demand has continued as local communities emerged from the pandemic.”

Representatives stressed that the new center would be a collaborative community project between multiple organizations, not just Munson and CMH. In addition to the leadership team that worked on the proposal – which will transition to an operational leadership team when the center opens – a community advisory group will also provide regular input. That group, which started meeting monthly in April and is planned to have 25-30 members, will include representatives from local nonprofits, institutions, funders, community members, family members, and individuals who have personal experience with behavioral health disorders. The leadership team also plans to hire a dedicated director to oversee the center.

Glenn said that – contingent on timing for lining up architects, construction firms, and materials – the Grand Traverse Center for Mental Wellness could open for phase-one services by the end of 2024. Numerous residents spoke in favor of the project Wednesday during public comment, sharing emotional stories about family members – including some who died by suicide – whose lives could’ve been changed if they had access to better mental health services. In a statement, CMH Interim CEO Brian Martinus acknowledged that local need, which he hopes the center will address.

“We are grateful for the community’s engagement in addressing this complex problem and the Grand Traverse County commission’s consideration regarding use of the federal funds,” he said. “With a vision, strong local partnerships, and community momentum, we are positioned to increase access to quality mental health services in northern Michigan – another important piece to the puzzle we’re trying to solve to get people the support they need.”

https://www.record-eagle.com/news/local_news/former-munson-behavioral-building-site-of-new-mental-health-center/article_d6317704-1045-11ee-8936-0b97d6b2cff7.html

Former Munson behavioral building site of new mental health center

By Patti Brandt Burgess pburgess@record-eagle.com

TRAVERSE CITY — The Grand Traverse County Board voted unanimously to approve an application for \$5 million in American Rescue Plan Act funds from Northern Lakes Community Mental Health Authority.

The money will be used to renovate the former behavioral health center at Munson Medical Center in Traverse City into a mental wellness center where all services will be located under one roof.

The goal is to get people the help they need without them having to visit emergency departments or be taken to jail.

“Access to behavioral health services has always been an issue, but the impact of the pandemic over the last three years has exacerbated those issues,” said Laura Glenn, chief operating officer for Munson Healthcare.

“Across the Munson Healthcare system, both youth and adults are seeking help for behavioral health crises in all of our emergency departments, often spending hours or days in those emergency departments. And truly, our

emergency department is not the appropriate place for those individuals to receive the type of care that they need.”

Calls to county 911 are up and jails are overwhelmed with people in crisis, Glenn said.

Brian Martinus, interim CEO for Northern Lakes, said a leadership group will oversee plans for development and the structure for operations of the center.

“We have been working on this plan for the last several months, and the community has also been working on this goal of having this mental health center in the community for the last couple of years,” Martinus said.

Another advisory group is made up of 25-30 members from area nonprofit organizations, funders, community leaders, family members and those who use services.

The group, which formed in April and meets monthly, provide input about things such as facility design and programming.

The building will continue to be owned by Munson, but will be leased to Northern Lakes, which will provide most of the services.

On June 14 Northern Lakes contracted with the Hope Network to open a crisis residential unit that has six adult beds. Those beds, as well as more for children and youth, will eventually become part of the new mental health center.

The new center will open in three phases, with the first phase bringing existing Northern Lakes services that include mobile crisis services, the welcoming center and the hotline all under one roof.

Other services include outpatient therapy, peer support and care coordination. Staffing initially will include masters level clinicians, peer support specialists, resource specialists, care coordinators and community health workers.

A center director will also be hired, with Munson and Northern Lakes partnering to find the right person, Martinus said.

Commissioner Lauren Flynn wanted to know what would happen when costs for renovations exceeded \$5 million, while Commissioner T.J. Andrews asked why costs are so high when the building was previously used for behavioral health.

Glenn said the 20,000-square-foot building is dated and needs to be brought up to code for crisis services. The center had beds for inpatient treatment for substance use disorder, which will also be updated for teens and adults who need short-term residential services.

The building will also get a separate entrance for when law enforcement officers bring clients in. Glenn said she estimated that costs would about \$4.5 million.

Commissioner Ashlea Walter questioned why the application for ARPA funding is being submitted before there are detailed cost estimates on the renovation.

“To keep this process moving it would be in the best interest of all involved to know they have the approval of this board,” said Dean Bott, county finance director.

Alger said if the costs come to less than \$5 million, the difference will be retained by the county.

Grand Traverse County received \$18.1 million in ARPA funds, which must be obligated by December 2024 and spent by December 2026. The \$5 million being used for the center was set aside in December for mental health services, but at that time it was unclear who would be the fiduciary for the center.

Opinion: Call to action for mental health

By Kate Dahlstrom

Lansing legislators and the governor will be finalizing the state (year-end Sept. 30, 2024) budget soon. We need your help! We have a severe statewide shortage of health care workers, especially for mental health care.

While the state recently approved \$75 million of supplemental funds for hospitals to recruit, retain and train registered nurses and physical health care workers, there has been no similar funding for mental health.

The best provision in current budget proposal is in the governor and House budgets — \$5 million to recruit (with a possible \$10 million fast-track program in the House budget).

We need to ask state legislators to allocate \$100 million in funding to increase/retain the behavioral health workforce. We are at a crisis level of need for clinicians, social workers, psychiatrists and psychologists.

The good news is that the governor's budget includes a combined \$618 million for school mental health services and safety, but it overlooks the fact that there are no social workers to hire with all that money – unless they steal them from other providers.

There are not nearly enough clinicians available for our community mental health system, private practices and schools.

So why not pull \$100 million from that \$618 million and/or other earmarks to increase our mental health workforce?

We have a crisis of mental illness in America. We need state leadership in Lansing to meet the needs of our state.

We need to ask Lansing to add funding to the 2024 budget to do so.

Contact your local legislators, plus: Senate Appropriations Chair Sarah Anthony: sensanthony@senate.michigan.gov; Senate DHHS Budget Subcommittee Chair Sylvia Santana: senssantana@senate.michigan.gov; House Appropriations Chair Angela Witwer: angelawitwer@house.mi.gov; House DHHS Budget Subcommittee Chair Christine Morse: christinemorse@house.mi.gov; Gov. Gretchen Whitmer: Gretchen.Whitmer@michigan.gov.

Thank you for advocating for mental health care.

About the author: Kate Dahlstrom, of Traverse City, is a board member of the National Alliance on Mental Illness- Grand Traverse; Northern Lakes Community Mental Health and Before, During and After Incarceration

<https://www.interlochenpublicradio.org/ipr-news/2023-06-22/various-healthcare-organizations-to-develop-a-mental-health-center-in-traverse-city>

Various healthcare organizations to develop a mental health center in Traverse City

Interlochen Public Radio | By [Tyler Thompson](#)

Grand Traverse County Commissioners approved \$5 million dollars in [American Rescue Plan Act](#) funds to expand mental health resources in the Traverse City area.

Munson Healthcare, Northern Lakes Community Mental Health Authority, and other partners will use the money to develop the Grand Traverse Center for Mental Wellness. The Center for Wellness will bring existing mental health services under one roof.

Brian Martinus, interim CEO of Northern Lakes, said the facility will make it easier to connect folks with the services they need.

"There's some services Northern Lakes can't offer. There's some services that Munson can't offer. But we have community partners that offer those services," he said. "So once the assessment is done, if they don't qualify for the services that we provide we can actually get them into the right services within the community."

Northern Lakes noted that more than 950 people were treated at Munson Medical Center's Emergency Department in Traverse City for a suicidal-related diagnosis in 2021.

"[The Grand Traverse Center for Mental Wellness] addresses the need in the community by allowing people to get direct access when they come in for services," Martinus said. "And it will allow Munson to free up bed space in their emergency room which makes everything a lot easier within the hospital system."



FOR IMMEDIATE RELEASE

June 29, 2023

Contact: Brian Martinus, Interim CEO, (231) 935-3645, brian.martinus@nlcmh.org

Northern Lakes CMH Holds Annual Public Hearing July 19

Northern Lakes Community Mental Health Authority (NLCMHA) is holding its Annual Public Hearing on July 19.

Held each year in July, the Public Hearing is a chance for NLCMHA to share information with the community on funding and current improvement projects and an opportunity for community members to give input to help NLCMHA assess the needs and gaps of service in its local communities.

This year, people may choose to attend virtually or in-person, or provide input in writing if they are unable to attend. There will be two identical sessions offered; the first is from 9:00 a.m. to 11:00 a.m. in NLCMHA's Traverse City office at 105 Hall Street. The second session is from 2:00 p.m. to 4:00 p.m. in NLCMHA's Cadillac office at 527 Cobb St.

Those unable to attend on July 19 may email input to [Stacy Maiville](mailto:stacy.maiville@nlcmh.org) at stacy.maiville@nlcmh.org or mail to her attention at NLCMHA, 105 Hall St, Ste A, Traverse City, MI 49684.

The links to attend virtually are posted on the agency website at www.northernlakescmh.org, under Recent News.

NLCMHA serves adults with serious mental illness, persons with intellectual and developmental disabilities, children with serious emotional disturbance, and those with co-occurring substance use disorders (as defined by the Michigan Mental Health Code) in six counties: Crawford, Grand Traverse, Leelanau, Missaukee, Roscommon, and Wexford. In addition, NLCMHA provides crisis intervention services for anyone in the community experiencing a mental health crisis, regardless of insurance.

More information may be found at www.northernlakescmh.org. For general questions call Customer Services at 800-337-8598. To access services call 800-492-5742. For 24/7 crisis intervention call 833-295-0616.

###

2023 NLCMHA Annual Public Hearing Meeting Links

<https://www.northernlakescmh.org/news-room/annual-public-hearing-july-19-youre-invited/>

9:00-11:00 AM – NLCMHA Office, 105 Hall Street, Traverse City

[Traverse City Morning Meeting Link](#)

Or call in (audio only)

+1 810-258-9588,,737780732# United States, Flint.

Phone Conference ID: 737 780 732#

2:00-4:00 PM – NLCMHA Office, 527 Cobb Street, Cadillac.

[Cadillac Afternoon Meeting Link](#)

Or call in (audio only)

+1 810-258-9588,,307625802# United States, Flint

Phone Conference ID: 307 625 802#

The facility will be located on the Munson Medical Center Campus. It'll be open to adults and youth, 24 hours a day, seven days a week, and is expected to open in 2024.

It's part of a three-phase project to expand services in northern Michigan.

Phase two of the project will add new services, like nursing and psychiatric assessments.

As part of the first phase of the project, Northern Lakes opened a 24-hour Crisis Welcoming Center on Hall Street in Traverse City last November.

**Northern Lakes Community Mental Health Authority
Financial Reporting for 6/30/2023**

Highlights:

- Last month NLCMHA received notice from SAMHSA that the \$1.8M grant in support of the crisis residential home Hope Network opened in Traverse City in June could be extended into fiscal year 2024 for any funds not spent in FY 2023. It is anticipated there will be almost \$1M available to carryforward into FY 2024. This is great news to support the crisis residential unit North Hope.
- NLCMHA now has 172 enrolled habilitation supports waiver people. This is 5 shy of the October enrollment number but making good progress. There has been 14 disenrollments this year for a variety of reasons making the return to 180+ enrollments that much more challenging. The capitation received in June was \$1,036,391 which is very close to the 18% mark matching monthly budgets. The goal for the up coming year will be closer to 20-22% of Medicaid budgets.
- The community inpatient encounters which were voided last month causing the 1.5% shift between healthy Michigan plan and Medicaid did rectify itself once those encounters were resubmitted to include the taxonomy codes. It is expected that 86.5% of behavioral health services are covered by traditional Medicaid, 11.5% of behavioral health services are covered by healthy Michigan plan, and 2% of services are covered by general funds. The percentages will begin to shift to general funds as redeterminations and Medicaid deductibles resume from the expiration of the public health emergency.
- A question was asked last month about the difference between earned revenues on the right side of the finance report and the actual YTD expenses. The difference between them is services which are funded by another source of funding that is not capitated or restricted in some nature which is grants. Grants are earned as they are spent and have no possibility of under or over-spending since they are billed as expended. The only risk is underestimating the cost of the service being purchased which finance has not experienced recently. This does not address sustainability once the grant has expired, however, once a service is continued outside of a grant funded methodology the service would move to the right side of the finance report and be reported within Medicaid, Healthy Michigan Plan, or general funds.
- In the month of July, it has been reported to NLCMHA 3,080 individuals within the six counties served by NLCMHA will be redetermined the next month. Of the 3,080 individuals, 98 people are open to NLCMHA for services. In June, 50 consumers who had Medicaid appear to have lost the Medicaid coverage in the month of July. Finance and data staff will review the 50 people. Several outcomes could occur, Medicaid could be retroactively received, the person may have had an assessed Medicaid deductible, or the person could participate in the ability to pay process.
- Last month it was reported there was a 1.5% change in Medicaid versus Healthy Michigan Plan coverage of services. The voids that had occurred for taxonomy codes in inpatient files have been submitted and verified. An amended Medicaid and Healthy Michigan Plan cost of services has been reported to the NMRE and will be reflected in the May NMRE financial report published to the NMRE Board in July.
- The finance committee of the NMRE region has decided to not report coordination of benefit or SSI collected as a separate dollar value on financial reporting for Medicaid purposes effective immediately.

Medicaid Spending as compared to Regional Funding Advances:

- Services provided to individuals with traditional Medicaid coverage will be reported at \$46,453,433. This is \$1,731,213 below capitated advances provided by the NMRE and 9/12ths of the FY 2022 carryforward made available to NLCMHA.
- Services provided to individuals with Healthy Michigan Plan coverage will be reported at \$6,188,946. This is \$284,182 below capitated advances provided by the NMRE and 9/12ths of the FY 2022 carryforward made available to NLCMHA.
- Services which must be paid for by General Funds total \$1,241,717. This is \$1,073,834 below the year's allocation. Services which are paid for by general funds due to Medicaid Deductibles total \$55,937 through June 30th. The inpatient encounter voids impacted this value last month.

Residential/Inpatient Usage:

- At the end of May, it is expected there were 233 people in contractual specialized residential placements, 21 people in semi-independent homes, and 30 people in the direct run or board operated homes including Glen Oaks apartments. This is a total of 284 people in supported residential living arrangements and a net decrease of 5. The average daily cost of a person in a contracted specialized residential home is \$231. The average daily cost of a person residing in a semi-independent placement home is \$289 and all SIP arrangements are contractual placements.
- The amount paid to community inpatient hospitals, on a cash basis, was \$389,952 in the month of June. Inpatient services are over budget by \$536,999 so far this fiscal year. This has improved the past month.

Revenues and Spending:

- Revenues exceed expenses by \$3,520,172 through June 30, 2023.
- Cash on hand increased \$157,932 in June. The NMRE advanced the June capitation in July. An additional \$2M in cash has been moved from the general checking account to the Huntington Treasury Management investments.

Northern Lakes Community Mental Health Authority

List of Contracts and Agreements Entered Into

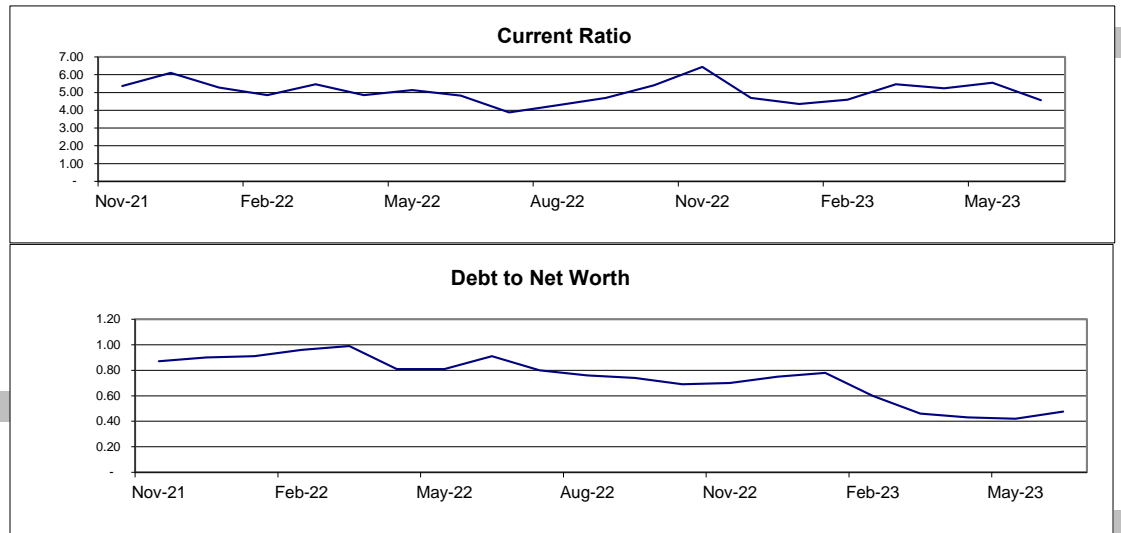
For the Month of June 2023

	Vendor by Category	Comments or Details	Estimated Annual Financial Value of Contract or Amendment
1	Specialized Residential Services and Community Living Supports		
*	Inspire Autism, Inc.	New Autism Services Provider Contract	\$ 100,000.00
*	North Hope CRU/ Hope Network Behavioral Health Services	Crisis Residential Contract with rates through 9/30/2023	\$ 602,000.00
			\$ 702,000.00
2	Inpatient and Hospital Contracts Including Single Case Agreements		
*	None		
*			\$ -
3	Independent Contractors and Leases		
*	New Beginnings Drop-In Center First Amendment	Amended Budget	\$ 1,851.00
*			\$ 1,851.00
4	Northern Health Care Management		
*	None		\$ -
5	Other Administrative Services		
*	None		\$ -
6	Other Professional Services (Legal and Accounting)		
*	Barnes & Thornburg LLP	Labor Attorney paid at \$496/hour as needed	\$ 10,000.00
*	Cummings Mclorey Davis & Acho, P.L.C.	General Attorney services paid at \$190/hour as needed	\$ 30,000.00
*	P. David Vinocur, PLC	Medicaid Attorney paid at \$250/hour as needed	\$ 50,000.00
*	Roslund Prestage & Company	Financial, Single, and Compliance Auditors	\$ 32,000.00
			\$ 122,000.00
7	Grants-Revenue Contracts		
*	None		\$ -

Northern Lakes Community Mental Health Authority
Finance Report As of 6/30/2023
Fiscal Year Ending September 30, 2023

	75%		Actual	Actual	Percentage	Capitated	(Expenses)		
	2023-#1	2023-#1					Actual	Actual	Percentage
Revenues	Total Budget	YTD Budget	YTD Revenues	Over/(Under)	YTD	Category	Advances	Revenues	(Over)/Under
State Sources	\$ 5,222,029	3,916,522	4,482,454	565,933	86%				
Local Sources	\$ 2,031,467	1,523,600	1,927,582	403,982	95%	General Funds	2,315,551	1,241,717	1,073,834
Medicaid Sources	\$ 68,140,272	51,105,204	53,456,779	2,351,575	78%	Medicaid	48,184,646	46,453,433	1,731,213
Reimbursements	\$ 2,745,124	2,058,843	910,384	(1,148,459)	33%	Healthy Michigan	6,473,128	6,188,946	284,182
Northern Health Care Mgmt	\$ 11,952,470	8,964,353	8,068,673	(895,680)	68%	Behavioral Health Home	445,554	189,721	255,833
Total Revenues	\$ 90,091,362	67,568,521	68,845,872	1,277,351	76%	Northern Health Care Mgm	8,068,673	7,298,678	769,995
						Local Requirements	1,927,582	612,882	1,314,700
							67,415,134	61,985,377	5,429,757
Expenditures	Total Budget	75% YTD Budget	Actual YTD Expenses	Actual (Over)/Under	Percentage YTD	Earned and allowable to retain			2,456,306
Personnel	\$ 30,356,676	22,767,507	21,359,562	1,407,945	70%				
Direct Operations	\$ 2,570,154	1,927,616	1,974,464	(46,849)	77%	Medicaid and Healthy Michigan Plan expenses that exceed capitation advances would need to be requested to be covered by Medicaid savings or the Medicaid Internal Service Fund held by the NMRE.			
Contractual Services	\$ 12,967,971	9,725,978	8,263,632	1,462,346	64%				
Contract Agencies	\$ 7,891,208	5,918,406	7,115,126	(1,196,720)	90%				
Residential Contracts	\$ 26,547,018	19,910,264	18,613,696	1,296,568	70%				
Inpatient Services	\$ 6,491,000	4,868,250	5,405,249	(536,999)	83%	Services/expenses which must be covered by General Funds that exceed the General Funds allocation must be covered by Local Sources or NLCMHA Fund Balance.			
Transportation	\$ 1,535,132	1,151,349	1,165,882	(14,533)	76%				
Occupied Space	\$ 1,732,203	1,299,152	1,428,090	(128,938)	82%				
Total Expenses	\$ 90,091,362	\$ 67,568,522	\$ 65,325,700	\$ 2,242,821	73%				
Net Revenues over Expenditures			\$ 3,520,172						

Monthly Indicators	Previous Month	Current Month
Current Ratio	5.55	4.57
Cash on Hand	\$ 26,380,819	\$ 26,538,751
Short Term Liabilities	\$ 4,755,983	\$ 5,807,497
<i>According to Financial Performance Indicators the goal is greater than 2.</i>		
Debt to Net Worth	0.42	0.48
Short Term Liabilities	\$ 4,755,983	\$ 5,807,497
Long Term Liabilities	\$ 2,968,615	\$ 2,968,615
Compensated Absences	\$ 1,386,866	\$ 1,386,866
Net Pension Liability	\$ 1,581,749	\$ 1,581,749
Unrestricted Fund Balance Audit	\$ 12,072,621	\$ 12,072,621
Net Assets (Undepreciated Value)	\$ 6,360,903	\$ 6,360,903
<i>According to Financial Performance Indicators the goal is less than 2.5.</i>		
Proforma YTD Fund Balance	\$ 14,430,844	\$ 14,528,927
Self Funded Health Insurance IS	\$ 345,587	\$ 332,690
Directly provided services	38.8%	39.0%
Contractually provided services	61.2%	61.0%



**CEO Response to June 15, 2023 Board Monitoring Report Evaluation
July 20, 2023**

Policy 2.7 – Continuity of Executive Functions – Internal Inspection

Eleven (11) Board Members completed and submitted the monitoring report. There were thirteen (13) Board Members attending in person.

Question 1 - Was this report submitted when due? 11 - Yes

Question 2 - Did the report lay out the CEO's interpretation of the request? 11 - Yes

Question 3 - Was I convinced that the interpretation is justified and reasonable? 11 - Yes

Question 4 - Did the interpretation address all aspects of the subject? 10 – Yes, 1 – No

Comment: 2.7.2 states that "*the CEO communicate with the Board in total...*" CEO indicated that he communicated with the Board Chair"

Response: I communicated with the Board Chair before the policy was changed in April 2023 as to the succession. Since then, the Board has not asked me to share with them a succession plan. If the Board would like to know, they simply need to ask.

Question 5 - Does the information show compliance with Board direction/policy? 11 - Yes

Question 6 Other comments –

Comment 1: "*Do not believe in the policy, entire Board should know.*"

Comment 2: "*Perhaps we amend 2.7.2 to read Board chair instead of Board in total.*"

Response: This policy was changed in April 2023 to read the Board in total per the Board's decision.

CEO Response 2023:

I appreciate the Board's assessment that we are in 100% compliance with this policy.

Respectfully Submitted,

Brian Martinus
Interim CEO

**ASSURANCE OF ORGANIZATIONAL PERFORMANCE
POLICY 2.4 FINANCIAL MANAGEMENT / INTERNAL CONTROLS
INTERNAL INSPECTION - CEO
JULY 20, 2023**

2.4 Financial Management

Type of Report: Internal Inspection

The CEO shall not by omission or commission render the Authority insolvent or permit the expenditure of funds except in accordance with and in furtherance of the Board Governance Policies. Authority finances shall be managed in accordance with applicable laws, regulations, contract obligations and sound financial practices. Budgets prepared under the direction of the CEO shall be predicated upon an annual assessment of need and shall be consistent with a multi-year strategic plan approved by the Board. In managing the financial affairs of the Board, the CEO shall honor priorities formally adopted by the Board:

- 2.4.1 Clinical and administrative services;
- 2.4.2 Internal service fund; and
- 2.4.3 Existing unfunded liabilities.

With respect to the preparation of budgets the CEO shall not:

- 2.4.4 Fail to include a projection of revenues and expenses based on the most current and accurate data available;
- 2.4.5 Fail to identify and distinguish capital and operating expenditures;
- 2.4.6 Fail to project or account for cash flow; or
- 2.4.7 Fail to disclose assumptions upon which the budget is predicated.

With respect to the operations of the Authority, the CEO shall not:

- 2.4.8 Receive, process or disburse funds except in accordance with standards and controls satisfactory to the Authority's outside auditor and comply with generally accepted governmental accounting principles;
- 2.4.9 Take any action or fail to advise the Board of any event or projected event that the CEO, in the exercise of sound business judgment, believes will result in liabilities exceeding assets or the need to use internal service fund resources;
- 2.4.10 Provide less for Board prerogatives during the year than is set forth in the Costs of Governance Policy;
- 2.4.11 Conduct inter-fund shifting;
- 2.4.12 Absent good cause communicated to the Board, fail to settle payroll and other financial obligations of the Board when due;
- 2.4.13 Fail to timely and accurately file documents or make disclosures required by federal or state laws or regulations or contract obligations;
- 2.4.14 Allow records to be retained in violation of the Record Retention & Disposal Policy according to state and federal laws;
- 2.4.15 Fail to instruct the Board selected auditor to provide the copy of the audit to the Board at the same time as made available to the CEO;
- 2.4.16 Commit the Authority to any unbudgeted financial obligation or series of obligations with a value in excess of \$15,000 for any purpose other than the provision of direct consumer services;
- 2.4.17 Enter into contracts or other binding obligation that is inconsistent with governance policies;

- 2.4.18 Enter into contracts without sufficient assurance that the contractor is qualified and eligible to furnish the goods and services covered by the contract.
- 2.4.19 Acquire, encumber or dispose of real property [Does not apply to leaseholds to be used as housing for individual consumers];
- 2.4.20 Fail to exercise reasonable diligence in the collection of delinquent financial or contractual obligations to the Authority; or
- 2.4.21 Fail to place cash in interest-bearing accounts in accordance with P.A. 196 of 1997 as amended.
- 2.4.22 Fail to report dollar amounts on the Administrative Consent Agenda when identifying expense contracts exceeding \$15,000.
- 2.4.23 Fail to continually seek out and/or be open to securing opportunities/avenues for revenue enhancements that fits our mission.

CEO Interpretation July 2023

As the Interim CEO I have not by omission or commission rendered the Authority insolvent and all expenditures of funds have been in accordance with Board Governance Policies. Our finances are managed in accordance with applicable laws, regulations, contract obligations and sound financial practices. Budgets have been prepared based on an annual assessment of need. The budgets have been prepared consistent with the plan.

The table below is a percentage of funding sources by year using the initial budget approved by the NLCMHA Board of Directors. In August of 2023 a final budget of the fiscal year will be recommended. The percentage of the budget in State Sources has increased from the prior year because of the General Funds carryforward and the grants that have been received. Medicaid has decreased by over 2% because of additional grant funding from both the State of Michigan and SAMHSA. Northern Health Care Management has remained consistent the past two years at 13.27%. Local sources and reimbursements have remained consistent in dollars although dropped by .12% as compared to the total budget.

First Budget Annual Percentage by Source
July 2023 2.4 Board Monitoring Report

Source	FY19	FY20	FY21	FY22	FY23
State Sources	4.99%	5.17%	5.00%	5.18%	5.80%
Local Sources	2.05%	1.98%	1.85%	2.37%	2.25%
Medicaid	74.04%	75.80%	75.99%	77.96%	75.63%
Reimbursements	2.23%	1.90%	1.78%	1.23%	3.05%
Reinvestment Dollars	0.00%	0.00%	0.00%	0.00%	0.00%
Northern Health Care Mgmt	16.68%	15.15%	15.38%	13.26%	13.27%
	100.00%	100.00%	100.00%	100.00%	100.00%

In managing the financial affairs of the Board, the CEO shall honor priorities formally adopted by the Board:

- **2.4.1 Clinical and administrative services;**

July 2023 Update:

NLCMHA has made several modifications and enhancements to financial reporting the past year. Financial reports are presented by the CFO at the Board Meeting, a Budget Committee has been formed to educate and communicate the budgeting process three months per year, and contracts which are not renewed annually are reported during certain months of the year. Educating Board members on financial activities ensures priorities can be identified. The public hearing has been set for July 19th seeking input from citizens on needs and priorities.

- **2.4.2 Internal service fund; and**

July 2023 Update:

NLCMHA holds no internal service funds for Medicaid. The final transfer of dollars occurred in February of 2015.

NLCMHA operates an internal service fund for employee self-funded health insurance through Blue Cross Blue Shield of Michigan. The internal service fund closed FY 2022 at a value of \$128,165 down 82% from the prior year. FY 2023 exposure to date has leveled off. The claims being paid by the self-insurance fund are closer to the limits allowable under Public Act 152. Public Act 152 caps the expenses allowable to provide health benefits to the employed workforce. In calendar 2024 the State of Michigan is increasing the cost limitation for medical benefits by 4.1%. The 4.1% is the percentage change in the medical care component from the March 2021-February 2022 to the period March 2022-February 2023. The limit on the amount that a public employer may contribute to a medical benefit plan for a single contract is \$7,703. The limit for a two-person plan is \$16,109 and the limit on a family plan is \$21,008. Blue Cross Blue Shield will not publish illustrative rates for calendar year 2024 until August.

- **2.4.3 Existing unfunded liabilities.**

NLCMHA's unfunded liability is within the defined benefit plan inherited from Grand Traverse County by the former Great Lakes CMH. The pension plan as of the last report date is summarized in the following chart.

Summary of MERS Defined Benefit Pension by Year:	2021	2022
Valuation Assets	\$23,288,419	\$22,276,414
PV of Accrued Benefits	\$25,407,929	\$24,913,231
Actuarial Surplus (Deficit)	(\$2,119,510)	(\$2,636,817)
Market Value of Assets Invested with MERS	\$23,322,867	\$19,242,539
Market Value (Shortfall) or Surplus	\$34,448	(\$3,033,875)
Combined (Liability)/Surplus from Market & Actuarial	(\$2,085,062)	(\$5,670,692)
Percentage (Liability) Surplus to Accrued Benefit	(8.2%)	(22.8%)

July 2023 Update:

The MERS actuarial report received in June of 2023 had a decrease in the present value of accrued benefits of \$494,698. However, the true market value of assets compared to the actuarially expected market value reported a significant decrease of \$3,033,875. The actuarial valuation uses a December 31st measurement date of assets. The percentage the plan is funded decreased from 92% to 89% and does not include measurement of the market value. Considering both the actuarial deficit and the market value of assets the percentage liability to accrued benefits shows negative movement from (8.2%) to (22.8%).

With respect to the preparation of budgets the CEO shall not:

- **2.4.4 Fail to include a projection of revenues and expenses based on the most current and accurate data available;**
- **2.4.5 Fail to identify and distinguish capital and operating expenditures;**
- **2.4.6 Fail to project or account for cash flow; or**
- **2.4.7 Fail to disclose assumptions upon which the budget is predicated.**

July 2023 Update:

The beginning budget for fiscal year 2023 was based on the most up to date data available from NMRE, MDHHS, and the actuarial firm Milliman. The freeze on redeterminations and spend downs had provided an increase in the Medicaid enrollment and capitation advances. That freeze was lifted on May 12, 2023. Redeterminations and Medicaid deductibles resumed on July 1st of 2023. The next 12 months will set the basis for which trends can be measured without pandemic related freezes. All grants applied for and most likely to be approved are considered in recommended budgets.

With respect to the operations of the Authority, the CEO shall not:

- **2.4.8 Receive, process or disburse funds except in accordance with standards and controls satisfactory to the Authority's outside auditor and that accord with generally accepted governmental accounting principles;**

July 2023 Update:

The NLCMHA Board of Directors has retained Roslund Prestage & Co as the outside auditing firm for the last three years. Roslund Prestage has had positive auditing reports in the last two years with no recommendations needing plans of correction from the 2022 fiscal year.

- **2.4.9 Take any action or fail to advise the Board of any event or projected event that the CEO, in the exercise of sound business judgment, believes will result in liabilities exceeding assets or the need to use internal service fund resources;**

July 2023 Update:

NLCMHA and Finance staff believe the revenues for which the budget has been predicated will occur.

- **2.4.10 Provide less for Board prerogatives during the year than is set forth in the Costs of Governance Policy;**

July 2023 Update:

The budget was increased for FY 2023 Board Governance and prerogatives to accommodate the requests for additional committees.

- **2.4.11 Conduct inter-fund**
- **2.4.12 Absent good cause communicated to the Board, fail to settle payroll and other financial obligations of the Board when due;**
- **2.4.13 Fail to timely and accurately file documents or make disclosures required by federal or state laws or regulations or contract obligations;**
- **2.4.14 Allow records to be retained in violation of the Record Retention & Disposal Policy.**

July 2023 Update:

It is believed that none of the above has occurred.

- **2.4.15 Fail to instruct the Board selected auditor to provide the copy of the audit to the Board at the same time as made available to the CEO;**

July 2023 Update:

Roslund Prestage, the auditors engaged for fiscal years 2021-2023, will present the financial audit directly to the Board of Directors. Roslund Prestage will send the financial, single and compliance audits directly to the required governing bodies of the Department of Treasury and MDHHS respectively. Once received by the Board of Directors the Executive Secretary will send the financial audits to each of the six counties served by NLCMHA.

2.4.16 Commit the Authority to any unbudgeted financial obligation or series of obligations with a value in excess of \$15,000 for any purpose other than the provision of direct consumer services;

July 2023 Update:

It is believed this has not occurred without authorization from the Board.

- **2.4.17 Enter into contracts or other binding obligation that is inconsistent with governance policies;**
- **2.4.18 Enter into contracts without sufficient assurance that the contractor is qualified and eligible to furnish the goods and services covered by the contract.**

July 2023 Update:

It is believed this has not occurred.

- **2.4.19 Acquire, encumber or dispose of real property [Does not apply to leaseholds to be used as housing for individual consumers];**
- **2.4.20 Fail to exercise reasonable diligence in the collection of delinquent financial or contractual obligations to the Authority; or**
- **2.4.21 Fail to place cash in interest-bearing accounts in accordance with P.A. 196 of 1997 as amended.**
- **2.4.22 fail to report dollar amounts on the Administrative Consent Agenda when identifying expense contracts exceeding \$15,000.**
- **2.4.23 Fail to continually seek out and/or be open to securing opportunities/avenues for revenue enhancements that fits our mission.**

July 2023 Update:

It is believed this has not occurred.

Respectfully Submitted,

Brian Martinus
Interim CEO
(Assisted by Lauri Fischer, CFO)

Board Policy being monitored:
2.4 Financial Management – Internal Inspection
July 20, 2023

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 June 15, 2023 Board Means Monitoring Report Evaluation
July 20, 2023**

Policy 4.3 Delegation of Management Powers to the CEO - Direct Inspection

Eleven (11) Board Members completed and submitted the monitoring report. There were thirteen (13) Board Members attending in person.

Question One - Do you believe we are in strict compliance with the policy as stated for each provision? – 11 Yes

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? – No comment

Question Three – How do you think we could improve our process to be in full compliance? – No comment

Question Four – What do we need to learn or discuss in order to live by this policy more completely? – Comment: *“Continuing to review policies and adherence”*.

Question Five - Does this policy remain in compliance with the Policy Governance model in terms of content and format? – 11 Yes

CEO Response:

I appreciate the Board’s assessment that we are in 100% compliance with this policy.

Respectfully Submitted,

Brian Martinus
Interim Chief Executive Officer

BOARD MEANS SELF-ASSESSMENT
Board Policy Monitoring – Direct Inspection
July 20, 2023

4.1 Unity of Control

Only formally adopted motions and resolutions of the Board are binding on the CEO. Accordingly:

- 4.1.1 The CEO is subject to direction by the Board as a whole. Board officers, members and committees have no authority to direct the CEO in the absence of a formal and specific delegation of such authority by the full Board.
- 4.1.2 Board members and Committees may request information from or the assistance of the CEO concerning factual matters without Board authorization. However, the CEO may refuse such a request if, in the opinion of the CEO, fulfilling the request would require excessive staff time or would otherwise disrupt management of the affairs of the Authority.

BOARD MEANS SELF-ASSESSMENT
Board Means Policy Being Monitored:

4.1 Unity of Control

July 20, 2023

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)



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

**Nominating and Leadership Development Committee Meeting
Minutes**

March 1, 2023

2:00 PM

Attendance:

Pam Babcock called the meeting to order at 2:00 p.m. at 527 Cobb Street, Cadillac and virtual.

Board Members Present: Rose Denny, Pam Babcock, Dan Dekorse, Mary Marois, Barb Selesky
Greg McMorrow,

Board Members Absent: Angie Griffis,

Others Present: Brian Martinus, Interim Chief Executive Officer; Stacy Maiville, Executive
Secretary.

MOTION: Approval of Agenda
RESULT: ADOPTED. [UNANIMOUS]
MOVER: Barb Selesky
SECONDER: Rose Denny

MOTION: Approval of the January 4, 2023 Meeting Minutes
RESULT: ADOPTED. [UNANIMOUS]
MOVER: Barb Selesky
SECONDER: Greg McMorrow

Board Education:

There was discussion around the Board Education Session from March until May. Mary mentioned that Samantha from ARC will be presenting in March. April will have Access presenting. The idea was shared by Greg to have a presentation on the Carver governance model for the May meeting. After discussion among members the committee decided against that idea and instead would like to form an AdHoc Governance Model Committee to investigate the possibility of a different governance model for the Board in the future.

Brian clarified that the enabling agreement will not determine the Board governance model. The Board governance model is determined by the Northern Lakes Board, not the counties.

MOTION:	Recommend to the Board to form an Ad Hoc Governance Model Committee with Greg McMorrow as Chair
RESULT:	ADOPTED. [UNANIMOUS]
MOVER:	Barb Selesky
SECONDER:	Mary Marios

The NLD explored the idea of monitoring reports, jail diversion, justice programs and CCBHC for the May Board Education Session. It was decided to do a session about the CCBHC and possibly invite Bob Sheehan.

March – Arc Presentation
April – Access
May – CCBHC Discussion

There was additional discussion around the importance of monitoring reports and why the Board does them. Committee members reminded each other that these must be done as one of the accreditation expectations by CARF. It was recommended to Dan, the Board Chair, to mention briefly at the Board meetings the importance of the monitoring reports.

Board Retreat & Board Survey:

Pam suggested that the retreat happen in October. The committee agreed to table further discussion until the May meeting due to the current changes taking place on the Board.

Board Individual and Self-Assessment

The committee reviewed the assessments. Mary suggested that the entire assessment be changed in the future. It was discussed that if the governance model changes then the document will change in the future.

Kate's Proposal

Kate's proposal "Cross -Sector Advisory Team" drove an extended and productive conversation at the NLD meeting. It sparked critical thinking of how to improve certain areas. There was discussion about the needs and gaps that were presented within Kate's proposal. The committee agreed that there needs to be a better way for people to be heard and if needed, the Board to respond in some manner. It was also expressed that there is a gap in the knowledge of the rights system. Many consumers do not know the rights they have. There needs to be some system in place that addresses people's concerns. Brian expressed the importance of community relations and collaboration between organizations to help address certain issues. The proposal is operational in nature. The Board does not approve or disprove operational proposals. Furthermore, the agency cannot direct other organizations to participate. It was agreed that the NLD cannot move forward with the creation of the Cross-Sector Advisory team.

NLD 's recommendation to the Board about Kate's proposal:

MOTION:	Ask the Board to direct the CEO to address the issues presented in Kate's proposal
RESULT:	ADOPTED. [UNANIMOUS]
MOVER:	Barb Selesky
SECONDER:	Mary Marois

Slate of Officers:

Nominations:

Ben

Tony

Sherry

Greg

The Secretary, Vice chair and Chair positions will be up for election this May or sooner. The committee decided to hold a special meeting in April to discuss elections, with the intention that elections will be held during the May Board meeting.

Next Meeting - April 5 at 2pm. Topics: Slate of Officers

Following Meeting – May 3rd, 10 am. Please note, this will be held in a different space at the Cadillac office. Meeting will be held in the **Cadillac “Couch Room.”**

Public Comment:

None.

Meeting adjourned at 4:10 p.m.

Respectfully Submitted,

Stacy Maiville, Executive Secretary



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

Nominating and Leadership Development Committee Meeting Minutes

April 5, 2023

1:30 PM

Pam Babcock called the meeting to order at 1:37 p.m. at 527 Cobb Street, Cadillac and virtual.

Attendance:

Committee Members Present: Pam Babcock, Mary Marois, Ben Townsend

Committee Members Absent: Angie Griffis, Greg McMorrow, Barb Selesky

Others Present: Brian Martinus, Interim Chief Executive Officer; Stacy Maiville, Executive Secretary; Dan Dekorse, Chairman of the Board

There was not a quorum. The members of the NLD recommended approval of the agenda and minutes but no vote was made due to a lack of a quorum.

Slate of Officers Discussion:

There was a great deal of discussion regarding the slate of officers. It was confirmed that the slate of officers be presented at the April 20, 2023, board meeting. The Board Chair will be elected at the April 20, 2023, board meeting. The election for the Vice Chair and Secretary will take place at the May board meeting.

The NLD recommends that the position for the Board Chair be thirteen months this time, instead of twelve. This would prevent complication for the election process.

It was mentioned that ideally, members should not hold a position of office for more than two years.

Slate of Officers:

- Chair- Ben Townsend and Tony Lentych
- Vice Chair: Greg for Vice Chair (election to take place at the May board meeting)
- Secretary: Greg, Sherry (election to take place at the May board meeting)

Next Meeting: May 3rd, 10 am. Please note, this will be held in a different space at the Cadillac office. Meeting will be held in the Cadillac "Couch Room."

Topics: Importance of community collaboratives, mission, and vision statement.

Public Comment:

None.

Meeting adjourned at: 2:13 p.m.

Respectfully Submitted,

Stacy Maiville,
Executive Secretary



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

**Ad Hoc Finance Committee Meeting
Minutes**

June 1, 2023

1:00 p.m.

Attendance: Al Cambridge, Ty Wessell, Tom Bratton, Ben Townsend

Others Present: Brian Martinus, Interim CEO; Lauri Fischer, Chief Financial Officer; Stacy Maiville; Executive Secretary

Lauri Fischer, the Chief Financial Officer presented her PowerPoint. Her presentation addressed budgetary details of the employed workforce and other agency oversight. The committee reviewed the proposed budget of the employed workforce and the personnel manning table. The table provides a break-down of how employees are paid and what considerations are taken for their wages. The Manning table outcomes are the personnel budget by cost center. Lauri noted that is important employees are paid similar to their peers.

Ms. Fischer also spoke about the inflationary wage adjustment and benefit costs. NLCMHA uses a 10-step wage scale to pay its employees. She noted that the personnel projected budget is around 32 million.

Ms. Fischer reviewed the other costs. Other costs total about 6.4 million and are focused on historical trends. Other costs include, but are not limited to:

- Staff development
- Supplies & materials

It was noted in the presentation that agency expenses are about \$39 million. The agency also has no rental or lease payment on any of the buildings.

There was discussion about vehicles, transportation and what NLCMHA can and cannot do. NLCMHA does not provide transportation. However, the agency does provide transportation for our consumers that are living in our homes.

The committee decided to present the Board with data from Lauri's presentation, the Direct Personnel Projected budget and Agency budget.

Next meeting: July 6th – 12:00 p.m. Cadillac and August 3rd – 10:00 a.m. Cadillac.

Respectfully Submitted,

Stacy Maiville, Executive Secretary