

Northern Lakes Community Mental Health Authority

Board of Directors Packet

August 17, 2023



BOARD AGENDA

The Northern Lakes Community Mental Health Authority Board will meet on August 17, 2023 at 2:15 p.m. at the Leelanau Governmental Center - 8527 E Governmental Center Dr, Suttons Bay, MI and Virtual Meeting Dial 1-810-258-9588 ID 986 665 315#

| | <u>TIME</u> | <u>ID #</u> ITEMS | POLICY # |
|---|---------------------|--|----------|
| | 2:15 p.m. | Roll Call Pledge of Allegiance Appoint Timekeeper Confirmation of Quorum Consideration of Agenda Conflict of Interest Declaration | |
| | 2:20 p.m. 1 2 | | |
| | 2:30 p.m. | Ownership Linkage A. Citizen Comment (May be limited to three minutes by Board Chairperson) | 1.1, 3.1 |
| | | B. Ownership Communication | |
| | 2:40 p.m. | Chief Executive Officer's Report | |
| | 2:50 p.m. | Chief Financial Officer's Report Initial FY 2024 Budget* 2024 Capitalization Plan* | 2.4 |
| | 3:10 p.m. | Northern Michigan Regional Entity Report | 3.4 |
| ÷ | 3:15 p.m. 5 6 | Assurance of Organizational Performance A. Receipt of CEO Monitoring Reports CEO Response to Monitoring Reports 2.4 Financial Management (Internal Inspection) * B. New Operational Worries C. August Monitoring Assignment 2.1 Consumer Services (Internal Inspection) (Please complete in advance and submit to the chairperson) | 3.0, 3.2 |
| | 3:25 p.m. 7 | Board Means Self-Assessment A. Receipt of Board Monitoring Report CEO Response to Monitoring Report 4.1 Unity of Control (Direct Inspection)* | 3.2, 4.2 |

| August | Monitorina | Assignment |
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8 4.2 Accountability (Direct Inspection) (Please complete in advance and submit to the chairperson)

| 3:35 p.m. | Governance Policies Discussion and Assessment A. Ends | 3.1 |
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| | B. Executive Limitations | |

- C. <u>Governance Process/Ownership Linkage</u> 3.4
- 9 a. RRAC Draft Minutes August 3, 2023 *Review* b. Ad Hoc Budget Committee-
- 10 July 6, 2023 Minutes Review & Approve* August 3, 2023, Draft Minutes - Review (Desk Packet)
 - c. Board Per diem*
 - D. Board/CEO Linkage
- 3:45 p.m.Ownership Linkage1.1, 3.1A. Citizen Comment
(May be limited to three minutes by Board Chairperson)1.1, 3.1
- 3:55 p.m. Announcements/Board Members Reports/Board Association -Board Retreat: October 2, 2023
- 4:00 p.m. September 21, 2023 Agenda Planning Houghton Lake
- 4:05 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: September 21, 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

| 2:15 p.m. |
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| |

Board Members Present: Ben Townsend, Greg McMorrow, Mary Marois, Al Cambridge, Pam Babcock, Kate Dahlstrom, Ruth Pilon, Tom Bratton, Carol Blake, Tony Lentych, Ty Wessell,

Absent: Eric Ostergren, Penny Morris, Sherry Powers, Dean Smallegan, - all advance notice.

Virtual: David Freedman

Others Present: Brian Martinus, Interim Chief Executive Officer, 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; Andrew Waite - BHH Operations Manager; Nancy Stevenson, Chief Operations Officer; Kari Barker, QI Compliance Director; Dan Mauk, Chief Information Officer; Brian Martinus, Interim Chief Executive Officer; Jennifer Hemmes, Administrative Assistant, Reception; Nate Alger, GT County Administrator, Eric Kurtz, NMRE Chief Executive Officer; Dave Simpson, Residential Services Administrator, Andy

<u>Others Virtual</u>: Ann Ketchum, Programmer Analyst II; Curtis Cummins, Medical Director; Jessica Williams, Performance Improvement Specialist; Aimee Horton Johnson, Office Administrator; Terri Henderson, Service Information Specialist; Lisa Holmes, Clinical Review Manager; Jennifer Wiesnewski, RN – Psychiatric Services; Chris Biggar, Finance Manager; Amanda Ritchie, Improvements Coordinator; Joshua Emery, Woodland Home Supervisor; Kellee Hoag, Administrative Specialist, Finance; Deb Freed, Public Relations; Lisa Jones; Recipient Rights Advisor; Terri LaCroix-Kelty, Guest; Carol Balousek, Guest; Lynn Pope, Guest; Becky Brown, Human Resources Specialist; Alyssa Heider, Recipient Rights Specialist; Hilary Rappuhn, Project Coordinator; Judi Crane (Guest), Terri Lacroix-Kelty, Mats Andtbacka, Programmer Analyst II; Melanie Schopieray, Customer Service Specialist -Quality Improvement & Compliance; Tiffany Fewins, Administrative Assistant; Melissa Bentgen, Accounts Payable Team Lead

Call to Order: 2:16 p.m.

Timekeeper: Tom Bratton

| MOTION: | Approve the Consent Agenda, item 2 (June 15, 2023, Committee of the Whole Minutes) |
|----------|---|
| RESULT: | ADOPTED. [UNANIMOUS] |
| MOVER: | M. Marois |
| SECONDER | A. Cambridge |

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MOTION: Approve the June 15,2023 Board of Directors Minutes

RESULT:ADOPTED. [UNANIMOUS]MOVER:M. MaroisSECONDERC. Blake

Ownership Linkage:

A. <u>Citizen Comment</u>:

Jeremiah Williams – Commented that the state of the culture at CMH during last 10 months has been moving in a positive direction. The staff are starting to see an improvement and morale is up.

Chief Executive Officer's Report:

Brian Martinus, Interim Chief Executive Officer, gave the Chief Executive Officer's Report. The agency held the Public Hearing on July 19th, with a great turnout of 115 attendee's total. The Public Hearing went very well. The hearing had robust discussion and a lot of helpful feedback. Mr. Martinus stated that he will be following up with many of the community partners who spoke in hopes to address their needs and build more partnerships.

Mr. Martinus mentioned that mental health speaker, Dave Bartley will be speaking at a VA event on July 25 & 26th, and encouraged those who can, to attend.

August 3rd- 18th Mr. Martinus will be doing 15 days of training for the military. He will be at the August Board meeting and available via phone and email during this time.

Mr. Martinus mentioned that the strategic plan is in the packet and that the Board may want to start considering a new strategic plan, since the current one expires in 2024. Mr. Martinus stated that he recently had a good meeting with MDHHS and will continue to work in partnership and collaboration with them. There are no new updates to the patient portal.

Chief Financial Officer's Report:

Lauri Fischer, Chief Financial Officer, reviewed her report with the Board.

172 Habilitation Waiver enrollments as of this month, approaching the goal of 180. FY 2023 goal is 20-22% HAB support revenue.

Medicaid redeterminations are currently underway. During the first month, 50 people lost their Medicaid for one reason or another. NLCMH is working to help consumers stay enrolled who are still eligible. MDHHS is doing approximately 3000 redeterminations a month.

Ms. Fischer replied to a question asked last month by Mr. Freedman. The difference between the actual expenses verses actual year to date expenses is grants.

Ms. Fischer gave the update on Medicaid spending as compared to regional expenses and referenced the coordination of benefits. She noted that moving forward she will be reporting in net, to stay consistent with the NMRE. The CFO also discussed Medicaid deductibles, residential/inpatient usages, revenues, and spending. Ms. Fischer reviewed the contracts page and explained the amounts listed on the Finance Report.

Northern Michigan Regional Entity Report:

NMRE has been nominating organizations for awards and giving recognitions. It was discussed that Bob Sheehan is focusing on rural health care needs.

Assurance Of Organizational Performance:

| A. <u>Receipt of Board Monitoring Report & CEO Response to Monitoring Report:</u> |
|---|
|---|

| MOTION: | The Board finds the organization in 100% compliance with policy 2.7 Continuity of Executive Functions. |
|-----------|--|
| RESULT: | ADOPTED. [UNANIMOUS] |
| MOVER: | M. Marois |
| SECONDER: | T. Wessell |

B. <u>New Operational Worries</u>:

Ms. Dahlstrom expressed concern regarding AOT (Assisted Outpatient Treatment). She gave background about AOT and asked if it will be part of the 2024 budget worries that there will not be enough staff. Mr. Martinus responded that he would look into the issue.

C. July Monitoring Assignment:

2.4 Financial Management (Internal Inspection)

D. NLCMHA Fiduciary for Grand Traverse Center for Mental Wellness

Ms. Dahlstrom made a motion to accept NLCMH as fiduciary with the requirement that two Board members would be on the committee. Discussion occurred around this topic.

Mr. Cambridge made a motion to remove the two people requirement from the motion. Ms. Marois seconded.

Mr. Nate Alger, Grand Traverse County Administrator, spoke to the Board about the funds and stated that the funds will need to be spent by December 2026.

MOTION: Accept the 5 million from Grand Traverse County and NLCMH to be the Fiduciary for Grand Traverse Center for Mental Wellness

Roll Call Vote Yes: B. Townsend, G. McMorrow, M. Marois, A. Cambridge, P. Babcock, R. Pilon, T. Bratton, C. Blake, T. Lentych, T. Wessell, K. Dahlstrom

RESULT:ADOPTED. [UNANIMOUS]MOVER:A. CambridgeSECONDER:M. Marois

Ms. Dahlstrom asked again to put forward 2 board members on the planning group. The group had discussion and it was commented that it was more an operational nature. The Chair referred the topic to the NLD.

E. <u>Employee Retention Payment:</u>

Mr. Martinus explained the retention payment that the agency would like to give to the staff. He stated that the payment would be a boost in morale for the staff and help retain vital employees. The Board asked questions, which were answered. There was discussion around the payment. Mr. Martinus explained the amounts that would be distributed.

MOTION: Authorize executive staff to implement the retention payment up to \$1,597,925

Roll Call Vote: Yes: B. Townsend, G. McMorrow, M. Marois, A. Cambridge, P. Babcock, R. Pilon, T. Bratton, C. Blake, T. Lentych, T. Wessell No: K. Dahlstrom

| RESULT: | ADOPTED. |
|----------|-----------|
| MOVER: | T.Lentych |
| SECONDER | C. Blake |

Board Means Self-Assessment:

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

| MOTION: | The Board finds the organization 100% in compliance with 4.3 Delegation of Management Powers. |
|-----------|---|
| RESULT: | ADOPTED. [UNANIMOUS] |
| MOVER: | M. Marois |
| SECONDER: | T. Wessell |
| | |

July Monitoring Assignment:

4.1 Unity of Control

Ben commented on policy 4.1. He stated the Executive Secretary serves at the behest of the CEO, and members of the Board should not misuse her. If they have requests for her, they need to send them through the CEO with the understanding that her obligations to the agency come first.

Governance Policies Discussion and Assessment:

- A. Ends: None
- B. Executive Limitations: None.
- C. <u>Governance Process/Ownership Linkage:</u>

MOTION:Receive the March 1, 2023, NLD meeting minutesRESULT:ADOPTED. [UNANIMOUS]MOVER:R. PilonSECONDER:G. McMorrow

| MOTION: | Receive the April 5, 2023, NLD meeting minutes |
|-----------|--|
| RESULT: | ADOPTED. [UNANIMOUS] |
| MOVER: | T. Lentych |
| SECONDER: | M. Marois |

The Board reviewed the NLD draft minutes from July 6, 2023. The NLD decided that there will be Board Retreat. The topic will be Governance, 10-4. Possible dates are October 2, 5, 10th. More details to come. They hope to have a facilitator and educator, with a goal to discuss, analyze, and decide.

| MOTION: | Approve June 1, 2023 Ad Hoc Budget Committee Minutes |
|--------------------|--|
| RESULT: | ADOPTED. [UNANIMOUS] |
| MOVER: SECONDER | A. Cambridge T. Bratton |

The Board reviewed the July 6, 2023, draft Ad Hoc Budget Committee minutes. Mr. Al Cambridge gave the Ad Hoc budget committee update. The committee has discussed revenue, budgets, and contracts. Things will come together for the August meeting.

| MOTION: | Approve the RRAC applicants for committee appointments |
|--------------------|--|
| RESULT: | ADOPTED. [UNANIMOUS] |
| MOVER: SECONDER | T. Lentych A. Cambridge |

D. Board/CEO Linkage: None.

Ownership Linkage:

A. <u>Citizen Comment:</u>

Ms. Babcock made a comment that Andy chose a favorite truck at the truck show and the community really embraces Andy as a fellow truck enthusiast.

Announcements/Board Member Reports/Board Association:

Mary mentioned that it has been nice having civility on the Board and acknowledged Mr. Townsend has been a big part of that.

Mr. Townsend acknowledged the hard work of the Board.

Ms. Dahlstrom passed around sheets regarding parity with health insurance and emphasized it's importance.

Mr. Cambridge requested for the press articles to be emailed out throughout the month, not just on Teams.

Mr. Bratton commented that he attended his first community resilience event, and it was a very good experience.

Mr. Freedman (virtual) spoke that he was grateful Ms. Dahlstrom brought up parity and also emphasized the importance of the issue.

Mr. Townsend commented that Ms. Tracy Andrews was the best Recipient Rights Director the agency has ever had. He also acknowledged Darryl and stated that the fellowship he received is a tremendous award.

Agenda Planning August:

Education Session Topic: August & September -Recovery

Meeting Evaluation/Comments:

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

<u>Adjournment</u>: The meeting adjourned at 3:30 p.m.

Respectfully Submitted,

Ben Townsend, Chairperson

Sherry Powers, Board Secretary

Stacy Maiville, Executive Secretary

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

Committee of the Whole Meeting Minutes

July 20, 2023

12:30 PM

Ben Townsend called the meeting to order at 12:30

Board Members Present: Ben Townsend, Greg McMorrow, Mary Marois, Al Cambridge, Pam Babcock, Kate Dahlstrom, Ruth Pilon, Tom Bratton, Carol Blake, Tony Lentych, Ty Wessell, David Freedman (virtual),

Absent: Dean Smallegan, Penny Morris, Eric Ostergren, Sherry Powers - all advance notice.

<u>Others Present</u>: 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; Andrew Waite - BHH Operations Manager; Nancy Stevenson, Chief Operations Officer; Kari Barker, QI Compliance Director; Dan Mauk, Chief Information Officer; Brian Martinus, Interim Chief Executive Officer; Jennifer Hemmes, Administrative Assistant, Reception; Nate Alger, GT County Administrator, Eric Kurtz, NMRE Chief Executive Officer; Dave Simpson, Residential Services Administrator, Andy

<u>Virtual</u> –Ann Ketchum, Programmer Analyst II; Curtis Cummins, Medical Director; Jessica Williams, Performance Improvement Specialist; Aimee Horton Johnson, Office Administrator; Terri Henderson, Service Information Specialist; Lisa Holmes, Clinical Review Manager; Jennifer Wiesnewski, RN – Psychiatric Services; Chris Biggar, Finance Manager; Amanda Ritchie, Improvements Coordinator; Joshua Emery, Woodland Home Supervisor; Kellee Hoag, Administrative Specialist, Finance; Deb Freed, Public Relations; Lisa Jones; Recipient Rights Advisor; Terri LaCroix-Kelty, Guest; Carol Balousek, Guest; Lynn Pope, Guest; Becky Brown, Human Resources Specialist; Alyssa Heider, Recipient Rights Specialist; Hilary Rappuhn, Project Coordinator; Judi Crane (Guest), Terri Lacroix-Kelty, Mats Andtbacka, Programmer Analyst II; Melanie Schopieray, Customer Service Specialist -Quality Improvement & Compliance; Tiffany Fewins, Administrative Assistant; Melissa Bentgen, Accounts Payable Team Lead

Public Comment:

Terri Lacroix- Kelty – Expressed her excitement for the Grand Traverse Center for Mental Wellness that Ms. Stevenson and Mr. Martinus spoke about in the Board Education session. Ms. Kelty went on to explain the benefits of such a crisis center and how the groups are collaborating to make it happen. Ms. Kelty expressed that Munson is dedicated to this project and to all those involved in bringing the project to completion.

Nate Alger – GT County Commission Administrator spoke about his support for having Northern Lakes serve as fiduciary for the approved ARPA funds.

Office of Recipient Rights Director's Report -

Monthly -July report currently we are under 66 open investigations. 100% compliant in 2 categories:

- 1 staff completing investigations within the 90 days
- 2- the CEO review of reports.

Mr. Newcomb explained that NLCMH is currently in line with the rest of the state. ORR is the biggest complaint source. Site visits are down to 5 for the year and those will be wrapped up in the next few weeks. Mr. Newcomb explained what a site visit is and what it entails.

Mr. Newcomb discussed currency agency statistics including remediation and complaint data for the semiannual report.

<u>NMRE Oversight discussion – Mr. Eric Kurtz</u> was present to answer any questions from the board regarding the contractual oversight of the CEO search process by the NMRE, as well as talk about the letter that was issued to the board regarding the search process and next steps. Mr. Kurtz stated that although the Enabling Agreement has been ratified, there are some other important things that need to take place before the CEO search can take place.

<u>Quality & Compliance Update –</u> Kari Barker gave a Quality and Compliance report to the board. The report covered Q2/Q3 of FY 23. Ms. Barker discussed the highlights in the areas of Quality, Compliance, and Customer Service. Ms. Barker mentioned the improvements seen across the agency for quality and compliance in the area of clinical record documentation. The agency is now averaging above 90%. Ms. Barker discussed risk events, critical incidents and where the agency stands in both of those categories.

Behavioral Health Home Presentation (CHAT) –

Andrew Waite gave an overview of the CHAT Program at Northern Lakes. CHAT is an acronym for Comprehensive Health Assistance Team. Mr. Waite explained what the program is about, its purpose, and how it benefits consumers. Mr. Waite explained eligibility for the CHAT program, the core services of the program, which are:

- Comprehensive Care
- Care Coordination
- Health Promotion
- Transitional Care
- Individual and Family Support
- Referral to Community and Social Support Services

Mr. Waite gave a breakdown of the consumers enrolled in the CHAT program by gender and age. He went on to cover statistics of the program including past, current, and anticipated growth. Also discussed, was the decrease in ER, Inpatient, and Urgent care visits for FY 22 compared to FY23. Mr. Waite also reviewed financial data for FY 22 for the CHAT program. Mr. Waite ended his presentation by sharing his goals for the program moving forward.

Agenda Planning:

Next meeting is August 17, 2023, at Leelanau County Governmental Center, Suttons Bay

Meeting Evaluations/Comments:

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

Other/Adjourn:

Meeting adjourned at 1:55

Respectfully Submitted,

Heather Sleight, Administrative Specialist

Interim Chief Executive Officer's

Report to the Board August 17th, 2023

Citizen Comment: None

Grants of Significant Value: None

Staff Retention Pay: Staff would like to thank the Board of Directors for approving staff retention pay. The positive outpouring from staff towards the leadership team and the Board of Directors has been overwhelming. This gesture has made a positive impact on the organization.

CWC Hour Reduction: Starting August 1^{st,} the CWC reduced its hours from 24 hours to 18 hours. CWC will now be open from 6:00 a.m. until 12:00 a.m.. This is a result of safety concerns, lack of staffing, and numbers not supporting being open 24 hours.

Community Connections/Meetings:

- 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
- August 23rd, NMRE Board Meeting
- September 6th, Managers Training Event
- September 7th, All-staff Training Event
- September 14th, Law Enforcement Meeting
- September 19th, NMRE Operations Committee Meeting
- September 21st, NLCMHA Board Meeting

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

- Staff Anniversaries
- Staff Changes
- Office Meetings & Townhall Information
- Update on Crisis Welcoming Center

- Employee Assistance Program Reminder
- Residential Homes Updates
- RCA Spotlight
- Employee Morale Building Events (Grayling Yoga & Tie dye shirts) (Traverse City Walking Wednesdays)
- Wellness Committee Reboot Emphasis of employee wellness & morale
- New Drop-in Center in Grayling "Hope Begins Here"
- Recap of Annual Public Hearing
- Promoting Behavioral Health Equity through Words

Human Resource Manager Vacancy: The job posting closed on July 17, 2023. Interviews are being set up and a hiring team is in place to hire our next HR Manager.

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:

Respectfully Submitted, Brian Martinus, Interim CEO

https://www.cadillacnews.com/news/mental-health-event-to-focus-on-what-it-is-like-forthose-living-with-mental/article_4b5ac088-2263-11ee-9aa4-4bcdf4c0f2ab.html

https://www.record-eagle.com/news/business/business-memoranda-07-26-2023/article_7321d8a6-2658-11ee-b6a6-178d81338a8b.html

<u>https://upnorthlive.com/news/local/roscommon-county-celebrates-national-night-out-a-night-of-fun-safety-education-and-community-bonding</u>

https://www.cadillacnews.com/news/mental-health-event-to-focus-on-what-it-is-likefor-those-living-with-mental/article_4b5ac088-2263-11ee-9aa4-4bcdf4c0f2ab.html

Mental health event to focus on what it is like for those living with mental health/illness issues

• By Rick Charmoli Cadillac News

CADILLAC — The goal for a second event focused on the mental health of the area is the same, but the intended audience and panelists will be different.

Last March, a mental health symposium was held in Cadillac to bring various community groups and people together to discuss what they are seeing in their professions. The idea behind the event was to allow the Human Service Leadership Council, which hosted the event at Baker College of Cadillac, to provide programming to not only its members but also community members to help spread awareness about what is going on within different agencies and nonprofits regarding mental health.

Although the premise of the mental health symposium was simple, once it was completed the people who attended the roughly two-hour session also knew it was vital for the community to find solutions to the issues associated with mental health and mental illness.

After the spring event, the idea was that a second event would be held in May during the annual Mental Health Awareness Month, but Human Services Leadership Council of Missaukee and Wexford Counties Coordinator Shari Spoelman said it was determined to not be a good time. There were a plethora of events occurring in May through Northern Lakes Community Mental Health and other agencies, such as Club Cadillac and National Alliance on Mental Illness that Spoelman said would have been a scheduling conflict for those groups. August was looked at, too, but Spoelman said with schools gearing up for the new year it again was going to be a scheduling conflict. With all that, Spoelman said it was determined that the second event would be held on Sept. 14 from 9:30 to 11 a.m. at the Baker College of Cadillac Student Center.

"The main difference between this one and the one in March is the intended audience. The one in March was for people who work with people and we want to make sure the one in September is open to anyone interested in mental health and the challenges people face with mental illness," she said.

During the March event, panelists who spoke included Nichole Richardson, Cadillac Innovation High School counselor, Lt. Mike McDaniel, Wexford County jail administrator, Rachel Reinink, Love, INC of Wexford and Osceola Counties executive director, Kari Wineland, Rexair LLC human resource manager, and Stacey Kaminski, Northern Lakes Community Mental Health operations manager for Crisis Services. The event also included a tabletop/round table exercise.

Spoelman said the information that was gathered during that exercise was collected and they pour over the information. The event in September and its topic are the direct result of that information.

That is how the idea came about to have this event be focused on those who live in the area and are living with mental health issues or mental illness. The event will be titled, "A Day in the Life of."

"It is really about educating ourselves and learning more. Breaking down barriers and reducing stigma. A lot of people still don't get help for themselves or children in the home, for parents or loved ones because there is still a stigma related to dealing with mental health issues," Spoelman said. "Hopefully the more we talk about it and listen to people who've gone through it and walked the path we get a better understanding of the services available."

Human Services Leadership Council Professional Development Chair Katelyn Richard said the panelists who will be presenting at the upcoming event have been identified and they are currently working toward getting marketing materials in place and out. She said it isn't just those who live with mental health issues but those are family members who can speak about what it was like living alongside someone living with those issues.

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Richard said the goal of his event is to shed light on actual situations and hear from people who can speak to living with mental illness and promote advocacy. The event in March had a directed promotion in terms of who could attend while the event in September is open to anyone and everyone who is interested or wants to come.

The point is to let people know they don't have to live in fear and that there is help, support and resources.

Richard said people may think mental health issues are only happening to people with substance abuse issues, people living in poverty or have incidents from their childhood. While those can be people who are dealing with mental health issues, Richard said they are not the only ones.

The goal is to showcase something different than their perceived picture of mental health or the stigma that is typically attached to it, she said.

"We are really pushing for impact. We are not going to open the floor for questions this time. There will be opportunities to be connected with resources if they need to talk to someone or need support," Richard said. "This is an impact event and sitting and listening to people and their experiences. How they found hope and got help."

The mission of the leadership council is to achieve a collective vision of quality of life in communities within Wexford and Missaukee counties through the provision of leadership in the design, delivery and oversight of health, education and human services. Mental health is likely one of the biggest facing this and other communities across the state and country.

<u>https://www.record-</u> eagle.com/news/business/business-memoranda-07-<u>26-2023/article_7321d8a6-2658-11ee-b6a6-</u> <u>178d81338a8b.html</u>

Business Memoranda: 07/26/2023

Darryl Washington was chosen as a 2024 <u>CQ Fellow</u>. Washington is the director of long-term care and support services for Northern Lakes Community Mental Health Authority and the leader of the Northern Health Care Management division. The one-year cultural intelligence (CQ) certification involves monthly group meetings, individual coaching and travel to Singapore. David Livermore is a founding member of the program.



https://upnorthlive.com/news/local/roscommon-county-celebrates-national-night-out-a-night-of-fun-safety-education-and-community-bonding

Roscommon County celebrates National Night Out: A night of fun, safety education and community bonding

by Nicole Long Wed, August 2nd 2023, 6:03 AM EDT

ROSCOMMON COUNTY, Mich., (WPBN/WGTU) - People in Roscommon County celebrated national night out earlier Tuesday evening.

Every first Tuesday in August, law enforcement agencies nationwide host the National Night Out.

It's a drug and alcohol-free event where people can meet their local heroes.

Many of the agencies work with children.

"We have a mobile children's team that will go out in the community and respond to families and children in crisis in their homes, in the community, wherever that is," NLCMH Crisis Services Operations Manager Stacey Kaminski said.

And having the opportunity to meet law enforcement one-on-one can help kids in case of an emergency.

VSU "If they're afraid of the person that's there, it kind of puts them back a little bit, so that they can recognize the uniform or the vehicle and say 'Oh, yeah, this person is a helper," Roscommon County Victim Services Unit Coordinator Jann Lehman said.

And some kids even come to the event to see those who've helped them in the past.

"I think it's really fun to come here and just meet them again," one child told UpNorthLive News.

"It started with minimal attendance and now we are serving 500 hotdogs and we will run out at some point," Roscommon Night Out Organizer Deputy Emilie said.

Northern Lakes Community Mental Health Authority Financial Reporting for 7/31/2023

Highlights:

- The Michigan Department of Health and Human Services (MDHHS) experienced a delay in issuing the files that are needed to pay the prepaid inpatient health plans their Medicaid capitation for July. As of August 8^{th,} the July capitation funds for Medicaid and Healthy Michigan Plan had not been received.
- For the month of August 3,197 individuals within the six counties served by NLCMHA will be redetermined for Medicaid coverage. Of the 3,197 individuals, 104 people are open to NLCMHA for services. In July, 44 consumers who had Medicaid in July have lost their Medicaid coverage in the month of August.
- Through July there are 173 HSW enrollments with 2 packets pending. The NMRE has 35 open HSW slots as of 8/9/2023.
- The Traverse House Clubhouse and the Club Cadillac Clubhouse worked in tandem during the Cherry
 Festival this year to sell parking spots in the Traverse City office parking lot during the festival. The 2023
 year was the best year ever experienced for this clubhouse fundraiser. During the 8 days of the festival
 \$22,028 was raised. It was the most money raised since this fundraiser began in 2001. The funds will be
 used to support wellness, education, Clubhouse International conferences and trainings, employment
 supports, and many others.
- Thank you to the Budget Committee. The past three months have been very informative, and it is hoped the changes to the budget presentation this month are well received. Beginning in November the financial reporting for FY 2024 operations will resemble the FY 2024 budget layout.

Medicaid Spending as compared to Regional Funding Advances:

- Services provided to individuals with traditional Medicaid coverage will be reported at \$52,081,809. This is \$1,527,219 below capitated advances provided by the NMRE and 10/12ths of the FY 2022 carryforward made available to NLCMHA.
- Services provided to individuals with Healthy Michigan Plan coverage will be reported at \$6,939,484. This
 is \$251,482 below capitated advances provided by the NMRE and 10/12ths of the FY 2022 carryforward
 made available to NLCMHA.
- Services which must be paid for by General Funds total \$1,331,786. This is \$1,225,889 below the year's allocation. Services which are paid for by general funds due to Medicaid Deductibles total \$63,671 through July 31st.

Residential/Inpatient Usage:

- At the end of June, it is expected there were 231 people in contractual specialized residential placements, 22 people in semi-independent homes, and 31 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 change of 0. The average daily cost of a person in a contracted specialized residential home is \$240. The average daily cost of a person residing in a semi-independent placement home is \$273 and all SIP arrangements are contractual placements.
- The amount paid to community inpatient hospitals, on a cash basis, was \$338,434 in the month of July. Inpatient services are over budget by \$378,602 so far, this fiscal year. NLCMHA utilized 98 bed days at the North Hope crisis residential unit in the month of July. North Country CMH also utilized North Hope for diversions from hospitalization for two people.

Revenues and Spending:

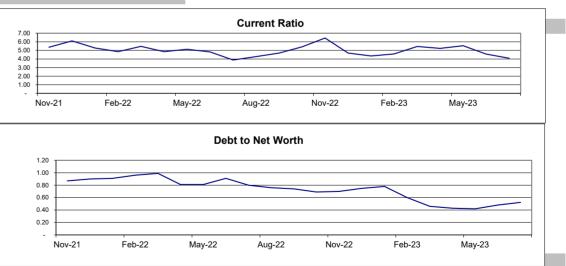
- Revenues exceed expenses by \$3,851,969 through July 31, 2023.
- Cash on hand increased \$727,246 in July. The NMRE advanced the July capitation in August.

| | | | ity Mental Health Authority | | | |
|---|-----|---|--|----------|--|--|
| | | | Agreements Entered Into hth of July 2023 | | | |
| | | | | | | |
| | | Vendor by Category Comments or Details | | | Estimated Annua Financial Value o Contract or Amendment | |
| 1 | Sne | ecialized Residential Services and Community Living Supports | | | | |
| - | * | MORC Second Amendment | To Extend Contract | \$ | 28,00 | |
| | * | Beacon Specialized Living Services, Inc. Fifth Amendment | Add Beacon Home at Woodland | \$ | 350,00 | |
| | | | | \$ | 378,00 | |
| 2 | Inp | atient and Hospital Contracts Including Single Case Agreements | | | | |
| | * | St. Joseph Mercy Oakland Hospital | Single Case Agreement | \$ | 10,00 | |
| | * | Brighwell Behavioral Health | Single Case Agreement | \$ | 10,00 | |
| | | | | \$ | 20,00 | |
| 3 | Ind | ependent Contractors and Leases | | | | |
| | * | Ferris State University Affiliation Agreement | Internship (Intern Wages at \$14/hour) | \$ | - | |
| | * | | | \$ | - | |
| 4 | No | rthern Health Care Management | | | | |
| - | * | None | | \$ | - | |
| | * | | | \$ | - | |
| _ | 0+1 | | | | | |
| 5 | Otr | ner Administrative Services (Office Equipment, Communications, ar | | | | |
| | * | First Net | Communication Provider for Cell phones and Ipads, An AT&T product designed for first responders | \$ | 200,0 | |
| | | | Office Equipment Contract for service, toner | Ŧ | | |
| | * | Applied Inovation | cartridges, etc | \$ | 100,0 | |
| | * | Stericycle Inc | Shredding Service for all sites | \$ | 36,5 | |
| | * | Proto-Call | After hours Crisis Line | \$ | 325,0 | |
| | * | Charter Communications | Communication, Television, Internet | \$ | 41,0 | |
| | * | Mako | Phone system | \$ | 46,5 | |
| | * | People Driven (Cisco) | Network Infrastructure license renewal | \$ | 95,0 | |
| | * | Tucows.com (Hover) | Domain Name registration renewal (nlcmh.org) | \$ | 2 | |
| | * | Agiloft, Inc | Contract management | \$ | 5,9 | |
| | * | DocTract | Policy Management | \$ | 7,5 | |
| | * | Innermark, Inc. | MemberCore - | \$ | 57,3 | |
| | * | Keeper Security | Password Management tool | \$ | 3,4 | |
| | * | Kaseya US, LLC | HelpDesk Software | \$ | 51,0 | |
| | * | Peter Chang Enterprises, Inc | PCE - NoLa | \$ | 225,0 | |
| | * | SBM Electronics Inc | Dictation software and hardware | \$ | 1,6 | |
| | * | Quest Software Inc | Backup software | \$ | 2,6 | |
| | * | Stratus Video | Translation service | \$ | 5 | |
| | * | Presidio Networked Solutions | Infrastructer licensing - Cisco | \$ | 3,6 | |
| | * | Safety Net | Licensing - VMWare | \$ | 18,3 | |
| | * | TriZetto Provider Solutions | Integrated elegebility - NoLa | \$ | 2,3 | |
| _ | - | | | \$ | 1,223,4 | |
| 6 | Oth | her Professional Services (Legal and Accounting) | | | | |
| | * | None | | \$ \$ | | |
| 7 | Gra | ants-Revenue Contracts | | <u> </u> | | |
| / | * | None | | \$ | | |
| | | | | \$ \$ | | |
| | | | | Ŷ | - | |

Northern Lakes Community Mental Health Authority Finance Report As of 7/31/2023 Fiscal Year Ending September 30, 2023

| | | | 83% | | | | | | (Expenses) | | |
|---------------------------|------------------------------------|-----------|--------------|---------------|--------------|------------|--|-----------------|-----------------|---------------|--|
| | 2023 | -#1 | 2023-#1 | Actual | Actual | Percentage | Capitated | Provided | Earned | Worries | |
| <u>Revenues</u> | Total B | udget | YTD Budget | YTD Revenues | Over/(Under) | YTD | Category | Advances | Revenues | (Over)/Under | |
| State Sources | \$ 5,22 | 22,029 | 4,351,691 | 5,010,882 | 659,191 | 96% | | | | | |
| Local Sources | \$ 2,03 | 31,467 | 1,692,889 | 2,078,976 | 386,086 | 102% | General Funds | 2,557,675 | 1,331,786 | 1,225,889 | |
| Medicaid Sources | \$ 68,14 | 40,272 | 56,783,560 | 59,969,607 | 3,186,047 | 88% | Medicaid | 53,609,028 | 52,081,809 | 1,527,219 | |
| Reimbursements | \$ 2,74 | 45,124 | 2,287,603 | 1,127,647 | (1,159,956 |) 41% | Healthy Michigan | 7,190,967 | 6,939,484 | 251,482 | |
| Northern Health Care Mgmt | \$ 11,9 | 52,470 | 9,960,392 | 8,882,201 | (1,078,191 |) 74% | Behavioral Health Home | 551,709 | 410,133 | 141,576 | |
| Total Revenues | \$ 90,09 | 91,362 | 75,076,135 | 77,069,313 | 1,993,178 | 86% | Northern Health Care Mgm | 8,882,201 | 8,058,611 | 823,590 | |
| | - | | | | | | Local Requirements | 2,078,976 | 657,788 | 1,421,188 | |
| | | | 83% | Actual | Actual | Percentage | | 74,870,555 | 69,479,611 | 5,390,944 | |
| Expenditures | Total B | udget | YTD Budget | YTD Expenses | (Over)/Under | YTD | Earned and allowable to ret | ain | | 2,514,238 | |
| Personnel | \$ 30,3 | 56,676 | 25,297,230 | 24,526,091 | 771,139 | 81% | | | | | |
| Direct Operations | \$ 2,570,154 \$ 12,967,971 | | 2,141,795 | 2,233,753 | (91,958 |) 87% | Medicaid and Healthy Michigan Plan expenses that exceed capitation advances would need to be requested to be covered by Medicaid | | | | |
| Contractual Services | | | 10,806,643 | 9,085,298 | 1,721,344 | 70% | | | | | |
| Contract Agencies \$ 7,8 | | 91,208 | 6,576,007 | 7,905,540 | (1,329,534 |) 100% | savings or the Medicaid Internal Service Fund held by the NMRE. | | | | |
| Residential Contracts | \$ 26,54 | 47,018 | 22,122,515 | 20,782,038 | 1,340,477 | 78% | | | | | |
| Inpatient Services | \$ 6,49 | 91,000 | 5,409,167 | 5,787,768 | (378,602 |) 89% | Services/expenses which m | ust be covered | l by General Fι | unds that | |
| Transportation | \$ 1,53 | 35,132 | 1,279,277 | 1,314,669 | (35,392 |) 86% | exceed the General Funds a | allocation must | be covered by | Local Sources | |
| Occupied Space | \$ 1,73 | 32,203 | 1,443,503 | 1,582,186 | (138,684 |) 91% | or NLCMHA Fund Balance. | | | | |
| Total Expenses | \$ 90,09 | 91,362 \$ | 5 75,076,135 | \$ 73,217,343 | \$ 1,858,792 | 81% | | | | | |
| | Net Reve | nues over | Expenditures | \$ 3,851,969 | | | | | | | |
| | | | | | | | | | | | |

| Monthly Indicators | Pre | evious Month | C | Current Month |
|------------------------------------|-------|------------------|-------|-----------------|
| Current Ratio | | 4.57 | | 4.08 |
| Cash on Hand | \$ | 26,538,751 | \$ | 27,265,997 |
| Short Term Liabilities | \$ | 5,807,497 | \$ | 6,681,072 |
| According to Financial Performance | e Ind | dicators the goa | al is | greater than 2. |
| Debt to Net Worth | | 0.48 | | 0.52 |
| Short Term Liabilities | \$ | 5,807,497 | \$ | 6,681,072 |
| 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 |
| According to Financial Performance | e Ind | dicators the goa | al is | less than 2.5. |
| | | | | |
| Proforma YTD Fund Balance | \$ | 14,528,927 | \$ | 14,586,859 |
| Self Funded Health Insurance IS | \$ | 332,690 | \$ | 268,857 |
| Directly provided services | | 39.0% | | 39.8% |
| Contractually provided services | | 61.0% | | 60.2% |



CEO Response to July 20, 2023 Board Monitoring Report Evaluation August 17, 2023

Policy 2.4 – Financial Management– Internal Inspection

Ten (10) Board Members completed and submitted the monitoring report. There are sixteen (16) Board members.

Question 1 - Was this report submitted when due? – 10 Yes

Question 2 - Did the report lay out the CEO's interpretation of the request? - 10 Yes

Question 3 - Was I convinced that the interpretation is justified and reasonable? -10 Yes

Question 4 - Did the interpretation address all aspects of the subject? -10 Yes

Question 5 - Does the information show compliance with Board direction/policy? – 10 Yes

CEO Response 2023:

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

Respectfully Submitted,

Brian Martinus Interim Chief Executive Officer

ASSURANCE OF ORGANIZATIONAL PERFORMANCE Board Policy Monitoring – Internal Inspection August 17, 2023

2.1 Consumer Services - Internal Inspection

The CEO shall not knowingly permit the delivery of services in a manner that violates the dignity, privacy, legal rights or safety of consumers.

In managing the services provided by the Authority, the CEO shall not:

2.1.1 Knowingly permit the solicitation of personal information from consumers for which there is no legal or clinical necessity;

2.1.2 Knowingly fail to comply with laws and regulations designed to safeguard the privacy and security of confidential information;

2.1.3 Knowingly permit professional services to be rendered without appropriate informed consent;

2.1.4 Knowingly fail to implement a fair system in which the grievances of consumers maybe heard and resolved.

2.1.5 When licensed as a substance use disorder provider fail to be in compliance with the Administrative Rules for Substance Abuse Services Programs in Michigan.

CEO Interpretation August 2023

NLCMHA maintains personal information in accordance with the highest level of privacy standards and regulations and obtains only the information that is needed for regulatory, legal, or clinical necessity. Need to know is an important guiding principle for Privacy and Security and is used to protect health information. NLCMHA uses the Consent to Share Behavioral Health Information developed by MDHHS as requested, needed, and appropriate. Adequate and advanced notices are provided as clinically necessary and appropriate to allow the person served recourse to decisions that reduce or limit services. It is operationalized through the Local Appeals and Fair Hearings process. Additionally, the grievance process is available for concerns that are not of a clinical nature. NLCMHA meets the requirements within the Mental Health Code that specifies regulations regarding Recipient Rights and maintains a system that protects the Privacy and Security of confidential information.

Policies have been developed to address and reinforce the expectation that staff practice consistent with the full range of legal protections including those clearly stated in the Michigan Mental Health Code, the Administrative Rules, and through the MDHHS contracts. The organizational structure of NLCMHA reinforces the Policies through, staff position descriptions and training expectations. Key Guarantors of compliance within the organizational structure, the Executive Team, all managers and supervisors, as well as all staff. We also continue to upgrade our hardware and software to support protections to the privacy and security of PHI.

Pertinent reports demonstrating our adherence to rules and regulations include:

- The Office of Recipient Rights Semi-Annual and Annual Reports
- The Privacy and Security Committee Annual Report
- The Customer Services Activity Reports
- Quality and Compliance Reports

Respectfully Submitted,

Brian Martinus, Interim Chief Executive Officer

ASSURANCE OF ORGANIZATIONAL PERFRORMANCE Board Policy Monitoring – Internal Inspection August 17, 2023

2.1 Consumer Services

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 July 20, 2023, Board Means Monitoring Report Evaluation August 17, 2023

Policy 4.1 - Unity of Control - Direct Inspection

Eleven (11) Board Members completed and submitted the monitoring report. There are sixteen (16) Board Members.

Question One - Do you believe we are in strict compliance with the policy as stated for each provision? – 10 Yes, 1 No

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?

Comments:

- 1. "I am unaware of any individual(s) not in compliance with this policy".
- 2. "I believe that the Board chair may direct the CEO at times without direction from the Board"

Question Three – How do you think we could improve our process to be in full compliance?

Comments: "Transparency".

Question Four – What do we need to learn or discuss in order to live by this policy more completely?

Comments:

- 1. "No Secrets."
- 2. "Frequent review with any needed explanation should suffice. Any and all issues of non-compliance should be addressed immediately."

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

CEO Response 2023:

I appreciate the Board's assessment of 91% compliance.

Respectfully Submitted,

Brian Martinus Interim Chief Executive Officer

BOARD MEANS SELF-ASSESSMENT Board Policy Monitoring – Direct Inspection August 17, 2023

4.2 Accountability

The employed Workforce is accountable to the CEO and the CEO is accountable to the Board. The employed Workforce is not directly accountable to the Board. Accordingly:

4.2.1 Neither the Board nor any member or committee thereof has authority to direct or supervise the activities of an employed member of the workforce.

4.2.2 The Board shall not participate, formally or informally, in the performance evaluation of any employed Workforce member except the CEO.

4.2.3 The Board's measure of the performance of the organization in realizing Board Governance Policies shall be the measure of the performance of the CEO.

BOARD MEANS SELF-ASSESSMENT Board Means Policy Being Monitored:

4.2 Accountability

August 17, 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)



Recipient Rights Advisory Committee Meeting Minutes

August 3, 2023

1:30 PM

Northern Lakes Community Mental Health Authority located at 527 Cobb Street, Cadillac as well as virtual.

Attendance:

Recipient Rights Advisory Committee Members Present: Chuck Corwin, Rudy Wright, Al Cambridge, Rose Denny Others Present: Brian Martinus, Interim CEO; Brian Newcomb, Director of Recipient Rights; Stacy Maiville, Executive Secretary; Erica Smith, Recipient Rights Advisor; Lisa Jones, Recipient Rights Advisor; Mark Draeger, Recipient Rights Advisor; Alyssa Heider, Recipient Rights Specialist Virtual: Armandina Zamora, Marleen Cassidy Absent: Tony Lentych – with advance notice

Al Cambridge called the meeting to order at 1:30 p.m.

Conflict of Interest Declaration: None.

Review and Approve Agenda:

The agenda was approved and included in the packet.

Receive and Review April 6, 2023, Meeting Minutes:

The minutes were reviewed and included in the packet.

| MOTION: | Receive and Review Meeting February 14, 2023 Minutes. |
|-----------|---|
| RESULT: | ADOPTED [UNANIMOUS] |
| MOVER: | Nina Zamora |
| SECONDER: | Chuck Corwin |
| | |

Public Comment: None.

Recipient Rights Director's Report:

The Office of Recipient Rights Director, Brian Newcomb, presented the latest ORR Report. This year there has been 310 complaints, and the department remains in 100% compliance. The findings are at a 55% substantiation rate, which is an average amount for the state of Michigan. The agency contracts with over 150 homes throughout Michigan. The ORR department is moving ahead of schedule with only 5 site visits left for FY 2023.

There have been discussions at the state level regarding background checks for those working in the CMH homes and to clarify language about camera in homes.

Required Protections of the ORR: None.

Semi Annual Report: Brian presented the Semi-annual report. NLCMH Serves 5,649 individuals. Most common complaint is neglect 3, about 80% of that is the staff sleeping on the job. It is important to note that the Office of Recipient Rights does not issue the discipline, the ORR offers what the Michigan Mental Health Code states as recommended action. Brian reviewed the categories and statistics from his report.

<u>Recipient Rights Refresher training - Restrictions and limitations:</u> The Office of Recipient Rights gave a presentation about restrictions and limitations.

Freedom of movement may not be restricted unless it is necessary to prevent injury to others, it must be documented and authorized in the plan of services, and in the least restrictive manner possible. Recipients have the freedom of expression, communication, movement, privacy, personal property, financial rights, personal space, confidentiality among other freedoms. If there is a limitation it is only allowed if reasonable, in writing, and posted.

If there is a search and seizure is only permitted with:

- Reasonable cause to suspect
- Witness must be present
- Resident must be given choice to be present
- Receipt given to resident
- Documented in record

The Behavior Treatment Committee adheres to Administrative Rule 330.7199(2)(g). If the recipients individual plan of services proposes to include intrusive interventions or interventions that restrict or limit the recipient's rights, the plan must be reviewed and approved by the NLCMHA Behavior Treatment Committee. The BTC meets once a month with the ORR and consists of Psychologists, the Medical Director, case managers, and any others that might need to be involved.

Public Comment: None.

Other/Adjourn: Meeting adjourned at 2:12pm

Respectfully Submitted,

Stacy Maiville, Executive Secretary



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

Ad Hoc Budget Committee Meeting

Minutes

July 6, 2023

12:00 p.m.

Attendance: Al Cambridge, Tom Bratton, Ben Townsend, Dave Freedman

<u>Others Present</u>: Brian Martinus, Interim CEO; Lauri Fischer, Chief Financial Officer; Stacy Maiville; Executive Secretary, Tracy Andrews Director of Managed and Integrated Health

| MOTION: | Approval of the June 1, 2023 Minutes |
|-----------|--------------------------------------|
| RESULT: | ADOPTED. [UNANIMOUS] |
| MOVER: | Ben Townsend |
| SECONDER: | Tom Bratton |

Lauri Fischer, the Chief Financial Officer provided information regarding the NLCMHA contracts with the assistance of Tracy Andrews, Director of Managed and Integrated Health. She mentioned that Northern Lakes has negotiation power with some contracts, and some we do not. Contracts are made for a two-year term. Different contract rates and renewals vary depending on the company and stipulations they face.

It was clarified that NLCMH has mandated services that we are required to provide. We cannot shift funds from one area to another. The consumer drives the priority. Just because a value of the contract is specified does not meant that the contract will experience that level of dollars. It is expected that the needs of the consumers will dictate who their provider will be because there is consumer choice.

Ms. Fischer and Ms. Andrews went over their reports and projections. Ms. Fischer clarified that some circumstances are estimates. It is projected based on that specific contract from trends and experience.

The report provided by the CFO identified the following information:

- Contract by service type
- Contracts alphabetically
- Contracts by budget summary

Discussion of Board presentation

The Ad Hoc Budget Committee decided that page two of the summary will be given to the Board.

Next meeting: August 3rd – 10:00 a.m. Cadillac.

Agenda: What capitation availability is. Compare the two primary budgets to see if there is any difficulty.

Respectfully Submitted,

Stacy Maiville, Executive Secretary