



Northern Lakes  
Community Mental  
Health Authority

Committee of the  
Whole Packet

November 16, 2023



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

**COMMITTEE OF THE WHOLE - AGENDA**

**DATE:** November 16, 2023  
**TIME:** 12:30 p.m.  
**PLACE:** Northern Lakes Community Mental Health Authority  
 527 Cobb Street, Cadillac and Virtual Meeting  
 Dial 1-810-258-9588 Conference ID 986 665 315#

<b>TIME</b>	<b>ID #</b>	<b>ITEM</b>	<b>POLICY #</b>
12:30 p.m.		Call to Meeting	2.8
12:35 p.m.		Public Comment <i>(May be limited to three minutes by the Committee Chairperson)</i>	
12:40 p.m.	1	Update on Recipient Rights - Brian Newcomb, Director of Recipient Rights	3.7
12:50 p.m.	2	Presentation –Information and Technology - Dan Mauk, Chief Information Officer	3.4
1:10 p.m.	3	2023 Board Schedules - Policy Monitoring Schedule - Annual Planning Calendar - Board Education and Work Plan - Board Meeting Schedule	
1:25 p.m.		Protocall Effectiveness	
1:40 p.m.		December 21, 2023, Agenda Planning – Traverse City	
1:45 p.m.		Evaluation/Comments	
1:55 p.m.		Other/Adjourn	

**NEXT MEETING: December 21, 2023**

**Note: This is the Board’s work group and often times the Board’s work groups do not follow set times.**

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

Office of Recipient Rights Director's Report  
November 2023

<b>Dates represented</b>	<b>10/01/21-11/06/21</b>	<b>10/1/22-11/06/22</b>	<b>10/1/23-11/06/23</b>
Complaints	47	40	52
OJ, No Right Inv.	6	8	6
Interventions	4	1	7
Investigations	37	31	37
Investigations Comp	37	31	3
Investigations open	0	0	35
Inv > 90 days	0	0	0
Inv < 90 days	37/37 (100%)	31/31(100%)	3/3 (100%)
Summary Report Avg	37/37 (100%)	33/33 (100%)	4/4 (100%)
NLCMHA staff alleg.	2	8	5
NLCMHA Staff W/I 1 yr	0	2	0

**Complaint Source**

<b>Complaint Source</b>	<b>Count</b>
Anonymous	1
Community/General Public	4
Guardian/Family	6
ORR	16
Recipient	8
Staff	17
<b>Total</b>	<b>52</b>

**Notes:**

-FY2023 – Completed 182 site visits

**Works in progress**

- Annual Report for MDHHS ORR

-CARF documentation for ORR

-Investigative Data for each contracted provider

Respectfully submitted,

Brian Newcomb

Director of Recipient Rights

# 2023 IT Board report

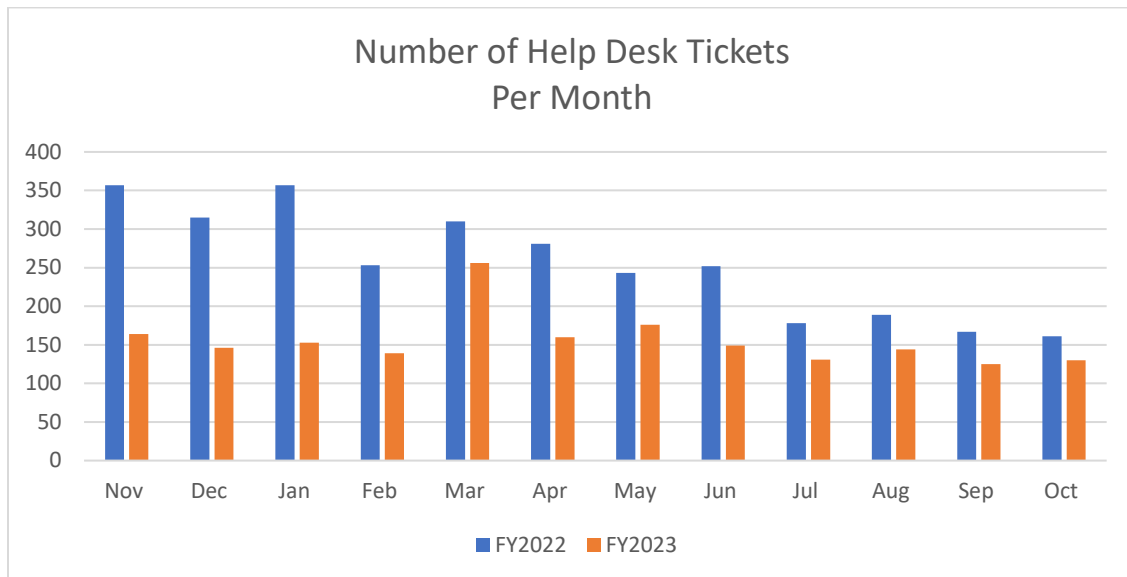
Dan Mauk, Chief Information Officer

## Summary

In the past fiscal year, our organization achieved significant advancements in operational efficiency, security, and staff support. Key accomplishments include a proactive approach to security risk assessment leveraging the Arctic Wolf Portal, upgrading bandwidth and transitioning to SD-WAN technology to meet increased demands from cloud-based solutions, enhancing cybersecurity awareness, implementing multi-factor authentication in Office 365, enforcing conditional access policies, migrating antivirus protection to Microsoft Defender, upgrading conference rooms to Teams Room devices, transitioning to a native Azure Active Directory, migrating file shares to cloud-based storage, replacing aging hardware, and addressing security incidents through improved training and protocols. These efforts reflect our unwavering commitment to providing excellent services while ensuring data security and infrastructure resilience.

## Staff Support

Last fiscal year we had rolled out a new help desk ticketing system to better manage and track our staff support. COVID had our support team off balance, trying to support a mostly remote workforce. As you can see below our monthly ticket count had steadily drop last year and has stabilize all this year, except for March. We continue to utilize the helpdesk information to direct the development of training materials, such as tutorials and “lunch and learn” sessions.



## Security Risk Assessment

The following is our current risk score as shown in our Arctic Wolf Portal



We are currently monitoring over 500 devices and all traffic within our facilities with Arctic Wolf. We have been mitigating identified risks as they emerge and are seeing our basic risk score hovering at about 8.0. You can see that over the past week we have seen a 92% increase in new risks, totaling 647 new risks. Over that same period, we have mitigated almost 3500 risks. We work daily to mitigate as many risks as possible and have a weekly planning meetings to understand the risks and address the approach needed to mitigate emerging risks. This is one of our primary areas of focus and where a considerable amount of our time is spent in this department. Arctic Wolf has proven to be an invaluable tool in the process.

### Upgraded bandwidth at all sites and migrated to an SDWAN topology.

Several factors: a post COVID move back to the office, increasing reliance on cloud-based services, to name a couple, had put increasing pressure on our available bandwidth. To address these new demands, we upgraded the available bandwidth at all 4 main sites to 1000 mbps from 50 mbps at Houghton Lake and Grayling and 100 mbps at Cadillac and Traverse City. Further improvements in access were realized by redesigning our network and switching to a SD-WAN topology from an ePLN topology. The ePLN topology was more localized and primarily focuses on on-premises network connections, while SD-WAN is designed to provide efficient, dynamic, and cost-effective wide area networking solutions for organizations like ours with multiple branches and remote locations, leveraging software-defined and cloud-centric approaches for network management and optimization.

### Migrating to Enhanced Cybersecurity Awareness.

Over 70% of all cybersecurity breaches are accomplished through social engineering. These attacks are successful because end users are tricked into inviting the bad actors into our environment, many times, by providing them with their credentials. Our previous awareness package mostly focused on testing, lacking a solid training and educational approach. Arctic Wolf's Managed Security Awareness service is designed to bolster an organization's cybersecurity posture by educating and training employees to recognize and mitigate security

threats effectively. This service includes features such as continuous and engaging security awareness training, simulated phishing exercises to test employees' responses to phishing attempts, tracking, and reporting on individual and overall employee performance, and customized content to address specific industry and organizational needs. It also provides insights and analytics to help organizations measure the effectiveness of their security awareness efforts, ultimately reducing the risk of successful cyberattacks by enhancing employees' security awareness and response capabilities.

### [Enforcing Multi-Factor Authentication in Office 365.](#)

Multi-factor authentication (MFA) plays a pivotal role in enhancing the security of our Office 365 environment and is integral to our comprehensive cybersecurity strategy. By requiring multiple forms of verification, such as a password and a temporary authentication code sent to a mobile device, MFA significantly reduces the risk of unauthorized access to our critical data. This safeguard ensures that only authorized personnel can access sensitive information, thereby protecting our organization from data breaches and unauthorized intrusions. Additionally, MFA promotes a culture of accountability, making it easier to track user activity and detect any suspicious behavior. As we continue to navigate the evolving threat landscape, the implementation of MFA in our Office 365 environment remains a crucial investment in safeguarding our digital assets and protecting the information we have been entrusted with by all stakeholders.

### [Implemented Conditional access policies.](#)

Conditional access policies in Microsoft Azure Active Directory are like digital gatekeepers for your online accounts and data. Think of them as rules you set to determine who can access your stuff and under what conditions. For example, you can make a rule that says, "Only allow access to my agency email when using a trusted device." This means that even if someone knows your password, they can't get in unless they're using a device you trust. It's a way to keep your digital world safe and secure. The process of implementing these policies requires extensive research to ensure that staff access is maintained while bad actors are restricted.

### [Migrated antivirus protection.](#)

Microsoft Defender offers robust protection against malware and threats. Microsoft Defender is integrated into Windows, ensuring seamless compatibility and regular updates with the operating system. This integration can lead to better system performance and fewer compatibility issues. Additionally, Microsoft Defender is known for its strong real-time protection and phishing detection capabilities.

### [Upgraded conference rooms to Teams Room devices.](#)

Teams Rooms devices are preferred over standard computers due to their dedicated, purpose-built design and integrated capabilities. Teams Rooms devices are optimized for seamless video

conferencing, ensuring a consistent and user-friendly experience. They offer simplified setup, one-touch joining of meetings, and high-quality audio and video. Moreover, these devices receive regular updates and maintenance, which is essential for maintaining the security and functionality. Keeping devices up to date is critical to ensure data privacy, compliance with healthcare regulations, and the delivery of reliable, secure, and up-to-date telehealth services. This is especially important in healthcare, where patient information and communication must be protected and reliable.

## Migrating to a native Azure Active Directory environment.

Migrating to native Azure Active Directory (Azure AD) is the preferred choice over managing an on-premise mixed mode infrastructure for several reasons. First, native Azure AD aligns with the modern cloud-first and mobile-first business landscape, eliminating the need for on-premises infrastructure and reducing administrative overhead. It offers a globally distributed, easily accessible platform, making it ideal for organizations with remote or global operations. Additionally, by transitioning to native Azure AD, we can harness advanced cloud-based security and scalability features. In contrast, managing a mixed mode infrastructure introduces complexity, synchronization challenges, and potential limitations on advanced on-premises features. Choosing native Azure AD streamlines our operations and enhances security, agility, and overall efficiency, aligning us with the future of cloud-centric identity and access management.

## Migrated all file shares to cloud-based storage.

Transitioning from traditional file servers to cloud-based solutions like SharePoint and Microsoft Teams offers a range of advantages, which can have a profound impact on an organization's efficiency, flexibility, and overall productivity. The shift from traditional file servers to cloud-based solutions bring numerous advantages, including improved accessibility, collaboration, security, scalability, and cost savings. This transition enables NLCMHA to work more flexibly, securely, and efficiently in an increasingly digital and remote work-oriented landscape.

## Hardware replacements and upgrades

Two major hardware projects that we successfully completed in the last fiscal year were the replacement of 100 aging agency laptops and the installation of a Storage Area Network (SAN) unit with the integration of three new hosts at our Cadillac location. The laptop replacement project was a critical response to the aging technology that could compromise productivity and security, ensuring our employees have reliable and efficient tools for their tasks. The SAN unit and host integration in Cadillac significantly expanded our data storage and processing capabilities, addressing a vulnerability in our infrastructure and bolstering data access resilience, especially during power outages.

## Two security incidents

Over the past year, we encountered two noteworthy security incidents, each presenting unique challenges and valuable lessons. The first incident involved a breach of a contracted provider's email

system, which was subsequently used to send a fraudulent request to our finance department, seeking a change in bank routing information. Unfortunately, staff did not verify the legitimacy of this request with the contracted provider. As a result of this incident, we have implemented a new policy to enhance communication and verification protocols between departments, significantly reducing the risk of similar deception in the future.

In the second incident, a deceptive email, from a legitimate mental health agency, was received by one of our users. Again, the sender's email account had been compromised by cybercriminals. A staff member unwittingly clicked on a link in the email, resulting in their login credentials being stolen.

Unfortunately, the user did not report the breach to our IT department, leaving a critical security vulnerability unaddressed. Fortunately, Arctic Wolf was able to identify the intrusion and we were able to stop the access quickly. The breach exposed sensitive consumer information, including names, Medicaid numbers, and addresses.

These incidents emphasize the need for ongoing staff training and awareness when it comes to recognizing and reporting phishing attacks. Quick reporting is essential to mitigate damage and ensure an effective response.

Our security and privacy officers worked together in line with HIPAA guidelines to inform the affected individuals about the breach and its potential consequences.



## 2024 Policy Monitoring Schedule

JANUARY	Internal	Direct Inspection	FEBRUARY	Internal	Direct Inspection	MARCH	Internal	Direct Inspection
2.4 Financial Management 3.9 CEO Compensation 3.10 Board Member Conflict of Interest	X	X X	2.2 Treatment of Employed Workforce Members 3.5 Meeting Agendas and Schedules	X	X	1.0 Consumer and Community Ends (1.0.1 – 1.0.5) 3.6 Board Chair Functions 3.3 Board Member Code of Conduct	X E/X	X
APRIL	Internal	Direct Inspection	MAY	Internal	Direct Inspection	JUNE	Internal	Direct Inspection
2.4 Financial Management/Internal Controls 2.8 Communication & Support to the Board 3.7 Governance Committees 3.7A Recipient Rights Advisory Committee 3.7B Recipient Rights Appeals Committee	E/X X	X X	3.8 Costs of Governance 3.8 Costs of Governance 2.9 Investments	X X	X	2.7 Continuity of Executive Functions 4.3 Delegation of Mgt Powers to the CEO	X	X
JULY	Internal	Direct Inspection	AUGUST	Internal	Direct Inspection	SEPTEMBER	Internal	Direct Inspection
2.4 Financial Management 4.1 Unity of Control	X	X	2.1 Consumer Services 4.2 Accountability	X	X	1.0 Consumer and Community Ends (1.0.6 – 1.0.11) 2.3 Compensation of the Employed Workforce	X X	
OCTOBER	Internal	Direct Inspection	NOVEMBER	Internal	Direct Inspection	DECEMBER	Internal	Direct Inspection
2.4 Financial Management/Internal Controls 2.5 Asset Protection 3.0 Global Gov Process/Ownership Linkage 4.0 Global Governance-Bd/CEO Linkage	X X	X X	2.0 Global Executive Limitations 3.2 Governance Style 3.4 Annual Workplan	X	X X	2.6 Community Resources 3.1 Board Job Description 2.10 Administrative Cost	X X	X

## 2024 ANNUAL PLANNING CALENDAR

- TOPIC	TIME ON AGENDA	COW MTG	BOARD MTG	FREQUENCY	MONTH
Review and Approval of Board By-Laws			X	Annual	January
FY 2023 Ownership Linkage Plan	10 MIN	X	X	Annual	January
Update on Recipient Rights	10 MIN	X		Monthly	January
2023 Annual Review	60 MIN	X		Annual	January
NLD Meeting – January			X		January
					65 minutes
Annual Recipient Rights Report to the Board	10 MIN	X	X	Annual	February
Update on Recipient Rights	10 MIN	X		Monthly	February
2023 Agency Performance Assessment Domains1 - 12	40 MIN	X		Annual	February
CEO Evaluation Distribute	10 MIN	X		Annual	February
RR Advisory Committee – Feb			X	Bi-Monthly	February
					80 minutes
Update on Recipient Rights	10 MIN	X		Monthly	March
FY 2023 Northern Lakes CMHA Quality Assurance and Improvement , Regulatory Compliance, and Customer Services Report	30 MIN	X	X	Annual	March
Security Annual Report	10 Min	X	X	Annual	March
NLD Meeting –			X		March

## 2024 ANNUAL PLANNING CALENDAR

					50 minutes
Conflict of Interest Disclosure Statement	5 MIN	X		Annual	April
Update on Recipient Rights	10 MIN	X		Monthly	April
Code of Conduct Declaration	5 MIN	X		Annual	April
CEO Evaluation	30 MIN	X	X	Annual	April
Financial, Single and Compliance Audit	30 MIN	X	X		April
RR Advisory Committee-			X		April
					90 minutes
Services for People with an Intellectual/Developmental Disability	20 MIN	X		Annual	May 18
Update on Recipient Rights	10 MIN	X		Monthly	May
Election of Officers			X	Annual	May (slate of officers identified by NLD in April)
NLD Meeting			X		May
CEO Compensation	30 MIN	X	X	Annual	May-effective May 1
					60 minutes
Club House and Drop-In Center Programs	20 MIN	X		Annual	June
Integrated Health Care	20 MIN	X			June
Update on Recipient Rights	10 MIN	X		Monthly	June
RR Advisory Committee-			X		June
					60 minutes
Behavioral Health Home	20 MIN	X		Annual	July
Update on Recipient Rights	10 MIN	X		Monthly	July

## 2024 ANNUAL PLANNING CALENDAR

Recipient Rights Semi-Annual Report to the Board	15 MIN	X		Semi-Annual	July
MI Choice Waiver	20 MIN	X		Annual	
NLD Meeting –			X		July
					65 minutes
Update on Recipient Rights	10 MIN	X		Monthly	August 17
FY 2023 Budget Amendment, Initial FY 2024 Budget and 2024 Capitalization Plan	30 MIN	X	X	Annual	August
Board Member Per Diem	10 MIN	X	X	Annual	August - Review rates prior to end of FY
Cost of Governance	10 MIN	X	X	Annual	August - Approve Annual Budget
RR Advisory Committee-			X		August
					70 minutes
Services for Adults with Mental Illness and Substance Use Disorders	20 MIN	X		Annual	September
Update on Recipient Rights	10 MIN	X		Monthly	September
PCP and Self-Determination Training	20 MIN	X		Annual	September
Compliance, Quality and Customer Services Report	20 MIN	X	X	Quarterly	September
Annual Compliance Training	20 MIN	X			
NLD Meeting			X		September
					90 minutes
Human Resources	20 MIN	X		Annual	October
Update on Recipient Rights	10 MIN	X		Monthly	October
RR Advisory Committee			X		October
Children with Serious Emotional Disturbance	20 MIN	X		Annual	October

## 2024 ANNUAL PLANNING CALENDAR

Individual Board Member Self-Assessment	5 MIN	X	X	Annual	Distribute in Oct, finalize in Nov (NLD)
Board Self-Assessment	5 MIN	X	X	Annual	Distribute in Oct, finalize in Nov (NLD)
					70 minutes
Information and Technology Report	20 MIN	X		Annual	November
Update on Recipient Rights	10 MIN	X		Monthly	November
Policy Monitoring Schedule	5 MIN	X	X	Annual	November
Annual Planning Calendar	10 MIN	X	X	Annual	November
Board Education and Work Plan	10 MIN	X	X	Annual	November
Board Meeting Schedule			X		November
NLD Meeting	10 MIN	X	X	Annual	November
					65 minutes
Update on Recipient Rights	10 MIN	X		Monthly	December
Compliance & Quality Report FY End	20 MIN	X	X	Quarterly	December
County Commissioner Survey	20 MIN	X		Annual	December
Board Member Terms	10 MIN	X		Annual	December
					70 minutes



**Board Education and Board Work Plan**

**January 1, 2024 – December 31, 2024**

**Approved by the Board –**

## **A. Overview**

Board members are committed to the principle that developing and maintaining a knowledgeable and skilled board of directors is essential to organizational success. To promote this principle, the board created and maintains a Board Nominating and Leadership Development Committee. The role of the committee includes:

- Assisting the counties, as needed, in identifying potential board members. Screening shall be completed not later than 60 days before the term ends;
- Planning and promoting board training and education, including Policy Governance;
- Developing the curriculum and materials to be used for new board member orientation and providing orientation with Chief Executive Officer (CEO) assistance as requested;
- Having the lead role in the development and annual review of the Board Education and Work Plan. The plan reflects board priority philosophy, expectations, planned activity, and learning objectives; and
- Ensuring Board and board member assessments are completed and utilized consistent with Board Governance policy.

## **B. Philosophy**

Board member education and development is vital to good governance. We believe:

- All board members must have an understanding of the issues impacting the public mental health system, the Michigan public mental health system, NLCMHA, the Northern Michigan Regional Entity, organizational responsibilities and roles, and of board policy governance.
- That having skilled board members is important, especially in the constantly changing health care environment.
- Education needs to be provided through various means such as written documents, oral presentations, site visits, board member orientation, board meetings, meetings with the Chief Executive Officer, in-services, conferences and/or meetings, etc.
- In having experienced board members mentor new members.
- In attending and coordinating with the Community Mental Health Association of Michigan activities and events as a means to gain information and develop networking relationships with others.
- All board members are encouraged to have knowledge of and contact with community leaders.

## **C. Expectations**

1. New board members will participate in an initial orientation session provided by the CEO and NLD chairperson or designee if available prior to the first board meeting after appointment by respective county Board of Commissioners. The CEO shall advise NLD committee members in advance so they may also participate should their schedule permit. At this orientation session the new board member will receive the NLCMHA Board Member Orientation and Reference Manual and will be provided a high level overview on the: Governance model (including providing education DVDs or documents) and NLCMHA governance policies, Boardworks (including information on available agency CDs), Mental Health Code, Open Meetings Act and Board Education and Workplan, and NLCMHA website presentation. In addition, new board members will be encouraged to attend the next NLD committee meeting.

The following are 2023 board education topics **completed** and listed for the purpose of future planning:

January 19 – 2022 Annual Review

February 16– Agency Performance Assessment

March 16 – Arc Presentation

April 20 – Financial Audit

May 18 – Board Member Introductions

June 15 – Revenue Presentation

July 20 – Behavioral Health Home and MI Choice Waiver

August 17 – Budget (Board Meeting)

September 21 – Recovery

October 19 – Children with Serious Emotional Disturbance

November 16 –

December 21 –

2. All board members shall participate in development and external development events to the greatest degree her/his schedule permits. Participation shall be consistent with other Board policies.

3. The NLCMHA Board of Directors may hold an annual board retreat and all board members are encouraged to attend. The objective is to provide orientation, reorientation, team building, and leadership development.

4. The NLCMHA annual budget will include funds to ensure board education and training, board operations, and the annual board retreat. The Board of Directors will review the budget no less than annually and shall provide for board member reimbursement for participating in conferences, meetings, and other board supported events.

5. Board members are encouraged to participate in Community Mental Health Association of Michigan conferences, regional education forums, and other events consistent with the board budget. This includes encouraging all NLCMHA board members to become certified board members through the Board works Program.

6. The Board Member Orientation and Reference Manual will be posted on the NLCMHA website. The NLD Committee will update this manual on an annual basis. Board members will be provided the updated manual no later than January of each year. An annual review of the policies will be completed as part of the board monitoring process and more often as desired by the board.

7. Historical board packets, reference documents, and policy information will be made available, upon board member request, through the CEO's Office regarding NLCMHA and the Northern



Michigan Regional Entity (nmre.org)

8. FACT sheets may be developed to provide board members and others quick access to important information regarding NLCMHA. The FACT sheets and other reference materials will assist in board education and assisting board members in educating others.

#### **D. Learning Objectives**

1. All board members will have a basic understanding of the roles and responsibilities of the Michigan public mental health system.

2. All board members will have a basic understanding of the role of the board, board member responsibility, policy governance, and board governance policies.

3. All board members will have an understanding of NLCMHA, our MDHHS contractual responsibilities (CMHSP, MI Choice Waiver and OBRA program), services managed and directly provided, and financing.

4. Within the first six months of appointment, the Board has established that each board member should know the following:

- Board responsibilities and decisions.
- The NLCMHA Vision, Mission, Values.
- Programs and Services offered by NLCMHA.
- Roberts Rules of Order - basic principles
- Board governance policies.
- NLCMHA Operations – facilities, staff, budget, and procedures – desired outcomes.
- Open Meetings Act
- Board Member Orientation and Reference Manual

5. The Board has identified these basic skills, which a Board member should develop over time.

- Must be willing to contribute the time required – NLCMHA Board meetings are unusually long due to having both the Committee of the Whole and board meeting on the same day.
- Policy Governance and the NLCMHA governance process.
- CMHSP, MI Choice Waiver and OBRA program responsibilities– “differences in the hats we wear.”
- Ability to participate in development and monitoring of Board governance policies.
- Proficiency with the “Board Works” curriculum offered by the CMHAM.
- Partnering.
- A working knowledge of the nature of programs for people who have a MI or I/DD so that board members may be able to more effectively and efficiently develop policies which may affect changes in a positive direction.
- Ability to cope with large amount of information and data – must be logical, experienced and organized.
- Should be familiar with today’s computerized management information systems.
- Working knowledge of Mental Health Code.
- Services that NLCMHA provides in the counties we represent.

#### **E. Education Curriculum**

- |   |                          |                  |
|---|--------------------------|------------------|
| ❖ Person Centered Planning and Self-Determination |                          | To Be Determined |
| ❖ Board Leadership Journal                        | Bi-Monthly(if available) | Board Members    |

**F. Board Work Plan**

1. Priority Topics

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Ongoing Priorities

- Ownership Linkage – site visits to include residential providers, courts, jails, schools; consider arranging one visit per quarter or two per year to sites such as Goodwill Inn, Sheriff Departments; align with ownership linkage plan
- State Innovation Model (SIM)
- Provider issues – shortages – plans to develop providers – Olmstead

2. Proposed Topics for FY 2024:

January 18 – 2023 Annual Review

February 15 – Agency Performance Assessment

March 21 –

April 18 – Financial Audit

May 16 – Services to People with an Intellectual/Developmental Disability

June 20 – Club House and Drop-In Center Programs

July 18 – Evidence Based Practices and MI Choice Waiver

August 15 – Budget

September 19 – Services for Adults with Mental Illness and Substance Use Disorders

October 17 – Human Resources and Children with Serious Emotional Disturbance

November 21 – Information Technology

December 19 – Recipient Rights Limitations

3. Ownership Linkages and Site Visitations - The Board may use site visits as a means to promote accomplishment of board work plan priorities. In 2024 the board education will be a possible visit to the following sites. Visits to occur in the summer months.

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4. Accountability to the Public/Community Linkage - In addition to possible site visits the board may periodically invite community representatives to board meetings (committee or board). This will assist the board in enhancing its understanding of community need, improve ownership linkage, and organizational performance and planning. The following ideas have been received in the past:

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5. Other educational activity

CMHAM Conferences

10/22/2023



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

**NORTHERN LAKES COMMUNITY MENTAL HEALTH AUTHORITY  
2024 BOARD MEETING SCHEDULE**

<b>DATE</b>	<b>STARTING TIME</b>	<b>PLACE</b>
January 18, 2024	2:15 p.m.	Northern Lakes Community Mental Health Authority 527 Cobb Street, Cadillac
February 15, 2024	2:15 p.m.	Northern Lakes Community Mental Health Authority 204 Meadows Drive, Grayling
March 21, 2024	2:15 p.m.	Northern Lakes Community Mental Health Authority 105 Hall Street, Traverse City
April 18, 2024	2:15 p.m.	Northern Lakes Community Mental Health Authority 105 Hall Street, Traverse City
May 16, 2024	2:15 p.m.	Northern Lakes Community Mental Health Authority 2715 South Townline Road, Houghton Lake
June 20, 2024	2:15 p.m.	Northern Lakes Community Mental Health Authority 527 Cobb Street, Cadillac
July 18, 2024	2:15 p.m.	Northern Lakes Community Mental Health Authority 204 Meadows Drive, Grayling
August 15, 2024	2:15 p.m.	Northern Lakes Community Mental Health Authority Leelanau County Governmental Center, Suttons Bay
September 19, 2024	2:15 p.m.	Northern Lakes Community Mental Health Authority 2715 South Townline Road, Houghton Lake
October 17, 2024	2:15 p.m.	Northern Lakes Community Mental Health Authority 105 Hall Street, Traverse City
November 21, 2024	2:15 p.m.	Northern Lakes Community Mental Health Authority 527 Cobb Street, Cadillac
December 19, 2024	2:15 p.m.	Northern Lakes Community Mental Health Authority 105 Hall Street, Traverse City

Meeting location may change due to location availability.

Meetings are open to the Public. If any person with a disability needs accommodations, please call the CEO's Office three days prior to the posted meeting date at: 231-409-6065.

Committee of the Whole Meetings are held prior to each Board meeting (12:30 p.m. start time).