



*To promote positive outcomes by creating a path to resilience, recovery,
wellness and self-determination*

**LENAWEE COMMUNITY MENTAL HEALTH AUTHORITY BOARD MEETING
Minutes
February 28, 2013**

Present: J. Ackley; D. Bills; S. Clites; M. Jackson; E. Martinez; G. Miley; N. Smith;
R. Tillotson; J. Van Doren; R. Wilson
Absent: H. Keller; C. Smith
Staff: Andrews, Beagle; Keener, Rawlings (minutes), Robb
Public: L. Miley

CALL TO ORDER

Chairperson Bills called the meeting to order at 3:02 p.m.

PREVIOUS MINUTES

There was a question by Miley regarding rescheduled Mental Health Awareness Committee. Karen will check with Kay Ross. **MOTION** by N. Smith to approve the previous minutes dated January 31, 2013. **SUPPORTED** by Jackson. **MOTION CARRIED.**

PUBLIC COMMENT

No public comment.

SPECIAL PRESENTATIONS, REPORTS AND ACKNOWLEDGEMENTS

Deb Beagle received an award for 10 years' service with LCMHA.

COMMITTEE REPORTS

A. Standing Committees



1. Consumer Advisory

Scott Clites reported that the Mental Health Awareness Committee met on February 20th. The main focus was the 2nd Annual Path to Wellness & Recovery event to celebrate Mental Health Awareness Month in May. The amount spent last year was \$1600. **MOTION** by Clites to approve an amount not to exceed \$3,000 from the Hendershot account to cover costs for the 2nd Annual Path to Wellness & Recovery Event in May. **SUPPORTED** by Tillotson. **MOTION CARRIED.** Ackley would like to see a lot more consumer involvement in planning this event. There are plans to continue participating in the State Walk-A-Mile event in Lansing, but to discontinue the local walk, due to lack of participation. The committee is asking for transportation funding. The group is planning fundraisers to pay for T-shirts to wear to the State Walk a Mile.

2. Performance Improvement

Emily Martinez reported on PI Committee which met on February 11th. Lenawee has been out of compliance for five quarters on the % of MI children started service within 14 days of assessment. This is mainly due to very small numbers – just one child can make us out of compliance. We were also out of compliance for MI adults starting service within 14 days. Keener explained that there is a GF benefit package and if additional services are needed, this request goes through Utilization Review Committee. This committee previously met once a month – it is now meeting weekly to ensure a speedier review. We had also had difficulty connecting with outpatient therapy; consumers would leave without an appointment and then did not get one. We have started to ensure that appointments are set before consumers leave the agency. This data is six months old, and we hope to see improvement next month. The state assigns quality improvement projects; they require a number of Peer contacts with consumers with Medicaid. We have had difficulty improving our Peer contact numbers as we were down one full time Peer for part of this period. Peer contacts for Medicaid recipients were the only contacts that counted for this PI project at the state. LCMHA also uses Peers to connect people with Medicaid; these contacts do not count for the state PI project. We set our own goal of getting 80% of consumers' labs done, these numbers continue to improve.

3. Facilities Committee

Deb Bills reported on Facilities Committee which met yesterday. Five bids were sent out for a new roof at Green Hwy. One bid was received from Terra Copia Lawn & Landscape. Sharon Robb explained the issues which involved broken trusses, mold and many holes in the roof from satellite dish installations. Ryan Beal (Terra Copia) is well known to CMH, as he currently provides maintenance at our homes. There was discussion regarding the low price; the single bid; and lack of roofing specialist. **MOTION** by Tillotson to approve roof bid from Terra Copia for \$5,490. **SUPPORTED** by Jackson. Ackley opposed. **MOTION CARRIED.** Recommendation

by Tillotson that in future satellite dish installations be via a pole on properties that we own.

4. **Operations and Budget**

Miley reported on Operations and Budget Committee which met on February 20th. Following the lead of many other organizations to move to personal cell phone use for business, research shows that costs are comparable to current. Savings would be in the repair and replacement of cell phones. Staff would be responsible for their own lost or broken cell phones in the future, if they chose to move to the stipend option. Staff is aware that their personal cell phones could be the subject of FOIA requests for work related issues.

MOTION by Miley to approve a cell phone stipend, the accompanying policy and agreement form. **SUPPORTED** by N. Smith. **MOTION CARRIED.**

Service Inquiry – January was a very busy month. 116 inquiries and 89 intakes scheduled. 48% had no insurance (GF), 48% Medicaid. Of the 57 assessments completed, 9 were ineligible as they did not meet criteria. 48 receive services. A comparison to previous years is included in the handout. SUD inquiries totaled 49. 20 Medicaid, 26 block grant, 1 commercial insurance. 2 were referred out, 1 had SU benefits, 1 out of county resident, 1 denied – no SUD diagnosis. Of the 33 served, 14 Medicaid, 19 block grant. We have not completed one quarter of SUD services, and more data will be available from our core providers.

State Institution – The budget allows for two people to be in the hospital per month, however, in January 4 were in hospital for the whole month, and 1 for 15 days. 2 were NGRI. 2 are long term, one is IST. One will be leaving in March; however, one is waiting to go in from the Forensic Center. The spending plan will have to be revised. Even if the Medicaid Expansion goes through, it will not help the state hospital budget as this is all GF \$. A chart handout which reflects funding was distributed for a better understanding of our GF predicament.

Inpatient Hospitalizations – January was another record month for community inpatient with 32 hospitalized, 4 children and 28 adults. 47% Medicaid, 53% GF. Co-occurring numbers are lower this month (25%), 66% were unknown. 7 reported attending the Family Medical Center, 14 with no primary care. We are tracking people who are discharged from the hospital, but do not follow up with us for an appointment. The after-hours telephone system changed on February 25th and we hope to be able to divert more people from the hospital by scheduling a next day appointment at CMH.

Finance Report – 33% of the budget is expended, at 33% of the year. Operating supplies and audit are above budget, but will even out before the end of the year. Pharmacy costs are above budget due to the increasing number of consumers with no insurance. Communications and recruitment are high, but expenses should be limited for the remainder of the year. The new positions are related to Substance Use Disorder Services and are now filled. We hope to save \$26,000 by using the WCHO after-hours phone service. State hospital and community inpatient costs continue to be high. Revenue is at 33%. ABW at 28% - the state is opening enrolment from April 1st – 30th; a lot of our uninsured consumers will be eligible. We are working on making sure that those eligible will be enrolled. Contribution from the fund balance \$189,310. We are above budget at 40% with PsychSystems – due to an increase of guardianship testing. We will also be contracting with them for Autism Services beginning in April. MAWC is at 41% - they provide respite services, and we are seeing an increase in the use of this service. Only 3 people are using the Monroe Clubhouse regularly. Changes will be reflected in the revised Spending Plan.

Cash Balance – We saw a loss in market value of UBT wealth management GF investment, and a slight gain on the Hendershot account. New UBT representatives will be coming to the April board meeting to do a presentation. Land contract for the clubhouse totals \$218,715.21. The mortgage stands at \$337,768.74.

MOTION by Jackson to accept the Finance Reports. **SUPPORTED** by Clites.
MOTION CARRIED.

5. Personnel Committee

There was no Personnel Committee Meeting in February.

B. Recipient Rights Advisory Committee

There was no Recipient Rights Advisory Committee Meeting in February.

B. Retirement Committee

There was no Retirement Committee Meeting in the month of February.

8. By-Laws

There was no By-Laws Committee Meeting in the month of February.

B. Ad Hoc Committees:

No Ad Hoc Committee Meetings in the month of February.

EXECUTIVE DIRECTOR'S REPORT

1. We have a new website, which is much improved – please take a minute to visit www.lcmha.org.
2. Plan of Correction with Christ Centered Homes – there will be a review in March. They will not be ready to be removed from provisional status for at least another three months, but progress is being made.
3. Mental Health First Aid. We hope to train more people (either staff or in the community) as there is a demand for this training. Kathryn Szewczuk is looking for the next available date.
4. The Affiliate Directors have been working on the AFP for the new R-PIHP. The 4th or 5th draft of the By-Laws will be reviewed by Board Chairs next Tuesday. Deb Bills will be attending.
5. The Affiliate Directors will be coming to the March Board Meeting to introduce themselves. They will be attending all board meetings during the month.
6. Alan Bolter – Legislative Liaison at the Board Association has volunteered to come to a board meeting to talk about the legislative agenda if needed.
7. Sandy met with Senator Caswell. The meeting went well, and he listened to concerns about our uninsured population/Medicaid Expansion etc.
8. The Drop In Center has closed for a few days due to a broken sewer line. It should be up and running again at the weekend.
9. Sandy did a presentation to the AM Rotary Club last week – the vision for the future.
10. We are in a critical situation in Lenawee regarding psychiatric capacity. We are struggling to meet the needs of the people. Insurance companies are obligated to provide mental health services for 20 outpatient visits. We had a shortage of psychiatrists in the community, and it is getting worse. Dr. Kahn, and now Dr. Pettit is leaving, which leaves only one at Herrick, and one Nurse Practitioner. People have been calling here; however, these people do not meet our criteria. Sandy has sent a note to ProMedica regarding this. We are working with the FQHC, and we have reached out to our affiliate partners to see if there is any excess capacity. We are currently scheduling people 6 – 8 weeks out, with a 12 week wait for children. Tele-psychiatry may be something that is available at the new Family Medical Center. There is a group in Monroe who is accepting new patients, and we are reaching out to the University's to get psychiatry residents. Jackson and Hillsdale will be contacted also. Toledo Hospital has a psychiatric unit; however, we cannot send Medicaid consumers out of the state. There is also a Recipient Rights issue with going out of Michigan.

REPORT FROM BOARD CHAIR

Deb Bills reported that she will be attending an Affiliation Meeting next week to review the draft By-Laws for the new PIHP. If any other Board Members would like to attend, they are welcome.

BOARD MEMBER COMMENTS

Comm. Tillotson reported that we will be receiving money back from South Central Substance Abuse. \$300,000 went to Washtenaw; another \$80,000 was received this week. There should be one more draft to come. He also is pleased that the LCMHA Board is kept updated with Finance Reports every month – it does not seem to be the case with our partners, or other CMH's.

ADJOURNMENT

Meeting adjourned at 4:15pm.

/klr

Robert Wilson
Robert Wilson

3-28-13
Date