

LENAWEE COMMUNITY MENTAL HEALTH AUTHORITY BOARD MEETING

Minutes
June 30, 2016

Present: J. Ackley, D. Bills; G. Adams; S. Clites; M. Jackson; J. Lapham; E. Martinez;
N. Smith; R. Tillotson; J. Van Doren; D. Yearsin
Absent: R. Wilson
Staff: Andrews; Douglas; Hutchison; Keener; Monahan; Potts; Rawlings (minutes);
Robb; Strayer; Szewczuk
Public: K. Trost; (Goodwill); J. Durell; M. Roman; J. Mort-Duncan (Interconnections).

CALL TO ORDER

Chairperson Clites called the meeting to order at 3:00pm.

PREVIOUS MINUTES

MOTION BY R. TILLOTSON to approve the previous minutes as presented dated May 26th, 2016. **SUPPORTED BY J. VANDOREN. MOTION CARRIED.**

PUBLIC COMMENT

No public comment.

SPECIAL PRESENTATIONS, REPORTS AND ACKNOWLEDGEMENTS

Three staff members were presented with ten year service awards: Amber Monahan, Sarah Douglas and Rita Potts.

COMMITTEE REPORTS

A. Standing Committees

1. Consumer Action Committee

Judy Mort-Duncan reviewed the events that are being planned, including a suicide walk in September or October and art classes with possible collaboration with Adrian Center for the Arts.

2. Performance Improvement

Kathryn Szewczuk reviewed reports and data presented to the committee, including required state standards. A QAPIP project monitoring consumers who are on a psychotropic medication and have seen the doctor at least twice in the year, reaching out to those consumers to ensure there are 6 lab values on file. Lenawee is faring better than our affiliate partners in obtaining consumer labs. Admission/Discharge/Transfer data is being collected and a report will be available at the next PI committee meeting. Three minor findings by the Joint Commission included that CMH should ask the reason why staff did not receive the flu vaccine. LCMHA will be offering a flu clinic next year, offered by Walgreens, and will ask employees if they didn't receive the vaccine – why? The other two findings have already been rectified.

3. Facilities Committee

Several members of Facilities Committee toured the group homes in June. Facilities committee will be meeting next month to prioritize “needs and desires” anticipated costs etc. to bring back to the board.

4. Personnel Committee

There was no Personnel Committee Meeting in June.

5. Operations and Budget

Deb Bills reported on Operations & Budget Committee which met on June 15th. A draft regional Procurement Policy was presented as a good template for Lenawee to work from. Sandy Keener presented several RFP examples that have been used by the Region, affiliate partners and the County. The RFP Ad-Hoc committee will be formulating a strategy to move forward.

Service Inquiry – there were 152 inquiries in May, which is the highest we have seen. (110 inquiries in April). 118 intakes were scheduled, 37% Healthy Michigan, 58.9% Medicaid and 4% GF. 81 assessments were completed with 73 eligible and receiving services. There were 47 inquiries for SUD services – this is double the number when we began offering substance abuse services in 2012. 36 were authorized and receiving services.

State Institution – two people remain in the hospital. There is a waiting list to get into the Forensic Center, and those at the Forensic Center cannot get into the state hospital. At the December Director's Forum, Cindy Kelly reported that it is an appropriations issue, and they may start penalizing those with people at the state hospital. The belief that people should be treated in the community is at the forefront.

Inpatient Hospitalizations – 28 people were admitted to local hospitals. 50% were Medicaid, 50% Healthy Michigan. 55% had co-occurring mental health and substance use disorders, 68% were previously unknown to us. 8 reported the Family Medical Center as their primary care provider, 4 had no PCP. There was an upswing in the number of admissions by petition, and 4 were related to an intentional overdose. It continues to be difficult to get a child into hospital. A state group is looking at children's hospital admissions; there is a scarcity of beds, with the addition of increased intensity and severity, which cannot be handled in a normal setting.

Finance Report – Deb Strayer reported that at May 31st we are 67% of the way through the year with 59% of the budget spent. Psychiatrist line shows 54% spent, however, following the approved increased rate last month this line will increase. Contracts line for SUD engagement center is only at 5%, this was slow to get started and will not be fully utilized this year. Clinical services – Centria is starting to see activity for autism services at 8%. Psych Systems is at 76% - above budget, this line will be adjusted in the revised spending plan next month. SUD is above budget at 84%, an increase to the budget will cover most of this and will be reflected next month. Revenue shows after covering a GF shortfall of \$97,000, we are still able to contribute \$102,000 to the fund balance.

Cash Balance – We saw a loss in market value in wealth management and Hendershot funds, however, earned interest showed a gain of \$9500 on cash management and \$1500 on Hendershot.

MOTION BY JACKSON to accept the Finance Report and additional vouchers totaling \$586,129.72. **SUPPORTED BY N. SMITH. MOTION CARRIED.**

6. Recipient Rights Advisory Committee

Greg Adams reported on Recipient Rights Advisory Committee which met on June 21st. The Rights Officer will be providing more training at Interconnections and other sites to encourage consumer awareness and reporting. An allegation situation regarding a home manager not reporting incidents is being closely monitored.

7. Retirement Committee

There was no Retirement Committee meeting in June.

A. By-Laws

There was no By-Laws Committee meeting in June.

B. Ad-Hoc Committees

A meeting will be scheduled in July for the O & P Ad Hoc RFP Committee.

EXECUTIVE DIRECTOR'S REPORT

1. Boilerplate 298. The final meeting of the 125 member workgroup was June 22nd. The final recommendation is for the department to work with a workgroup to design recommendations to improve coordination of behavioral and physical health services for individuals with mental illnesses, intellectual and developmental disabilities and substance use disorders by January 2017. The workgroup will include members of MACMHB, the Michigan Association of Health Plans. They plan to have regular communication with key stakeholder groups. Many states have moved to a structure that has an administrative role at the state with contracts with numerous health plans. We will continue to monitor the situation.
2. Super Medicaid Waiver. This is moving slowly – all waivers will be combined into one and will include SUD.
3. Lawsuit. There is a lawsuit by Michigan Assisted Living Association against the State of Michigan (LARA) which could have a large impact on community living support services. A residential provider was notified they were in violation of the AFC Licensing Act. Under lease agreements an AFC license is required when 24 hour supports are provided. This would impact our provider (Renaissance) of CLS services. This comes at a time when we are also trying to implement the home and community based waiver transition plan. Currently we have approx. 90 consumers in community living supported housing.
4. RFP Ad Hoc Committee. Sandy has already started to receive some inquiries and contacts regarding the services we plan to bid out.
5. ICMA Transfer. The conversion from ICMA to Mass Mutual is expected to be complete on October 1st, 2016. There will be five days of black-out dates for the transition. Steve Oman and Jason Tether will be discussing with staff as well as past employees.
6. Sandy has been contacted by the consultants working with the HOPE Center who are doing a feasibility study on the new "SPERO" vision of a community for individuals with disabilities. Board members may be contacted to voice their opinion.
7. Last week the Family Medical Center had a site visit by the Tier II Learning Community for Integrated Health. They viewed the work plan and provided technical assistance and consultation. Both assessors were very impressed by the work being done at the FMC. In fact the integrated health team was invited to present at the Tier 2 Learning Conference in September.
8. The Strategic Plan has been updated, a copy was provided to board members for their information. Overall we are making good progress on the goals we have set.

REPORT FROM BOARD CHAIR

1. We have been advised by the Regional Board, that the three year term of Mr. Tillotson is due for renewal. Mr. Tillotson is agreeable to continue on the Regional Board. **MOTION BY VAN DOREN** to approve the reappointment of Commissioner Tillotson to the Regional Board. **SUPPORTED BY MR. LAPHAM. MOTION CARRIED.**
2. A list of committee assignments was included in the packets, and is now up to date.

REPORT FROM REGIONAL BOARD

1. Sandy reported that the Chair of the Regional Board expects our budget needs to be zero, that we should not have any excess Medicaid revenue.

BOARD MEMBER COMMENTS

1. Greg Adams reported that the E-Race Stigma 5k race raised \$17,000. This amount is similar to last year.
2. Greg will be presenting at the MACMHB Fall Conference.

ADJOURNMENT

Meeting adjourned at 3:55pm.

Robert Wilson

Date