



MONROE COMMUNITY MENTAL HEALTH AUTHORITY

BOARD MEETING

December 12, 2023 – 5:00 p.m. / Aspen Room

Draft Agenda

BOARD VALUES:

- 1.1 Monroe Community Mental Health Authority exists so that individuals with severe and persistent mental illness and intellectual/development disabilities can live, work, and play in their communities to their fullest potential.
- 1.2 Monroe Community Mental Health Authority strives to be the provider of choice for Monroe County by offering the highest quality of treatment with positive measurable outcomes, while maintaining competitive rates with the State.
- 1.3 Monroe Community Mental Health Authority establishes and sustains a culture that values each staff member; holds staff to high standards; is fair and respectful; and values creativity and promotes collaborative thinking.
- 1.4 Monroe Community Mental Health Authority continues to establish collaborative community relationships that enable MCMHA to provide quality service to consumers.

BOARD RULES OF CONDUCT:

- a. Speak only after being acknowledged by the Chair and only to the Chair.
- b. Keep deliberation focused on the issue and don't make it personal.
- c. Divulge all pertinent information related to agenda items before action is taken.
- d. Seek to understand before becoming understood.
- e. Seek to do no harm.

CITIZEN RULES OF CONDUCT:

- a. In order for our Board to move efficiently through the meeting agenda, we ask that everyone present conduct themselves respectfully and with decorum. Anyone who chooses not to comply with this will be asked to leave the building.

MISSION STATEMENT:

Enrich lives and promote wellness.

VISION STATEMENT:

To be a valued/active partner in an integrated System of Care that improves the health and wellness of our community.

CORE VALUES:

Compassion, Authenticity, Trust, and Accountability.

	<u>Guide</u>
I. Call to Order	01 min
II. Roll Call	02 min
III. Pledge of Allegiance	02 min
IV. Motion to Adopt the Agenda as Presented	02 min
V. Motion to Approve the Minutes from the November 15, 2023 Board Meeting and waive the Reading Thereof	02 min
VI. Feedback Summary	02 min
VII. Citizen Comments	03 min/person
<i>“The Board will listen respectfully to any comments you would like to make but will not respond directly tonight. You can expect a follow up contact from the Executive Director or her representative within 24 hours if your comment is about a specific problem or complaint. Comments shall be limited to 3 minutes”.</i>	
VIII. Presentations Recognitions, and Celebrations	05 min
a. Certificates of Appreciation – Years of Service Awards	
IX. Board Committee Reports	05 min
a. Motion to Place on File All Written Committee Reports	
i. Bylaws & Policy	
ii. Business Operations	
iii. Clinical Operations	
iv. Community Relations	
v. Executive	

- vi. Performance Evaluation
 - b. **Motion to Appoint Rebecca Curley to the Community Relations Ad-hoc Committee**
- X. Items for Board Action** **05 min**
- a. **Motion to Approve the Consent Agenda Less Item _____**
 - i. Administrative Contracts as Presented
 - ii. Service Contracts as Presented
- XI. Authority and Regional Policy Review/Approval** **00 min**
- a. **Motion to Approve the Authority Policy, Procedure, and Exhibits as Presented**
 - i. **Policy:** Rescheduling Consumer Psychiatric Appointment Policy
 - ii. **Procedure:** Rescheduling Late Arrivals Procedure
Bridge Script Procedure
Contracts Notification to the Board Procedure
 - iii. **Exhibit:** Site Visit Checklist Exhibit
 - iv. **Rescind:** N/A
 - b. **Motion to Approve the Regional Policies as Presented**
 - i. **Policy:** N/A
- XII. Relationship with the Region, County, and Others** **05 min**
- a. Regional Reports
 - i. Regional PIHP Board Meeting Minutes – Not Available
 - b. State Legislation and Policy Committee Report
- XIII. Items from the Chief Executive Officer** **25 min**
- a. Financial Report
 - b. Chief Executive Officer’s Report (*handout*)
- XIV. New Business** **00 min**
- XV. Citizen Comments** **03 min/person**
- XVI. Announcements by Board Members** **03 min/person**
- XVII. Adjournment** **01 min**

The next regular scheduled meeting for the Monroe Community Mental Health Authority Board of Directors is on Wednesday, January 24, 2024 beginning at 5:00pm in the Aspen Room.

LG/dp 3:34 p.m.



**BOARD OF DIRECTORS REGULAR MEETING MINUTES
November 15, 2023**

- Present:** Michael Humphries, Chairperson (arrived at 5:07pm); Susan Fortney, Vice Chairperson; Catherine Bernhold, Secretary; John Burkardt; Deb Staelgraeve; Chantele Steffens; Dawn Asper; Rebecca Pasko; Ken Papenhagen; Rebecca Curley; and LaMar Frederick
- Excused:** Pam Ray
- Absent:**
- Staff:** Lisa Graham
- Guests:** 8 guests attended

I. CALL TO ORDER

The Board Chairperson, Mike Humphries, called the meeting to order at 5:07 p.m.

Lisa Graham introduced Cat Farnham, Desi Poupard, and Stephan Pietszak from Crossroads Clubhouse. They will be filming the monthly Board Meetings.

II. ROLL CALL

Roll Call confirmed a quorum existed.

III. PLEDGE OF ALLEGIANCE

The Pledge of Allegiance was led by Mike Humphries.

IV. CONSIDERATION TO ADOPT THE DRAFT AGENDA AS PRESENTED

Request made to add Banking Solution and Letter from Chase as a motion for consideration under section X as item c.

Ken Papenhagen moved to adopt the amended draft agenda as presented. Chantele Steffens supported. Motion carried unanimously.

V. CONSIDERATION TO APPROVE THE MINUTES FROM THE October 25, 2023 BOARD MEETING AND WAIVE THE READING THEREOF

John Burkardt moved to approve the minutes from the October 25, 2023 Board Meeting and waive the reading thereof. Ken Papenhagen supported. Motion carried unanimously.

VI. FEEDBACK SUMMARY

Mike Humphries reviewed feedback from the October 25, 2023 Board Meeting.

VII. CITIZEN COMMENTS

There was no citizen comment.

VIII. PRESENTATIONS, RECOGNITIONS, AND CELEBRATIONS

- a. **CCBHC Finance** – Richard Carpenter commented that we are one month into the CCBHC demonstration and provided a high-level overview on the complexities and how funding works for CCBHC. Financial statements including CCBHC funding will be available in January for the Business Operations Committee and included in the January Board Packet.

IX. BOARD COMMITTEE REPORTS

- a. **Motion to Place on File All Written Reports**

Rebecca Curley moved to place on file all written reports. Ken Papenhagen supported. Motion carried unanimously.

Written reports on file: Clinical Operations, and Executive.

- b. **Motion to Approve the 2024 Board of Directors Calendar**

LaMar Frederick moved to approve the 2024 Board of Directors Calendar. Deb Staelgraeve supported. Discussion followed. Motion approved unanimously.

X. ITEMS FOR BOARD ACTION

- a. **Motion to Approve the Consent Agenda Less Item _____**

No contracts for November

- b. **Motion to Approve the Purchase of a 2024 Trailblazer at the Cost of \$30,909 for the Intensive Outpatient (IOP) Substance Abuse Program**

LaMar Frederick moved to approve the purchase of a 2024 Trailblazer at the cost of \$30,909 for the Intensive Outpatient (IOP) Substance Abuse Program. Chantele Steffens supported. Discussion followed. Roll call: In favor: Pasko, Steffens, Frederick, Burkardt, Humphries, Fortney, Bernhold, Asper, Curley, Papenhagen, and Staelgraeve; opposed: none; motion carried unanimously.

- c. **Motion to Approve Engagement with JP Morgan Chase for Banking, Credit Card, and Investment Management Services and for Lisa Graham, CEO, and Richard Carpenter, CFO, as signatories for these new accounts**

Richard Carpenter commented that the banking and credit card relationships have been in place for years and have not been reevaluated, while the needs of Monroe CMHA continued to grow and evolve. Management has obtained a proposal from JP Morgan Chase identifying services available at a reasonable cost. An analysis and breakdown were provided in the Board Packet.

LaMar Frederick moved to approve engagement with JP Morgan Chase for banking, credit card, and investment management services and for Lisa Graham, CEO, and Richard Carpenter, CFO, as signatories for these new accounts. Ken Papenhagen supported. Discussion followed. Roll call: In favor: Steffens, Frederick, Burkardt, Humphries, Fortney, Bernhold, Asper, Curley, Papenhagen, and Staelgraeve; opposed: none; abstain: Pasko; motion carried.

XI. AUTHORITY AND REGIONAL POLICY REVIEW/APPROVAL

a. Motion to Approve the Authority Policy, Procedure, and Exhibits as Presented

- i. Policy: N/A
- ii. Procedure: N/A
- iii. Exhibit: N/A
- i. Rescind: N/A

b. Motion to Approve the Regional Policies as Presented

- i. Policy: N/A

XII. RELATIONSHIP WITH REGION, COUNTY, AND OTHERS

a. Regional Reports

- i. Regional PIHP Board Meeting Minutes – Minutes were included in the packet.
 - 1. LaMar Frederick commented that there was a lawsuit that started several years ago for purposes of funding that was believed by the PIHP that should have been paid by the State. Negotiations took place and the PIHP Director said there was a stalemate and that there were two alternatives. Start another lawsuit or take what has been negotiated. The conclusion was why spend more funds on a lawsuit. The group decided to take the money they offered and move forward. We have received two million and waiting for the rest of the payment.

XIV. ITEMS FROM THE CHIEF EXECUTIVE OFFICER

- a. Financial Report – Richard Carpenter provided updates.
 - i. Finance Update – There is no budget to actual for this month. We are in the new financial system now and it is going well. We did an interim financial report to give an estimate for the end of the fiscal year. We are not sending any money back. We are reporting a small overspend of less than 5%. We are showing a small deficit and need to let the PIHP know what we did differently than the other CMHs.
 - ii. Local Match – There is a requirement to provide a local match payment. Washtenaw is opting out of the local match. A letter is being sent.
 - iii. Agency Holiday Party – The holiday party for staff would be about \$3500. This does not require Board action. Looking to develop a policy for future events.
 - iv. PIHP Payment – Two million came from PIHP, another 4 million coming. This is not new revenue from a budget perspective, this is money that was spent 5 years ago.
- b. Chief Executive Officer's Report included an update on: Staff Satisfaction Survey; Non-Union Grievance Data; MCMHA Holiday Event; CCBHC Enrollment; FY2023 Year End; Revel Update; and Universal Referral Pilot.

Lisa Graham passed out the FY2022 Annual Report to Board Members. This annual report would have come out in April or May 2023 and includes Board Members that were on the Board in FY2022. Revel is working on the FY2023 Annual Report and will be completed in Spring 2024.

Chantele Steffens requested that a consideration of a year-end bonus be added to the Business Operations Committee agenda for discussion with Finance to know if it is a possibility.

Lisa Graham commented that a one-time bonus was provided to staff last year. This can be added to the Business Operations agenda for discussion as Chantele's point is timely. We will be negotiating a Union Contract in 2024 and the Board can talk about this consideration.

XV. NEW BUSINESS

XVI. CITIZEN COMMENTS

There was no citizen comment.

XVII. BOARD ANNOUNCEMENTS

Rebecca Pasko commented on attending the State Policy and Legislation Committee. The committee meets every other month. Today there was a bill that went through and sent to the Governor’s desk that will affect our special needs. You are not supposed to restrain or have hands on, but the bill went through for safety purposes. This bill will cover “in case of emergencies” where you can put hands on. Another bill that will affect us is the house bill 1584 and 1585 which has to do with licensing. The request is for social work licensing exams to be dropped so that you can become a social worker without taking the exam. Michigan would be the 3rd state to pass this bill.

It was suggested to add the CMHAM Policy and Legislation committee as an endorsed meeting so that Rebecca Pasko could receive a Board Stipend for attending.

Motion to Approve the Committee List and Scope to include an endorsement for the CMHAM Policy and Legislation Committee. Susan Fortney supported. Roll call: Staelgraeve, Papenhagen, Curley, Asper, Bernhold, Fortney, Humphries, Burkardt, Frederick, Steffens, and Pasko. Motion carried unanimously.

Deb Staelgraeve reminded Board Members about the tree lighting downtown Monroe on December 17th.

Board Members wished each other a Happy Thanksgiving.

XVII. ADJOURNMENT

Mike Humphries adjourned the meeting at 6:41pm.

Submitted by,

Catherine Bernhold
Board Secretary

LG/dp 11/17/23



BOARD BYLAWS & POLICY COMMITTEE
Thursday, November 16, 2023
5:00pm

MAJOR COMMITTEE RESPONSIBILITIES

1. Monitor and maintain the Board Bylaws and Board Governance Policy Manual
2. Review Authority and Regional Policy, Procedures, and Exhibits
3. Make recommendations to the full Board

COMMITTEE MEMBERS

Catherine Bernhold, Chair; John Burkardt; Susan Fortney; Rebecca Pasko; Pam Ray; and Michael Humphries (Ex-Officio).

DRAFT MINUTES

I. CALL TO ORDER

Catherine Bernhold called the meeting to order at 5:03pm. Catherine Bernhold, Susan Fortney, and Rebecca Pasko were present. Pam Ray, Mike Humphries, and Lisa Graham were excused. John Burkardt was absent.

II. COMMITTEE BUSINESS

- a. Authority Policy, Procedures, and Exhibits (Review/Recommend Approval)

Policies:	Rescheduling Consumer Psychiatric Appointment Policy
Procedures:	Rescheduling Late Arrivals Procedure Bridge Script Procedure Contracts Notification to the Board Procedure
Exhibits:	Site Visit Checklist Exhibit
Rescind:	n/a

- b. Regional Policies

Policies:	n/a
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III. REVIEW BOARD GOVERNANCE POLICY MANUAL

- a. Review of Board Monthly Feedback Summary Tool – The committee reviewed a new Board monthly feedback tool and suggested adding a 5-point Likert scale rather than having yes or no to answer questions. Include a comment section at the end. With the addition of the Liker scale and comments, the committee agreed to move forward with the new tool. The Feedback Summary would be sent electronically to Board Members the day after the Board Meeting and be given 5 days to complete. The Board Governance Policy 3.2 Board Member Responsibilities was amended.
 - i. The committee would like to add a Governance Policy 4.4 for Monitoring Board Performance that would include language on completing an annual Board Performance and Self Evaluation.
 - o Susan Fortney provided a sample of a Board Self-Assessment Questionnaire for the committee to review along with some suggestions.
 - o The committee requested to review the Board Self-Assessment Questionnaire at their next meeting and will amend language and develop Policy 4.4.
- b. Review of Board Governance Policy Manual Feedback for Sections 1 and 2 – The committee reviewed the feedback submitted by the Board in review of Section 1 and 2 of the Governance Policy Manual. All feedback was taken into consideration and Section 1 and 2 were amended. Questions submitted will be answered via email.

IV. REVIEW OF BOARD BYLAWS

- a. The committee is in the process of reviewing the Board Bylaws and upon completion will send them to the full Board for review and feedback.

V. PARKING LOT

- a. Add Policy 4.4 Board Performance
- b. Review Self-Assessment Tool and Suggestions for Annual Board Performance and Self Evaluation

VI. AJOURNMENT

The meeting adjourned at 6:14pm.

VII. NEXT MEETING

The Next Meeting of the Board Bylaws & Policy Committee is scheduled for **Thursday, December 14, 2023** at 5:00pm.

Respectfully submitted,
Catherine Bernhold (dp)

Catherine Bernhold
 Committee Chair



BOARD BUSINESS OPERATIONS COMMITTEE
Wednesday, December 6, 2023
4:00pm

MAJOR COMMITTEE RESPONSIBILITIES

- Review and monitor the Strategic Plan of the Authority as it relates to Business Operations and Administrative Support including Finances, Contracts, Facilities, Technology Infrastructure, and Customer Service.
- Review and make recommendations to the full Board regarding changes in Services, Contracts, and Budget.
- Monitor the organization's finances and strategies for managing overages and shortfalls.

COMMITTEE MEMBERS

LaMar Frederick, Chair; Rebecca Curley; Susan Fortney (Nov-Apr); Ken Papenhagen; Pam Ray (May-Oct); Chantele Steffens; and Michael Humphries (Ex-Officio)

DRAFT MINUTES

I. CALL TO ORDER

LaMar Frederick called the meeting to order at 4:03pm. LaMar Frederick, Ken Papenhagen, Rebecca Curley, Chantele Steffens (4:12pm), Lisa Graham, Jim Brown, Bridgitte Gates, and Alicia Riggs were present. Mike Humphries, Pam Ray, and Susan Fortney were excused.

II. BUSINESS OPERATIONS

- a. Facilities – Jim Brown commented that the Board had approved three additional fleet vehicles in October. Two have been received and one is in transit.
- b. Technology – There is a contract for review this evening related to IT security. The IT Team is assessing leased workspace at Salvation Army/Harbor Light to get technology set up there.

III. FINANCE

a. Items for Board Action (Consent Agenda)

- i. Administrative Contracts: LaScala; Iris Tele-health; Iris Tele-health; and New Directions Peer Recovery Center were presented by Alicia Riggs (recommend Board approval).
- ii. Service Contracts: Harbor Oaks, Trinity Health, Mastrofrancesco Inc.; Guardian Trac LLC; Dimensions of Wellness; Illuminate ABA Services; and Dearborn Speech and Sensory Center Inc., DBA Metro EHS Pediatric Therapy were presented by Alicia Riggs (recommend Board approval).

Chantele Steffens suggested Crossroads Clubhouse, New Directions, and the satellite site to have one entry and to redecide how to reset the space inside to work better for these programs. Lisa Graham commented that it is a requirement for Crossroads Clubhouse to have a separate entry.

LaMar Frederic added, is there a way we can start thinking about consolidation. Look at our space needs for every department now that we are a CCBHC and what that expansion may look like. How can we use the Raisinville building and other spaces to become more efficient with our space.

Lisa Graham took note of both suggestions and will include space utilization within the development of the 2024 Strategic Plan.

V. INFORMATIONAL ITEMS

- a. FY2023 Funds – Lisa Graham commented that last month at the Board Meeting we were expected to finish the FY2023 year-end breaking even "ish". We are going to break even within a percent. We did a deeper dive into where we spent more money. We provided 4 million more in service delivery in 2023 than in 2022 and served approximately 100 more consumers and of the percentage of eligibles we have the highest penetration rate in our affiliation. There will be more information on this at next week's board meeting.

VI. PARKING LOT

- a. Jan 2024: Explanation of new financial report format that includes CCBHC dollars and private party insurance
- b. Union Contract Negotiations – Year End Bonus
- c. May 2024: Review of surplus funds and how it can be utilized

VII. ADJOURNMENT

The meeting adjourned at 4:39pm. The Business Operations Committee's next meeting is scheduled for **Wednesday, January 17, 2024** at 5pm in the Aspen Room.

Respectfully submitted,
LaMar Frederick (df)

LaMar Frederick
Business Operations Chair

12/6/23



BOARD CLINICAL OPERATIONS COMMITTEE
Wednesday, December 6, 2023
5:00pm

MAJOR COMMITTEE RESPONSIBILITIES

- Review and monitor the Strategic Plan of the Authority as it relates to Clinical Programs and Psychological Services.
- Review and make recommendations to the full Board regarding Clinical Programs and Psychological Services.

COMMITTEE MEMBERS

Susan Fortney, Chair; Rebecca Curley; Rebecca Pasko; Deb Staelgraeve; Chantele Steffens; and Michael Humphries (Ex-Officio).

DRAFT MINUTES

I. CALL TO ORDER

Susan Fortney called the meeting to order at 5:00pm. Susan Fortney, Chantele Steffens, Rebecca Curley, Lisa Graham, Crystal Palmer, Bridgitte Gates, and Adam Anastasoff were present. Rebecca Pasko, Deb Staelgraeve, and Mike Humphries were excused.

II. CHIEF CLINICAL OFFICER UPDATE

a. Clinical Update - Attachment A

1. Crystal Palmer presented the clinical report highlighting the topics: Community Outreach, Service Flyers, and Call Volume.
 - i. Community Outreach: We have expanded to 9 agencies for the Universal Referral Form. There has been some discussion and interest for schools using the referral. We will discuss this as a team to know if we are ready and have the resources for that. Crystal Palmer presented data on how people are getting connected to services.
 - ii. Service Flyers: There are 23 service flyers that can be posted on the agency website and shared at community events. The flyers help to provide information on what the services are and what is to be expected.
 - iii. Call Volume: Crystal Palmer commented that the goal is to answer 95% of calls. When looking further into the data and trying to figure out why were not meeting the 95%, it was discovered that some of the calls were not even a second long but were being counted. When working with 8x8, it was determined that those calls should not be counted as you don't have an opportunity to answer them. The data does not currently reflect this change but there will be an opportunity to scrub the data moving forward. Removing those calls would put us at 98%.
 - a. Chantele Steffens suggested to contact Washtenaw to alert those that answer for after-hours that Monroe CMH is now a Certified Community Behavioral Health Clinic (CCBHC) and that a Crisis Mobile Unit is available.
2. Crisis Mobile Presentation: Adam Anastasoff presented on Crisis Mobile. Nine of the ten staff are hired and working on the tenth. Primarily the responsibility of Crisis Mobile is deployments for crisis situations in the community. Crisis situations can range. Crisis Mobile does use after-hours to triage what resources are needed. There are basically three resources that can be deployed. Law Enforcement can call and deploy the Crisis Mobile Unit and provide a warm handoff; Clinical Supervisors can request deployment; and after-hours clinicians can request deployment. Follow-up for all deployments occur with an additional follow up 5-7 days later. If the person in crisis is already assigned to a different treatment team, that team would provide the follow up but if there was a crisis, the Crisis Mobile Unit will follow up. Referrals that are received from law enforcement are followed up on as well. The Crisis Mobile Unit staff also work on some outreach efforts as well to engage in treatment. Adam presented the Crisis Mobile data for October that showed there were 6 deployments with an average face to face at just about an hour with an average response time of 15 minutes.
 - i. Chantele Steffens commented on reviewing the training that is provided to those that answer the phone for after hours and see if any additional training is needed.
 - ii. Chantele Steffens suggested Lisa Graham contact Andrew Shaw, Superintendent, at Monroe Public Schools regarding a mental health grant the school would like to obtain. There may be a possible partnership that could happen here.

b. Operations Update

1. Bridgitte Gates presented the Operations Report highlighting the topics: Customer Services; Kiosks; and 1st Quarter Grievances.
 - i. Customer Services – The NCI Survey is 41 pages and completed by the I/DD population that we serve. Monroe must provide 23 surveys. This survey is to review current services and look at data nationally to see if we are providing adequate services and what can be made the same across the nation.
 - ii. Kiosks – data and graphs for the three kiosk locations were provided in the report.
 - iii. 1st Quarter Grievances – The number of grievances submitted in November was three. All are pending.

III. CERTIFIED COMMUNITY BEHAVIORAL HEALTH CLINIC (CCBHC)

- a. Lisa Graham commented that there are no big updates. We are continuing to implement and get consumers enrolled into CCBHC. There will be more information available when 1st quarter is completed.

IV. INFORMATIONAL ITEMS

V. PARKING LOT

- a. FY2022 CMHPSM Annual Submission
- b. Engagement Strategy – Chantele Steffens

VI. ADJOURNMENT

The meeting adjourned at 6:25pm. The Board Clinical Operations Committee's next meeting is scheduled for **Wednesday, January 10, 2023** at 5pm in the Aspen Room.

Respectfully submitted,

Susan Fortney (dp)

Susan Fortney
Clinical Operations Chairperson

BOARD CLINICAL OPERATIONS COMMITTEE MEETING

Clinical Updates – December 6, 2023

STAFF

Strategic Plan Goal 1: Recruit and Retain Qualified Staff and Competent Provider Staffing that Meets the Needs of our Community.

The Clinical Department still has vacancies and continues to recruit vacant positions. We have the following vacancies as of November 30th:

- Access Screener *** (Tentative to start 12/11)
- ACT Therapist – Internal transfer
- Case Service Manager – Adult (Candidate in process)
- Case Service Manager – Adult/Child***
- Case Service Manager – Child and Family (Candidate in process)
- Children's Therapist/Case Manager
- Crisis Mobile Response Peer***
- Evaluation & Admission Specialist (backfilling Maxim position)
- Home Based Clinician (Candidate in process)
- Infant Mental Health Specialist
- OBRA Assessor (New position due to grant funding)
- Outpatient Therapist
- Peer Support Specialist (FT)
- Peer Support Specialist (PT)
- Peer Support Specialist (FT) - SUD Jail Diversion
- Youth Peer Support Specialist (specialty population position requiring a person between the ages of 18-26 with lived first or secondary experience with a mental health disorder)

***New positions due to Certified Community Behavioral Health Clinic (CCBHC) funding.

The Director of Access/Crisis/Diversion partnered with Human Resources to attend a Social Work Open House Job Fair on the campus of Spring Arbor University in effort to further recruit a talented work force.

There is a job fair scheduled for December 6th at Wayne State University for Social Workers and Counselors graduating from their program. MCMHA will be sending staff and encouraging them to apply for open positions at our agency for this event.

LEADERSHIP

Strategic Plan Goal 2: Assure Competent and Accountable Leadership

As a learning organization, also dedicated to building leaders, we will be providing additional leadership training for all clinical leadership along with other new leaders within the organization. We look forward to this opportunity to support leadership development as we continue to grow our leader regarding communication, building relationships, accountability, etc.

BOARD CLINICAL OPERATIONS COMMITTEE MEETING

Clinical Updates – December 6, 2023

During the month of November, two (2) training sessions were provided. Additional training is being planned for December 2023 and January 2024. ***This meets objective #3 Leadership will provide consistent and accurate communication under “Develop and Implement a Strategic Communication Plan with Input from Staff.”***

COMMUNITY OUTREACH

Strategic Plan Goal 3: Serve as a Responsive and Reliable Community Partner

Universal Referral

MCMHA continues to utilize the Universal Referral Form program which allows some of our community partners the opportunity to have a quick and easy way to refer individuals they encounter that they believe to be in need.

We did extend the Universal Referral program to the YMCA. Therefore, we now have 9 agencies plus law enforcement utilizing the universal referral form. A list of the agencies are as followed:

- Opportunity Center at the ALCC
- Salvation Army
- Disabilities Network
- Paula’s House
- Fairview
- Saleh Center
- Health Department’s Maternal and Child Health Services
- Monroe Housing Commission
- YMCA

There have been 32 referrals which include both law enforcement and community partners. The outcomes of these cases are as follows:

- 1 was opened and active in services at MCMHA
- 3 were referred and following through with Access
- 3 were authorized for inpatient psychiatric
- 4 declined any further intervention
- 8 were sent to their treatment teams for follow up
- 2 were followed up with in person
- 2 were connected with on the phone
- 1 had no information for follow up
- 1 was sent to Youth Diversion for follow up
- 7 were no response

BOARD CLINICAL OPERATIONS COMMITTEE MEETING

Clinical Updates – December 6, 2023

Collaborations/Partnerships

Monroe Community Mental Health Authority (MCMHA) continues to meet and play a role in the development of Monroe's Drug Court in collaboration with the Circuit Court, Prosecutors, Salvation Army Harbor Light (SAHL), probation, and many more partners.

The Intermediate School District (ISD) Transition Council resumed during the month of September, and MCMHA continues to be a partner at the table with participation from the Director of Child/Family and (Intellectual/Developmental Disabilities (I/DD) and the Housing/Employment Specialist. This is a collaborative group providing education and resources to the I/DD community. Planning for the district "roadshow" to deliver resources and information to each of the participating high schools, the annual Adverse Childhood Experiences (ACES) employment support workshop, and the 'Transition Night' open house started last week.

The Children's Department resumed attendance as a community support with the Great Starts Collaborative. This participation allows MCMHA to maintain community connection with the early childhood and preschool populations. This supports our prevention direct, infant, and early childhood services.

The Child/Family Department has partnered with members from the Great Start Collaborative to form a Children's Mental Health Workgroup to review and address concerns identified from the Great Start's annual survey. Members from Early On, Great Start, Mini Mitten, Head Start, Intermediate School District (ISD), and MCMHA met to review the survey and identify goals of the committee.

Opportunity Center at the ALCC

Monroe Community Mental Health Authority (MCMHA) continues to partner with the Opportunity Center at the ALCC by placing peers' services within the center on a consistent schedule. Certified Peer Support Specialists/Parent Support Partners meet individuals at the Center on Mondays, Wednesdays, and Thursdays from 12-4pm for anyone interested. These days had the highest volume of contacts and services. Appointments will be continuously monitored, and availability will be increased if the need changes.

The peers continue to assist in linking and coordinating services which includes engaging those who need community mental health services or those involved in community mental health services. In September, we provided 5 1:1 meetings. The peers also engaged in 16 programs/activities within the Opportunity Center.

These items meet objective #3 Increase/Improve Community Presence under "create and implement a strategic community presence plan for each event."

Mental Health First Aid (MHFA)

No additional training has been provided since the last report. More training courses are being added to the calendar in order to provide additional training to the community. ***This meets objective #2 Community Outreach which is under Mental Health First Aid (MHFA) Trainings.***

BOARD CLINICAL OPERATIONS COMMITTEE MEETING

Clinical Updates – December 6, 2023

FINANCE

Strategic Plan Goal 4: Develop and Implement a Stable yet Agile Financial Strategy that Supports MCMHA’s Mission

No updates.

SERVICES

Strategic Plan Goal 5: At All Levels of the Organization, Services Provided Meet the Needs of the Customer

Crisis Mobile Response Team

As of 12/1/23, MCMHA has nine (9) out of ten (10) Crisis Mobile Response Team Staff. The main focus will be training these staff as we are committed to quality 24/7 coverage. As a reminder, the shifts are as follows:

	# Of Staff	Shift	Work Days
A-shift	1 Clinician; 1 Peer	Shift 7am - 8:30pm	Sat, Sun, Mon
B-Shift	1 Clinician; 1 Peer	Shift 7pm - 8:30am	Sat, Sun, Mon
C-Shift	1 Clinician; 1 Peer	Shift 8am- 6:30pm (Tuesday till 6pm)	Tue, Wed, Thu, Fri
D-Shift	1 Clinician; 1 Peer	Shift 2pm- 11:30pm (Tuesday till 11pm)	Tue, Wed, Thu, Fri
E-shift	1 Clinician; 1 Peer	Shift 11pm- 9:30am (Tuesday till 9am)	Tue, Wed, Thu, Fri

Please see the attached report (Attachment 1) regarding October data from the Crisis Mobile Response Team.

Developing and implementing a crisis mobile response team meets objective #1 Enhance Programs for Highly Vulnerable Populations under “mobile crisis unit.”

MCMHA Crisis Mobile Response Team continues to receive great feedback on responses from the community and law enforcement.

Crossroad Clubhouse

The Crossroad Clubhouse has submitted the application for re-certification. All areas that were found in need of attention/improvement have been addressed. The Clubhouse is looking for ways to advertise the program to increase the knowledge of services offered and the benefits to the community individuals. The fliers created by Revel will be utilized and left at referral sources such as ProMedica, Family Medical Center (FMC) locations and in our Access Department to provide to each individual as a resource. (Attachment 2) Clubhouse members will be working on making these connections with referral sources and dropping off the fliers to these providers.

BOARD CLINICAL OPERATIONS COMMITTEE MEETING

Clinical Updates – December 6, 2023

Benesh Expansion

The data provided below identifies the individuals zip codes who were scheduled at the Benesh building. It should be noted that the information includes all appointments whether they were held in-person or virtually.

Zip Code	Location	23-Apr	23-May	23-Jun	23-Jul	23-Aug	23-Sep	23-Oct	Total
48103	Ann Arbor	0	0	1	0	0	0	0	1
48105	Ann Arbor	0	1	0	0	0	0	0	1
48117	Carleton	1	4	2	3	5	2	2	19
48131	Dundee	4	3	2	0	1	1	3	14
48133	Erie	5	1	1	0	3	3	4	17
48135	Garden City	1	0	0	0	0	0	0	1
48140	Ida	0	0	0	1	0	0	0	1
48144	Lambertville	2	0	0	0	4	1	0	7
48145	LaSalle	1	1	0	0	0	0	1	3
48157	Luna Pier	0	1	1	0	0	0	3	5
48159	Maybee	0	3	2	0	1	0	0	6
48160	Milan	5	2	1	0	2	1	6	17
48161	Monroe	23	44	42	40	45	36	49	279
48162	Monroe	11	34	28	20	20	24	15	152
48164	New Boston	0	0	1	0	0	1	0	2
48166	Newport	7	18	12	9	7	4	9	66
48177	Samaria	1	0	0	0	0	0	0	1
48179	South Rockwood	1	1	0	0	3	0	0	5
48182	Temperance	6	8	6	1	6	2	3	32
48191	Willis	0	0	0	0	0	0	1	1
48336	Fowlerville	0	0	0	0	0	0	1	1
49267	Ottawa Lake	1	0	0	0	0	0	1	2
49270	Petersburg	8	1	1	3	2	0	0	15
Total		77	122	100	77	99	75	98	648

It should be noted that starting in January 2024, reporting will only be for Fiscal Year 2024.

Below a table is provided indicating out of the total number appointments scheduled each month, how many of those appointments were in-person at the Benesh Building; and out of all appointments scheduled, whether in-person or virtual, how many were kept.

	% Appointments in Office	% Kept Appointments (in-person/virtual)
April	45%	58%
May	55%	67%
June	58%	56%
July	66%	58%
August	70%	43%
September	69%	53%
October	76%	52%

BOARD CLINICAL OPERATIONS COMMITTEE MEETING

Clinical Updates – December 6, 2023

Jail Misdemeanor IOP Program

The Jail Misdemeanor IOP program continues to increase the number of enrollees and services provided. Below is data provided for October 2023:

- # assessed and enrolled: 10
- # of discharges: 5 successful
- # currently in the program: 23
- # denied due to being at dorm: 2
- # denied due to not interested: 1
- # denied due to not being in jail: 27
- # denied out of county: 0

Training

The Director of Access/Crisis/Diversion attended Crisis Con 2023, a national crisis continuum conference. Much information was gathered, networking occurred and now information is being applied to Monroe's Crisis Mobile Unit to ensure they are well-equipped and effective.

Certified Community Behavioral Health Clinic (CCBHC)

As previously stated, MCMHA will be a part of the Michigan Department of Health and Human Services (MDHHS) CCBHC Demonstration Project beginning October 1, 2023. This status will allow MCMHA to expand the population served. ***Therefore, this allows us to meet/exceed objective #3 for Improve Integration of Physical and Behavioral Health Care and Overall Wellness Services under "access benefits of certified community behavioral health clinic (CCBHC) vs. health home certification and make recommendation."***

The CCBHC Program Director and MCMHA clinical staff have continued to work diligently to create efficient and effective processes to enroll members and ensure timely access to services. CCBHC Program Director has created an eligibility flow chart and infographic to assist staff in determining the appropriate workflow. The CCBHC Implementation workplan has been updated to reflect FY24 goals and objectives, including expanding and implementing required Evidence Based Practices, training staff, and continuing to expand access to services.

Additionally, a Michigan Certification Board for Addiction Professionals (MCBAP) Cohort has been developed to support staff pursuing MCBAP credentialing and to increase staff skills and knowledge of treating substance use disorders (SUD) to meet the CCBHC demonstration project requirement to provide SUD services. At this time one (1) staff member has the Certified Clinical Supervisor credential, one (1) staff is on a development plan to become certified, and 14 staff members have expressed interest in becoming certified. CCBHC Care Coordination agreements were submitted to MDHHS on November 16, 2023. MCMHA is currently waiting on two (2) care coordination agreements from the Department of Veteran's Affairs and MiCAL. In November, 307 additional members were enrolled in the Waiver Support Application (WSA); making a total of 797 members enrolled in CCBHC as of 11/28/2023. IT is coordinating with the PIHP to obtain access to the master eligibility list monthly to ensure eligible members are identified and input into the WSA timely.

BOARD CLINICAL OPERATIONS COMMITTEE MEETING

Clinical Updates – December 6, 2023

Assertive Community Treatment (ACT) Team

MCMHA leadership is exploring additional training to prepare for the ACT audit that we anticipate will occur around the month of April. This training will refresh the team and look for areas that can help individuals grow and become independent regarding their Mental Health Care.

Waiver Program Services

The Michigan Department of Health and Human Services (MDHHS) offers several waiver programs. These programs provide a pathway to Medicaid for individuals with the highest medical need for Developmental Disabilities and Serious Emotional Disturbance.

Children's Waiver Program (14 Enrolled – **no change this month**) – This waiver makes it possible for children, under the age of 18, have a documented developmental disability, meet requirement for Intermediate Care Facility (IFC) and need for habitative medical and/or behavioral care in the home, to receive Medicaid. There are a limited number of accepted cases per state and region and 14 is one of the highest numbers of these cases MCMHA has ever held.

Serious Emotional Disturbances Waiver (9 Enrolled – **no change this month**) – Another Michigan pathway to Medicaid for children and youth with a Serious Emotional Disturbance (SED) diagnosis and intensive treatment need that meets criteria for inpatient hospitalization or without added behavioral services they would require hospitalization. Again, this is the highest number of these cases MCMHA has held, and before 2021 we had zero SED waiver cases.

Habilitation Supports Waiver (HAB Waiver/**130 Enrolled**) - This is a cooperative Federal and State agreement allowing for a waiver on certain requirements to allow us to provide services in a community setting rather than in an institution. Enrolled consumers on the HAB waiver must meet specific guidelines to be eligible including a documented developmental disability, living in the community, active Medicaid, need for Intermediate Care Facility, active and ongoing treatment, and assistance to support functioning, and at least one HAB waiver service per month in addition to supports coordination.

***It should be noted that MCMHA has 126 assigned slots for the HAB Waiver and has utilized for additional slots from other counties in our region.

Service Flyers

The Clinical Department has been working on service flyers for the last several months in order to better educate the community. After the content was developed, Revel created a uniformed look. (Attachment 3-26)

BOARD CLINICAL OPERATIONS COMMITTEE MEETING

Clinical Updates – December 6, 2023

MISCELLANEOUS

Call Volume Data

Below is the call volume data through October 2023.

	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23
Incoming Calls	3522	4136	3948	4256	3594	4195	4195	3859	4528	4254	3929
Incoming calls minus abandon calls	3177	3789	3639	3932	3346	3900	3914	3615	4195	3957	3863
Calls Answered	3100	3761	3575	3911	3279	3904	3915	3609	4221	3921	3653
Missed/Abandoned Calls	434	386	380	353	322	297	283	258	333	338	66
Abandoned Calls	345	347	309	324	248	295	281	244	333	297	265
% incoming calls answered	88%	91%	91%	92%	91%	93%	93%	94%	93%	92%	93%
% incoming calls answered minus abandon calls	90%	92%	92%	92%	93%	93%	93%	94%	93%	93%	98%

It should be noted that starting in January 2024, reporting will only be for Fiscal Year 2024.

Key: Abandoned means that no one was on the other line when the call was answered.

Missed is someone calls in and the call wasn't answered as staff could have been on their phones taking care of others. Duplication of missed and abandoned.

As stated previously, MCMHA is setting an internal goal of 95% of calls answered. MCMHA has been working with 8x8 to clean up the data. There are calls that are "zero" seconds long which are still being considered abandoned or missed due to calls even though these could be cell phone calls dropped, etc. Therefore, with some assistance, MCMHA's IT department is able to look at the calls a little more in depth and more accurately report the numbers. As you can see, during the month of October 2023, we were at 98% which is over our goal of 95%.

Select Month:: 2023 - 10

(1) ▾



Monroe County CMH Mobile Crisis Utilization Report

Number of encounters, Number of Follow Ups:

Month	Initial or Follow Up...	#	%
2023 - 10	Follow-Up	0	0%
2023 - 10	Initial	6	100%

1 - 2 / 2 < >

Month	Contact Type	Hours
2023 - 10	Face-To-Face	4.5
2023 - 10	Contact Attempt	0
2023 - 10	Indirect Contact (Phone/Email/Other)	0

1 - 3 / 3 < >

Total Mobile Crisis Deployments

6

Month...	Contact Type	#	%
2023 - 10	Face-To-Face	6	100%
2023 - 10	Contact Attempt	0	0%
2023 - 10	Indirect Contact (Phone/Email/Other)	0	0%

1 - 3 / 3 < >

Average Face-to-Face Interaction Time

0.9

Month	Avg F2F Contact
2023 - 10	0.9

1 - 1 / 1 < >

Select Month:: 2023 - 10

(1) ▾

Time of Calls from Law Enforcement

Time of day of calls:

Hour ▾	# Calls from Law Enforcement
00:00	0
01:00	0
02:00	0
03:00	0
04:00	0
05:00	0
06:00	0
07:00	0
08:00	0
09:00	0
10:00	0
11:00	0
12:00	2
13:00	0
14:00	1
15:00	0
16:00	1
17:00	1
18:00	0
19:00	0
20:00	0
21:00	1
22:00	0
23:00	0

Day	# Calls from Law Enforcement
Sunday	5
Monday	7
Tuesday	8
Wednesday	5
Thursday	12
Friday	8
Saturday	9

Length of time to respond from time of call to arriving on scene:

Average Response Time (Minutes)

15.33

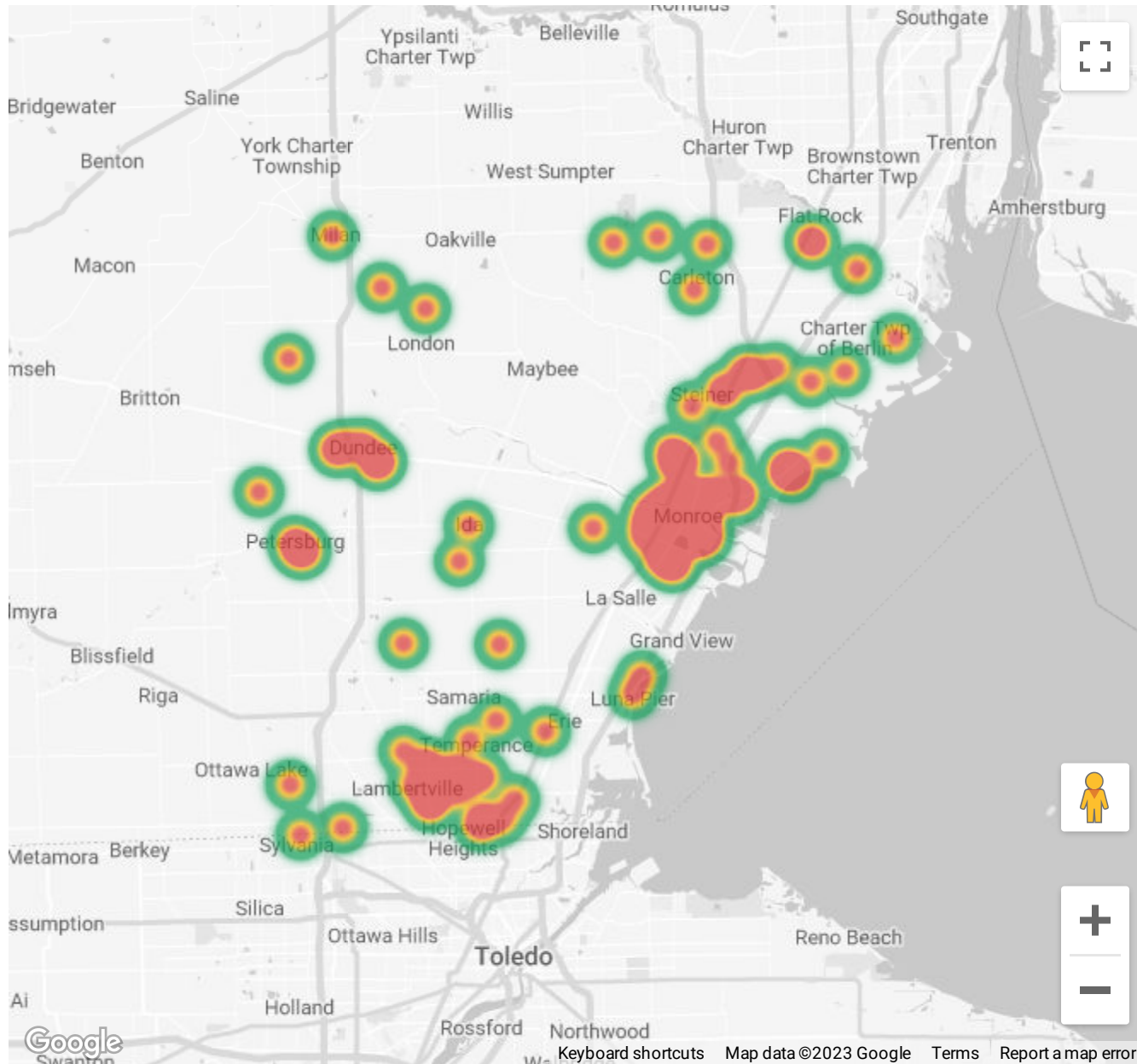
Month	Avg. Response Time ▾
2023 - 10	15.33

Select Month:: 2023 - 10

(1) ▾

Location

Mapping of locations deployed to:



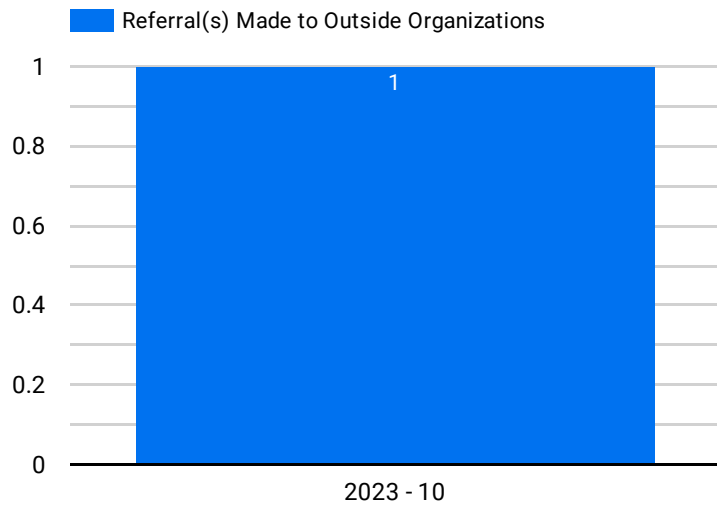
Month	Zipcode	#	%
2023 - 10	48162	2	33%
2023 - 10	48161	2	33%
2023 - 10	48182	1	17%
2023 - 10	48134	0	0%
2023 - 10	48160	0	0%
2023 - 10	48173	0	0%
2023 - 10	48166	1	17%
2023 - 10	48117	0	0%

call_Address 0 1

Select Month:: 2023 - 10

(1) ▾

Number of referrals made and where they were referred to:



Month ① ▲	Referred to: ② ▲
2023 - 10	N/A
2023 - 10	Promedica Monroe

Select Month:: 2023 - 10

(1) ▾

Where Referrals are Coming From:

Month / # Calls	
Deployed by:	2023 - 10
ACCESS	3
Monroe County Sheriff's Dept.	2
Monroe City Police	1
Police Mental Health Referral	0
CMH	0
Mobile Crisis Follow Up	0
Self	0

Select Month:: 2023 - 10

(1) ▾

Number of Narcan Kits Distributed:

Narcan Kits Distributed

0

Number of calls per population - Race

			Month / # / %
			2023 - 10
Race		#	%
White		4	67%
Other Race		1	17%
Black or African American		1	17%

Select Month:: 2023 - 10

(1) ▾

Number of calls per population - Age

			Month / # / %
			2023 - 10
Age		#	%
0 to 9		0	0%
10 to 17		1	17%
18 to 28		1	17%
29 to 39		0	0%
40 to 50		2	33%
51 to 61		2	33%
62 to 72		0	0%
73 to 83		0	0%
84 to 94		0	0%
95 +		0	0%
Not Collected		0	0%

Crossroads Clubhouse

MONROE

A Center For Community

Come join the club.



What is the Crossroads Clubhouse?

The Crossroads Clubhouse is a psychological rehabilitation program that provides **members** the chance to lead normal and productive lives. We offer a **supportive environment** where members can regain their confidence, develop skills, and pursue personal **goals**. We give people with mental illnesses the chance to form **long-term** relationships, obtain employment, education, and more. We promote independence, social integration, and **overall well-being**. With a focus on recovery and the reduction of stigma, Crossroads Clubhouse stands as a **beacon of hope**, promoting mental health awareness and fostering a sense of **belonging** among our members in Monroe County.

The Crossroads Communications program offers our members the opportunity to make an **impact** in the community through research and special projects for Crossroads Clubhouse and MCMHA. In **collaboration** with MPACT (Monroe's Public Access Center Community Radio & Television Station) and MCMHA, Crossroads has developed a public access television show that is member designed, produced, and directed. The program – "Rise with Crossroads sponsored by MCMHA" – empowers our members to communicate with a variety of audiences through digital and social media. It provides an **understanding** of professional, cultural, and ethical issues shaping the community. This program involves creating documents and resources that convey information in a more suitable format for its intended audience and purpose. Our members develop technical communication skills that entail design, management, writing and other techniques for producing a variety of content types. Ultimately, it allows our members to share **their story** in their voices from their eyes.

What is the Clubhouse Model?

We operate from the Clubhouse Model, emphasizing collaboration, empowerment, and respect for each **individual's unique** strengths and abilities.

The Clubhouse serves as a supportive environment where individuals are referred to as "**members**" rather than patients or clients, emphasizing their active participation and engagement. We operate on the principle of a "work-ordered day," where members and staff **work side by side** as colleagues to run the Clubhouse and its programs.

Members are given the tools to discover their talents and interests in a variety of areas including:

- **Food Service** – meal preparation including menu planning, purchasing, meal preparation, sanitation, and culinary arts presentation.
- **Clerical** – office work including receptionist, telephone answering and messages, typing, newsletter, and bus ticket distribution.
- **Facilities** – general maintenance and upkeep of the physical plant, inside and out, and operating the General Store.
- **Vocational** – All aspects of employment, including volunteering, transitional employment, supported and independent employment, as well as educational opportunities.

Why Partner with Crossroads Clubhouse?

A **partnership** with the Crossroads Clubhouse in Monroe County offers organizations a range of benefits, including social impact, talent acquisition, community engagement, and professional networking.

Such partnerships showcase a **commitment** to mental health advocacy and provide opportunities to make a **positive difference** in the lives of individuals living with mental illness while establishing a **strong presence** within the local community.

Partnering with us has a clear set of benefits, including:

- Enhance reputation and brand image in the community.
- Access a pool of talented individuals for employment opportunities or internships.
- Help Clubhouse members gain confidence and develop job-related skills.
- Contribute to the well-being and empowerment of individuals with mental illness.
- Break down stigmas surrounding mental health and promote inclusivity.
- Engage in networking opportunities within the local community.

For more information or to join us in our work, call us at **(734) 243-6401**.



Access Services

Access Services offer eligibility screenings for Monroe Community Mental Health Authority (MCMHA) services or other relevant services in the community, including crisis services, prescreening assessments for inpatient admission, and substance abuse services. Our crisis services have staff available Monday through Friday from 8:30 a.m. to 5 p.m.

Information & Assistance

For further information or for questions or concerns, please contact:

Customer Services:
(734) 243-7340 TTD: 7-1-1

Suicide and Crisis Life Line: 9-8-8

What is expected of me?

- Answer questions as honestly and completely as you can

What to expect from the Access Clinician?

- Ask questions about your situation to help them determine what is needed
- Prompt, efficient intervention when in a crisis situation

Who is eligible?

- Any person with a mental health or substance use disorder
- Anyone who is experiencing a crisis can reach out to speak with an Access Clinician, regardless of insurance or eligibility for services

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Assertive Community Treatment

Assertive Community Treatment Services offer an intensive service approach provided in your home or community. Our mobile multidisciplinary team includes a nurse, psychiatrist, case manager, peer support, therapist, and housing support. Our services include co-occurring treatment, employment, and rehabilitative services. Crisis availability is provided by our team 24/7.

Information & Assistance

For further information or for questions or concerns, please contact:

Customer Services:
(734) 243-7340 TTD: 7-1-1

Suicide and Crisis Life Line: 9-8-8

What is expected of me?

- Participate in all appointments
- Understand that progress takes time, is a commitment, and is a process
- Take ownership of your recovery

What to expect from the ACT team?

- Multiple weekly contacts, a minimum of 2 hours per week
- Contacts in your home or community
- Help accessing community resources
- Person-centered planning
- Guidance and advocacy in times of crisis

Who is eligible?

- Adults with severe and persistent mental illness who require intensive intervention to support continued independence in the community

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Adult Outpatient Services

Adult Outpatient Services offer brief solution-focused therapy, appointments in office or via telehealth video, and advocacy for yourself/family.

Information & Assistance

For further information or for questions or concerns, please contact:

Customer Services:
(734) 243-7340 TTD: 7-1-1

Suicide and Crisis Life Line: 9-8-8

What is expected of me?

- Participate in all appointments
- Support each other in the treatment process
- Understand that progress takes time, is a commitment, and is a process
- Take ownership of your recovery

What to expect from my therapist?

- A clinician trained & certified in evidence-based treatment approaches
- A frequency of appointments based on severity of need and is agreed upon by the individual
- Offer guidance/advocacy in times of crisis
- Assist with developing safety and crisis prevention plans
- Provide a safe, private, and judgement-free space to process personal matters

Who is eligible?

- Persons aged 18+ have a diagnosis of mental health or substance use disorder
- Individuals with mental health concerns that interfere with daily living
- Individuals not receiving services from another agency or have not been successful when participating in similar services

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After-Hours Crisis Services

Safety planning and crisis services are available 24 hours a day, 7 days a week. Reach a clinician after hours by calling 734-243-7340 and selecting 1 (Assessment) to determine eligibility for inpatient psychiatric admission.

This is completed once a hospital has assessed you, completed a petition for hospitalization and a clinical certificate, and clearance has been achieved.

Information & Assistance

For further information or for questions or concerns, please contact:

Customer Services:
(734) 243-7340 TTD: 7-1-1

Suicide and Crisis Life Line: 9-8-8

What is expected of me?

- Answer questions as honestly and completely as you can

What to expect from my After-Hours Clinician?

- Prompt, efficient, and compassionate intervention when in a crisis situation
- The clinician will ask you questions about your situation to help them determine level of care and next steps

Who is eligible?

- Anyone who is experiencing a crisis can call the crisis line regardless of insurance or location

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Applied Behavior Analysis

Applied Behavior Analysis (ABA) is an intensive, behavior-based treatment that uses various techniques to bring meaningful and positive changes to a child's life. Each ABA plan is designed for the individual needs of the child and includes an average of 5 to 25 hours per week of direct intervention depending on medical necessity. Services can be provided in the home or community setting.

Information & Assistance

For further information or for questions or concerns, please contact:

Customer Services:
(734) 243-7340 TTD: 7-1-1

Suicide and Crisis Life Line: 9-8-8

What is expected of me?

- Answer questions as honestly and completely as you can
- Attend the ABA intake appointment
- Communicate with your provider regularly
- Attend ABA services as scheduled with you and your child

What to expect from ABA?

- Screening to determine if further testing is medically necessary
- Complete intake process
- Assignment of a Support Coordinator (SC) or Case Services Manager (CSM)
- Scheduled evaluation and/or additional psychological testing
- If ABA treatment is determined to be appropriate, the SC or CSM will schedule with an ABA provider
- Intake and IPOS documentation is completed

Who is eligible?

- Under age 21
- Diagnosis of Autism Spectrum Disorder with the ABA provider and the assigned CS or CSM

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Case Management

Case Management offers a coordination of services such as linking to resources, advocacy for individual person-centered planning, and crisis management.

Information & Assistance

For further information or for questions or concerns, please contact:

Customer Services:
(734) 243-7340 TTD: 7-1-1

Suicide and Crisis Life Line: 9-8-8

What is expected of me?

- Participate in goal setting and scheduled appointments
- Complete annual forms
- Actively participate as part of your mental health team
- Ownership in your recovery process

What to expect from CM?

- Education on all services available
- Link, monitor, and coordinate authorized services
- Schedule appointments regularly based on individual choice
- Monthly contacts as needed

Who is eligible?

- Any person with a mental health or substance use disorder

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Children's Waiver Program

The Children's Waiver Program provides Medicaid coverage to children who would otherwise be unable to meet Medicaid eligibility due to parental income.

This program is designed to assist individuals in acquiring, retaining, and improving the social skills necessary to reside successfully in the home and the community.

Services may include community living supports, enhanced transportation, environmental accessibility adaptations, fencing for your home, family/non-family training, respite, overnight health and safety support, specialized medical equipment & supplies, and specialty services such as music/recreation/art massage therapy.

Information & Assistance

For further information or for questions or concerns, please contact:

Customer Services:
(734) 243-7340 TTD: 7-1-1

Suicide and Crisis Life Line: 9-8-8

What is expected of me?

- Participation in regularly scheduled appointments

What to expect from my therapist?

- Educate the family on all services they have access to through the waiver, including enhanced and specialized services
- Monitor timely submission of recertifications and disenrollments
- Coordinate the development of the treatment team, explain how the team works cooperatively to identify the child's needs, and secure all necessary service that must be included in the IPOS
- Regularly scheduled appointments

Who is eligible?

- Ages 0-18
- Meets criteria based on MDHHS approval
- Resides with parent(s) or with a relative who has been named as legal guardian
- Risk of being placed in or currently resides in an Intellectual with Developmental Disability or Intermediate care facility
- Has intellectual developmental disability AND in need of habilitative service

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Community Living Supports

CLS is designed to teach, prompt, encourage, support, and monitor children and adults diagnosed with intellectual developmental disabilities and/or mental illnesses. CLS can be provided through verbal prompting and reminding or with assistance, as well as physical guidance. Services are available for in-home and in the community.

Information & Assistance

For further information or for questions or concerns, please contact:

Customer Services:
(734) 243-7340 TTD: 7-1-1

Suicide and Crisis Life Line: 9-8-8

What to expect from CLS?

- Assistance in increasing and maintaining personal self-sufficiency for tasks such as bathing, dressing, shaving, toileting, oral care, hygiene, etc.
- Skill building for grocery shopping, meal planning, cooking, home maintenance, and medical appointment coordination
- Education on food safety/storage, medication administration, and community safety
- Transportation
- Community integration activities

Who is eligible?

- Any person diagnosed with a mental health or substance use disorder
- Individual qualifications are determined through the CLS Assessment

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Rise with Crossroads Clubhouse

Create a TV program!



With an emphasis on fostering a supportive and inclusive space, we welcome Crossroads Clubhouse members of all backgrounds and skill levels to participate in “Rise With Crossroads Clubhouse and MCMHA.”

In this collaborative and creative process, individuals work as a team to create a TV program.

By joining our dynamic workshops and hands-on training sessions, you’ll acquire valuable skills in camera operation, sound recording, set design, and more. Each role, from production to execution, is filled by a Crossroads Clubhouse member.

Roles for this include:

- Script writers
- Editors
- Broadcasters
- Film and production crew
 - Director
 - Producers
 - Camera crew
 - Camera operators
 - Sound
 - Lighting

Through this program, participants will get hands-on experience in utilizing professional production equipment, build an inclusive and productive environment, and be able to showcase their talents to the community. MCMHA’s TV Production Program fosters mentorship and a team mentality as individuals work together to create each episode. **Bring your vision to life today with “Rise With Crossroad Clubhouse and MCMHA.”**

Rise with Crossroad Clubhouse
Call (734) 243-7340 to sign up!

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Crossroads Clubhouse

Clubhouses are a powerful demonstration of the fact that people with mental illness can and do lead normal, productive lives. Clubhouses provide members with opportunities to build long-term relationships that, in turn, support them in obtaining employment, education, and other attainable goals.

Information & Assistance

For further information or for questions or concerns, please contact:

Customer Services:
(734) 243-7340 TTD: 7-1-1

Suicide and Crisis Life Line: 9-8-8

What to expect from Crossroads?

- A structured day in which the talents and abilities of members are recognized and utilized within the Clubhouse
 - The work ordered day begins at 9:30 am and runs until 2:00 pm
- Participation in consensus-based decision making regarding all important matters related to the running of the Clubhouse
- Opportunities to obtain paid employment in mainstream businesses and industries through a Clubhouse-created Transitional Employment Program
- Opportunities to participate in Clubhouse-supported and independent employment/vocational programs
- Assistance in accessing community-based educational resources
- Evening & weekend social activities and recreational events
- Access to crisis intervention when needed
- Assistance in securing and sustaining safe, affordable housing

The Clubhouse is open from 8:30 am to 3:30 pm.

Who is eligible?

- Any person 18 or older with a mental health or substance use disorder
- You feel Crossroads might benefit you in an area of your recovery

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Habilitation Supports Waiver

The Habilitation Supports Waiver (HSW) team is an intensive home and community-based active treatment and support program designed to assist individuals with severe developmental disabilities to live independently with supports in their community of choice. Some services include community living supports; enhanced medical equipment and pharmacy; environmental modifications; family/non-family training; personal emergency responses system; out-of-home, non-vocational or prevocational services; respite; overnight health and safety support; and/or private duty nursing.

Information & Assistance

For further information or for questions or concerns, please contact:

Customer Services:
(734) 243-7340 TTD: 7-1-1

Suicide and Crisis Life Line: 9-8-8

What is expected of me?

- Participate in regularly scheduled appointments and developing a treatment plan
- Assist in providing needed documentation

What to expect from my case manager?

- Educate the family on all services they have access to through the waiver, including enhanced and specialized services
- Monitor timely submission of recertifications and disenrollments
- Coordinate the development of the treatment team, explain how the team works cooperatively to identify the consumer's needs, and secure all necessary service that must be included in the IPOS
- Monthly contacts or as needed

Who is eligible?

- Any person that has been diagnosed with developmental or intellectual disability or intellectual disability (as defined by Michigan law)
- Resides in community setting (must live in a licensed setting above 12 beds)
- If not for HSW services, individuals with would require developmental disability or intermediate care facility level of care service
- Chooses to participate in the HSW in lieu of ICF/IDD services

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Home-Based Services

Home-based services are an intensive service approach provided in your home, school, or community focusing on: family-driven and youth-guided treatment; advocacy for your family; opportunities to resolve challenges that have prevented your child from thriving at home, school, work, or other social settings; therapy to address ongoing behavioral/emotional concerns of your child; and supports to empower parent(s)/caregivers.

Information & Assistance

For further information or for questions or concerns, please contact:

Customer Services:
(734) 243-7340 TTD: 7-1-1

Suicide and Crisis Life Line: 9-8-8

What is expected of me?

- Parents and child participate in scheduled appointments
- Support each other in the treatment process
- Understand that progress takes time, is a commitment, and is a process

What to expect from my therapist?

- Home-based weekly visits, minimum of 1 hour per week
- Supports to understand the needs of your child
- Guidance and advocacy in times of crisis
- Help connecting the family to the community for support and resources

Who is eligible?

- Youth aged 4-21 that have a mental health or substance use disorder
- Youth with mental health needs, adverse childhood experiences like neglect and violence, social or emotional impairment and delay, and challenges at home, school, or in the community
- Families that are not receiving similar services from another agency or have not been successful when participating in similar services in the community

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Early Childhood Services

Provides empathy and emotional support through individual and family counseling. Services offer developmental guidance about infant behaviors and childcare practices while providing encouragement for appropriate behavior, interaction, and parental response, and promoting emotional well-being in young children and their families.

Information & Assistance

For further information or for questions or concerns, please contact:

Customer Services:
(734) 243-7340 TTD: 7-1-1

Suicide and Crisis Life Line: 9-8-8

These services offer support for coordination of mental health issues that cause difficulties in caring for an infant and place the development of the infant and parent-infant relationship at risk; teach positive interactions and relationships through modeling, play, and mirroring; link to community resources.

What is expected of me?

- Participate in scheduled appointments
- Understand that progress takes commitment and time
- Provide clinicians with an understanding of what is culturally important to the family and dynamics of relationships within family/friendships

What to expect from my clinician?

- Weekly/bi-weekly visits in your home, community, or office
- Guidance and advocacy in times of crisis
- Assistance gaining access to community resources

Who is eligible?

- Infants (aged birth to 3 years) and children in early childhood (aged 3-6 years)
- Fathers, mothers, and pregnant women
- Children having difficulties with relating, bonding, or responding to caregiver or at risk of developing problems with bonding and attachment

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Intensive Crisis Stabilization Services for Teens and Children

Crisis Stabilization Services are designed to provide short-term alternative to inpatient psychiatric services and are available for on-site critical intervention and/or telephone consultation at all times.

Information & Assistance

For further information or for questions or concerns, please contact:

Customer Services:
(734) 243-7340 TTD: 7-1-1

Suicide and Crisis Life Line: 9-8-8

What is expected of me?

- Answer questions as honestly and completely as you can

What to expect from the Crisis Stabilization team?

- Intensive structured treatment and support
- Assessments and identify strengths and needs
- De-escalation of the crisis
- Family-driven, youth-guided crisis and safety planning
- Brief intensive individual and family counseling/psychotherapy
- Skill building and Psychoeducation
- Referrals to community services and/or collaboration with youth serving systems
- Psychiatric consult as needed

Who is eligible?

- Children, teens, and young adults ages 0-21 who meet criteria
- Parent/caregiver has identified a crisis and reports inability to manage
- Harm to self or others at risk
- Risk behaviors and/or behavioral/emotional symptoms impacting typical level of functioning
- Immediate intervention required to avert hospitalization and/or to remain in the current living arrangement

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Jail & Jail MATS Services

Jail services provide an assessment of needs, coordinations with a legal team, peer support, crisis management, psychiatric services (if appropriate), supports and services to reduce repeat offenses after release, and medication assisted treatment (MAT) if appropriate for substance use treatment.

Jail MAT services assess for the need of service and then provide coordination with a service provider, including continuation or start of substance use disorder medication assistance; tools to overcome medication addiction; and counseling.

Information & Assistance

For further information or for questions or concerns, please contact:

Customer Services:
(734) 243-7340 TTD: 7-1-1

Suicide and Crisis Life Line: 9-8-8

What is expected of me?

- Participation in treatment planning
- Report concerns or areas of need
- Ownership of your own recovery

What to expect from my team?

- Assistance with interventions and coping skills
- Formulation of release plan

Who is eligible?

- Persons that are currently incarcerated and interested in services

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Jail Diversion Program

Jail diversion services provide one-on-one case management, peer support, legal coordination, and psychiatric services, as well as crisis management the coordination of resources to reduce the likelihood of repeat offenses.

Information & Assistance

For further information or for questions or concerns, please contact:

Customer Services:
(734) 243-7340 TTD: 7-1-1

Suicide and Crisis Life Line: 9-8-8

What is expected of me?

- Participation in scheduled appointments and treatment planning
- Report concerns or areas of need
- Ownership of your own recovery

What to expect from my team?

- Advocating and coordinating services to ensure successful transition into the community
- Implementing a release plan

Who is eligible?

- Any person with a mental health or substance use disorder
- Persons recently released from incarceration

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Medical Assistants & RNs

Medical assistants and RNs provide vital checks, completion of health reviews, screening for prior authorizations, medication administration and injections, in-person and telehealth appointments, and medication education.

Information & Assistance

For further information or for questions or concerns, please contact:

Customer Services:
(734) 243-7340 TTD: 7-1-1

Suicide and Crisis Life Line: 9-8-8

What is expected of me?

- Attend scheduled appointments
- Have current medication list ready for review
- Keep vital, injection, and personal health review appointments as recommended by Psychiatric Health Services

What to expect from my Nurse/Medical Assistant?

- Integrated and coordinated care within the team
- Welcoming, empathetic, and compassionate staff
- Timely appointments

Who is eligible?

- Any person with a mental health or substance use disorder

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Mental Health Recovery Court

Mental Health Recovery Court (MHRC) provides a team approach through the court system for the coordination of care. Services could include evidence-based group therapy, psychiatric services, and crisis management if needed.

Information & Assistance

For further information or for questions or concerns, please contact:

Customer Services:
(734) 243-7340 TTD: 7-1-1

Suicide and Crisis Life Line: 9-8-8

What is expected of me?

- Meetings with case manager as outlined in the MHRC program manual
- Daily calls to the drug testing line
- Random drug testing
- Meetings with probation officer as outlined in the program manual
- Bi-monthly court hearings
- Weekly in-person group therapy
- Ownership of your own recovery

What to expect from my team?

- Interaction with the team, which consists of 1st District Court, 38th Circuit Court, and others
- Case management based on Mental Health Court Structure
- Peer support based on needs/coordination
- Supports to understand your needs
- Advocate in times of crisis
- Help connecting to the community for support and resources

Who is eligible?

- Adults referred to the MHRC program (legally or clinically eligible)

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Youth Outpatient Therapy

Youth Outpatient Therapy offers a person- or family-centered approach provided at home, in a community location, or at our office. The individual-driven treatment allows for self-advocacy, resolves daily challenges, and addresses ongoing behavioral and emotional concerns, and more.

Information & Assistance

For further information or for questions or concerns, please contact:

Customer Services:
(734) 243-7340 TTD: 7-1-1

Suicide and Crisis Life Line: 9-8-8

What is expected of me?

- Participate in scheduled appointments
- Support each other in the treatment process
- Understand that progress takes time, is a commitment, and is a process
- Take ownership of your own recovery

What to expect from my therapist?

- Establishes frequency of appointments based on severity of need
- Schedules appointment in the home, office, or a community location
- Offers guidance and advocacy in times of crisis
- Assists with developing safety and crisis prevention plans
- Provides a safe, private, and judgement-free space to process personal matters

Who is eligible?

- Any person with a mental health or substance use disorder
- Individuals whose mental health concerns interfere with daily life
- Individuals not receiving similar service from another agency or those who have not been successful with similar services

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Parent Management Training Oregon

Parent Management Training Oregon (PMTO) will help parents learn supporting practices like directions, tracking, emotional regulation, and communication. PMTO sessions are videotaped to assist clinicians with learning.

Information & Assistance

For further information or for questions or concerns, please contact:

Customer Services:
(734) 243-7340 TTD: 7-1-1

Suicide and Crisis Life Line: 9-8-8

What to expect from PMTO?

Supporting Parenting Practices

PMTO is a skill- and evidence-based treatment approach that provides:

Directions: Promotes children's cooperation and helps parents stay focused on the positive.

Tracking: Notes progress of what is working and what may need to be adjusted for success.

Emotional Regulation: Learning ways to maintain a well-regulated emotional state to cope with everyday stress and be available for learning and interactions.

Communication: Teaches positive communication to assist in building a strong parent-child relationship.

Who is eligible?

- Youth from preschool through adolescence with serious behavioral concerns

These behaviors may include:

- Overt antisocial behavior (noncompliance, aggression, defiance, hyperactivity, fighting)
- Covert antisocial behavior (lying, stealing, truancy, fire setting)
- Internalizing problems (depressed mood, peer problems, deviant peer association)
- Delinquency, substance abuse, school failure

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Parent Support Services

Parent Support Services (PSP) offers support to caregivers of youth. PSP will help you set goals and determine strategies to achieve those goals; help you prepare for and attend meetings at DHHS, CMH, or Family/Juvenile Court; brainstorm ideas or concerns regarding your family, system, or services; offer training and education to effectively communicate with the agencies involved in your family's life; and assist you with making informed choices.

Information & Assistance

For further information or for questions or concerns, please contact:

Customer Services:
(734) 243-7340 TTD: 7-1-1

Suicide and Crisis Life Line: 9-8-8

What is expected of me?

- Participate openly and honestly in scheduled appointments

What to expect from my therapist?

- Bringing both personal experiences and knowledge of raising a child with challenges to the role, empowering families and giving much needed hope
- Sensitivity and respect of family's individual needs, preferences, values, and life experiences
- Assistance in planning and implementation of services as part of the treatment team
- Empower parents to be advocates for their children and family

Who is eligible?

- Any caregivers of youth receiving community mental health services
- Anyone who is struggling with emotions and the navigation of systems involved with their family

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Preadmission Screening Resident Review

PASRR is a federal requirement to help ensure that individuals are not inappropriately placed in nursing homes for long-term care. It has been an important tool for states to use in rebalancing services away from institutions and towards supporting people in their homes.

Information & Assistance

For further information or for questions or concerns, please contact:

Customer Services:
(734) 243-7340 TTD: 7-1-1

Suicide and Crisis Life Line: 9-8-8

What is expected of me?

- This is an automatic process that is a state requirement and managed by your medical professionals
- All applicants to Medicaid-certified nursing facilities will be given a preliminary assessment to determine whether they might have SMI or ID

What to expect from PASRR?

- Preliminary assessment to determine whether an individual might have a Serious Mental Illness (SMI) or Intellectual Disability (ID)
- Those individuals who are determined to have SMI or ID complete a comprehensive evaluation that is submitted to the State for review
- The evaluation results determine need, appropriate setting, and recommendation for services

Who is eligible?

- Individuals that may require a higher level of care due to an inability to live independently
- Individuals that are referred by a hospital, primary care, or facility that provides care

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Psychiatric Health Services

Psychiatric health services provide a comprehensive assessment of psychiatric and medical needs, as well as telehealth video and in-person appointment options and flexible scheduling.

Information & Assistance

For further information or for questions or concerns, please contact:

Customer Services:
(734) 243-7340 TTD: 7-1-1

Suicide and Crisis Life Line: 9-8-8

What is expected of me?

- Participate in scheduled appointments
- Medication compliance
- Annual bloodwork
- Honest conversations with prescriber
- Ownership in your own recovery

What to expect from my prescriber?

- Friendly, knowledgeable staff
- Timely appointments
- Guidance in times of crisis
- Comprehensive approach to alleviate complex mental health problems

Who is eligible?

- Any person with a mental health or substance use disorder

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Director of Operations Report – December 6, 2023

Customer Services:

- NCI Surveys - MDHHS

Kiosks:

- For month of November comment from Tell us about your below average experience in lobby were:

- Boring
- Pizza

Question asked what do you wish was here?

- Lindsey Rocks!
- Gum that people can take.
- It was very good.
- Food

How was your visit?

- 2 responses - The person I was meeting with was late.

How clean was it?

- 1 response (1 star) – The lobby was dirty

How convenient is our location?

- 1 response - it's a far drive from my house (2 star)

How satisfied were you with scheduling your appointment?

- 1 response (1 star) – after school appointments were not available.

How well did the appointment time work for you?

- 1 response (2 stars) – late appointments were not available.
- 1 response (1 star) – after school appointments were not available.

- From Prescriber survey for month of November, How respectful was the staff?
 - 1 response (1 star) – the staff I met with was not friendly.

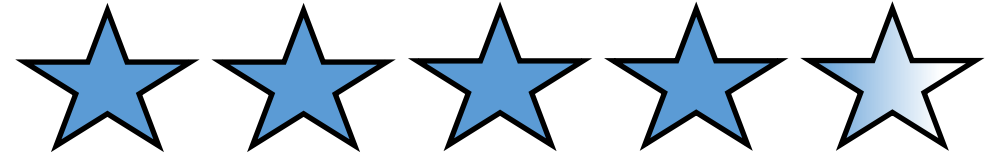
External Providers – No report at this time.

Quarter 1 Grievances FY23/24 (November): 3 grievances

- 2 regarding medication requests – both pending
- 1 regarding change in case manager – pending

PULSE FOR GOOD DATA

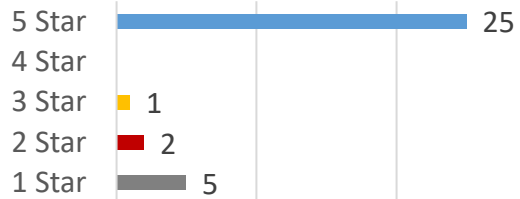
November 2023 / Location - Lobby Kiosk



Overall Rating: 4.63

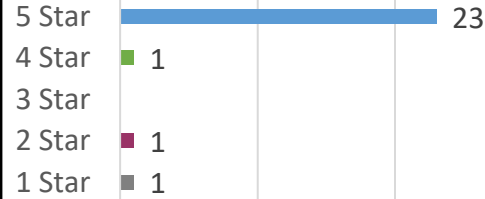
How was your visit?

33 Responses / 4.15 Rating



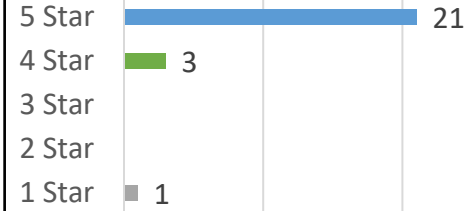
Do you think this agency is a safe place to be?

26 Responses / 4.69 Rating



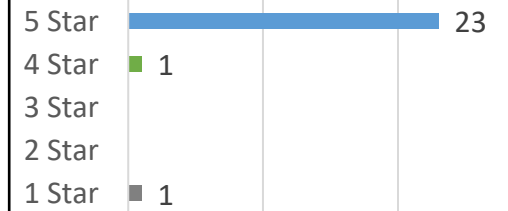
How clean was it?

25 Responses / 4.72 Rating



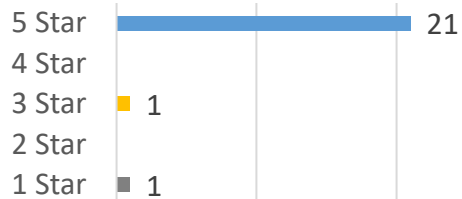
How respectful was the staff?

25 Responses / 4.80 Rating



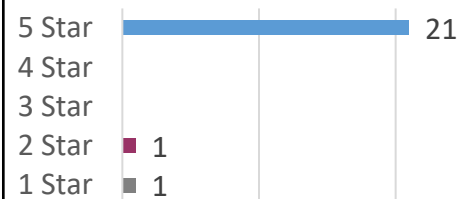
How satisfied were you with scheduling your appointment?

23 Responses / 4.74 Rating



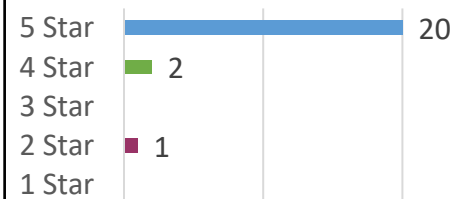
How well did the appointment time work for you?

23 Responses / 4.70 Rating



How convenient is our location?

23 Responses / 4.78 Rating

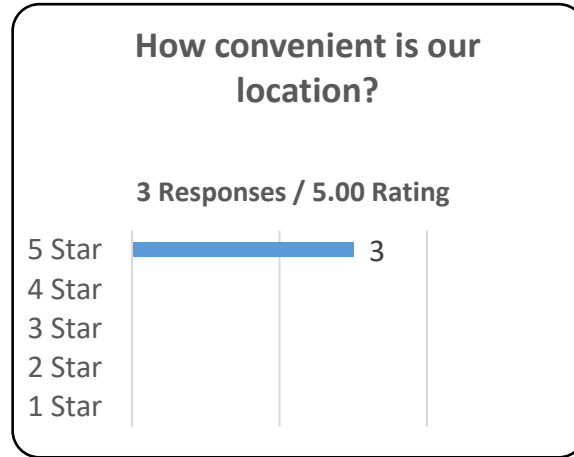
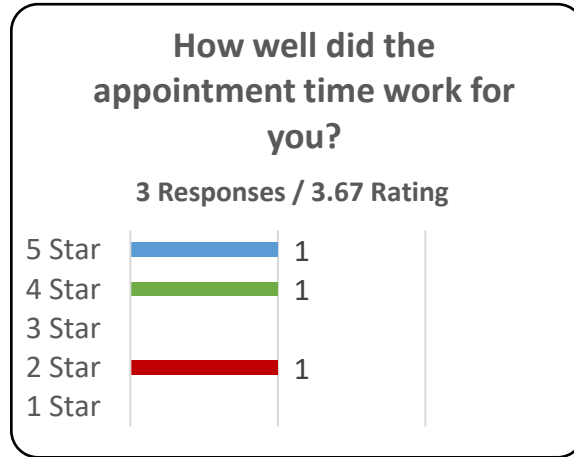
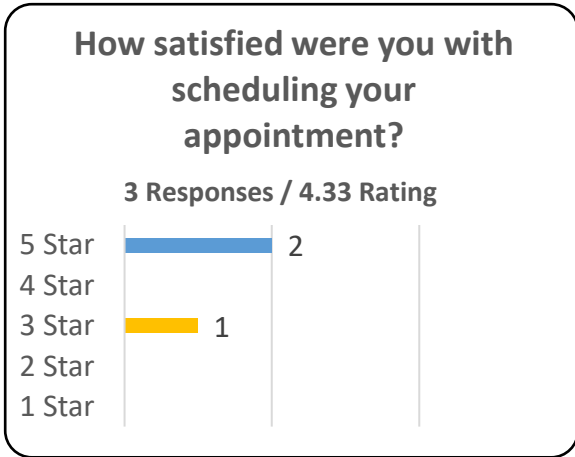
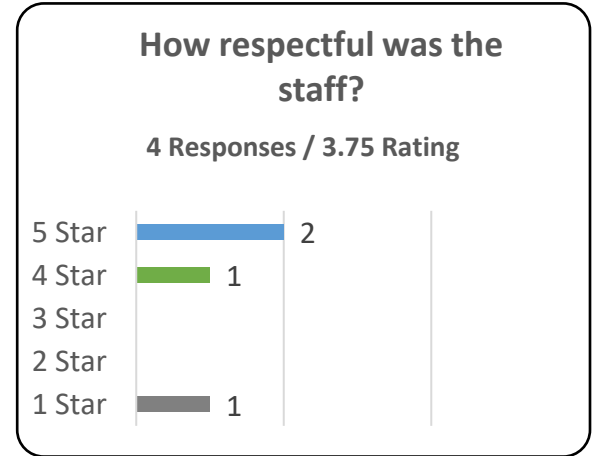
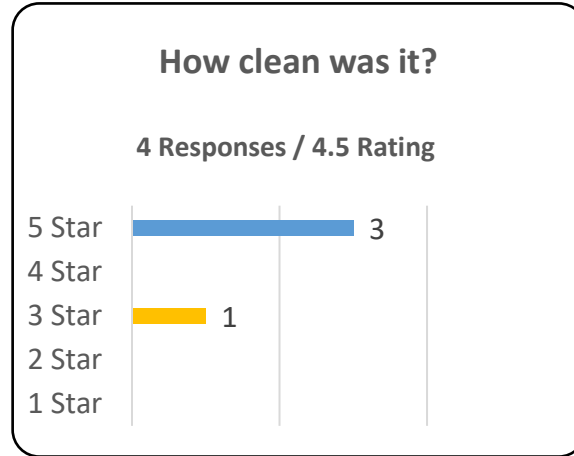
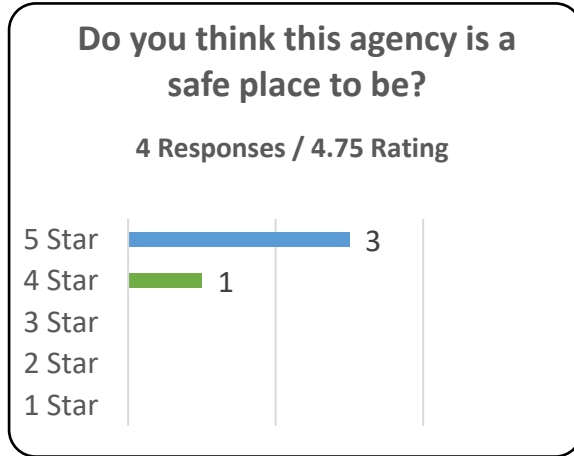
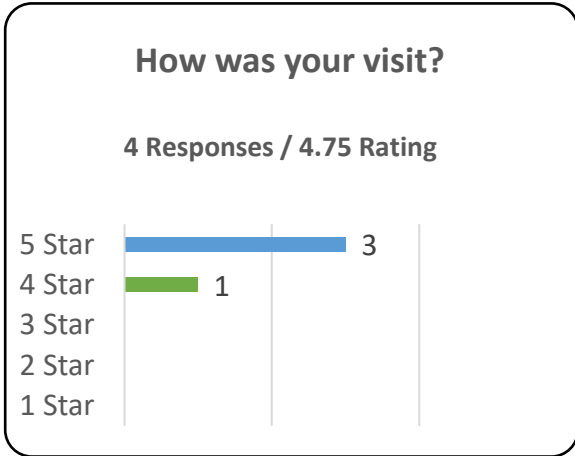


PULSE FOR GOOD DATA



Overall Rating: 4.40

November 2023 / Location – Prescriber Kiosk



PULSE FOR GOOD DATA

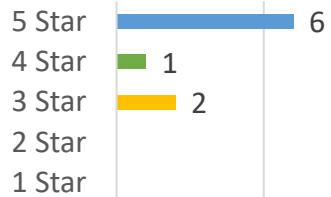
November 2023 / Location - Benesh Kiosk



Overall Rating: 4.50

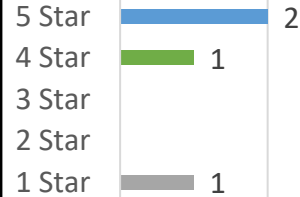
How was your visit?

9 Responses / 4.44 Rating



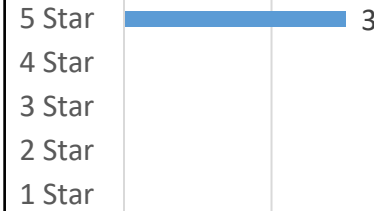
Do you think this agency is a safe place to be?

4 Responses / 3.75 Rating



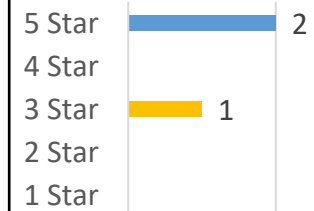
How clean was it?

3 Responses / 5.00 Rating



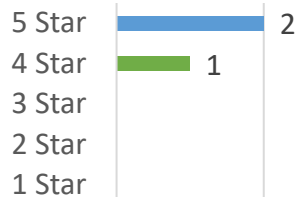
How respectful was the staff?

3 Responses / 4.33 Rating



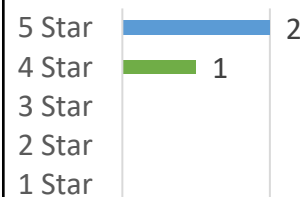
How satisfied were you with scheduling your appointment?

3 Responses / 4.67 Rating



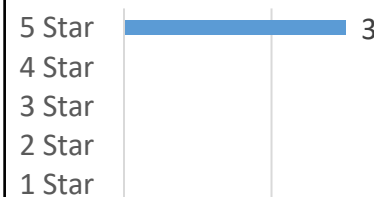
How well did the appointment time work for you?

3 Responses / 4.67 Rating



How convenient is our location?

3 Responses / 5.00 Rating





BOARD COMMUNITY RELATIONS AD-HOC COMMITTEE

Thursday, November 16, 2023

6:00pm

MAJOR COMMITTEE RESPONSIBILITIES

1. To foster a trusting relationship between MCMHA and the community it serves.

COMMITTEE MEMBERS

Rebecca Pasko, Chair; Dawn Asper; Susan Fortney; and Michael Humphries (Ex-Officio)

DRAFT MINUTES

I. CALL TO ORDER

Rebecca Pasko called the meeting to order at 6:20pm. Rebecca Pasko, Dawn Asper, and Susan Fortney were present. Lisa Graham and Mike Humphries were excused.

II. REVIEW AND APPROVE COMMITTEE CHARGE AND SCOPE

- a. The committee reviewed and amended the charge and scope.
 - i. Add "Ad-hoc" to Committee title.
 - ii. Remove "In conjunction with CMHA CEO"
- The committee agreed upon the language of the charge and scope with amendments.

III. COMMITTEE MEMBER GOALS / INPUT FOR UPCOMING MEETINGS

- a. The committee's goal is to have a Town Hall to gather information.
- b. The committee requested a presentation by legal counsel to the Board during a Special Meeting or a Board Meeting to advise what "legally" can be done for committee direction.
- c. The committee requested to change the Committee Member Goals / Input for Upcoming Meetings to the standing topic of "Parking Lot" to the agenda.
- d. The agenda will include the following standing topics: Call to order, Follow-up from Previous Meeting, Next Steps, and Parking Lot. Topics for discussion will be added as needed.

IV. CMH REPORT ON COMMUNITY RELATIONSHIPS / STATUS / ISSUES

- a. The committee reviewed a list of community partners.
- b. Rebecca Pasko requested that each committee member create a list of common themes occurring in the community for discussion at the next meeting.
- c. The committee agreed for the community to utilize the agency resources first and if exhausted then to contact the committee. Agency resources include Customer Service complaints and addressing the Board of Directors during Citizen Comment time at a monthly Board Meeting.

V. REVEL PUBLIC RELATIONS REPORT / STATUS

- a. A monthly report on Revel's progress is being provided at the Clinical Operations Committee.
- b. Susan Fortney recommended that the committee members be cognizant of what reports are being provided from Clinical and Business Operation Committee's rather than duplicating reports within the Community Relations Committee.

VI. NEXT STEPS

- a. Next agenda: Discussion on Common Themes Occurring in the Community.
- b. Next agenda: Follow-up on Communication with Legal Counsel

VII. PARKING LOT

- a. Town Hall

VIII. AJOURNMENT

The meeting adjourned at 7:46pm.

IX. NEXT MEETING

The Next Meeting of the Board Community Relations Ad-hoc Committee is scheduled for **Thursday, December 14, 2023** at 4:00pm.

Respectfully submitted,

Rebecca Pasko (dp)

Rebecca Pasko
Committee Chair

11/17/23



BOARD EXECUTIVE COMMITTEE
Wednesday, December 6, 2023
6:00pm

MAJOR COMMITTEE RESPONSIBILITIES

1. Form agenda for monthly meetings.
2. Monitor long term effectiveness of the Board and Board Committees.

COMMITTEE MEMBERS

Mike Humphries, Chair
Susan Fortney, Vice Chair
Catherine Bernhold, Secretary

I. CALL TO ORDER

Mike Humphries called the meeting to order at 6:11pm. Susan Fortney, Mike Humphries, and Lisa Graham were present. Catherin Bernhold was excused.

II. REVIEW OF THIS MONTH'S BOARD MEETING

- a. Board Agenda – Reviewed
- b. Presentation – Certificates of Appreciation - Years of Service Awards

III. ITEMS FOR DISCUSSION

- a. **St. Joes Tour** – Lisa Graham commented on a tour and breakfast sponsored by St. Joes.
- b. **Board Meeting Recording** – Lisa Graham commented that after following up with Crossroads regarding the recording of the November Board Meeting it was found that the recording was corrupt and not able to be viewed.

IV. ACTION ITEMS FOR FUTURE BOARD MEETING AGENDA

- a. Nov – N/A
- b. Dec – N/A
- c. Jan – Recipient Rights Annual Report

V. AJOURNMENT

The meeting adjourned at 6:23pm.

VI. NEXT MEETING

The Next Meeting of the Executive Committee is scheduled for **Wednesday, January 17, 2024** at 6:00pm.

Respectfully submitted,

Mike Humphries (dp)

Mike Humphries
Board Chairperson

12/8/23



BOARD PERFORMANCE EVALUATION COMMITTEE

Tuesday, November 14, 2023

5:00pm

MAJOR COMMITTEE RESPONSIBILITIES

1. Compile quarterly performance measures for Chief Executive Officer.
2. Compile quarterly performance measures for the Board.

COMMITTEE MEMBERS

Board Chair
Business Operations Chair
Bylaws & Policy Chair
Clinical Operations Chair

DRAFT MINUTES

I. CALL TO ORDER

The meeting was called to order by Mike Humphries at 5:07pm. Mike Humphries, Susan Fortney, LaMar Frederick, Catherine Bernhold, and Lisa Graham were present.

II. REVIEW PERFORMANCE EVALUATION TOOLS

- a. The committee reviewed the evaluation tools the committee and the Chief Executive Officer (CEO) will use for the 2023 Performance Evaluation and agreed upon the process. The committee agreed to use the:
 - i. CEO self-evaluation
 - ii. 360 Surveys for Board Members, Direct Staff, Community Partners, and the PIHP
 1. The committee requested to remove the COVID19 question from the survey.
 2. The committee requested to review the distribution list of the community partners survey.
 - iii. Performance Evaluation Committee Annual Evaluation Tool.
 1. The Performance Evaluation Committee members will complete an Annual Evaluation Tool to use as a comparison to the CEO self-evaluation and the 360 survey feedback.
- b. The committee developed a timeline for the CEO Performance Evaluation.
 - i. 360 surveys will be sent to solicit feedback on December 11th and have a deadline to complete by January 5, 2024.
 - ii. CEO self-evaluation will be submitted to the committee on January 5, 2024.
 - iii. The committee has scheduled a series of meetings to review 360 survey feedback, the CEO self-evaluation, and to develop an overall performance summary for the CEO.
 - iv. The committee will present the overall summary to the full Board at the February 28, 2024 Board Meeting.

III. NEXT STEPS

- a. The committee cancelled its December 19, 2023 meeting as there is no reason to meet until January.

IV. ADJOURNMENT

The meeting adjourned at 6:19pm. The next meeting is scheduled for Tuesday, January 16, 2024 beginning at 5:00pm.

Respectfully submitted,

Michael Humphries (dp)

Mike Humphries
Performance Evaluation Committee Chair

11/15/23

MCMHA Board Action Request Mental Health Administrative Contract(s) / Amendments	FY 2022-23	December 6, 2023
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Action Requested: Approval Requested for the Mental Health Administrative Contracts Listed Below:

Contractor name	Department	Request	Budget	Contract Term	Service Description
LaScala	Agency		\$2,283.75 per month to monitor 225 devices	1/1/2024-12/31/2026	Managed Breach Detection and Resposne to detect, investigate and respond to cybersecurity incidents 24/7.
Iris Telehealth	PHS		\$235 per hour for 40 hours per week	2/5/2024	The addition of psychiatrist Dr. Cushman to work with our agency 40 hours per week. Start date to occur once credentialing items are completed. The target date is 2/5/24.
Iris Telehealth	PHS	Rate increase for Dr. Dubash a contractual psychiatrist	\$222 per hour for 32 hours per week	1/1/2024	
New Directions Peer Recovery Center			\$10,700 per month	1/1/24-9/30/24	Contract renewal

RECOMMENDATION: As reviewed by the MCMHA Board Business Operations Committee on December 6, 2023 approval of the contract(s) listed on MCMHA Board Action Mental Health Administrative Contract(s) / Amendments on or before December 12, 2023.

MCMHA Board Action Request Mental Health Service Contract(s) / Amendments	FY 2022-23	December 6, 2023
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Action Requested: Approval Requested for the Mental Health Service Contracts Listed Below:

Provider Name	Contract Term	Service Description(s) include	CPT code	FY 20-22 Rate/Unit	FY 22-24 Rate/Unit	Additional Information/ Background
Hospitals:						
Harbor Oaks	1/1/24-9/30/24	Community Psychiatric Inpatient	0100	\$728.00 per diem	\$765.00 per diem	5% increase
		Community Psychiatric Inpatient, enhanced staffing (1:1)	0100 CD		\$993.20 per diem	Addition of enhanced staffing rate for behavioral consumers
		Community Psychiatric Inpatient, specialized pediatric unit	0100 CD	\$1,200.00 per diem	\$1,248.00 per diem	4% increase
Trinity Health	1/1/24-9/30/24	Community Psychiatric Inpatient	0100		\$896.48 per diem	
		Partial Hospitalization	0912		\$357.65 per diem	
		Electro-convulsive Therapy	0901		\$938.08 encounter	
Community Living Supports/Supported Empl/Respite						
Mastrofrancesco Inc.	1/1/24-9/30/24	Respite Care	H0045		\$74.60 per day	
Guardian Trac LLC	1/1/24-9/30/24	Family Training	S5111		\$80.00 per encounter	
		Treatment Planning Mental health service plan development by non-physician.	H0032/H0032 TS		\$80.00 per encounter	
Dimensions of Wellness	12/15/24-9/30/24	Individual Therapy-30 minutes	90832		\$75.00 per service	
		Individual Therapy-45 minutes	90834		\$125.00 per service	
		Individual Therapy-60 minutes	90837		\$150.00 per service	
		Family Psychotherapy without patient present- 50 minutes	90846		\$125.00 per service	
		Family Psychotherapy with patient present- 50 minutes	90847		\$125.00 per service	
Autism/Waiver Services						
Illuminate ABA Services	1/1/24-9/30/24	Behavior Identification Assessment	97151 HP, HO		\$38.00 per 15 minute unit	
			97151 HN		\$24.00 per 15 minute unit	
		Treatment Planning Mental health service plan development by non-physician	H0032/H0032 TS		\$100.00 per encounter	
			Behavior treatment plan review	H2000/H2000 TS		\$25.00 per encounter
Dearborn Speech and Sensory Center Inc. DBA MetroEHS Pediatric Therapy	1/1/24-9/30/24	Family Training	S5111		\$80.00 per encounter	
		Occupational Therapy	97530		\$18.39 per 15 minute unit	

RECOMMENDATION: As reviewed by the MCMHA Board Business Operations Committee on December 6, 2023 approval of the contract(s) listed on MCMHA Board Action Mental Health Service Contract(s) / Amendments on or before December 12, 2023.