

# MONROE COMMUNITY MENTAL HEALTH AUTHORITY BOARD MEETING

November 20, 2024 – 6:00 p.m. / Aspen Room Draft Agenda

#### **BOARD GUIDING PRINCIPLES:**

- 1.1 Monroe Community Mental Health Authority ("Authority") exists to help individuals with mental illnesses and/or intellectual/developmental disabilities so they can live, work, and play in their communities to their fullest potential. As a Certified Community Behavior Clinic (CCBHC), the Authority will provide mental health and/or substance use care/services, regardless of ability to pay, place of residence, or age, including developmentally appropriate care for children and youth.
- 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 service 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; 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.
- 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.

**<u>VISION STATEMENT</u>**: To be a valued/active partner in an integrated System of Care that improves the health and wellness of our

community.

i. Executive

**CORE VALUES:** Compassion, Authenticity, Trust, and Accountability.

I.	Call to Order	<u>Guide</u> 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 13, 2024 Board Meeting and waive the Reading Thereof	02 min	
VI.	Feedback Summary (handout)	05 min	
VII.	Public Comments  "The Board will listen respectfully to public comments but will not respond directly during the meeting.  You can expect a follow up contact from the Chief Executive Officer or representative within 24 hours if your comment is about a specific problem or complaint. Comments shall be limited to 3 minutes".	03 min/Person	
VIII.	Presentations, Recognition, and Celebrations  a. Clinical Report – Crystal Palmer  b. Operations Report – Bridgitte Gates  c. FY2024 CCBHC Quality Metrics Report – Lisa Graham	30 min	
XI.	Board Committee Reports a. Committee Chair Reports	05 min	

02 min

b. Motion to Place on File All Written Committee Reports

IX.			oard Action	the Concept A	ganda Laga Itam	05 min	
	a. Motion to Approve the Consent Agenda Less Item     i. Administrative Contracts as Presented						
				tracts as Present			
	b.	Sprin		MHAM Confer	oard Members to Attend the 2025 Winter, ences and The National Council		
Х.		Moti	_	-	Approval (Executive Summary in Packet) y Policy, Procedure, and Exhibits	02 min	
		i.	Policy:	EOC2000	Emergency Preparedness Plan		
		ii.	<b>Procedure:</b>	EOC2000-P1 EOC2000-P2	MCMHA Emergency Preparedness Plan Nuclear Emergency Management-Fermi II		
		iii.	Exhibit:	EOC2000-12 EOC2000-E3	Monroe County Emergency Management Plan Annex L		
				EOC2000-E4 EOC2000-E5	DTE Emergency Preparedness Booklet PFS-CISM Team		
				EOC2000-E3	Fire Emergency Drill Form – Non-Residential		
		iv.	<b>Rescind:</b>	N/A			
		v.	<b>Relocate:</b>	N/A			
	b.	Moti	on to Approv	e the Regional	Policies as Presented	02 min	
		V.	Policy:	RR8041	Assessment and Authorization of Community Living Supports (CLS) Services		
				PI6009 POC7062	Incident Reporting Timeliness of Service Provision and Documentation		
					Documentation		
XII.		_	_	ion, County, a		10 min	
	a. b.	_	_		ng Minutes – October 30, 2024 mmittee Report – Rebecca Pasko		
XIII.	Items a.	Lisa Graham	05 min				
XIV.	New B		00 min				
XV.	Public		03 min/person				
XVI.	. Motion to go into Closed Session for Purposes of Collective Bargaining Pursuant to Section VIII (c) of the Open Meetings Act						
XVII.	Board	Mem	ber Announce	ements		03 min/person	
XVIII.	Adjou	rnmei	nt			01 min	

The next regular scheduled meeting for the Monroe Community Mental Health Authority Board of Directors is on Tuesday, December 10, 2024 beginning at 6:00pm in the Aspen Room.

LG/dp 3:19 p.m.



## BOARD OF DIRECTORS REGULAR MEETING MINUTES November 13, 2024

Present: Susan Fortney, Vice Chairperson; Catherine Bernhold, Secretary; Rebecca Pasko; John Burkardt;

LaMar Frederick; Becca Curley; Dawn Asper; Naomi Stoner; and Ken Papenhagen

**Excused:** Michael Humphries, Chairperson; Deb Staelgraeve; and Pam Ray

Absent:

Staff: Lisa Graham

**Guests:** 7 guests were present

## I. CALL TO ORDER

The Board Vice Chair, Susan Fortney, called the meeting to order at 6:00 p.m.

## II. ROLL CALL

Roll Call confirmed a quorum existed.

## III. PLEDGE OF ALLEGIANCE

The Pledge of Allegiance was led by LaMar Frederick.

## IV. CONSIDERATION TO ADOPT THE DRAFT AGENDA AS PRESENTED

Ken Papenhagen moved to adopt the draft agenda as presented. Becca Curley supported. Motion carried unanimously.

# V. <u>CONSIDERATION TO APPROVE THE MINUTES FROM THE OCTOBER 23, 2024 BOARD MEETING AND WAIVE THE READING THEREOF</u>

Rebecca Pasko moved to approve the minutes for the October 23, 2024 Board Meeting and waive the reading thereof. John Burkardt supported. Motion carried unanimously.

## VI. BOARD MEETING EVALUATION REPORT

Susan Fortney commented that Board members have received the report for review. If there are any questions, can address the Executive Committee.

## VII. PUBLIC COMMENTS

There were no public comments.

## VIII. ITEMS FOR BOARD CONSIDERATION

- a. Administrative Contracts
  - i. Administrative Contracts for Snow Chiu Wu, B. B. H. Venture LLC, and Adam J. McLaughlin dba A. McLaughlin Properties LLC. were presented by Alicia Riggs.
- b. Service Contracts
  - i. Service Contracts for Forest View Psychiatric Hospital Inc, Harbor Oaks, ProMedica Monroe Regional Hospital, ProMedica Coldwater Regional Hospital, BCA of Detroit LLC, Progressive Residential Services, Hope Network Behavioral Health Services, Community Living Network Guardian Trac, Adult Learning Systems, A Heart That Cares LLC, Arkay Inc., CHS Group LLC, Goodwill Industries of Southeastern Michigan Inc., Help at Home Michigan LLC., Life Enrichment Academy Inc., Macomb Residential Opportunities, Mastrofrancesco Inc., Progressive Residential Services Inc., and Choices with Self Determination LLC. were presented by Alicia Riggs.

## IX. FINANCIAL REPORTS

- a. Fiscal Finance Report: Ken Melvin presented the September financials, highlighting:
  - i. Eligibility has mostly leveled off during August of 2024. Rate adjustments are now in effect and are reflected in the charts to show increased dollars since April. Additionally, the State has indicated \$41 million in funding to be distributed state-wide sometime in 2025 for the 2024 fiscal year.
  - ii. Cash and Investments are up from prior year primarily from collection of receivables from the PIHP.
  - iii. Liabilities are also up from prior year primarily related to estimated claims incurred but not reported.
  - iv. Net income is projected to be down compared to prior year primarily due to GASB 68 & 75 adjustments that are currently unknown and will be available in early 2025 from the actuaries.
  - v. Revenue received from the PIHP exceeds expenses by \$1,096,294 this month. Part of the Medicaid and HMP surpluses are due to allowable costs being covered by GF as individuals continue to fall off Medicaid.
  - vi. The CCBHC program is showing a deficit of \$590,475 through this reporting period. We continue to work with the PIHP to accelerate the reporting of T1040s which will bring in more revenue. As we continue to look at generating more T-1040s on the revenue side, primary focus shifts to expenses.
  - vii. State General Fund is showing a deficit of \$3,157,078, primarily related to spenddowns, individuals falling off Medicaid and CCBHC non-Medicaid. This deficit is covered by local funds with a reported use of fund balance through this reporting period of \$2,473,313.

Becca Curley commented on the PIHP submitting encounters only once a month to the state. The frequency of submitting encounters has been a topic of discussion for months now. Becca shared her concerns for becoming a CCBHC as we are struggling financially. Ken Melvin commented that, overall, the financial benefits of becoming a CCBHC have been beneficial even though there are certain pieces we continue to work through with the state. The once-a-month submission of encounters doesn't just affect CCBHC services but all services and needs continued discussion at the PIHP level. When financials for February are submitted, the state will review the PPS1 rate and that will retro back.

Medicaid eligibility continues to be an issue. We are trying to get consumers that have fallen into the incorrect Medicaid Plan called Plan First, into the correct Medicaid plan. We have consulted with attorneys and will be submitting documentation to the state on the consumers behalf to appeal. Lisa Graham commented that the Medicaid Plan First plan does not cover mental health services and we have alerted consumers to call us to help them appeal as they are at risk of losing services. Our new Eligibility Specialist will help guide consumers through the appeal process; and anyone that is currently open to assess their services before sending referrals or termination notices.

Rebecca Pasko commented on Meridian Insurance dropping people. Ken Melvin commented that Meridian sent out a letter that they had interpreted their contract with the state differently. There has been a lot of push back statewide and are re-evaluating their decision. This has been a low impact for Monroe CMH consumers.

The PIHP is sending us a performance bonus next week. There is another bonus available for meeting CCBHC Quality Metrics and we are not sure if we will receive those. If we do, it will improve our situation. The CCBHC Quality Metrics have 6 measures and the state's criteria is to meet all to receive a bonus. If you don't meet all 6 of the measures, your bonus goes back into the pool, and it is spread amongst all CCBHCs that did meet them. Currently there is an argument at the state for CCBHCs not meeting indicators. At this time, it is not prudent to include that bonus in the year end numbers but we will continue to strive to get it.

Ken Melvin commented that he has received some feedback and would like Board input on what type of format they would like to see the financials presented for the FY2025 year. This is to ensure the information being presented is valuable to the Board. Ken asked the Board to take some time to think about it and provide feedback through email.

Ken Melvin commented that traditionally we do not bring October financials to the Board as they are historically unreliable. Data tends to be incomplete due to finishing up year end. In December, Ken will not have financials to present but will provide an update on what Finance has done. November financials will be presented at the January Board Meeting and will include a check register.

## X. NEW BUSINESS

There was no new business.

## XI. PUBLIC COMMENTS

There were no public comments.

# XII. MOTION TO GO INTO CLOSED SESSION FOR PURPOSES OF COLLECTIVE BARGAINING PURSUANT TO SECTION VIII (c) OF THE OPEN MEETINGS ACT

Rebecca Pasko moved to go into Closed Session for purposes of Collective Bargaining pursuant to Section VIII (c) of the Open Meetings Act. LaMar Frederick supported. Roll call: Papenhagen, Stoner, Asper, Pasko, Fortney, Burkardt, Frederick, Curley, and Bernhold; opposed: none; motion carried unanimously.

The Board went into Closed Session at 6:45pm.

The Board went back into Open Session at 7:16pm.

## XIII. BOARD ANNOUNCEMENTS

Becca Curley requested a status update on the MDHHS worker contract. Lisa Graham commented that contract ended September 30, 2024 and continues to have discussion with Linda Needham to come to an agreement. An Eligibility Specialist has started, and she is doing a really good job in her new role and is actively seeing consumers. The Eligibility Specialist is now certified as a Bridges Navigator and can go right into the Bridges system to assist with paperwork. An MDHHS worker does have a quicker access to things rather than going through the main hub in Lansing, however so far, the addition of an Eligibility Specialist has been very positive.

John Burkardt asked if Monroe CMH partners with St. Joe's or others if a child needs a neurological workup. Lisa Graham commented that we do not partner for this service but can assist with helping to get that service.

Susan Fortney commented that the Sawyer House is having their open house on Friday, November 22<sup>nd</sup> from 5-8pm. The Sawyer House is a historical home in Monroe, MI and the Daughter's of American Revolution (DAR) recently decorated the home for the open house. Everyone is welcome to attend.

Dawn Asper asked if the River Raisin Clubhouse has to wait until January 1, 2025 to get into their new building? Lisa Graham commented that we received the keys to the new building this week and are working on the interior of the space so that the Clubhouse will be ready to begin their program at their new location starting January 1, 2025.

XIV.	<b>ADJOU</b>	RNMENT	

Susan Fortney adjourned the meeting at 7:24pm.	
Submitted by,	
Catherine Bernhold Board Secretary	LG/dp 11/13/24

## **Board Clinical Report – Executive Summary**

November 20, 2024

## **STAFF**

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

• MCMHA continues to recruit and hire staff for current vacancies, which is 13 at this time. Two vacancies are newly created positions.

## **LEADERSHIP**

Strategic Plan Goal 2: Assure Competent and Accountable Leadership

 The clinical leadership team continues to focus on Compassionate Accountability and will be completed in January 2025.

## **COMMUNITY OUTREACH**

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

- There were 76 universal referrals made in August, September and October. 66% received some type of follow-up, services authorized, etc. 12% declined any further intervention, and 22% MCMHA either didn't have enough information for follow-up or no response. Two partners were added to the pilot.
- Certified Peer Support Specialists (CPSS) continue to provide support at the ALCC. The CPSS did
  engage in 43 programs/activities and five (5) 1:1 meeting during the months of August,
  September and October.

## **FINANCE**

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

• Updates on this strategy will be provided via the Finance Department.

## **SERVICES**

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

- Crisis Mobile was deployed 159 times in August, September and October, which averaged 1.5 hours of face-to-face interaction time.
- The average response time for Crisis Mobile was approximately 16.46 minutes which is likely due to 48% of the calls being in 48161 and 48162 zip codes.
- There were multiple referral sources for Crisis Mobile; 50% were from the Monroe County Sheriff's Department and Monroe City Police; other sources were from Access Dept/CMH, and self-referral.
- Enrollment for the CCBHC has increased by 74 members over the last 3 months. This is a 3.5% increase in enrollment from the previous report.
- The data for incoming calls being answered is at 98% for FY24, which meets MCMHA's goal of 95%.
- The Clubhouse received the Collaboration Innovation Prevention Grant for FY25.
- There were 670 appointments scheduled for the Benesh Building in FY24 with 79% occurring in the office.

November 20, 2024

## **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 work with the Human Resources Department to fill these positions. We have the following vacancies as of November 13<sup>th</sup>:

- Case Service Manager Child/Family (2 positions)
- Case Services Manager Adult (2 positions 1 NEW)
- Children's Therapist/Case Manager
- Crisis Mobile Response Clinician/Peer (2 positions)
- Direct Support Professional (NEW)
- Evaluation & Admission Specialist Short Term Outpatient Therapist
- Peer Support Specialist (PT 2 positions)
- Transition Facilitator (NEW)
- SUD Therapist

Regarding the above positions, some are in the hiring process; however, they are not removed from the list until the person starts the position.

## **LEADERSHIP**

## Strategic Plan Goal 2: Assure Competent and Accountable Leadership

Over the last three months, the clinical leadership team continued to discuss Compassionate Accountability and incorporating the concept as they supervise staff. The clinical leadership team will finish the discussion In January 2025 and will determine another training topic for the year.

#### **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. MCMHA has now has 12 agencies plus law enforcement utilizing the universal referral form. A list of the agencies is 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

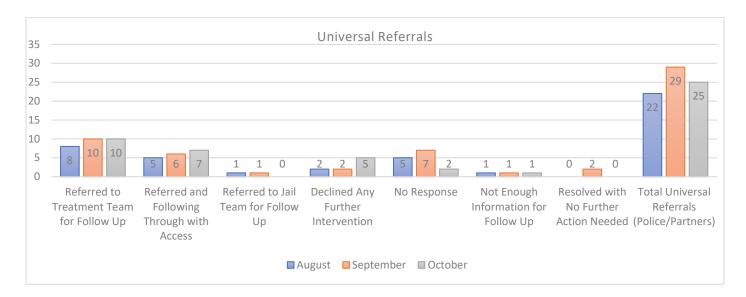
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Updated as of 11/15/24

November 20, 2024

- Michigan Works!
- Oaks of Righteousness
- ProMedica Physicians Monroe Pediatrics Dr. Gandert

During the months of August, September, and October 2024, there have been 76 universal mental health referrals, including law enforcement and community referrals. The outcomes of these cases are as follows:

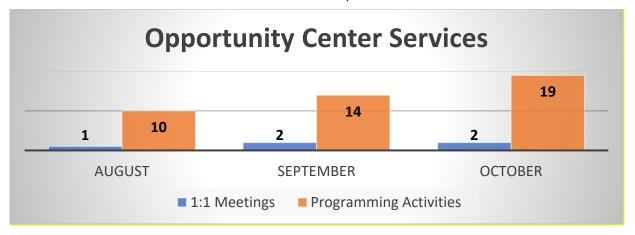


#### **Opportunity Center at the ALCC**

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.

Peers continue to help link and coordinate services, including engaging those who need community mental health services or those involved in them. In the months of August, September and October, MCMHA Peer Support Staff provided five (5) 1:1 meetings/appointments and the peers did engage in 43 programs/activities within the Opportunity Center.

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## **Outreach Activities**

On August 23<sup>rd</sup>, a couple staff from the Child and Family team participated in **End of Summer Bash** event at the Opportunity Center where they distributed 180 homemade playdoh samples. Staff also gave out the recipe for the playdoh, talked about 200 teddy bears with their caretakers (ranging from infants to adults), distributed MCMHA logo swag, as well as provided information on MCMHA services, Crisis Mobile services and CCBHC services.

On August 25<sup>th</sup>, MCMHA hosted a table at the **Party in the Park** which provided free food and fun to the community. The event was well-attended, and MCMHA provided mental health awareness literature and swag. MCMHA staff also participated in a PB&J Drive and donated over 100 jars of peanut butter and jelly to the cause.

In September, the Access/Crisis/Diversion Director and the Crisis Mobile Response Supervisor attended the **9-1-1 District Board** Meeting as requested to discuss Crisis Mobile services. They were able to discuss successes and continue to promote the further use/deployment of our services to all present.

MCMHA participated in the **National Alliance on Mental Illness (NAMI) annual walk** on September 21<sup>st</sup>. 13 individuals attended the walk on behalf of MCMHA and \$878 was raised.

MCMHA's Housing and Employment Coordinator provided information on mental health services through Monroe Community Mental Health at the **Annual RAW Recovery Picnic** on September 21<sup>st</sup>. Information was shared with several attendees, such as educational material on mental wellness and cooccurring disorders as well as representing MCMHA as a place of recovery. There was also an opportunity to collaborate with other community providers to explore available resources.

The **Suicide Awareness and Remembrance Vigil** was held at St Mary's Park on Tuesday, September 10<sup>th</sup>. A nice article was featured in the Monroe News and several people attended. A speaker from Oakland Community Health Network/ Marine Corps veteran peer support specialist spoke about his own experience with suicide and suicide loss extends way beyond the uniform. He shared how losing someone due to suicide can be a universal experience that many people face. After the speaker, people were able to share about their loved ones. Some brought pictures or wore shirts in memory of someone they lost. The event ended with a butterfly release.

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Updated as of 11/15/24

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As stated in the previous report, the Monroe County Sheriff's office, requested MCMHA provide a 2-hour mental health training for the entire Sheriff's Office officers to start in October 2024. The first training has occurred and three (3) more training courses are scheduled in order to train everyone on different shifts. This training focuses on becoming more informed on mental health issues and basic deescalation. This will provide an opportunity to continue to partner and strengthen our relationship and promote our Crisis Mobile services.

MCMHA's Child & Family and I/DD staff presented at **Road Shows** with other community agencies at Jefferson, Whiteford, Airport, Ida, Bedford, and Dundee High schools throughout the month of October. Information was presented and discussed with youth and parents who receive special education services through their perspective schools. Our partnership with the Monroe ISD Transition Coalition allows us to partner on these events to provide education and information on mental health and linking with our community partners across the county. Approximately 256 brochures were distributed.

October also allowed staff to participate in festive events providing opportunities to engage children, families, and adults' information about mental health wellness and resources to get support. On October 30<sup>th</sup>, the Opportunity Center sponsored a **Halloween Family Fun Night event** and MCMHA hosted a table. Approximately, 150 children & families took part in a small craft and received information about mental health resources.

At the beginning of November, the Access/Crisis/Diversion Director and the Chief Clinical Officer had the opportunity to present our efforts with our Crisis Services, specifically the Crisis Mobile Team, to the **MDHHS CCBHC lunch and learn**. There were over 100 people in attendance from across the state and we were asked to present to showcase our data dashboards that they were so impressed with.

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

#### **FINANCE**

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

Updates on this strategy will be provided via the Finance Department.

## **SERVICES**

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

## <u>Crisis Mobile Response Team</u>

Please see the attached report (Attachment #1) regarding data from the Crisis Mobile Response Team for the months of August, September and October.

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

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Updated as of 11/15/24

November 20, 2024

## **Benesh Expansion**

The data below identifies the individuals' zip codes scheduled at the Benesh building during FY24. Note that the information includes all appointments, whether held in-person or virtually.

Zip Code	Location	23-Oct	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Total
48101	Ann Arbor	0	1	0	0	0	0	0	0	0	0	0	0	0	1
48103	Ann Arbor	0	0	0	0	0	1	0	0	0	0	0	0	0	1
48104	Ann Arbor	0	0	0	0	0	0	0	0	0	0	0	0	1	1
48105	Ann Arbor	0	0	0	0	0	0	0	0	0	0	0	0	0	0
48111	Belleville	0	0	0	0	0	1	0	0	0	0	0	0	0	1
48117	Carleton	2	3	2	0	1	4	2	3	4	3	2	2	5	33
48131	Dundee	3	2	1	0	1	0	2	4	2	1	1	2	0	19
48133	Erie	4	2	4	1	0	2	3	0	1	0	2	6	6	31
48134	Flat Rock	0	0	0	0	0	2	1	1	1	0	0	0	0	5
48135	Garden City	0	0	0	0	0	0	0	0	0	0	0	0	0	0
48140	Ida	0	0	0	0	0	0	0	1	0	1	0	0	0	2
48144	Lambertville	0	1	0	0	0	2	1	1	1	1	1	1	0	9
48145	LaSalle	1	1	2	0	0	1	5	0	1	0	1	0	0	12
48153	Maybee	0	0	0	0	0	1	0	0	0	0	0	0	0	1
48157	Luna Pier	3	0	0	0	0	0	0	1	0	1	0	2	1	8
48159	Maybee	0	0	0	0	0	0	0	2	0	3	0	0	1	6
48160	Milan	6	3	2	1	1	0	3	1	1	0	0	0	1	19
48161	Monroe	49	27	22	14	18	11	17	17	25	19	37	26	20	302
48162	Monroe	15	16	11	7	6	6	10	11	12	9	22	12	17	154
48164	New Boston	0	0	0	0	0	0	0	0	0	0	0	0	0	0
48166	Newport	9	2	7	3	2	0	6	4	5	13	1	7	2	61
48177	Samaria	0	0	0	0	0	0	0	0	0	0	0	0	0	0
48179	South Rockwo	0	0	0	0	0	0	1	0	0	0	0	0	0	1
48182	Temperance	3	9	2	0	3	9	1	3	1	4	2	3	8	48
48191	Willis	1	0	0	0	0	0	0	0	0	0	0	0	0	1
48198	Ypsilanti	0	0	0	0	0	0	1	0	0	0	0	0	0	1
48214	Detroit	0	0	0	0	0	1	0	0	0	0	0	0	0	1
48336	Fowlerville	1	0	0	0	0	0	0	0	0	0	0	0	0	1
48817	Corunna	0	0	0	0	0	0	1	0	0	0	0	0	0	1
49221	Adrian	0	0	1	0	0	0	0	0	0	0	0	0	0	1
49267	Ottawa Lake	1	0	0	0	0	0	0	0	0	0	0	0	0	1
49270	Petersburg	0	2	1	1	0	0	0	2	2	1	0	0	1	10
49276	Riga	0	0	0	1	0	0	0	0	0	0	0	0	0	1
Total		98	69	55	28	32	41	54	51	56	56	69	61	63	733

FY24 had **670 appointments** scheduled at the Benesh Building, including both virtual and in-person appointments.

Below a table is provided indicating out of the total number appointments scheduled each month for FY24, 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)
October	76%	52%
November	75%	48%
December	70%	59%
January	79%	43%
February	81%	66%
March	90%	54%
April	80%	72%
May	71%	63%
June	61%	55%
July	82%	61%
August	88%	62%
September	89%	51%
October	91%	47%

Updated as of 11/15/24

Note: This report includes information from August, September and October.

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November 20, 2024

Note that we started having walk-ins in May and are now collecting this as in office appointments.

#### **Crossroad Clubhouse**

The Crossroads Clubhouse membership has officially renamed the clubhouse to the River Raisin Clubhouse which was approved by Clubhouse International.

The River Raisin Clubhouse received its final approval to start working on the new site (former Panera Bread Building located at 393 North Telegraph Road in Monroe) to prepare for their move. The goal is to relocate in the second week of December so the members will be able to celebrate the holidays at their new location. Priorities are being developed regarding the immediate needs for the Clubhouse to make it fully functional and inviting.

The River Raisin Clubhouse was chosen for the second year in a row to receive the Collaboration Innovation Prevention (CIP) Grant. Our Clubhouse was one (1) of the five (5) awarded clubhouses in a coalition of 43 Clubhouses in the State of Michigan. This funding will allow them to service individuals that reside in the community that are not associated with MCMHA in addition to those individuals who do not have Medicaid funding. The grant award is for \$70,220.00 for FY25. \$30.00 per person, per day of attendance, up to \$5851.66 per month. The River Raisin Clubhouse has also been chosen to receive the federal Mental Health Block Grant. This grant assists the clubhouse and its members in funding the Comprehensive 2-week training that is required by Clubhouse International. The funds cover training, travel and any specialized track training that is needed for the Clubhouse staff and members.

## **Monroe County Community College (MCCC)**

Currently, our Evaluation and A Specialist position at MCCC is vacant. We have been actively recruiting and interviewing for this position. In the interim, we have still been providing limited services of assessment and therapy to students at the college.

## **Certified Community Behavioral Health Clinic (CCBHC)**

As of October, there were 2,164 members currently enrolled in CCBHC through the WSA, which is an increase of 74 enrolls or 3.5% since last reported in September. This number will continue to fluctuate as consumers enroll and disenroll in services. This remains to be around 80% of our consumers.

In August, MCMHA implemented use of the Community Electronic Health Record (CEHR), patient portal on 8/1/2024. The patient portal allows consumers to view upcoming appointments, medications, sign documents, etc. that increases MCMHA's ability to coordinate care. Ongoing support will be provided to staff and consumers who choose to utilize this tool. The CEHR website and login information is available on MCMHA's Facebook page and website.

MCMHA received full certification as a Certified Community Behavioral Health Clinic (CCBHC) on August 27th. This is typically a 3-year certification unless SAMHSA makes significant changes to the program model, at which time MCMHA would be required to provide proof of compliance.

During the month of August, MCMHA submitted a request to MDHHS for Psych Resolutions to become a Designated Collaborating Organization (DCO). While Psych Resolutions is already a contracted provider for MCMHA, we are unable to attach T1040s to their services currently. Psych Resolutions becoming a DCO will allow MCMHA to increase clinical oversight of Psych Resolutions, increase service capacity for

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consumers, and increase the number of T1040s generated. This was approved by MDHHS in September 2024.

MCMHA is working with the PIHP to determine how the region will implement substance use disorder (SUD) services and DCO arrangements, given the contract language updates that go into effect 10/1/2024. Per last month's report: New language was proposed to add to the PIHP contract ensuring conflict free access to care for consumers and formalizing other aspects of the existing contract, specific to access centers and substance abuse services. The major change impacting MCMHA is the language indicating that the PIHP must allow CCBHCs to provide substance use disorder services or contract with a designated collaborating organization (DCO) to provide SUD services.

Patient Experience of Care/Youth Patient Experience of Care survey collection completed 9/30/2024. 34 adult surveys and 35 youth surveys were completed by CCBHC consumers for FY24. Data will be analyzed.

MCMHA and Catholic Charities of Southeast Michigan met on September 4<sup>th</sup> to discuss partnering to build a Behavior Health Urgent Care (BHUC). Later in the month, MCMHA Leadership meet with the ProMedica President, Catholic Charities CEO along with other staff from the respective agencies to discuss the plans for developing a Behavioral Health Urgent Care and discuss special needs and the potential partnership with St. Joseph Center for Hope and shared space which is provided by ProMedica Hospital. The meeting went incredibly well and everyone at the table was very excited about the opportunity. Additionally, in October MCMHA leadership toured the potential space for the BHUC. Leadership will continue to explore feasibility and next steps for this partnership/building opportunity.

Effective 10/1/2024, consumers will receive a social drivers of health (SDOH) screening as part of the new CCBHC Quality Metrics, which replaces the self-sufficiency matrix. Our region elected to utilize the Accountable Health Communities (AHC) Health-Related Social Needs (HRSN) screening – a standardized tool developed by the Centers for Medicare and Medicaid Services. This will be completed annually (or at intake) with the biopsychosocial and will be utilized to help identify barriers, strengths, goals, and be built into the individual plan of service.

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."

#### **Transition Age Youth Program**

As previously stated, MCMHA is creating a specific transition age youth program that will provide age specific mental health services to youth and young adults who are transitioning into adulthood through evidence-supported practice. Although MCMHA has always served this age group, we have a small set of staff that participated in "Transition to Independent Process Model" (TIP) training to offer improved ways to work with this population. The TIP Model emphasizes youth voice and choice and supports youth and young adults with their transition to adulthood. The TIP Model is a strength-based, youth-driven framework that was developed for working with youth and young adults (14-29 years old) with emotional/behavioral difficulties.

MCMHA has identified an internal staff that will be assigned to the Transition Age Youth Program; however, this person will not transfer to the new position until their vacancy is filled.

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This Transition Facilitator will provide services to youth and young adults focusing on youth engagement, future planning and skill building through a person-centered approach. The Transition Facilitator will focus on youth voice and choice while supporting the transition to adulthood. The Transition Facilitator will utilize the Transition to Independence Process (TIP) Model. The Transition Age Youth Program can include youth and young adults beginning at age 14 through age 29.

## **Monroe Drug Court**

With continued partnership in the Monroe County Drug Court, the Monroe Drug Court is growing and now has four (4) official participants (as of August) with a goal of growing to 20 by the end of the calendar. year.

#### Jail MAT Program

The Access/Crisis/Diversion Director and the Jail Diversion Supervisor continue to meet with the Jail Administrator, Therapeutics, and the jail medical provider to discuss the Jail MAT program to ensure it is as efficient as possible and work out any kinks that arise especially with the newly introduced jail medical provider, Vital Core.

## **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.

<u>Children's Waiver Program</u> (14 Enrolled) 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 habituative medical and/or behavioral care in the home, to receive Medicaid.

<u>Serious Emotional Disturbances Waiver</u> (8 Enrolled) 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. Over the past three months (August, September and October), we have disenrolled one consumer due to child welfare status and living situation but in addition had a new enrollee also. Therefore, we remain at 8 enrolled.

<u>Habilitation Supports Waiver</u> (HAB Waiver/122 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. We have three (3) pending HAB applications and two (2) consumers moving into group homes that will apply for the waiver once they are accepted by the provider.

## Groups

**Assertive Community Treatment (ACT)** Group - ACT continues with a weekly therapy group held at the Benesh building. The focus is on problem solving called Breaking Barriers. The group has been a good

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success and was originally going to conclude after 10 weeks; however, due to the popularity of the group, it will continue for the time being.

**Parenting through Change (PTC)** group – Two (2) families completed the summer PTC group the first week of September and a new group began on October 2<sup>nd</sup>.

A **social-emotional skills group** that was anticipated to start in October was cancelled due to lack of participation. This group will start again after the new year. The goal for the group is to teach participants to interact in positive ways by incorporating family games. This group is open to any current child/youth and their family being served by the Child & Family Services.

In the meantime, an ongoing 'open group' meaning there is no start and stop and does not require attending all sessions is being planned. The hope is that there would be participation at the leisure of the consumers and not require any prerequisite other than having an open case.

## Certification

Parent Management Training-Oregon Model (PMTO), individualized sessions that teach parents ways to manage emotions and alleviate the strain of parenting children with serious mental health challenges. We have four (4) PMTO certified therapists, one State of Michigan fidelity implementor and three Parenting Through Change facilitators on our team. Our current "Generation PMTO" team in total, consists of seven certified members and one in training.

**Trauma Focused – Cognitive Behavioral Therapy (TF-CBT)**, one of our evidenced based practice services, continues to be fostered. We currently have five (5) therapists certified in this modality and two (2) master's level children's therapists are participating in the 35th Cohort Learning Collaborative with MDHHS. Additionally, the TF-CBT Supervision Cohort has been completed by one supervisor, Devon Cunningham.

## **Training**

MCMHA's children's leadership team is participating in the next **Components for Enhancing-Clinician Experience and Reducing Trauma (CE-CERT) cohort** through the Michigan Department of Health and Human Services. CE-CERT was developed by Dr. Brian Miller, is a 'synthetic framework' integrating empirical findings to deliver concrete strategies to reduce the impact of secondary traumatic stress in the helping profession. This training will strengthen our staff retention goals as it provides supervisors with education and tools to provide trauma-informed supervision and support a healthy response to secondary traumatic stress for our clinical staff. Unfortunately, we are only able to participate through our MDHHS Children's Trauma Initiative stakeholders so, only our supervisors that provide services to SED youth can attend but we hope to share this information throughout the agency as it can be applied. "A Supervisors best friend – Leading through implementation science" was attended on August 23<sup>rd</sup>. The cohort participants will attend two additional training courses and participate in monthly coaching through fall of 2025.

**Strengths & Strategies** is the model of implementation for assessing and providing an informed practice to support the treatment of fetal alcohol spectrum disorders (FASD). Sessions are focused to identify the strengths and stress within the family and support the parent to implement strategies that reduce or reframe the challenging behaviors causing stress. MCMHA currently has one (1) implementation supervisor, one (1) clinical supervisor, and one (1) clinician working under the training and supervision of

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MDHHS with three (3) families. The screening of FASD continues for all children during the intake assessment. Access staff are enrolled in FASD screening training and will participate in November. We also continue to train all Child & Family staff in the MDHHS offering FASD 101 and 201 (Beyond the Basics) training. Training for this promising practice is ongoing.

The Access/Crisis/Diversion Director and the Crisis Mobile Response Supervisor attended the annual **CrisisCon, The National Crisis Continuum Conference**, which brings together crisis providers, partners, advocates, and payers from across the country to solely focus on crisis service delivery and expansion. This was a great opportunity to learn from other programs' experiences and bring back ideas and models to adopt and implement within our own community. It was also reassurance that we are heading in the right direction with what we are building with our crisis services here in Monroe.

## **MISCELLANEOUS**

#### **Call Volume Data**

Below is the call volume data for Fiscal Year 24.

	October-23	November-23	December-23	January-24	February-24	March-24	April-24	May-24	June-24	July-24	August-24	September-24	October-24
Incoming Calls	3929	3967	3418	4124	4390	4177	4484	4264	4291	4628	4668	4732	5027
Incoming calls minus abandon calls	3863	3905	3345	4063	4311	4108	4377	4124	4155	4487	4554	4613	4906
Calls Answered	3653	3680	3135	3815	4048	3832	4128	3816	3810	4165	4214	4289	4557
Missed/Abandoned Calls	66	62	73	61	79	69	107	140	136	141	114	119	121
Abandoned Calls	265	276	280	287	323	325	351	405	459	454	446	431	462
% incoming calls answered	93%	93%	92%	93%	92%	92%	92%	89%	89%	90%	90%	91%	91%
% incoming calls answered minus													
abandon calls	98%	98%	98%	99%	98%	98%	98%	97%	97%	97%	98%	97%	98%

**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. As you can see, during Fiscal Year 2024, we **average 98%**, which is over our goal of 95%.

#### **Caseload Report**

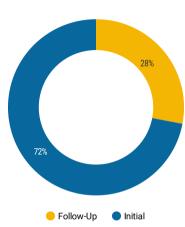
This report will be provided quarterly. The next report will be provided in December 2024.



# Monroe County CMH Crisis Mobile Utilization Report

## <u>Deployments - Number of encounters, Number of Follow Ups:</u>

Month •	Initial or	#	%	
2024 - 08	Follow-Up	11	21%	
2024 - 08	Initial	42	79%	
2024 - 09	Follow-Up	6	12%	
2024 - 09	Initial	44	88%	
2024 - 10	Follow-Up	39	51%	
2024 - 10	Initial	38	49%	
		1-6/6	< >	



Month •	Contact Type	Hours
2024 - 08	Face-To-Face	29.5
2024 - 08	Indirect Contact (Phone/Email/Other)	1
2024 - 08	Contact Attempt	0
2024 - 09	Face-To-Face	66.9
2024 - 09	Indirect Contact (Phone/Email/Other)	0.5
2024 - 09	Contact Attempt	1.5
2024 - 10	Indirect Contact (Phone/Email/Other)	2
2024 - 10	Contact Attempt	2.15
2024 - 10	Face-To-Face	44.01

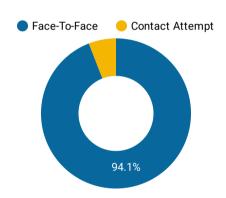
## Attachment #1

## Total Crisis Mobile Deployments

# 159

Month ▼	Contact Type	#	%
2024 - 10	Face-To-Face	48	86%
2024 - 10	Contact Attempt	6	11%
2024 - 09	Face-To-Face	45	90%
2024 - 09	Contact Attempt	3	6%
2024 - 08	Contact Attempt	0	0%
2024 - 08	Face-To-Face	50	94%

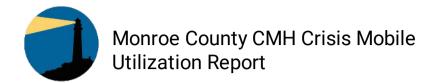
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## Average Face-to-Face Interaction Time (Hours)

# 1.5

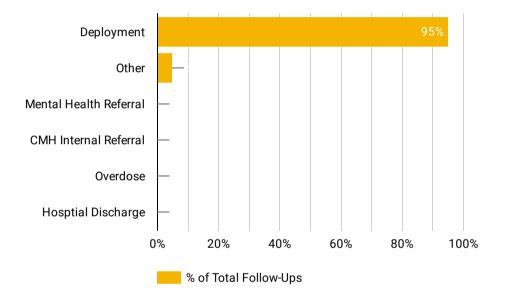
Month	Avg F2F Contact 🔻
2024 - 09	2.23
2024 - 10	1.26
2024 - 08	1.02



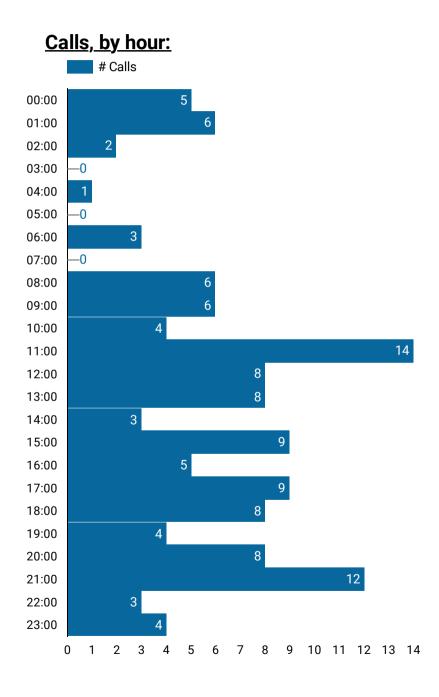
## Follow-Ups - Number of Follow Ups, Follow-Ups by Type:

Note: Tracking for follow-ups started October 2024

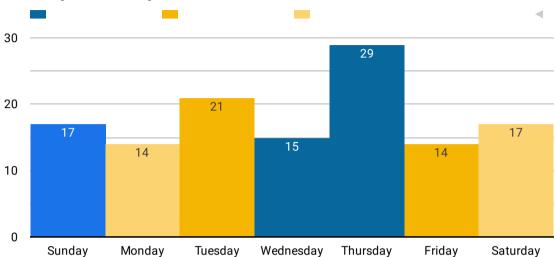
Month • •	Type ❷ ▲	#	%
2024 - 10	CMH Internal Referral	0	0%
2024 - 10	Deployment	39	95.12%
2024 - 10	Hosptial Discharge	0	0%
2024 - 10	Mental Health Referral	0	0%
2024 - 10	Other	2	4.88%
2024 - 10	Overdose	0	0%



## Time of Calls



## Calls, by Weekday:



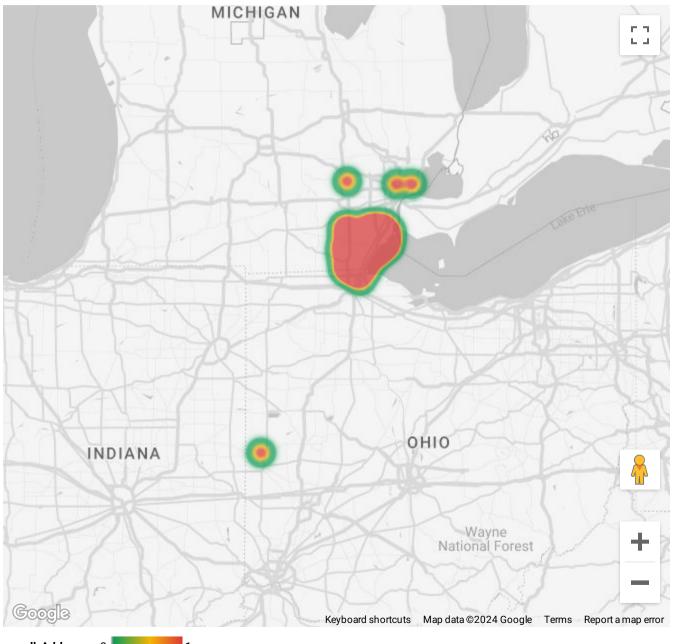
## Length of time to respond from time of call to arriving on scene:

Average Response Time (Minutes)

16.46

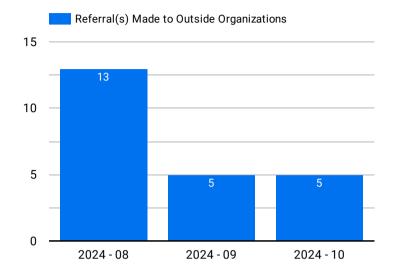
Month	Avg. Response Time 🔻
2024 - 10	20.6
2024 - 08	15.81
2024 - 09	12.97

# Location Mapping of locations deployed to:



Month -	Zipcode	#	%
2024 - 08	48134	1	2%
2024 - 08	48160	0	0%
2024 - 08	48166	4	9%
2024 - 08	48162	18	38%
2024 - 08	48161	17	36%
2024 - 08	48182	5	11%
2024 - 08	48173	0	0%
2024 - 08	48117	1	2%
2024 - 09	48173	0	0%
2024 - 09	48160	0	0%
2024 - 09	48134	0	0%
2024 - 09	48166	4	10%
2024 - 09	48182	7	17%
2024 - 09	48161	14	34%
2024 - 09	48162	10	24%
2024 - 09	48117	4	10%
2024 - 10	48117	5	12%
2024 - 10	48173	0	0%
2024 - 10	48166	5	12%
2024 - 10	48160	0	0%
2024 - 10	48134	0	0%
2024 - 10	48182	5	12%

## Number of referrals made and where they were referred to:



Month •	Referred To: ② ^	#	%
2024 - 08	Arrowhead Behavioral Health	0	0%
2024 - 08	Behavioral Health Treatment	0	0%
2024 - 08	СМН	7	23%
2024 - 08	Family Counseling and Shelter Services of Monroe	0	0%
2024 - 08	Fire Station	0	0%
2024 - 08	Gabby's Ladder	0	0%
2024 - 08	Harbor Light	6	19%
2024 - 08	Henry Ford Wyandotte	0	0%
2024 - 08	Holistic Wellness	0	0%
2024 - 08	Lemon Tree	0	0%
2024 - 08	MCOP	0	0%
2024 - 08	Michigan Works	1	3%
2024 - 08	Monroe County Animal Control	0	0%
2024 - 08	Paula's House	1	3%
2024 - 08	ProMedica ER	9	29%
2024 - 08	Pure Psych	0	0%
2024 - 08	RAW	1	3%
2024 - 08	Resource Flyer	0	0%
2024 - 08	SUD Treatment	3	10%
2024 - 08	Salvation Army Harbor Light	1	3%
2024 - 08	St. Joe's	2	6%

## **Where Referrals are Coming From:**

			Month / # Calls
Deployed by:	2024 - 08	2024 - 09	2024 - 10
Monroe County Sheriff's Dept.	21	19	17
ACCESS	5	5	12
Monroe City Police	8	8	5
СМН	4	5	4
Self	1	3	3
Police Mental Health Referral	1	1	0
Mobile Crisis Follow Up	0	1	0

# Primary Issue or Diagnosis: (New question starting 12/2023)

			Month / #
Issue/Diagnosis	2024 - 08	2024 - 09	2024 - 10
Thought Disorder	21	25	29
Suicidal Ideation	12	8	9
Substance Abuse	7	4	1
Neurocognitive	1	1	2
Homicidal Ideation	2	0	4
Environmental	2	1	1
Domestic Violence	0	3	2

## **Consumers, New and Repeats:**

	Month • •	New or Repeat Consumer	#
1.	2024 - 08	New	34
2.	2024 - 08	Repeat	19
3.	2024 - 09	New	31
4.	2024 - 09	Repeat	19
5.	2024 - 10	New	27
6.	2024 - 10	Repeat	29

## **Number of Narcan Kits Distributed:**

# Narcan Kits Distributed

1

## Number of calls per population - Race

						Month / # / %
		2024 - 08		2024 - 09		2024 - 10
Race	#	%	#	%	#	%
White	33	80%	32	78%	29	76%
Unknown	3	7%	1	2%	3	8%
Other Race	2	5%	-	-	1	3%
Not Collected	-	-	2	5%	1	3%
Multiracial	-	-	2	5%	1	3%
Black or African American	2	5%	4	10%	3	8%
Asian	1	2%	-	-	-	-

## Number of calls per population - Age

						Month / # / %
		2024 - 08		2024 - 09		2024 - 10
Age	#	%	#	%	#	%
0 to 9	0	0%	1	2%	2	5%
10 to 17	3	7%	12	29%	7	18%
18 to 28	10	24%	7	17%	9	23%
29 to 39	10	24%	9	22%	13	33%
40 to 50	7	17%	7	17%	6	15%
51 to 61	5	12%	0	0%	1	3%
62 to 72	4	10%	3	7%	0	0%
73 to 83	1	2%	2	5%	0	0%
84 to 94	0	0%	0	0%	0	0%
95+	0	0%	0	0%	0	0%
Not Collected	1	2%	0	0%	2	5%

## **OPERATIONS REPORT**

November 20, 2024

## **COMMUNITY OUTREACH**

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

## **REVEL Marketing**

- Community Awareness Campaign
  - Began phase II of the campaign
  - Campaign posters have been ordered
  - o Received posters with QR code to be placed in the community
  - Received yard signs
  - New billboard will be located on I-75 by Nadeau Road January
- Facebook Like Campaign
  - o Prior to campaign there were 545 Likes and as of 11/7/24 there are 741 Likes
- Ongoing upkeep with website updates
- · Ongoing internal newsletter

REVEL Marketing Update – What's Been Done along with examples of what types of community awareness items that will be used within the campaign are attached for review.

## **SERVICES**

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

#### **Customer Services**

- Successful Town Hall meeting. 50 people were in attendance. Alan Bolter, Associate Director from CMH Association of Michigan (CMHAM), presented and gave a state update. Consumer awards were presented.
- Giving Tree Staff provide items of warmth to those we serve. The tree is up in the lobby from 12/2/24 to 1/2/25 or until donations run out. (scarfs, hats, mittens/gloves, coats, socks, and boots)
- Ongoing continued presence at community events.

## Kiosks

- September/October data provided 60 total responses
- Comments from consumers/guardians prescriber hallway
  - o Prescriber Hallway Staff doesn't work in the office on the day the consumer is available, and bus doesn't come to their home.

Pulse for Good kiosk data for the lobby, prescriber hallway, and Benesh building are attached for review.

## **OPERATIONS REPORT**

## November 20, 2024

## MCMHA Performance Indicator Survey: External Providers

- Provider staff retention continues to remain above 80% considering the greatest challenge has been retention and recruitment.
- Training compliance continues to be above 95%.
- New Directions will be moving from the 2<sup>nd</sup> floor to the 1<sup>st</sup> floor of the Benesh Building where the Crossroads Clubhouse was located to be more visible in the community. New Directions is seeing an increase in walk-ins, referrals, and word of mouth.

The MCMHA Performance Indicator Survey is attached for review.

## Quarter 4 Grievances: FY23/24 (September)

## 8 Grievances / 8 Resolved

- 4 new prescriber requests. Various prescribers (no themes) 3 granted and 1 consumer withdrew their request.
- 1 request for new therapist resolution meeting scheduled and resolved.
- 1 CSM request consumer wants meds only, no case management services.
- 1 regarding initial services appointment scheduled and opened to services.
- 1 dissatisfaction of medication changes education provided to the consumer.

## Quarter 1 Grievances: FY24/25 (October)

## 11 Grievances / 9 Resolved

- No contract with DHHS worker Ongoing communication with MDHHS/internal staff
- 4 prescriber request granted
  - o Gummies parent giving child not FDA approved, (2) time and day didn't work for consumer's schedule, not comfortable with prescriber
- 4 request for new CSM denied (2)
  - o Consumer isn't engaging in treatment, consumer isn't answering phone when CSM attempting to contact, 2 granted consumer not comfortable, staff rude, don't mesh well together.

## 2 Grievances Pending

- 1 prescriber request reconciliation meeting scheduled
  - Consumer requesting medication that prescriber isn't comfortable prescribing due to other medications consumer is on by PCP.
- 1 CSM request pending
  - Not comfortable with male.

## Marketing Update - What's Been Done

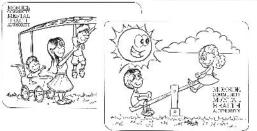
- Logo Refresh
- Website
- Send out Monthly Internal Newsletter
- Social Media Management (first 12 months)
- Display Booth Materials
- 2 Annual Reports
- Car Magnets for Crisis Mobile Unit
- Print/Program Ads
- CCBHC Certification PR & Newsletter
- Survey Cards
- Board & Leadership Team Headshots
- Community (Rack Card Info) Posters
- Coloring Pages
- Internal Behavior Sign
- Videos:
  - Culture/Who We Are Video
  - o Crisis Mobile Program Video
  - Crossroads Clubhouse Program Video
  - Find Your Why/Partnership Video
  - Board Recruitment Video

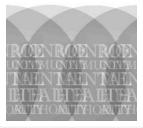
#### 40+ Pieces of Program Literature:

- Monroe Services Guide Brochure
- When Someone You Know Refuses Mental Health Care Rack Card
- Getting Help Before A Crisis Rack Card
- Guardianship, Conservatorship, and Decision-Making Options to Help Your Loved One Rack Card
- Overall Crisis Rack Card
- Crossroads Clubhouse Services Flyer
- Crossroads Overview Brochure
- Crossroads Transitional Employment Brochure
- Parenting Through Change Flyer
- Respite Flyer
- Crisis Mobile Flyer
- · Critical Incident Stress Management Flyer
- Trauma-Focused Cognitive Behavior Therapy Flyer
- Wraparound Services Flyer
- Youth Peer Support Services Flvers
- Youth Diversion Services Flyers
- · Access Services Flyer
- Assertive Community Treatment Flyer
- Adult Outpatient Services Flyer
- · After-Hours Crisis Services Flvers
- · Applied Behavior Analysis Flyers
- · Case management Flyers
- Children's Waiver Program Flyer
- Community Living Supports Flyers
- Crossroads Clubhouse Flyer
- Medical Assistants & RNs Flyer
- Mental Health Recovery Court Flyer
- Intensive Crisis Flyer
- Habilitation Supports Waiver Flyer
- Home-based Services Flyer
- Early Childhood Services Flyer
- Intensive Crisis for Teens & Children Flyer
- Jail & MATS Program Flyer
- Jail Diversion Program Flyer
- Jail Re-entry Flyer
- Parent Management Training Oregon Flyer
- · Parent Support Services Flyer
- Pre-admission Screening Resident Review Flyer
- Psychiatric Health Services
- · Youth Outpatient Therapy Flyer

















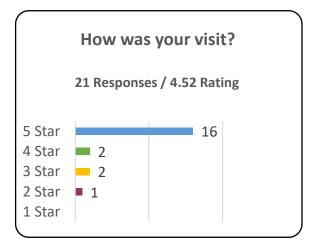
Page 30 of 46

# **PULSE FOR GOOD DATA**

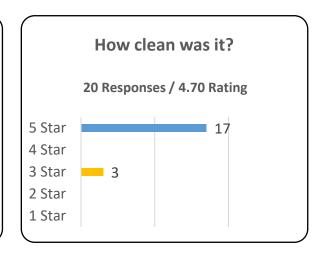


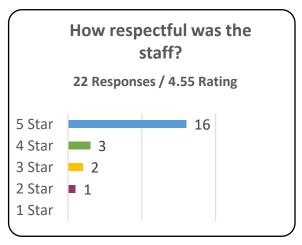
**September-October 2024 / Location - Lobby Kiosk** 

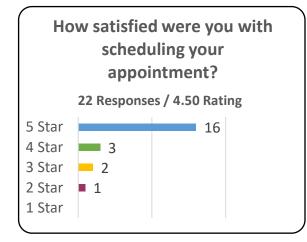
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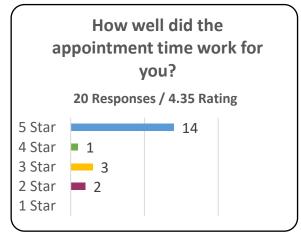


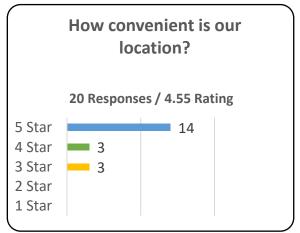










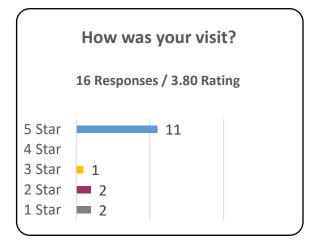


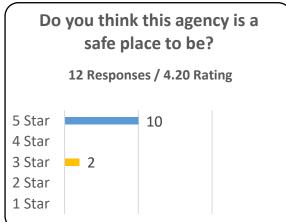
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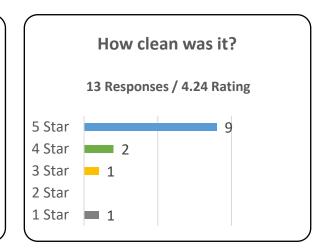


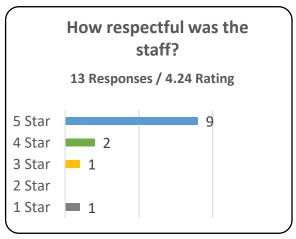
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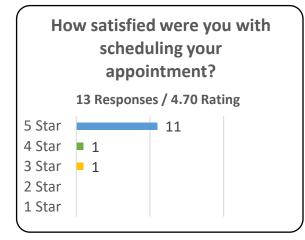
**Overall Rating: 4.25** 

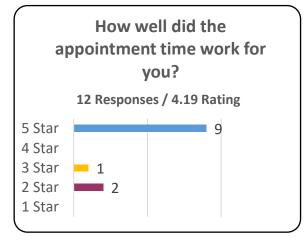


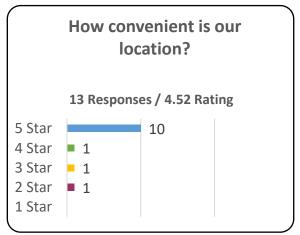










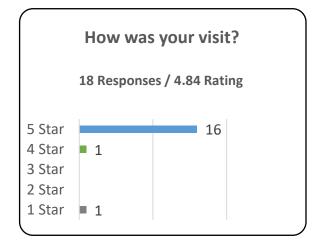


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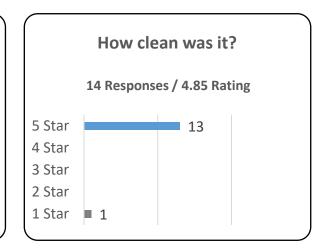


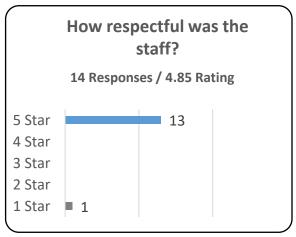
**September-October 2024 / Location - Benesh Kiosk** 

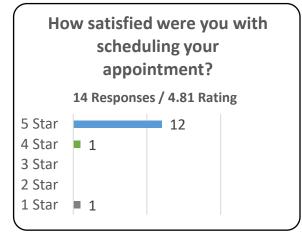
**Overall Rating: 4.86** 



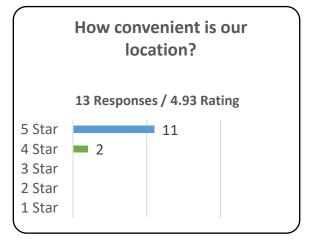












## **MCMHA Performance Indicator Survey: External Providers**

FY 2024 Q4: July 1 – September 30, 2024

Surveyed	Surveyed Providers Retention		Training Compliance
# Sent Out	# Responses	Average Staff Retention	Average Training Compliance
37	36	Q3: 84.03% Q4: 81.59%	Q3: 98.33% Q4: 97.19%

## **Greatest Challenges**

Category	# of Providers
Detection and requirement	
Retention and recruitment	16
Billing issues	5
Consumer issues	3
Training compliance	2
Rates for services	2
Staff and consumer illnesses	1
MCMHA provided tablet not	1
keeping a charge	
Community engagement	1
Empty bed vacancies	1

## **Greatest Successes**

Category	# of
	Providers
Quality service	9
Retention and recruitment	6
Training compliance	4
Consumer successes	4
Consumer programming	2
Referrals	1
Billing successes	1
Ownership transition	1

## **Supported Employment**

Number of	Number of	Consumers
Providers	Supported	at Least 6
	Employment	Months
	Consumers	Employed
1	5	5

## **Drop-In Center**

Number of Providers	Average Daily Attendance	Average Meals Per Day
1	6	0

The supported employment provider that responded was Life Enrichment Academy. The drop-in center provider that responded was New Directions. New Directions reports having more walk-ins, referrals, and 'word-of-mouth' discoveries since their move to their current location.

## **MEMORANDUM**



**TO:** MCMHA Board of Directors

FROM: Lisa Graham, CEO

**RE:** FY24 CCBHC Quality Metrics

DATE: November 20, 2024

The following are CCBHC Quality Metrics for which Performance Bonus dollars are attached.

Asterisk (\*) indicates data for that indicator was generated from CC360 and was last updated 3/31/24.

QUALITY INDICATOR	BENCHMARK	MCMHA SCORE
SRA-BH-C: Percentage of consumer visits for consumers aged 6-17 with a diagnosis of Major Depressive Disorder (MDD) with an assessment for suicide risk.	47.9%	71.2
SRA-AD: Percentage of adult consumers with a diagnosis of MDD with a suicide risk assessment completed during the visit in which a new diagnosis or recurrent episode was identified.	67.7%	99.2%
*SAA-AD: Adherence to anti-psychotic medication for Schizophrenia.	56.7%	64.5%
<b>*FUH-AD</b> : Percentage of adults who receive a follow up visit after inpatient psychiatric hospitalization.	7-Day: 46% 30-Day: 70.1%	7-Day: 45.5% 30-Day: 69.7%
<b>*FUH-CH</b> : Percentage of children who receive a follow up visit after inpatient hospitalization.	7-Day: 70.1% 30-Day: 83.5%	7-Day: 62.5% 30-Day: 95%
*IET-BH: Percentage of adults who were linked to SUD treatment within x days of request.	14-Day: 43.9% 34-Day: 12.4%	14-Day: 56.9% 34-Day: 18.7%

## **MEMORANDUM**



**TO:** MCMHA Board of Directors

FROM: Lisa Graham, CEO

RE: CCBHC Quality Metrics, FY24, Q4

DATE: November 20, 2024

The following are FY24, Q4 CCBHC Quality Metrics . These are clinical standards that do not have performance bonus dollars attached.

QUALITY INDICATOR	BENCHMARK	MCMHA SCORE
<b>I-EVAL:</b> Percentage of consumers with initial evaluation provided within 10 business days of first contact.	First Contact: 57.8%	First Contact: 45.9%
I-EVAL MEAN DAYS: The mean number of days until initial	Days to Evaluation:	Days to Evaluation:
evaluation for new consumers.	20.8	13.5
BMI-SF: Percentage of adult consumers with a BMI	32.5%	32.9
documented during the current encounter or during the		
previous six months AND with a BMI outside of normal		
parameters, a follow-up.		
WCC-CH: Percentage of children aged 3-17 who had an	44.3%	1.7%
outpatient visit with a Primary Care Physician or OB/GYN		
practitioner <b>AND</b> who had a documented BMI.		
TSC: Percentage of adults screened for tobacco use one or	48.7%	37.3%
more times within 24 months AND who received cessation		
counseling intervention, if identified as a tobacco user.		
ASC: Percentage of adults screened at least once within	48.6%	9.5%
24 months for unhealthy alcohol use using a systematic		
screening method AND who receive brief counseling, if		
identified as an unhealthy alcohol user.		
CDF-AD: Percentage of adults screened for clinical	37.2%	41.9%
depression on the date of the encounter using an age-		
appropriate standardized depression screening tool, <b>AND</b> , if positive, a follow-up plan is documented on the date of		
the positive screen.		
the positive sereem.		
<b>DEP-REM 12</b> : Percentage of consumers aged 12 and older	13%	8.10%
who were screened for clinical depression on the date of the encounter using an age-appropriate standardized		
screening tool, <b>AND</b> , if positive, a follow-up plan is		
documented on the date of the positive screen.		



## **BOARD EXECUTIVE COMMITTEE**

Wednesday, November 13, 2024 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

Susan Fortney called the meeting to order at 7:32pm. Susan Fortney, Catherine Bernhold, and Lisa Graham were present. Mike Humphries was excused.

## II. REVIEW OF THIS MONTH'S BOARD MEETING

- a. Board Agenda Reviewed
- b. Presentation Clinical Report, Operations Report, and FY2024 CCBHC Quality Metrics

## III. ITEMS FOR DISCUSSION

- a. FY2024 CCBHC Quality Metrics Lisa Graham commented on presenting the CCBHC Quality Metrics to show which metrics have a bonus tied to them and which metrics do not at the November 20, 2024 meeting.
- b. The annual Board and Leadership Holiday Dinner event is scheduled for Friday, December 6, 2024 at the Monroe Golf & Country Club. Reservations in the Ross Room are for 6:30pm. An invitation will be sent by email requesting an RSVP and meal choice within the next 2 weeks. This is not an agency paid event.

## IV. ACTION ITEMS FOR FUTURE BOARD MEETING AGENDA

- a. Nov CMHAM Conferences and NATCON25 Conference
- b. Dec Board and Leadership Holiday Dinner Event December 6, 2024

#### V. AJOURNMENT

The meeting adjourned at 7:47pm.

## VI. NEXT MEETING

The Next Meeting of the Executive Committee is scheduled for Wednesday, December 10, 2024 at 6:00pm.

Respectfully submitted,

Susan Fortney (dp)

Susan Fortney

Board Vice Chairperson 11/14/24

MCMHA Board Action Request	Mental Healt	h Administrative Contract(s) / A	Amendments		FY 2024-25	November 13, 2024
Action Requested: Approval Requested for the Mental Health Administrative Contracts Listed Below:						
Contractor name	Department	Request	Budget	Contract Term	Service Descriptio	n
Snow Chiu Wu	IT		\$90/hour not to exceed \$70,000 annually	10/1/24-9/30/25	Consultation and re Fully reimbursed by	'
B.B.H. Ventures LLC		Renewal of leases for the Granby and Vivian properties	Granby- \$2,499.54 per month Vivian- \$2,526.42 per month	10/1/24-9/30/27	These are 3 year lea and 1% each year af	ses with and initial 5% increase ter.
Adam J. McLaughlin dba A. McLaughlin Properties LLC			Binkley- \$2,398.86 per month Harbor- \$1,982.93 per month John L- \$2,545.20 per month Lewis- \$2,548.78 per month S. Dixie- \$2,686.25 per month	10/1/24-9/30/27	These are 3 year lea and 3% each year af	ses with and initial 5% increase ter.

RECOMMENDATION: As reviewed by the MCMHA Board of Directors are their November 13, 2024, approval of the contract(s) listed on the MCMHA Board Action Mental Health Administrative Contract(s) / Amendments on or before November 20, 2024.

MCMHA Board Action Request Men	tal Health Service C	ontract(s) / Amendments		FY 2024-25	November 13, 2024	
Action Requested: Approval Requested for the Mental Health Service Contracts Listed Below:						
Provider Name	Contract Term	Service Description(s) include	CPT code	FY 22-24 Rate/Unit	FY 24-26 Rate/Unit	Additional Information/ Background
Hospitals:						
Forest View Psychiatric Hospital Inc	10/1/24-9/30/26	Inpatient Psychiatric hospitalization	0100	\$1,007.00 per diem	\$1,027.14 per diem	2% increase
Harbor Oaks	10/1/24-9/30/26	Inpatient Psychiatric hospitalization	0100	\$765.00 per diem	\$787.95 per diem	3% increase
		Inpatient Psychiatric hospitalization (1:1 staffing)	0100 CD	\$993.20 per diem	\$1,023.00 per diem	
		Inpatient Psychiatric hospitalization (Specialized pediatric unit)	0100	\$1,248.00 per diem	\$1,400.00 per diem	Specialized pediatric is at a 13% increase
ProMedica Monroe Regional Hospital	10/1/24-9/30/26	Inpatient Psychiatric hospitalization	0100	\$975.00 per diem	\$995.00 per diem year 1 \$1,015.00 per diem year 2	2% increase per year
ProMedica Coldwater Regional Hospital	10/1/24-9/30/26	Inpatient Psychaitric hospitalization	0100	\$975.00 per diem	\$995.00 per diem year 1	2% increase per year
					\$1,015.00 per diem year 2	, ,
BCA of Detroit LLC	10/1/24-9/30/25	Inpatient Psychiatric hospitalization	0100	\$817.44 per diem	\$841.97 per diem	3% increase for one year
		Inpatient Psychiatric hospitalization (1:1 staffing)	0100 CD	\$1,200.00 per diem	\$1,236.00 per diem	
Community Living Supports/Supported Empl/I	Respite					
Progressive Residential Services	10/1/24-9/30/26	Licensed Residential - Vineyard Home	H2016		\$160.10 per diem	
			T1020		\$160.10 per diem	
Hope Network Behavioral Health Services	10/1/24-9/30/26	Evaluation and management of new patient 15-29 minutes	99202	\$136.13 Per encounter	\$151.51 Per encounter	
<u>'</u>		Evaluation and management of new patient 30-44 minutes	99203	\$208.60 Per encounter	\$232.17 Per encounter	
		Evaluation and management of new patient 45-59 minutes	99204	\$306.29 Per encounter	\$340.90 Per encounter	
		Evaluation and management of new patient 60-79 minutes	99205	\$408.39 Per encounter	\$454.54 Per encounter	
Campanita Uhira Naturah	10/1/24-9/30/26	Donath.	T4005	\$2.50 per 15 minutes	CA F2 per 4F minutes	
Community Living Network	10/1/24-9/30/26	Respite	T1005	\$3.50 per 15 minutes	\$4.53 per 15 minutes	
Guardian Trac			UN		\$2.27 per 15 mintes	
			UP		\$1.51 per 15 minutes	
			UQ		\$1.14 per 15 minutes	
			UR		\$.91 per 15 minutes	
			US		\$.76 per 15 minutes	
		Supported Employment	H2023 1Y, 2Y, 3Y, 4Y	\$3.44 per 15 minutes	\$4.62 per 15 minutes	
			H2023		\$4.62 per 15 minutes	
			UN		\$2.31 per 15 minutes	
			UP		\$1.54 per 15 minutes	
			UQ		\$1.16 per 15 minutes	
			UR		\$.93 per 15 minutes	
			US		\$.77 per 15 minutes	
			H2025	\$3.44 per 15 minutes	\$4.62 per 15 minutes	
		Skill Building	H2014	\$4.74 per 15 minutes	\$5.78 per 15 minutes	
			UN	\$2.37 per 15 minutes	\$2.89 per 15 minutes	
			UP		\$1.93 per 15 minutes	
			UQ		\$1.45 per 15 minutes	
			UR		\$1.16 per 15 minutes	
			US		\$.97 per 15 minutes	
Adult Learning Systems	10/1/24-9/30/26	Respite	T1005	\$3.34 per 15 minutes	\$4.66 per 15 minutes	
A Heart That Cares LLC			UN	\$1.36 per 15 minutes	\$2.33 per 15 minutes	
Arkay Inc.			UP		\$1.56 per 15 minutes	
CHS Group LLC			UQ		\$1.17 per 15 minutes	
Goodwill Industries of Southeastern Michigan Inc.			UR		\$.94 per 15 minutes	
Help at Home Michigan LLC.			US		\$.78 per 15 minutes	
Life Enrichment Academy Inc.						
Macomb Residential Opportunities						
Mastrofrancesco Inc.						
Progressive Residential Services Inc.	1	1	1	1		

Arkay Inc.	10/1/24-9/30/26	Supported employment	H2023 1Y, 2Y, 3Y,4Y	\$5.16 per 15 minutes	\$5.39 per 15 minutes	
Choices with Selt Determination LLC.			H2023		\$5.39 per 15 minutes	
CHS Group LLC.			UN		\$2.70 per 15 minutes	
Life Enrichment Academy Inc.			UP		\$1.80 per 15 minutes	
			UQ		\$1.35 per 15 minutes	
			UR		\$1.08 per 15 minutes	
			US		\$.90 per 15 minutes	
			H2025	\$5.16 per 15 minutes	\$5.39 per 15 minutes	
Autism/Waiver Services						

RECOMMENDATION: As reviewed by the MCMHA Board of Directors at their November 13, 2024 Board Meeting, approval of the contract(s) listed on the MCMHA Board Action Mental Health Service Contract(s) / Amendments on or before November 20, 2024.



## REVIEW AND APPROVAL / November 20, 2024 Local (MCMHA) and Regional (CMHPSM) Policy, Procedure, and Exhibits

## **Executive Summary**:

- There is one local policy, two procedures, and four exhibits. There are three regional policies.
- This document serves as an Executive Summary of the policies for review and approval at the October 23, 2024 Board Meeting.

LOCAL: Policy, Procedure, and Exhibits	Reason for Revision	Summary
EOC2000 Emergency Preparedness Plan Policy	3-Year Review	Purpose: To create a plan to mitigate, prepare for, and respond to consequences of natural disasters or other emergencies.  Significant Changes: There are no significant changes.
EOC2000-P1 MCMHA Emergency Preparedness Plan Procedure	3-Year Review	Purpose: The Emergency Planning Zone (EPZ) is a 10-mile radius surrounding FERMI II. Monroe County emergency planning has been done to assure prompt and effective protection of the public in the event of a potential or actual release of radioactivity. MCMHA and its contractual service providers will have emergency management plans for consumers, staff, and services located in the EPZ.  Significant Changes: There are no significant changes.
EOC2000-P2 Nuclear Emergency Management – Fermi II Procedure	NEW	Purpose: The Emergency Planning Zone (EPZ) is a 10-mile radius surrounding FERMI II. Monroe County emergency planning has been done to assure prompt and effective protection of the public in the event of a potential or actual release of radioactivity. MCMHA and its contractual service providers will have emergency management plans for consumers, staff, and services located in the EPZ.  Significant Changes: New procedure to be attached to the EOC2000 Emergency Preparedness Plan Policy for purposes of a nuclear emergency.

EOC2000-E3 Monroe County Emergency Management Plan Annex L Exhibit	3-Year Review	Purpose: To provide procedures for the provision of human services.  Significant Changes: There were no significant changes.
EOC2000-E4 DTE Emergency Preparedness Booklet Exhibit	3-Year Review	Purpose: Emergency Preparedness Booklet for Monroe and Wayne Counties.  Significant Changes: There were no significant changes.
EOC2000-E5 PFS-CISM Team Exhibit	3-Year Review	Significant Changes: Amended staff names currently trained CISM.
EOC2013-E3 Fire Emergency Drill Form – Non-Residential Exhibit	3-Year Review	Significant Changes: There were no significant changes.

REGIONAL: Policy and Exhibits	Reason for Revision	Summary
RR8041 Assessment and Authorization of Community Living Supports (CLS) Services Policy	3-Year Review	Purpose: To establish guidelines for the assessment and authorization of community living support (CLS) services within the Community Mental Health Partnership of Southeast Michigan (CMHPSM).  Policy: The CMHPSM shall develop, implement, and maintain a process to access, authorize, and monitor CLS services for individuals living in licensed and non-licensed settings in ways that meet state and federal requirements.  Significant Changes: Language throughout the policy where the word consumer is mentioned, "consumer/individuals served" was added. There were no significant changes.
PI6009 Incident Reporting Policy	3-Year Review	Purpose: To provide guidelines for timely reporting, monitoring, reviewing, and evaluating unusual and/or unexpected incidents which occur in the course of providing behavioral health services to consumers/individuals served.  To ensure that the information derived from incident reporting is used to identify opportunities for improvement.

		Policy: It is the policy of the CMHPSM that unusual and significant incidents (as defined below) involving active consumers/individuals served will be reported and investigated in a timely manner, with appropriate follow up and/or remedial action steps taken to prevent reoccurrence. The Incident Reporting process is a retrospective peer review process to improve services or enhance treatment for consumers/individuals served. Any records, data and knowledge collected in this process are confidential and considered peer review documents and are to be protected as such. Therefore, this information is not available by record requests, under the Freedom of Information Act (FOIA) or by subpoena.  Significant Changes: There were no significant changes.
POC7062 Timeliness of Service Provision and Documentation Policy	3-Year Review	Purpose: To establish standards of timeliness for the provision of care, treatment, and services, and the documentation of those services, to ensure the continuity of care.  Policy: The provision and documentation of all care, treatment, and services shall be done in a timely manner. Service provision and documentation should occur in compliance with Michigan Department of Health and Human Services (MDHHS), and applicable accreditation standards.  Significant Changes: Acronym amendment. There were no significant changes.

# COMMUNITY MENTAL HEALTH PARTNERSHIP OF SOUTHEAST MICHIGAN SPECIAL BOARD MEETING MINUTES

October 30, 2024

Members Present for Judy Ackley, Rebecca Curley, LaMar Frederick, Bob King, Rebecca

In-Person Quorum: Pasko, Mary Pizzimenti, Mary Serio, Holly Terrill,

Members Not Present Patrick Bridge, Molly Welch Marahar, Alfreda Rooks, Annie

For In-Person Quorum: Somerville, Ralph Tillotson

**Staff Present:** Stephannie Weary, James Colaianne, Matt Berg, Nicole Adelman,

Lisa Graham, CJ Witherow, Connie Conklin, Kathryn Szewczuk,

**Trish Cortes** 

Guests Present: Attorneys Greg Moore (phone) and Chris Ryan from Taft Law

I. Call to Order

Meeting called to order at 4:02 p.m. by Board Chair Bob King.

II. Roll Call

Quorum confirmed.

III. Consideration to Adopt the Agenda as Presented

Motion by M. Serio, supported by J. Ackley, to approve the agenda Motion carried

IV. Audience Participation

None

- V. Old Business
  - a. Closed Session to Discuss Pending Litigation

Motion by M. Serio, supported by L. Frederick, to move that the CMHPSM Board meet in closed session under section 8(1)(e) of the Open Meetings Act, to consult with our attorney regarding trial or settlement strategy in connection with pending legal action related to our FY2025 MDHHS contract

Motion passed unanimously

- The meeting entered into closed session at 4:05 p.m.
- After returning to open session at 4:39 p.m.:

Motion by L. Frederick, supported by J. Ackley, to authorize the CEO to decline signing the proposed FY25 MDHHS/PIHP contract as currently written Motion carried unanimously

Motion by M. Serio, supported by R. Pasko, to join the other PIHPs in any legal action enacted in relation to the proposed MDHHS/PIHP contract Motion carried unanimously

- VI. Old Business
  - a. FY2025 CEO Contract Clarification

## **CMHPSM Mission Statement**

Through effective partnerships, the CMHPSM shall ensure and support the provision of quality integrated care that focuses on improving the health and wellness of people living in our region.

 J. Colaianne recommended to the board that they rescind the 5% cost of living adjustment (COLA) for the CEO that was approved at the 10/9/24 board meeting and reconsider the COLA percentage in conjunction with the CEO contractual annual increases.

Motion by L. Frederick, supported by M. Serio, to rescind the 5% COLA, which the board approved on 10/9/24, for further consideration Motion carried unanimously

- The board agreed to convene a subcommittee to review the CEO contract for potential updates to incorporate the addition of a COLA.
- Subcommittee volunteers:
  - L. Frederick
  - M. Serio
  - ❖ B. King
  - H. Terrill
- VII. Adjournment

Motion by L. Frederick, supported by R. Curley, to adjourn the meeting Motion carried unanimously

The meeting was adjourned at 4:46 p.m.

Rebecca Pasko, CMHPSM Board Secretary



## **CEO REPORT**

November 20, 2024

## RECRUIT AND RETAIN STAFF

Interim Medical Director: Dr. Jaswant Bagga will serve as MCMHA's Interim Medical Director, effective 1/10/24. Dr. Bagga is a Board-Certified psychiatrist, with certifications in Psychiatry and Addiction Psychiatry and the author of two books: Laugh or Cry, It's Your Choice and Living with Dignity Despite Pain and Suffering. Dr. Bagga has been with MCMHA for nearly two years.

**MCMHA Professional Development Day/Holiday Event**: MCMHA will host our quarterly Professional Development Day along with our staff holiday event on Thursday, December 5.

## SERVICES MEET THE NEEDS OF THE CUSTOMER

**National Core Indicator Surveys**: MDHHS requires local CMHs to identify adult consumers with Intellectual and/or Developmental Disabilities who will be willing to participate in a survey focused on satisfaction with CMH services and support. These are due by 12/15.

**River Raisin Clubhouse**: MCMHA has begun the process of taking possession of the former Panera building, including transferring utilities, completing occupancy agreement, IT and Facilities needs. We have no target move-in date yet.

## **FINANCE**

**Non-Medicaid/General Fund:** MCMHA continues to work on addressing our Non-Medicaid/GF deficit. The following has occurred: Letters out to all consumers who are assigned to Plan First, wait listing non-Medicaid/non-CCBHC services at the front door, filling and training our internal Benefits Specialist, review and assessment of all open consumers who do not have Medicaid and are receiving services outside of those allowed by CCBHC.

## COMMUNITY PARTNERSHIPS/COMMUNITY OUTREACH

**Community Coalition:** Last month, the Community Coalition voted to reduce meetings from monthly to quarterly.

## **UPCOMING EVENTS**

**Board of Directors Holiday Dinner:** Our annual Board Holiday dinner is coming up! December 6 at the Monroe Golf and Country Club! We have requested a table set up that allows everyone to be seated together. In the next week or two, you will receive information on menu choices. Please respond to Dawn immediately.

Please refer to the Clinical Operations packet for detailed clinical and operations updates.

Respectfully Submitted,

Lisa Graham LAUSW

Lisa Graham, LMSW