

ST. CLAIR COUNTY COMMUNITY MENTAL HEALTH AUTHORITY
3111 Electric Avenue
Port Huron, Michigan 48060

GROUP MEETING: SCC Community Mental Health Board
SUBJECT: Public Hearing
PLACE: St. Clair County Community Mental Health
3111 Electric Avenue, Port Huron
DATE: March 3, 2020
TIME: 6:00 p.m.
PRESIDING: Nancy Thomson, Chairman

PRESENT: L. Ames, S. Armstrong, J. Bligh, A. Essian, J. Jowett-Lee, M. Paulus, E. Priemer, K. Schieweck, N. Thomson

CALL IN: M. Partipilo, S. White

ABSENT: E. Rieves

ALSO PRESENT: Guests: A. Bolter, CMHAM
Staff: T. Delor, K. Gallagher, S. Herrle, M. Hutchinson, D. Johnson, T. Pingitore, K. Farr, M. Measel-Morris, K. Zultak, T. Goyette

I. CALL TO ORDER

The meeting was called to order at 6:00 p.m. by Chairman Thomson.

II. MEETING PURPOSE

The purpose of the Public Hearing is to present the FY 2020 Annual Submission Requirements. It is a requirement within the Mental Health Code and our MDHHS contract that we examine and evaluate the mental health needs of our county and develop an annual plan.

Ms. Measel-Morris provided an overview of each of the four sections of the report as follows:

Estimated FTE Equivalent: Ms. Measel-Morris informed the Board that the report covers information gathered from CMH and the Provider Network.

Table 1 identifies the total workforce in Specialized Residential settings and contains information on contract agency staff. There are no CMHSP employees represented in this table.

Table 2 addresses the workforce in other settings such as community living supports, personal care, skill building.

Requests for Services and Disposition of Requests: Ms. Measel-Morris explained that the purpose of this section is to gather data on requests for services and disposition of requests during the past year. This data is pulled from Access screening calls which are forwarded to CMH for intake assessment.

These individuals have been determined by the Access Center as potentially eligible for CMH services and are scheduled for intake assessment with the Central Intake Unit and is broken down by population.

Waiting List Information: This report details the waiting list for services for the period of October 1, 2018 through September 30, 2019 which is zero.

Community Needs Assessment: Ms. Measel-Morris explained that the report provided information, gathered from a broad variety of sources to identify current and future social and health needs of the community. Ms. Measel-Morris noted that in several areas you will see N/A; this is due to the fact that we are waiting for the State to provide the data. The report details the census population, Medicaid enrollment, number of children in foster care, the number of licensed foster care beds in our catchment area, prevalence proxy data, adults with serious mental illness, children at-risk for serious emotional disturbance 100% below poverty, persons with development disabilities, community homelessness, community employment, justice system, jail diversions, prison discharges, education system; graduation and drop-out rates; primary health and the percentage of CMH consumers with an identified Primary Care Physician, number of CMH Medicaid recipients with primary care service/encounter, primary care plus emergency room, emergency room with no primary care.

Priority Needs and Planned Actions: This information is based on feedback received from stakeholder groups and data collected from this process. Based on their feedback, five key areas were identified. They were: 1) Substance Abuse: alcohol, methamphetamine, opiate and prescription drugs; 2) Increase integration of physical and behavioral health services 3) Direct Care Workers recruitment and retention; 4) Availability of Crisis Beds for children and adolescents; and, 5) Availability of specialized AFC and group home placements. Ms. Measel-Morris provided a brief update on what steps are being taken to address the identified issues.

III. COMMENTS

Chairman Thomson asked for any comments/questions from the public or Board members regarding the FY 20 Annual Submission Requirements. Ms. Partipilo asked what possible incentives we could offer direct care staff to increase retention. Ms. Gallagher commented that the main issue surrounding retaining direct care workers centers around rate of pay. When additional funding is made available and passed along to our contract providers it is up to the contract provider to decide what to do with the funds.

IV. ADJOURNMENT

With no further questions and/or comments Vice Chairman Thomson adjourned the meeting at 6:09 p.m.

Respectfully submitted,

Tracy Goyette
Recording Secretary