

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

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GROUP MEETING: SCC Community Mental Health Board  
SUBJECT: Regular Session  
PLACE: St. Clair County Community Mental Health  
3111 Electric Avenue, Port Huron  
DATE: December 3, 2019  
TIME: 6:00 p.m.  
PRESIDING: Nancy Thomson, Chairman

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PRESENT: L. Ames, S. Armstrong, J. Bligh, A. Essian J. Jowett-Lee, M. Paulus,  
E. Priemer, K. Schieweck, N. Thomson, S. White  
CALL IN: No one  
ABSENT: M. Partipilo, E. Rieves  
ALSO PRESENT: Guest(s): R. Kiehler, IHDC  
Staff: T. Delor, D. Johnson, K. Farr, K. Gallagher, L. Gauthier, T. Goyette, M. Measel-  
Morris, T. Pingitore

I. CALL TO ORDER

The meeting was called to order at 6:04 p.m. by Chairman Thomson.

II. CITIZENS WISHING TO ADDRESS THE BOARD - None

III. AGENDA CHANGES -None

IV. PRESENTATION OF PREVIOUS MEETING MINUTES

It was moved by Mr. Priemer seconded by Ms. Jowett-Lee, to approve the minutes of the November 5, 2019 regular meeting of the CMH Board, as presented. **MOTION CARRIED**

V. PRESENTATION OF OCTOBER RECEIPTS/DISBURSEMENTS & ELECTRONIC TRANSFERS

It was moved by Mr. Essian, seconded by Ms. Bligh, to approve the October Receipts/Disbursements and Electronic Transfers, as presented. **MOTION CARRIED**

VI. PRESENTATION OF BILLS TO BE PAID

It was noted by Ms. Thomson that costs of travel were high due to travel to the fall conference in Traverse City, IT was doing a lot of travel and two of the higher travel costs are being looked into.

It was moved by Ms. Jowett-Lee, seconded by Ms. Priemer, to approve the Bills to be Paid in the amount of \$2,401,658.45, as presented. **MOTION CARRIED**

VII. ITEMS FOR ACTION

A. St. Clair CMH Board 2020 Meeting Calendar – N. Thomson

Ms. Johnson reviewed the St. Clair County Community Mental Health Board Meeting Calendar for the coming year. The regularly scheduled board meetings are held the first Tuesday of the month however January presents a conflict due to the holiday, February due to the CMHA Winter conference and April due to the National Conference. It was proposed that those meeting dates be moved to January 21, 2020, February 11, 2020, and April 14, 2020.

It was moved by Mr. Essian, seconded by Mr. Armstrong, to approve the SCCCMHA FY 2020 Board Meeting Calendar, as presented. **MOTION CARRIED**

B. FY 20 Agency Goals – D. Johnson

Ms. Johnson presented the SCCCMHA FY 2020 Agency Goals. It was noted that Agency Goal two should read: Improving outcomes for the individuals we serve by meeting or exceeding all indicators for excellence regarding care.

It was noted by Ms. Johnson that the Agency Goals may be reviewed or adjusted if results of upcoming strategic planning deem it necessary.

It was moved by Mr. Essian, seconded by Ms. Jowett-Lee, to endorse the SCCCMHA FY 2020 Agency Goals, as presented. **MOTION CARRIED**

C. Quality Improvement Committee – M. Measel-Morris

1. FY 19 Summary Report

Presented by Ms. Measel-Morris the SCCCMHA FY 19 Quality Improvement Plan Annual Report is a culmination of all four quarters and reflects the status of priority goals / key tasks that were established by Committees and Workgroups of the Quality Improvement Council. All Workgroups and Committees have reported the status of each goal assigned.

2. FY 20 Plan/Program

Presented by Ms. Measel-Morris the SCCCMHA FY 20 Quality Improvement Program/Plan is to continue and/ or improve current Quality Improvement structures and systems used to monitor, maintain and improve quality care throughout all programs. All population groups are included within the Quality Improvement Program/Plan. Clinical outcomes and organizational process reviews may be system-wide or population specific. The Quality Improvement Plan Goals for FY 2020 are listed within the report. It was noted by Ms. Measel-Morris that it should be expected for changes to occur within the document in the future as need presents.

It was moved by Mr. Priemer, seconded by Mr. Armstrong, to endorse the SCCCMHA FY 2020 Quality Improvement Plan/Program, as presented. **MOTION CARRIED**

D. Administrative Services Organization Agreements: Lapeer & Sanilac – K. Farr

Ms. Farr advised the Board that we have some shared administrative functions performed by St. Clair CMH along with software costs that benefit all three CMHs. The purpose of this agreement is to detail those services/costs (not covered by Medicaid) and how they are shared amongst all three CMHs.

It was moved by Mr. Essian, seconded by Ms. Jowett-Lee, to approve the Administrative Services Organization Agreement between St. Clair CMH and Lapeer CMH and Sanilac CMH (respectively) for the period of October 1, 2019 through September 30, 2020, as presented.

**MOTION CARRIED**

E. Personnel Committee Report: Executive Director Evaluation – N. Thomson

Ms. Thomson announced that Ms. Johnson's evaluation was completed prior to tonight's meeting. All evaluation feedback received from board members was compiled by the Personnel Committee and presented to Ms. Johnson. It is the recommendation of the Personnel Committee that Ms. Johnson's contract be renewed for another year and receive the 1% increase consistent with the Union. Ms. Johnson expressed gratitude to the board for the continued opportunity to serve our individuals, staff, and the community.

It was moved by Ms. Jowett-Lee, seconded by Mr. Essian, to accept the Personnel Committee's Report of the evaluation of Ms. Deb Johnson for 2019 and her contract renewal for another year including the 1% increase consistent with the Union increase. **MOTION CARRIED**

VII. INFORMATIONAL ITEMS

A. Recipient Rights Advisory Council: T. Delor

Committee Meeting Report

The Recipient Rights Advisory Committee met earlier today. Agenda highlights included:

1. Aggregate Complaint Data Report: During the period of August 30, 2019 through October 31, 2019, the Recipient Rights Office received 35 complaints consisting of 45 allegations and also completed 33 previously pending complaints consisting of 45 allegations.
2. Office of Recipient Rights Annual Report – Fiscal Year 2019 (October 1, 2018 – September 30, 2019)

Each year, the Executive Director shall submit to the Board of Directors an Annual Report prepared by the Office of Recipient Rights on the current status of rights protection. This report must then be submitted to the Department by December 30, 2019.

Ms. Delor provided an overview of the fiscal year 2019 Annual Report. She reported we served 4,674 individuals (unduplicated count), we received one request for an appeal upon completion the RRAC upheld the findings of the ORR. During FY 19 the Recipient Rights Office had the equivalent of 2.5 full-time employees supporting the Office of Recipient Rights.

Ms. Delor reported that during fiscal year 2019 the Office of Recipient Rights received 154 complaints consisting of 196 allegations. The Office of Recipient Rights investigated 179 allegations and 81 substantiated allegations. Eighty-one remediation plans were received by the Office of Recipient Rights.

Ms. Delor reported that during fiscal year 2019 the Office of Recipient Rights provided training to 1,305 staff members/volunteers. The staff members of the Office of Recipient Rights received a combined total of 111 hours of continuing education credits.

In reviewing the progress on the fiscal year 2019 Outcomes, Ms. Delor stated that the first outcome is ongoing and the other two outcomes were accomplished. She noted that Outcome 1, develop a state-wide registry specific to allegations of abuse and neglect, is going to be difficult to achieve. Mr. Priemer questioned the road blocks for achieving the state registry. Ms. Delor stated the main roadblock is the current complaint investigation process does not include an appeal option for the accused staff member/volunteer, which makes it difficult for the MDHHS-ORR to support such a registry. By not having an appeal process in place you are taking away their right to due process. Ms. Delor stated other agencies have language that provides for registries, such as Licensing and Protective Services, and this language could be adopted for the Rights community. Ms. Delor stated this would require an amendment to the Mental Health Code.

Fiscal Year 2020 Desired Outcomes for the ORR: 1) The Office of Recipient Rights will work in collaboration with the Contract Management Department, Data Department, Finance Department, and Nursing Department to develop and present a training that identifies the specific to the roles and responsibilities of residential providers. 2) The Office of Recipient Rights will work in collaboration with the Home and Community Based Services Department and Licensing and Regulatory Affairs-Bureau of Community Health Systems to ensure all residential providers understand the Home and Community Based Services Rules and how these rules align with the Mental Health Code and Licensing rules. 3) The Office of Recipient Rights will continue to work to develop a statewide registry to capture data specific to substantiated allegations of Abuse: Class I, Abuse: Class II, Neglect: Class I, and Neglect: Class II which will be accessible by all Offices of Recipient Rights in the State of Michigan.

In reviewing the recommendations to the SCCCMHA Board, Ms. Delor stated that the Advisory Committee recommends the following: 1) The Board of Directors continues to support the development of a statewide registry to capture the names of the staff members/volunteers with substantiated recipient rights violations in the categories of Abuse (I & II) and Neglect (I & II). This registry would be accessible by all Offices of Recipient Rights in the State of Michigan. 2) The Board of Directors continues to designate adequate funding for the operation of the Office of Recipient Rights, to include funding for staffing at a minimum level of 2.5 full-time employees, as well as adequate funding for training and prevention efforts. 3) The Board of Directors continues to support the monitoring of contracted service sites on an annual basis, and as often as needed for the Office of Recipient Rights to fulfill its monitoring function, which may include conducting site visits during non-traditional business hours.

It was moved by Mr. Armstrong, seconded by Mr. Essian, to move the Office of Recipient Rights Annual Report to an Item for Action, as presented. **MOTION CARRIED**

It was moved by Ms. Jowett-Lee, seconded by Ms. Priemer, to approve the Office of Recipient Rights Annual Report, as presented. **MOTION CARRIED**

**B. October Funding Bucket Report and Financial Statement**

Presented by Ms. Farr was the October Funding Bucket Report. She reported that:

- Year-to-Date Expenditures are running approximately \$177,000 over the Original Budget
- Payroll costs are running approximately \$43,000 over the Original Budget
- Contractual costs are running approximately \$64,000 over the Original Budget, mainly in Autism department
- Non-OASIS Contracted Services are \$10,000 under budget
- Residential, Supported Housing and Self Determination are running approximately \$62,000 under the Original Budget
- Contracted Outpatient expenditures are running approximately \$12,000 over the Original Budget
- Hospitals are running approximately \$156,000 over the Original Budget
- Technology, Software, Network expenditures and building related expenditures are collectively running approximately \$65,000 under the Original Budget

For the Region 10 PIHP Contract Funding:

- YTD Medicaid Expenditures are running approximately \$86,000 over the Original Budget, with a YTD Deficit of approximately \$36,000.
- YTD MHP Expenditures are running approximately \$132,000 over the Original Budget, with a YTD Deficit of approximately \$181,000.

The total YTD Net Deficit due from Region 10 PIHP is approximately \$217,000

ST. Clair CMH GF Contract

- YTD GF Expenditures are running approximately \$11,500 over the Original Budget with a YTD deficit of approximately \$12,800 covered by CCBHC
  - YTD COFR Expenditures are running approximately \$19,200 under the Original Budget. Deficit spending of approximately \$7,200 covered by Medicaid.
- The total YTD Net Surplus for St. Clair CMH GF Contract funding is \$0.

ST Clair CMH Other Funding

- YTD Expenditures for Earned Contracts are running approximately \$4,200 under the Original Budget.
- YTD Local / Other Expenditures are running approximately \$15,000 under the Original Budget, with a surplus of approximately \$30,000.
- YTD CCBHC Expenditures are running approximately \$2,300 under the original Budget. Redirected SUD deficit of \$2,500 is being covered by CCBHC funding.
- YTD SUD Expenditures are running approximately \$11,000 under the Original Budget, with a YTD deficit of \$2,500 which is covered by CCBHC.

Ms. Jowett-Lee questioned if SCCCMHA has services in place to lower the hospital costs. Ms. Farr stated that historically hospital admissions run higher in the first quarter. Ms. Gallagher stated that it is currently high risk individuals who are being placed in the hospital. All of our individuals who are placed at the hospital during regular business hours has a screening done by the Mobile Crisis Unit Prior to being admitted. A step down program is currently being looked into that would offer support at a level less than the ACT Team but more than Outpatient. Ms. Johnson stated that McLaren did have a recent reduction in their

number of beds on the Mental Health Unit resulting in out of county hospital placements when necessary. It is expected that McLaren will increase their number of beds in January.

Ms. Farr is going to arrange to meet with Mr. Schieweck independently to promote further understanding related to the budget and terminology utilized within the report.

C. Program Operations – K. Gallagher/D. Johnson

A video created by EBW TV that highlights SCCCMHA's new Children's Building and services offered was played. The video offered a tour of the new Children's Building and Ms. Johnson spoke to what the new space would provide for our individuals and to services offered by SCCCMHA.

1. Agency In-Service (12/13/2019)

The agency will be closed for the All Staff Agency In-Service on December 13, 2019.

2. Overview of New Groups

Ms. Gallagher spoke to the new groups and Evidence Based Practices offered related to insomnia, depression and living with chronic health conditions. Expanding our wellness efforts to include a dietitian is also in process.

3. Spravato Update

Ms. Gallagher reported that we have been approved for our first person to begin Spravato Treatment. That will be starting in the next two to three weeks.

Dr. Saeed has begun using an injectable form of Suboxone called Sublocade. For those who have difficulty taking the Suboxone as prescribed the injectable version can be a better option.

3. Liberty House

Liberty House located on Lincoln is scheduled to open in January. Liberty House will offer six more beds for adults. The group home license has gone into the state. Renovations are going well.

4. MSW Incentive Program: Tuition Reimbursement -

To attract MSWs SCCCMHA is offering MSW Tuition Reimbursement. Staff who enter into an agreement for tuition reimbursement will be required to work for SCCCMHA a determined number of years.

5. Employee & Team of the Month: September

*Employee of the Month for August was Ms. Katlyn Sienkiewicz. Ms. Sienkiewicz was nominated for consistently demonstrating exceptional organizational and administrative skills as well as her positive outlook. Most recently Ms. Sienkiewicz was instrumental in ensuring*

CMH's transition to a new HR platform. For her enthusiasm, positivity, and can-do outlook, Ms. Sienkiewicz was named SCCCMH's September Employee of the Month.

*Team of the Month for August was the Capac Habitat for Humanity Build Team.* St. Clair County Community Mental Health staff was recently given the opportunity to form teams including individuals who receive mental health services and participate in a Habitat for Humanity Build. Capac staff rallied together to create a team including creating a team name, developing a motto, and created bibs with the team name and motto for all participants to display on their shirts. The team secured a CMH van and all car pooled together for the event. For their enthusiasm, dedication, and teamwork, the Wiley Westerners were named SCCCMH's September's Team of the Month.

D. Personnel Policies for Review:

1. Harassment in the Workplace

Policy 06-001-0105 Personnel: Harassment in the Workplace was presented by Ms. Johnson for review. Ms. Johnson noted that language changes have taken place under IV. Standards: B. The standard reads that all complaints of harassment of any kind will be promptly reported. This language change will hopefully encourage employees to report harassment allegations in a timely fashion allowing for thorough investigation to take place. Supervisors will be participating in a training on December 12<sup>th</sup> provided by Todd Shoudy of Fletcher, Fealko, Shoudy & Fancis Law Firm regarding this policy. A complaint form has been added to the policy to assist staff with filing a harassment complaint.

2. Corrective/Disciplinary Action

Policy 06-001-0055 Personnel: Corrective/Disciplinary Action was presented by Ms. Johnson for review. Ms. Johnson noted that revisions to the policy have taken place to make the disciplinary action process more clear. Suggested Guidelines of Recommended Levels of Discipline have been included.

3. Leaves of Absence: FMLA

Policy 06-001-0040 Personnel: Leaves of Absence: FMLA was presented by Ms. Johnson for review. It was not previously included in the policy that an employee who is utilizing FMLA needs to report their number of leave hours to the Human Resources Manager at the end of each pay period. This language has been added to the policy. The employee utilizing FMLA will also be given a directive stating this information at the time their leave begins.

All three of the above listed polices have had legal review reviewed and utilize the language recommended by the attorney. As such it was requested that the above listed polices be moved up for action and approved. Any employee feedback received after the polices distribution to staff will be considered.

It was moved by Mr. Armstrong, seconded by Mr. Essian, to move the Personnel Polices for Review to an Item for Action, as presented. **MOTION CARRIED**

It was moved by Ms. Ames, seconded by Mr. Essian, to approve the Personnel Polices for Review, as presented. **MOTION CARRIED**

E. Region 10 Update

1. Board Meeting (10/18/19) – E. Priemer

Mr. Priemer stated that the Region 10 Board Meeting Minutes presented properly reflect the October 18, 2019 meeting. The meeting included discussion surrounding a recent audit. Region 10 will be ensuring monitoring to validate that the plan of correction related to the audit is being implemented and followed by all applicable agencies.

The next meeting of the PIHP Board is December 20<sup>th</sup>.

IX. DIRECTOR'S REPORT – D. Johnson

An article related to a big question right now, is “Is Opioid use subsiding?” was included. Ms. Johnson stated that that is difficult to tell. With the utilization of Narcan/Naloxone in instances of overdose, individuals do not necessarily have to go to the hospital. SCCCMHA efforts related to Opioid use will continue.

We have a contract established with Ms. Amy Kzyonsek, Psychiatric Nurse Practitioner which was a much need position to fill in order to support the individuals that receive SCCCMHA services.

Recent discussions and outreach efforts have been made to the St. Clair County Health Department. The Health Department recently received prevention funding and has been utilizing it to provide services within local schools. SCCCMHA would very much like to partner with the Health Department in this and support their efforts.

SCCCMHA will be piloting Mental Health Groups at Memphis Schools.

RESA recently received 31N funding which allows for school based Mental Health Services. SCCCMHA will continue to meet with RESA to collaborate.

Ms. Johnson shared that she recently attending a Youth Advisory Council Meeting. Resources of the YAC will be focused in part on Mental Health Services for youth. Ms. Johnson offered SCCCMHA as a resource for this group.

A. Community Education/Public Relations & Upcoming Trainings

Highlights included:

- The Great Grocery Gift is currently taking place. CMH is partnering with Mid City Nutrition program and other local non-profits to collect and distribute bags of non-perishable food items to people in need, many of whom use CMH services. People looking to participate in the give can pick up a reusable grocery bag up at SCCCMHA and fill the bag with items listed on the attached list. Another option is picking up a prefilled grocery bag from the Sail In Café. Total cost of items needed to fill the bag is around \$30.00.
- Soup Kitchen Santa will take place on December 23<sup>rd</sup> at Mid City Nutrition. Santa will visit the Soup Kitchen and have stockings for the kids and bags of food from the Great Grocery Gift for the adults.
- The play “Fairy Tale Misfits” took place November 8 & 9, 2019 at the Citadel Stage. Ms. Johnson reported that the play was very successful but we may need to look at a more accessible venue for next year.



- The CSCB Annual Report was provided for review. The report includes information, goals, and achievements of the CSCB for FY 2019. Ms. Amy Smith was recognized with the 2019 Community Collaborative Award in honor of her many years furthering and growing the goals of the CSCB.

Provided was the listing of Upcoming Trainings for Board members consideration. If interested please contact Ms. Tammy Lake at Administration to register

B. Community Mental Health Association Business

1. Weekly Update – No update
2. Winter Conference

The Winter Conference will be taking place February 3, 2020 through February 5, 2020. If anyone is interested in attending the Winter Conference please contact Lori Gauthier or Tracy Goyette.

C. Strategic Planning Process

Ms. Johnson reported that SCCCMHA is currently looking into TBD Solutions to assist with our strategic planning process. TBD Solutions is extremely knowledgeable and have been successful in working with other CMHs.

X. BOARD FORUM

A. Advisory Council Meeting Minutes (10/30/19)

Provided for information were the October 30, 2019 Advisory Council Meeting minutes. Raising awareness of CMH Services and all that CMH has to offer was discussed. Radio testimonials and getting a variety of different ads out to the public was suggested. Possible hurdles with accessing services were discussed.

XI. ANY OTHER BUSINESS TO PROPERLY COME BEFORE THE BOARD – none

XII. ADJOURNMENT

It was moved by Ms. Bligh, seconded by Ms. Jowett-Lee, to adjourn. **MOTION CARRIED.** With no further business to discuss the meeting was adjourned at 7:14 pm.

Respectfully submitted,

Tracy Goyette  
Recording Secretary