

LENAWEE-LIVINGSTON-MONROE-WASHTENAW
OVERSIGHT POLICY BOARD

VISION

"We envision that our communities have both an awareness of the impact of substance abuse and use, and the ability to embrace wellness, recovery and strive for a greater quality of life."

AGENDA

April 26, 2018

**705 N. Zeeb Road, Ann Arbor
Patrick Barrie Conference Room
9:30 a.m. – 11:30 a.m.**

1. ***Introductions & Welcome Board Members***– 5 minutes
2. Approval of Agenda (Board Action) – 2 minutes
3. Approval of March 23, 2018 OPB Minutes {Att. #1} (Board Action) – 5 minutes
4. Audience Participation – 3 minutes per person
5. Old Business – 20 minutes
 - a. Finance Report {Att. #2} (Board Action) – 15 minutes
6. New Business – 35 minutes
 - a. Presentation – Work-it Health – 35 minutes
 - b. {Att. #5} Mini-grant update – 5 minutes
7. Report from Regional Board (Discussion) – 15 minutes
 - a. {Att. #3} 4-11-18 Contract amendments
 - b. {Att. #4} CMHPSM Board Policy Manual
8. SUD Director Updates (Discussion) – 10 minutes
 - a. STR site visit/update
 - b. State Licensing Rules update
 - c. County updates

Next meeting: May 24, 2018

Parking Lot:

**LENAWEE-LIVINGSTON-MONROE-WASHTENAW
OVERSIGHT POLICY BOARD
March 22, 2018 meeting
705 N. Zeeb Road
Ann Arbor, MI 48103**

Members Present: David Oblak, Dianne McCormick, William Green, Tom Waldecker, Dave O'Dell, John Lapham, Charles Coleman, Amy Fullerton, Kim Comerzan, Blake LaFuente, Ralph Tillotson, Mark Cochran

Members Absent: Monique Uzelac, Susan Webb

Guests: Vicky Loveland

Staff Present: Stephannie Weary, Marci Scalera, Dana Darrow, Suzanne Stolz (phone)

A. D. Oblak called the meeting to order at 9:30 a.m.

1. Introductions
2. Approval of the agenda

Motion by M. Cochran, supported by W. Green, to approve the agenda
Motion carried

3. Approval of the January 24, 2018 OPB Minutes

Motion by D. McCormick, supported by C. Coleman, to approve the January 24, 2018 OPB minutes
Motion carried

4. Audience Participation
) None

5. Old Business

- a. Finance Report

) D. Darrow presented. Discussion followed.

) M. Scalera provided an STR grant update. Some of the programs aren't up and running yet, which is the reason for some of the high balances for some of the STR budget lines.

6. New Business

- a. Mini-grant requests

) M. Scalera provided a list of mini-grants that were requested and approved.

) Lenawee has a heroin summit coming up, at which the PIHP is providing Narcan training.

- b. Dashboard Report

) OPB reviewed the dashboard report.

) M. Scalera promised a better report for next quarter.

) K. Comerzan requested to also see the dashboard graphs by county.

c. Engagement Center Information

) M. Scalera provided an Engagement Center comparison data report.

) Amy reported that meth is making a resurgence in Lenawee.

7. SUD Director Report

) M. Scalera provided an overview of the budget shortage being experienced on the mental health side.

) M. Scalera provided an STR Grant update.

) Project Stop (Narcan) is rolling along very well.

) Root Program (Recovery Opioid Outreach Team), the goal: whenever there's a save in Washtenaw they send a peer to the hospital to follow-up with the person. It's up and running, but there are barriers: 1) hospitals aren't forthcoming with every referral that comes through; 2) not all police officers notify the ROOT team of their intervention.

) The program that is managing pregnant, opiate-addicted women in Monroe and Washtenaw is going well.

) The program that places peers in drug courts is also going well.

8. Adjourn

Motion by K. Comerzan, supported by M. Cochran, to adjourn
Motion carried

) Meeting adjourned at 11:05 a.m.

Community Mental Health Partnership Of Southeast Michigan
SUD SUMMARY OF REVENUE AND EXPENSE BY FUND
 February 2018 FYTD

Summary Of Revenue & Expense	Funding Source				Total Funding Sources
	Medicaid	Healthy Michigan	SUD - Block Grant	SUD-COBO/PA2	
Revenues					
Funding From MDCH	\$ 954,974	\$ 1,746,705	\$ 2,513,799		\$ 5,215,478
PA2/COBO Tax Funding	\$ -	\$ -	\$ -	\$ 760,872	\$ 760,872
Other	\$ -	\$ -	\$ -	\$ -	\$ -
Total Revenues	<u>\$ 954,974</u>	<u>\$ 1,746,705</u>	<u>\$ 2,513,799</u>	<u>\$ 760,872</u>	<u>\$ 5,976,350</u>
Expenses					
Funding for County SUD Programs					
Lenawee	\$ 119,668	\$ 230,789	\$ 188,879	\$ 37,011	\$ 576,346
Livingston	\$ 85,248	\$ 157,380	\$ 396,872	\$ 85,675	\$ 725,175
Monroe	\$ 117,550	\$ 212,469	\$ 336,454	\$ 64,947	\$ 731,419
Washtenaw	\$ 517,126	\$ 1,141,078	\$ 1,064,068	\$ 236,730	\$ 2,959,001
Total SUD Expenses	<u>\$ 839,591</u>	<u>\$ 1,741,715</u>	<u>\$ 1,986,272</u>	<u>\$ 424,362</u>	<u>\$ 4,991,941</u>
Other Operating Costs					
SUD HICA Claims Tax	\$ 7,162	\$ 13,100	\$ -	\$ -	\$ 20,262
Total Operating Costs	<u>\$ 7,162</u>	<u>\$ 13,100</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 20,262</u>
Administrative Cost Allocation	<u>\$ 44,898</u>	<u>\$ 93,143</u>	<u>\$ 138,187</u>	<u>\$ -</u>	<u>\$ 276,228</u>
Total Expenses	<u>\$ 891,652</u>	<u>\$ 1,847,958</u>	<u>\$ 2,124,459</u>	<u>\$ 424,362</u>	<u>\$ 5,288,431</u>
Revenues Over/(Under) Expenses	<u>\$ 63,322</u>	<u>\$ (101,253)</u>	<u>\$ 389,340</u>	<u>\$ 336,510</u>	<u>\$ 687,919</u>

			Revenues Over/(Under) Expenses
	Revenues	Expenditures	
<u>PA2 by County</u>			
Lenawee	61,341	37,011	24,330
Livingston	186,703	85,675	101,028
Monroe	132,599	64,947	67,652
Washtenaw	380,229	236,730	143,499
Totals	<u>\$ 760,872</u>	<u>\$ 424,362</u>	<u>\$ 336,510</u>

Unallocated PA2	<u>Beginning Balance</u>
Lenawee	961,376
Livingston	2,646,564
Monroe	708,058
Washtenaw	2,583,425
Total	<u>\$ 6,899,423</u>



Regional Board Action Request – Contracts

Board Meeting Date: April 11, 2018

Action(s) Requested: Approval of the contracts, agreements and/or amendments listed below.

Organization - Background	Term / Type	Amount / Funding Source
<p>Lenawee CMH – Contractual amendment to increase the SUD core provider net cost contract funding level for Lenawee CMH. Lenawee CMH has seen an increase in the medically necessary SUD services in Lenawee mostly centered around Medicaid Assisted Treatment (MAT) services. The CMHPSM-Lenawee core provider contract is cost settled at the end of the fiscal year. This amendment reflects the estimated SUD increased service costs in Lenawee county.</p>	<p>10/1/2017 – 9/30/2018 <i>Amendment</i></p>	<p><i>Increase annual net cost contract from \$1,025,728 to \$1,630,268.</i> <i>Medicaid, HMP, Block Grant & PA2 based on consumer eligibility.</i></p>
<p>Livingston CMH – Contractual amendment to increase the SUD core provider net cost contract funding level for Livingston CMH. Livingston CMH has seen an increase in the medically necessary SUD services in Livingston mostly centered around Medicaid Assisted Treatment (MAT) services. The CMHPSM-Livingston core provider contract is cost settled at the end of the fiscal year. This amendment reflects the estimated SUD increased service costs in Livingston county.</p>	<p>10/1/2017 – 9/30/2018 <i>Amendment</i></p>	<p><i>Increase annual net cost contract from \$786,900 to \$1,157,271.</i> <i>Medicaid, HMP, Block Grant & PA2 based on consumer eligibility.</i></p>

Recommend: Approval



Community Mental Health Partnership of Southeast Michigan

Board Governance Policy Manual

POLICY TABLE OF CONTENTS

- 1. Mission and Values**
 - 1.0 Mission, Vision and Values
 - 1.1 Bylaws and Policy Review and Amendment

- 2. CEO Responsibilities**
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 - 2.3 Compensation and Benefits
 - 2.4 Financial Policies
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- 3. Governance Process**
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 - 3.1 Board Responsibilities/Duties
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 - 3.3 Board Chair's Role
 - 3.4 Policy Review and Amendment
 - 3.5 Cost of Governance

- 4. Board-CEO Linkage**
 - 4.0 Governance-Management Connection
 - 4.1 CEO's Responsibilities
 - 4.2 Monitoring CEO Performance

Section 1: *MISSION, VISION AND VALUES*

1.0 *MISSION/VISION AND VALUES*

The Mission/Vision and Values of the CMHPSM are:

Mission: To provide quality behavioral healthcare that promotes recovery and wellness, fosters resilience and supports self-determination and empowerment so that individuals served in the four county region that comprises the CMHPSM are successful in achieving their personal goals and dreams.

Vision: The CMHPSM will be a comprehensive system of care working in an integrated fashion with substance abuse and primary healthcare systems so that the care and services provided better meet consumer needs in a more efficient and cost effective manner

Values:

-) Respect the diversity of our communities and the people we serve
-) Zero Tolerance for stigma
-) Coordinated and continuous care between and across healthcare systems and providers
-) Meaningful partnerships with consumers and community stakeholders
-) Learning organization disciplines of systems thinking, team learning, shared vision, personal mastery, and mental models
-) Data based decision making
-) Innovation and creativity
-) Provision of the best quality services to the most people at the best cost

1.1 *BYLAWS AND POLICY REVIEW AND AMENDMENT*

The Board will review the regional mission, vision, and values statements for relevance to current needs and interest of the four county partners at least every two years. The Board will ensure stakeholder involvement in the review of the mission/vision and values.

Section 2: CEO RESPONSIBILITIES

2.0 EXECUTIVE RESPONSIBILITIES

The CEO shall ensure that all practices, activities, decisions, and/or organizational circumstances shall be lawful, prudent and in compliance with commonly accepted business and professional ethics. The CEO will recommend either new or revised Board Governance policies to address areas of non-compliance.

2.1 TREATMENT OF CONSUMERS

With respect to interactions with and services provided to consumers or those applying to be consumers, the CEO shall ensure the CMHPSM has an established process that is followed to monitor conditions and procedures employed across the four county region so that services and supports are provided in a manner that is dignified, respectful, appropriate, not unnecessarily intrusive, and promotes safety. The manner in which services and supports are provided shall be in accordance with the CMHPSM Mission and Vision statements.

2.2 TREATMENT OF STAFF

The CEO shall promote conditions for the staff that are fair, dignified, respectful, organized, and clear.

Further, by way of example, but not limited to the following:

1. Operate with written personnel rules which: (a) clarify rules for staff, (b) provide for effective handling of grievances, and (c) protect against wrongful conditions, such as nepotism and preferential treatment for personal reasons.
2. Have a process for exit interviews and staff satisfaction surveys.
3. Ensure each employee of the CMHPSM shall have due process in the event of an adverse disciplinary action.
4. Within fiscal constraints, provide necessary resources to staff for the performance of their job duties.
5. Staff shall have annual performance appraisals.

2.3 COMPENSATION AND BENEFITS

The CEO shall administer board approved competitive compensation and benefits.

2.4 FINANCIAL POLICIES

The CEO shall ensure the financial policies and practices of the CMHPSM meet state and federal

requirements and are compliant with Generally Accepted Accounting Practices (GAAP).

Further, by way of example, but not limited to the following:

1. Financial Policies and amendments related to:
 - A. Procurement—approved 2014
 - B. Investments—approved 2014
 - C. CEO Scope of Authority—approved 2014
 - D. CEO Authority for Position Control—approved 2014
 - E. Financial Risk Management—in development

shall be approved by the Board.

2. The CEO and CFO shall review the financial policies annually and make recommendations to the Board for amendments when needed.

2.5 EMERGENCY CEO SUCCESSION

To protect the CMHPSM from sudden loss of CEO Services, the CEO shall have no fewer than two other executives familiar with Board and CEO issues and processes.

2.6 COMMUNICATION AND SUPPORT TO THE BOARD

The CEO shall keep the Board informed and supported in its work.

Further, by way of example, but not limited to the following:

1. Submit monitoring data required to the Board (see policy on Monitoring CEO Performance) in a timely, accurate, and understandable fashion, directly addressing provisions of Board Policies being monitored.
2. Keep the Board informed of relevant trends, anticipated adverse media coverage, threatened or pending lawsuits and material external and internal changes, particularly changes in the assumptions upon which any Board Policy has previously been established.
3. Advise the Board if, in the CEO'S opinion, the Board is not in compliance with its own policies on Governance Process and Board – CEO Linkage, through the Board Chair.
 - a) If there is a breakdown in the relationship between the Board Chair and the CEO, the CEO shall inform the full CMHPSM Board of the breakdown.
 - b) In the event the CMHPSM Board is unable to resolve the issues, the leadership of the CMHSPs that appoint the CMHSP members to the CMHPSM Board shall meet to address the issues and develop recommendations for the CMHPSM Board to act upon.

4. Marshal for the Board information from as many staff and external perspectives, on issues and options as needed for fully informed Board choices.
5. Provide a mechanism for official Board communications.
6. The CEO shall provide a compliance report to the Board at least annually and any time there are any violation at either the CMHPSM or the CMHSPs. This report shall include a review of the implementation of operational policies to ensure that areas of noncompliance are identified and addressed before the noncompliance results in sanctions from regulatory bodies.
7. Report in a timely manner an actual or anticipated noncompliance with any Board Policy.

2.7 REGIONAL RESOURCES

The CEO shall be informed and take advantage of collaboration, partnerships and innovative relationships with agencies and organizations, including state, regional and county specific resources. The CEO shall also stay abreast of current affairs as they apply to this industry through conferences and seminars.

Section 3: GOVERNANCE PROCESS

3.0 GOVERNING STYLE

The Board will govern with an emphasis on (a) outward vision, (b) diversity in viewpoints, (c) strategic leadership, (d) clear distinction of Board and CEO roles, (e) collective rather than individual decisions and, (f) proactivity.

The Board must insure that all divergent views are considered in making decisions, yet must resolve into a single organizational position. Once a decision is made the Board must speak in one voice publicly.

Accordingly:

1. The Board will establish written policies reflecting the Board's values and perspectives. The Board's major policy focus will be on the intended long-term impacts outside the organization, not on the administrative or programmatic means of attaining those effects.
2. The Board will enforce discipline whenever needed. Discipline will apply to matters such as attendance, preparation for meetings, violation of policies, and disrespect for roles.
3. Continual Board development will include orientation of new Board Members and periodic Board discussion of process improvement.
4. The Board will listen respectfully to citizen comments and assure that an internal process is in place to follow up on the concerns expressed.

3.1 BOARD RESPONSIBILITIES/DUTIES

The Board will ensure appropriate organizational and CEO performance and promote a link between the regional community and the CMHPSM.

Further, by way of example, but not limited to the following:

1. Meetings
 - (a) Attend Board meetings
 - (b) If unable to attend Board meetings provide advance notice to the CEO and Board Chair
 - (c) Be prepared and on time
 - (d) Listen with an open mind
 - (e) Participate in discussion and encourage dialogue
 - (f) Make decisions in the best interest of the PIHP region
 - (g) Speak with one voice after a decision has been made
2. Board Member Personal Development
 - (a) Complete Board orientation and training
 - (b) Commit to ongoing development of Board Member skills
3. Operational Policies
 - (a) Relevant operational policies applicable to the Board are included by reference (i.e. CMHPSM Travel Expense Reimbursement Policy)

3.2 BOARD MEMBER ETHICS

The Board commits itself and its members to ethical, businesslike, and lawful conduct, including proper use of authority and appropriate decorum when acting as Board Members.

Further, by way of example, but not limited to the following:

1. Operate with the best interest of the PIHP region in mind.
2. Recuse from conflict of interest.
3. Board Members will not use their board position to obtain employment in the organization for themselves, family members, or close associates. Should a Board Member apply for employment, he or she must first resign from the Board.
4. Board Members shall not attempt to exercise individual authority over the organization.
5. The Board will not evaluate, either formally or informally, any staff other than the CEO.
6. Board Members will respect confidentiality.

3.3 BOARD CHAIR'S ROLE

The Board Chair assures the integrity of the Board's process and, represents the Board to outside parties. The Board Chair has no authority to make decisions about policies created by the Board nor authority to supervise or direct the CEO.

3.4 POLICY REVIEW AND AMENDMENT

1. The Board Bylaws and Board Policies shall be reviewed in April of every year.
2. Board Policies may be suspended, rescinded, or amended by 3/4 of the serving membership and will be superseded by any change in federal or state law.

3.5 COST OF GOVERNANCE

The Board will invest in its governance capacity.

Accordingly:

1. Board members shall be compensated at the rate of the appointing CMHSP per meeting for attendance at all Board meetings, assigned committee meetings, workshops, required training, and other Board approved functions. Board members are entitled to one meeting allowance per day.
2. Travel expenses shall be reimbursed by the appointing CMHSP
3. The Board shall be informed of its budget and expenses.

Section 4: BOARD-CEO LINKAGE

4.0 GOVERNANCE-MANAGEMENT CONNECTION

The Board shall appoint a CEO of the Community Mental Health Partnership of Southeast Michigan who meets the standards of training and experience established by the Michigan Department of Health and Human Services (MDHHS). The Board shall establish general policy guidelines within which the CEO shall execute the duties and responsibilities of a Pre-Paid Inpatient Health Plan as required by state and federal laws, rules, regulations, and the Medicaid Specialty Supports and Services contract with the MDHHS.

4.1 CEO'S RESPONSIBILITIES

The CEO of the CMHPSM shall function as the chief executive and administrative officer of the PIHP and shall execute and administer the program in accordance with the approved annual plan and operating budget, the general policy guidelines established by the Board, the applicable governmental procedures and

policies, and the provisions of the Mental Health Code. The CEO has the authority and responsibility for supervising all employees. The terms and conditions of the CEO's employment, including tenure of service, shall be as mutually agreed to by the Board and the CEO and shall be specified in a written contract.

4.2 MONITORING CEO PERFORMANCE

There will be systematic and objective monitoring of the CEO's job performance and achievement of organizational goals as agreed upon.

Adopted the 8th of June 2016

Board Chairperson

Date

Board Secretary

Date

CMHPSM SUD MINI-GRANT REQUEST/REPORT

Funding reserved per county \$5000

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DATE	PROVIDER	AMOUNT REQUESTED	PROGRAM DESCRIPTION	COUNTY	COUNTY BALANCE REMAINING
11/30/17	Unite to Face Addiction	\$500	Reality Tour	Washtenaw	\$4500
1/12/18	Dawn Farm, HNV, WCCMH	\$919	CommUNITY: Training for SUD provider staff and CMH staff on joint services and coordination	Washtenaw	\$3581
2-25-18	Wake Up Livingston	\$744	2018 National Rx Drug Abuse & Heroin Summit	Livingston	\$4256
3/2/18	Washtenaw Harm Reduction Conference planning group	\$1,000	Requesting support for the pre-conference speaker	Washtenaw	\$2,581
4/20/18	Wake up Livingston	Additional \$735.37	Travel and hotel costs were more than estimate	Livingston	\$3520.63