MONROE COMMUNITY MENTAL HEALTH AUTHORITY
REGULAR BOARD MEETING
April 25, 2018 – 5:30 p.m.
Draft Agenda

BOARD VALUES:

1.1 Monroe Community Mental Health Authority is the provider of choice for Monroe County by offering the highest quality of treatment with measured results, while maintaining flexibility of treatment at competitive rates.
1.2 Units of service costs are competitive with the private insurance rates.
1.3 Provide treatment with evidence of measurable results that produce positive outcomes.
1.4 Relationships have been developed with community partners that makes us their provider of choice.

MISSION STATEMENT:

The mission of the Monroe Community Mental Health Authority is to provide quality mental health care in partnership with consumers and our community to enrich lives and promote wellness.

		Guide
I.	**Call to Order**	**1 min**
II.	**Roll Call**	**2 min**
	a. Welcome Andrew Hoppert, John Burkardt, and Kandie Collier as new members of the MCMHA Board of Directors	
III.	**Pledge of Allegiance**	**2 min**
IV.	**Motion to Adopt the Agenda as Presented**	**2 min**
V.	**Motion to Approve the Minutes of the February 28, 2018 Regular Meeting and Waive the Reading Thereof**	**2 min**
VI.	**Feedback Summary** *(handout)*	**5 min**
VII.	**Citizen Comments**	**3 min/person**

"The Board will listen respectfully to any comments you would like to make, but will not respond directly tonight. You can expect a follow up contact from the Executive Director or her representative within 24 hours if your comment is about a specific problem or complaint. Comments shall be limited to 3 minutes".

VIII. Purpose of the Monroe Community Mental Health Authority **2 min**
(Vision: That people are empowered and supported to reach their maximum potential)

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 on an issue before action is taken.
d. Seek to understand before becoming understood.
e. Seek to do no harm.

Board Concerns
a. Executive Director and Organization Evaluation
b. Organizational Sustainability and Budget Funding
c. Sustain Delivery of High Quality Service

a. The Next Board Workshop is scheduled for Saturday, June 16, 2018 from 9am-12pm.

IX. Presentations Recognitions, and Celebrations **15 min**
a. Recognition for CRCT Implementation

LJ/dp

X. Board Committee Reports **2 min**

- **a. Motion to Place on File All Written Committee Reports**
  - i. Executive
  - ii. Finance
  - iii. Program & Planning
- **b. Motion to Appoint the Nominating Committee**

XI. Items for Board Action **10 min**

- **a. Motion to Approve the Consent Agenda Less Item _____**
  - i. Administrative Contracts as Presented
- **b. Motion to Accept the FY2017 Financial Audit as Presented at the Board Finance and Facilities Committee Meeting on Wednesday, April 18, 2018**
- **c. Motion to Approve up to Three Board Members to Attend the MACMHB Spring Conference Beginning on Monday, April 30, 2018 through Wednesday, May 2, 2018 in Novi, Michigan**

XII. Relationship with the Region, County, and Others **2 min**

- **a.** Regional Reports
  - i. Regional PIHP Board Meeting Minutes
- **b.** MACMHB Committee Reports
  - i. Executive
  - ii. Legislative & Policy

XIII. Items from the Executive Director **10 min**

- **a.** Financial Report
- **b.** Executive Director's Report *(handout)*

XIV. New Business **5 min**

XV. Citizen Comments **3 min/person**

XVI. Announcements by Board Members **1 min/person**

XVII. Adjournment **1 min**

The next scheduled Regular Meeting is 5:30pm, Wednesday, May 23, 2018 in the Monroe Community Mental Health Authority Aspen Room.

4/18/18, 3:19 p.m.

LJ/dp

BOARD OF DIRECTORS REGULAR MEETING MINUTES
February 28, 2018

Present: Charles Londo, Chairperson; Sandy Libstorff, Vice Chairperson; Bill Henning, Secretary; David Stephens; Jim Neumann; and Susan Fortney

Excused: Gloria Rafko, Pam Ray, and Rusty Shorter

Unexcused:

Staff: Lisa Jennings

Guests: 3 guests were present

I. CALL TO ORDER

The Board Chairperson, Charles Londo, called the meeting to order at 5:30 p.m.

II. ROLL CALL

The Roll Call confirmed a quorum existed.

III. PLEDGE OF ALLEGIANCE

The Pledge of Allegiance was led by Charles Londo.

IV. CONSIDERATION TO ADOPT THE DRAFT AGENDA AS PRESENTED

Susan Fortney moved to adopt the draft agenda as presented. Jim Neumann supported. Motion carried unanimously.

V. CONSIDERATION TO APPROVE MINUTES

Sandy Libstorff moved to approve the minutes of the January 24, 2018 Regular Meeting and waive the reading thereof. Bill Henning supported. Motion carried unanimously.

VI. FEEDBACK SUMMARY

Charles Londo reviewed the January Board Feedback Summary.

VII. CITIZEN COMMENTS

Lacie Schiller commented on the need for community awareness for Autism and services available at Monroe Community Mental Health Authority. The Wraparound program has been very helpful to her family.

VIII. PURPPOSE OF THE MONROE COMMUNITY MENTAL HEALTH AUTHORITY

a. Next scheduled Board Workshop is for Saturday, May 19, 2018 from 9:00am to 2:00pm.

IX. PRESENTATIONS, RECOGNITIONS, AND CELEBRATIONS

a. FY2016-2017 CMHPSM Annual Submission – Lisa Jennings commented that the Mental Health Code requires a community needs assessment be submitted to the State annually. This year Monroe CMH did not identify any new priority needs as the stakeholder survey and top 5 needs were identified last year. The report submitted to the State included FY2016-2017 data and an update on progress made in the past year to the Priority Needs Assessment; increasing community awareness, integrated health, child and family services, jail diversion, and promoting consumer choice and least restrictive settings. Lisa commented that Monroe is doing well and have made a lot of progress in all five priority areas.

X. BOARD COMMITTEE REPORTS

a. Consideration to Place on File Written Committee Reports

Dave Stephens moved to place on file all written committee reports. Susan Fortney supported. Motion carried unanimously.

Written Minutes placed on file were: Executive – February 15, 2018, Finance & Facilities – February 21, 2018, Membership Screening – February 13, 2018 and February 15, 2018, Performance Evaluation – January 23, 2018 and January 30, 2018, and Program & Planning – February 20, 2018.

XI. ITEMS FOR BOARD ACTION

a. **Motion to Approve the Consent Agenda Less Item_____**

Jim Neumann moved to approve the Consent Agenda. Dave Stephens supported. Roll call: In favor: Henning, Stephens, Neumann, Libstorff, Londo, and Fortney; opposed: none, motion carried unanimously.

Items approved:
Service Contracts as presented

b. **Motion to Approve the Proposed Revised FY2018 Budget**

Dave Stephens moved to approve the proposed revised FY2018 Budget. Sandy Libstorff supported. Roll call: In favor: Henning, Stephens, Neumann, Libstorff, Londo, and Fortney; opposed: none, motion carried unanimously.

c. **Motion to Approve Dave Stephens, Gloria Rafko, and Jim Neumann to Attend the NATCON Conference beginning April 22, 2018 through April 25, 2018 in Washington, D.C.**

Susan Fortney moved to approve Dave Stephens, Gloria Rafko, and Jim Neumann to attend the NATCON Conference beginning April 22, 2018 through April 25, 2018 in Washington, D.C. Jim Neumann supported. Roll call: In favor: Henning, Stephens, Neumann, Libstorff, Londo, and Fortney; opposed: none, motion carried unanimously.

d. **Motion to Accept the Performance Evaluation Committee's Recommendation for Lisa Jennings to Receive a Rating of "Satisfactory" for the Executive Director Performance Evaluation Summary and Receive a Step Increase Effective February 28, 2018**

Dave Stephens moved to accept the Performance Evaluation Committee's recommendation for Lisa Jennings to receive a rating of "Satisfactory" for the Executive Director Performance Evaluation Summary and receive a step increase effective February 28, 2018. Jim Neumann supported. Discussion followed. Roll call: In favor: Henning, Stephens, Neumann, Libstorff, Londo, and Fortney; opposed: none, motion carried unanimously.

e. **Motion to Recommend David O'Dell for Re-Appointment to the Pre-Paid Inpatient Health Plan (PIHP) Substance Use Disorder (SUD) Oversight Policy Board for Term October 1, 2017 through September 30, 2020**

Bill Henning moved to recommend David O'Dell for re-appointment to the Pre-Paid Inpatient Health Plan (PIHP) Substance Use Disorder (SUD) Oversight Policy Board for Term October 1, 2017 through September 30, 2020. Sandy Libstorff supported. Roll call: In favor: Henning, Stephens, Neumann, Libstorff, Londo, and Fortney; opposed: none, motion carried unanimously.

f. **Motion to Endorse the Resolution Concerning the Issue of the State of Michigan's Medicaid Enrollment Misclassification**

Jim Neumann moved to endorse the Resolution Concerning the Issue of the State of Michigan's Medicaid Enrollment Misclassification. Dave Stephens supported. Discussion followed. Roll call: In favor: Henning, Stephens, Neumann, Libstorff, Londo, and Fortney; opposed: none, motion carried unanimously.

g. **Motion to Request the Monroe County Board of Commissioner's to Consider Endorsement of the Resolution Concerning the Issue of the State of Michigan's Medicaid Enrollment Misclassification**

Bill Henning moved to request the Monroe County Board of Commissioners consider endorsement of the Resolution Concerning the Issue of the State of Michigan's Medicaid Enrollment Misclassification. Dave Stephens supported. Discussion followed. Roll call: In favor: Henning, Stephens, Neumann, Libstorff, Londo, and Fortney; opposed: none, motion carried unanimously.

XII. RELATIONSHIP WITH THE REGION, COUNTY, AND OTHERS

a. Regional Reports

i. Regional PIHP Board Meeting – meeting minutes available.

ii. MACMHB Committee Reports – no report for February.

XIII. ITEMS FROM THE EXECUTIVE DIRECTOR

a. Financial Report – Jeff Koras was available for questions regarding the Financial Report.

b. Executive Director's Report – Lisa Jennings commented on: SUD Outpatient Treatment License; CRCT (pronounced Cricket), electronic health record; mandated Mobile Crisis Unit; Tele Psychiatry; the Governor's FY2019 Budget Proposal; Section 298; and the Bedford Business Fair.

Charles Londo complimented Lisa Jennings and staff on taking the initiative to begin the process of obtaining a SUD Outpatient Treatment License.

XIV. NEW BUSINESS

XV. CITIZEN COMMENTS

Lacie Schiller commented that Board Members are doing a wonderful job in caring for those who have mental health needs. Lacie would like to see the Schools and Boards be informed and trained on how to handle those with mental health disorders and Autism.

XVI. ANNOUNCEMENTS BY BOARD MEMBERS

Susan Fortney commented that it would be nice to have mental health professionals in the schools.

Dave Stephens commented on the Bill HR620 passed by the House of Representatives last week.

Charles Londo commented that effective March 2018 the Board Executive Committee will meet on the same day as the Board Finance and Facilities Committee. Board Executive Committee will meet at 3:30pm and the Finance and Facilities Committee at 5:00pm.

XVII. ADJOURNMENT

Jim Neumann moved to adjourn at 6:32pm. Susan Fortney supported. Motion carried unanimously.

Submitted by,

_____

Bill Henning
Secretary

LJ/dp 3/1/18

BOARD EXECUTIVE COMMITTEE
Wednesday, March 21, 2018
3:30pm

MAJOR COMMITTEE RESPONSIBILITIES

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

COMMITTEE MEMBERS

Bill Henning
Charles Londo, Chair
Sandy Libstorff

DRAFT MINUTES

I. CALL TO ORDER
The meeting was called to order at 3:30pm by Charles Londo. Charles Londo, Sandy Libstorff, Bill Henning, and Lisa Jennings were present.

II. REVIEW OF THIS MONTH'S BOARD MEETING
a. Board Agenda – Reviewed
b. Committee Reports – Reviewed
c. Presentation – No presentation for March

III. ITEMS FOR DISCUSSION
a. Executive Director Update:
   i. Lisa Jennings commented on an early retirement option that will be discussed at the next Board Finance Committee meeting.
   ii. Presentation for the April Board Meeting will be on Jail Diversion/Mental Health Recovery Court.
   iii. Lisa Jennings commented that getting the SUD License is a little trickier than thought. They want the program developed and what that would like before obtaining the license.
   iv. Business Plan to serve mild to moderate and bill private insurance – Lisa Jennings commented that she has a meeting in April with the Guidance Center to discuss how their structure is set up.
   v. Lisa Jennings and Geralyn Harris have a meeting with the Judges soon. Lisa commented this is to discuss working with the schools for referrals or developing a program to get grant money to expand children services. More information to come.
b. Charles Londo requested a follow up at the Finance Committee on Agency Wi-fi for guests.
c. Charles Londo commented that he requested Dave Stephens to put together an Ad-hoc committee when the SUD License is obtained. This Ad-hoc committee would discuss space needs for services.

IV. ACTION ITEMS FOR FUTURE BOARD MEETING AGENDA
a. April – MACMHB Spring Conference and Appoint Nominations Committee
b. May – Board Officer Elections and PIHP Representative Appointment
c. June – Board Committee List – sign up

V. AJOURNMENT
The meeting adjourned at 4:10pm.

VI. NEXT MEETING
The Next Meeting of the Executive Committee is scheduled for **Wednesday 18, 2018** at 3:30pm in the Aspen Room.

Respectfully submitted,

Charles Londo

Charles Londo
Board Chair

3/22/2018

BOARD EXECUTIVE COMMITTEE
Wednesday, April 18, 2018
3:30pm

MAJOR COMMITTEE RESPONSIBILITIES	COMMITTEE MEMBERS
1. Form agenda for monthly meetings. 2. Monitor long term effectiveness of the Board and Board Committees.	Bill Henning Charles Londo, Chair Sandy Libstorff

DRAFT MINUTES

I. CALL TO ORDER
The meeting was called to order at 3:41pm by Charles Londo. Charles Londo, Bill Henning, and Lisa Jennings were present. Sandy Libstorff was excused.

II. REVIEW OF THIS MONTH'S BOARD MEETING
a. Board Agenda – Reviewed
b. Committee Reports – Reviewed
c. Presentation – Recognition of CRCT Implementation

III. ITEMS FOR DISCUSSION
a. Executive Director Update:
   i. Jeff Koras presented the Early Retirement Option that will be discussed at the next Board Finance Committee.
      - Charles Londo requested to prepare a presentation for the May Board Finance Committee with the following:
        a. How many per year will retire?
        b. Of the 12 eligible for the plan, what are the ages and number of years of service?
        c. Add language of %8 return
   ii. Lisa Jennings provided an SUD update. Currently working on completing the license application. Meeting with Marci Scalera and Jane Terwilliger to discuss screening calls in Monroe and making referrals.

b. Program & Planning/Review Purpose and How Often to Meet – Charles Londo requested to invite the Program & Planning Chair to the next Executive Committee to discuss.
c. MACMHB Spring Conference – The Executive Committee agreed to approve up to three Board Members attend. Motion to be on the April Board Agenda.
d. Board Workshop – Rescheduled to Saturday, June 16th due to scheduling conflicts.
e. Board Orientation for New Members – Will review availability to schedule a Board Orientation session with the Board Chairperson and Executive Director with the three new members in May.
f. Agency Wi-fi – Charles Londo requested an update at the next Board Finance Committee.

IV. ACTION ITEMS FOR FUTURE BOARD MEETING AGENDA
a. May – Board Officer Elections and PIHP Representative Appointment
b. June – Board Committee List – sign up
c. July – Approve Board Committee List

V. AJOURNMENT
The meeting adjourned at 4:52pm.

VI. NEXT MEETING
The Next Meeting of the Executive Committee is scheduled for **Wednesday, May 16, 2018** at 3:30pm in the Aspen Room.

Respectfully submitted,

Charles Londo

Charles Londo
Board Chair

4/19/2018

MONROE COMMUNITY MENTAL HEALTH AUTHORITY

BOARD FINANCE & FACILITIES COMMITTEE
Wednesday, March 21, 2018
5:00pm

MAJOR COMMITTEE RESPONSIBILITIES

1. Monitor the Organization's Finances and Facilities.
2. Review and Recommend to the Full Board Contracts and Budgets.
3. Review and Recommend to the Full Board Budget Strategies for Managing Overages and Shortfalls.

COMMITTEE MEMBERS

Pam Ray	Rusty Shorter
Susan Fortney	Gloria Rafko
Bill Henning	David Stephens, Chair
Sandy Libstorff	Jim Neumann

Charles Londo (Ex-Officio)

DRAFT MINUTES

I. CALL TO ORDER
The meeting was called to order at 5:00pm by David Stephens. Rusty Shorter, Jim Neumann, Sandy Libstorff, Susan Fortney, David Stephens, Bill Henning, Gloria Rafko, Lisa Jennings, Jeff Koras, Jim Brown, and Beth Didario were present. Charles Londo and Pam Ray were excused.

II. ITEMS FOR BOARD ACTION (Consent Agenda)
a. Administrative Contracts – MyStrength was presented by Beth Didario (recommend approval).

III. FACILITIES UPDATE
a. Jeff Koras commented that quotes for guest agency Wi-fi have been received. Next step is to review the quotes and start the process.
b. Susan Fortney requested Facilities to consider moving the location of the changing tables located in the lobby restrooms as it creates an obstruction to enter the rest room when being used. Susan also requested to consider moving the soap dispenser and hand towels to be closer together in the lobby family bathroom.

IV. FINANCIAL REPORTS
a. The following FY2017-2018 Budget Reports were presented by Jeff Koras: Budget-to-Actual, Balance Sheet, Cash Flow, Investments, and Board Budget (recommend approval).

V. INFORMATIONAL ITEMS
a. Early Retirement Option Discussion – Jeff Koras presented an early retirement option for full-time employees. Eligibility would be based upon staff who have at least 24 years of service within the Monroe County Employees Retirement System. Under the stated eligibility, the number of staff who would quality for an early retirement is twelve. No other incentives will be offered to eligible staff beyond the opportunity for early retirement. Jeff commented that actuarial valuations were completed for the Monroe County Employee Retirement Pension Plan and for the Monroe CMHA Retiree Health Plan. Results from the two valuations were that if all 12 employees elected to take the early retirement option that the additional cost would be a total of $29,455 for the pension plan and $5,907 for retiree health.

Lisa Jennings commented that the intent to offer an early retirement option is to re-purpose the vacated positions to begin staffing an SUD program.

VI. PARKING LOT
a. Regional Budget Process/Timeline and Funding Affiliation Partners

VII. PUBLIC COMMENTARY

VIII. ADJOURNMENT
The meeting adjourned at 6:17pm.

The next meeting of the Finance & Facilities Committee is scheduled for **Wednesday, April 18, 2018** at 5pm in the Aspen Room.

Respectfully submitted,

Dave Stephens

David Stephens
Committee Chair

dp 3/22/18

MONROE COMMUNITY MENTAL HEALTH AUTHORITY

BOARD FINANCE & FACILITIES COMMITTEE
Wednesday, April 18, 2018
5:00pm

MAJOR COMMITTEE RESPONSIBILITIES

1. Monitor the Organization's Finances and Facilities.
2. Review and Recommend to the Full Board Contracts and Budgets.
3. Review and Recommend to the Full Board Budget Strategies for Managing Overages and Shortfalls.

COMMITTEE MEMBERS

Pam Ray	Rusty Shorter
Susan Fortney	Gloria Rafko
Bill Henning	David Stephens, Chair
Sandy Libstorff	Jim Neumann

Charles Londo (Ex-Officio)

DRAFT MINUTES

I. CALL TO ORDER
The meeting was called to order at 5:00pm by David Stephens. Rusty Shorter, Charles Londo, Jim Neumann, Susan Fortney, David Stephens, Bill Henning, Gloria Rafko, Lisa Jennings, Jeff Koras, and Beth Didario were present. Pam Ray and Sandy Libstorff were excused.

II. ITEMS FOR BOARD ACTION (Consent Agenda)
a. Administrative Contracts – MyStrength was presented by Beth Didario (recommend approval).

III. FACILITIES UPDATE

IV. FINANCIAL REPORTS
a. The following FY2017-2018 Budget Reports were presented by Jeff Koras: Budget-to-Actual, Balance Sheet, Cash Flow, Investments, and Board Budget (recommend approval).

V. INFORMATIONAL ITEMS
a. Early Retirement Option Discussion – Jeff Koras presented an early retirement option for full-time employees. Charles Londo requested Jeff to present additional data at the next Board Finance Committee Meeting. Jeff Koras reminded Board Members that the intent to offer an early retirement option is to re-purpose the vacated positions to begin staffing an SUD program.
b. Lisa Jennings commented on the risk corridor that was discussed at the April Regional PIHP Board Meeting.
c. Gloria Rafko commented that Gretchen Whitmer will be at McGeady's for a meet and greet on Monday, April 30th.

VI. PARKING LOT
a. Regional Budget Process/Timeline and Funding Affiliation Partners

VII. PUBLIC COMMENTARY

VIII. ADJOURNMENT
The meeting adjourned at 5:59pm.

The next meeting of the Finance & Facilities Committee is scheduled for **Wednesday, May 16, 2018** at 5pm in the Aspen Room.

Respectfully submitted,

Dave Stephens dp

David Stephens
Committee Chair

dp 3/22/18

BOARD PROGRAM & PLANNING COMMITTEE
Wednesday, March 7, 2018
5:00pm

MAJOR COMMITTEE RESPONSIBILITIES

I. Ensure supports and services needed for consumers to achieve their outcomes are available and accessible.
II. Monitor MCMHA programs and services for effectiveness, quality, and consumer satisfaction within the scope of the mission of the organization.

COMMITTEE MEMBERS

Ray, Pam
Fortney, Susan, Chair
Libstorff, Sandy
Rafko, Gloria
Neumann, Jim
Londo, Charles (Ex-Officio)
Shorter, Rusty
Henning, Bill

DRAFT MINUTES

I. CALL TO ORDER

The meeting was called to order at 5:00pm by Susan Fortney. Susan Fortney, Gloria Rafko, Rusty Shorter, Bill Henning, Jim Neumann, Sandy Libstorff, and Lisa Jennings were present. Charles Londo and Pam Ray were excused.

II. INFORMATIONAL ITEMS

a. Indicators / Plan of Correction – Lisa Jennings presented the 1st Quarter Strategic Plan Indicators for UM/UR Indicator 6 and the DLA-20.
b. SALs & Face to Face Time/Engagement Performance Improvement Plan Update – The engagement plan is to create a culture of accountability, establish an expectation and hold staff accountable. Geralyn Harris has started with Supervisors rolling this out and letting staff know what the expectation is for performance. IT will run reports monthly and will be able to use these to help staff. Monitoring performance will be brought through quarterly indicators for SALs and Face to Face.
c. SUD License Update – Reached out to the State to ask if they will grant the license prior to having staff in place to implement programs. There are 3 staff in house that have the credentials. You have to have 1 staff for 40 outpatient consumers. We are looking at our capacity and as jobs become vacant to post with the credentials needed for SUD. A report will be ran to see how many consumers have both a mental illness and SUD, will know better on how many staff will be needed.
d. Access Project/Consumers Waiting in Lobby – Geralyn Harris has started a workgroup that has representation from across the agency and consumers. They are analyzing the flow and how to make that better. They are not ready to make recommendations at this time.
e. Tele-Psychiatry – Had a great interview with a children's Doctor, she is from Puerto Rico and licensed here. She is very used to working with a population that has experienced a lot of trauma, poverty. The Interim Medical Director and Nurses have been having discussions with Livingston that uses Tele-Psychiatry. One of our Nurses will shadow at Livingston to see how their process works. The Tele-Psychiatry is to fill 24 hours a week and will continue to assess if more time is needed.
f. MyStrength App – This is an app that we would like to purchase and will bring the contract to the next Board Finance Committee. It can be used on your phone or computer and is all anonymous. Once you enter your information it is very personalized and a lot of tools are available and can be used as a treatment extender. It is all evidence based practice. All staff and consumers 13 years and older can have access to the app. The cost is $12,000 a year and a one-time setup fee for $5,000. Currently there are 9 other CMHs using the app in Michigan. The training hasn't occurred yet so we don't know how sophisticated the login process will be but will have a demo and let Board Members know when that is available.

III. PARKING LOT

a. SALs & Face to Face Time – Engagement Performance Improvement Plan (ongoing)
b. SUD License (ongoing)
c. What is the role of the PIHP (Do they monitor services? Where do we fit in?)
d. DLA-20 Indicator – How to Measure?
e. Local Consumer Satisfaction Survey (Jul)
f. Regional Consumer Satisfaction Survey (Oct)

IV. ADJOURNMENT/NEXT MEETING

The meeting adjourned at 5:57pm. The next meeting of the Program & Planning Committee will be held on **Wednesday, April 4, 2018** beginning at 5pm in the Aspen Room.

Respectfully submitted,

Susan Fortney
Program & Planning Chair

dp 3/8/18

MCMHA Board Action Request Mental Health Administrative Contract(s) / Amendments | **FY 2017-2018** | **April 18, 2018**

Action Requested: Approval Requested for the Mental Health Administrative Contracts Listed Below:

Contractor name	Department	Request	Budget	Contract Term	Service Description
MyStrength	Admin	$5,000 One-Time Set-Up Fee, $12,000/year	$29,000.00	5/1/2018 - 5/1/2020	On-line consumer support

RECOMMENDATION: As reviewed by the MCMHA Board Finance Committee on April 18, 2018, approval of the contract(s) listed on MCMHA Board Action Mental Health Service Contract(s) / Amendments on or before April 26, 2018.

Community Mental Health Association of Michigan
Annual Spring Conference

Collaboration & Innovation: A Formula for Success

May 1 & 2, 2018

Diamond Center at
Suburban Collection Showplace
46100 Grand River Ave,
Novi MI 48374

Pre-Conference Institutes
April 30, 2018

CONFERENCE AGENDA

Monday, April 30, 2018

9:30am — Registration for Pre-Conference Institute #1
Member Fee: $89 per person. Fee includes materials and lunch
Non-Member Fee: $107 per person and includes materials and lunch

10:00am – 3:00pm — Pre-Conference Institute #1:
Healthcare Integration Efforts: Challenges and Successes in Other States

- *Trish Marsik, MSW, Chief Operating Office, Services for the UnderServed, Inc. (New York)*
- *Doug Stadter, MPA, President, Arkansas Provider Coalition, LLC; Vice President, Care Coordination, Summit Community Care (Arkansas)*
- *Shane Spotts, BS, Medicaid Business Development, Anthem (Arkansas)*
- *Mick Pattinson, PhD. Former CEO AspenPointe (Colorado)*
- *Moderator: Robert Sheehan, Chief Executive Officer, CMH Association of Michigan*

Michigan's public mental health system has a long history of actively fostering innovation and continues to be a leader of a great many healthcare integration and transformation initiatives in communities all across the state. The pace and breadth of healthcare transformation is continuing to accelerate, with the changes related to Section 298 pilots being only one set of such efforts. These changes and the expectations of the healthcare system's patients, payers, providers, policy makers, nor legislators will not stand still during the two year 298 pilot process. Therefore, during this two year pilot period, our system must continue to innovate relative to its practices, partnerships, and structures drawing on and learning from the work being done in other states, with an eye toward the work that strengthened the public healthcare safety net. This pre-conference will feature the leaders of healthcare transformation efforts in a number of states, examining what went right and what went wrong – as a guide to Michigan's work over the next several years.

12:30pm — Registration for Pre-Conference Institute #2
There is no charge for attending this Pre-Conference Institute

1:00pm – 3:00pm — Pre-Conference Institute #2:
Wearing the HIPAA Hat

- *Sean C. Rhudy, Abilita*

Have you had the HIPAA Compliance Officer role added to your duties or is your organization considering you for this role? If so, this training is for you! In this training, we'll discuss what needs to be done throughout the year and annually to maintain compliance. The training will cover ways to efficiently manage your time needed for this role by scheduling tasks and delegating duties to other departments. We'll also dive deeper into how to identify what data needs to be protected, who needs to sign a BAA, end user HIPAA training, and the breach notification process. By the end of this training, you'll be more competent with your HIPAA Compliance Officer role.

Skill level: Beginner – Intermediate

CMHAM is pleased to offer this training partnership with Abilita to help free staff's time and reduce operating expenses for CMH, PIHP and Providers. Abilita is the leader in telecommunications consulting, and endorsed by CMHAM since 2011 to help members reduce risks, costs and prevent your staff from wasting their time. Abilita evaluates HIPAA technology risks and can insure you are in compliance without wasting your staffs' time. In addition we reduce your telecom costs by 29% with no upfront costs or risk.

2:00pm – 6:15pm — Earlybird Registration for CMHAM Spring Conference

3:00pm – 3:45pm — CMHSP/PIHP Board Chairperson Roundtable & Networking (there is no fee for this meeting)

4:00pm – 5:15pm — CMHAM Members: Executive Board Meeting

5:30pm – 6:15pm CMHAM Member Assembly Meeting & Election of Officers

Tuesday, May 1, 2018

7:30am – 5:00pm Conference Registration and Exhibits Open

7:30am – 8:15am Group Breakfast

8:15am – 8:30am Conference Welcome

8:30am – 9:30am Keynote: The Third Way: Fostering Integration and Public-Private Partnerships to Ensure a Strong Healthcare Safety Net

- *Trish Marsik, MSW, Chief Operating Office, Services for the UnderServed, Inc. (New York)*
- *Doug Stadter, MPA, President, Arkansas Provider Coalition, LLC; Vice President, Care Coordination, Summit Community Care (Arkansas)*
- *Shane Spotts, BS, Medicaid Business Development, Anthem (Arkansas)*
- *Mick Pattinson, PhD, Former CEO AspenPointe (Colorado)*
- *Moderator: Robert Sheehan, Chief Executive Officer, CMH Association of Michigan*

The "third path/third way" will be highlighted by the keynote speakers making up this panel. This approach, one being pursued by the CMH Association of Michigan, is a concerted, focused, and soundly grounded approach to building public-private partnerships and provider-payer partnerships that foster healthcare transformation within the nation's publicly sponsored healthcare system. The pursuit of this "third path/third way" strategy is based on the recognition that neither of the two options often put forth as the only options for the future of Michigan's public mental health system will allow Michigan's system to provide high quality, person-centered services and supports nor to continue to be at the cutting edge of publicly-sponsored mental healthcare field. These two options are 1. Retaining the current structure of Michigan's publicly-sponsored mental health system or 2. Privatizing the core functions of the Michigan system. The "third path/third way" pursued in several other states will be discussed, during this key note, by leaders from New York, Colorado, and Arkansas. The aim of this keynote is to assist the persons served, payers, and providers in Michigan to identify, examine and promote the adoption of the best practices and structures, drawn from across the country, that are built around public-private partnerships, provider-payer partnerships, healthcare integration and strong public safety net themes.

9:30am – 10:00am Exhibitor Refreshment Break

Concurrent Workshops:

10:00am – 11:30am

1. Process and Ethical Dilemmas of Competency to Stand Trial
   - *Aubrey Valleau, LLMSW, Clinical Social Worker, Kalamazoo Psychiatric Hospital*
   - *Lisa Williams, LMSW, Clinical Social Worker, Kalamazoo Psychiatric Hospital*

   The workshop will provide a foundational overview of the meaning and process of competency to stand trial. This workshop will explore the clinical and ethical dilemmas that impact professionals who are tasked with providing mental health treatment under court order for the purpose of competency restoration. Important concepts will be reviewed to assist professionals in their understanding of the assessment and treatment processes involved in competency restoration. Participants will be able to: 1. Describe three elements of the competency to stand trial process; 2. Examine three relevant ethical dilemmas in the dual role of treating clinician and forensic evaluator; and 3. Define two important concepts related to competency education.

10:00am – 11:30am

2. Using Data to Inform Interventions Across the Sequential Intercept Model
   - *Nanci Hambrick, LLMSW, Project Coordinator, Michigan State University School of Social Work*
   - *Sheryl Kubiak, PhD, LMSW, Professor, Michigan State University School of Social Work*
   - *Steven Mays, BSW, Liaison to the Mental Health Diversion Council, Diversion Administrator, MI Department of Health and Human Services*

   Since 2015, ten counties across Michigan have been working with the Governor's Diversion Council to improve response to individuals with SMI involved in the criminal justice system. A system evaluation is currently underway to identify and measure the impact of the variety of interventions across five sequential intercepts within the counties. This workshop details how individuals booked into these county jails are identified with SMI and receive mental health services in jail. Standardized screening instruments were collected on a sample of individuals booked into the county jails to detect symptoms of SMI, presence of alcohol or drug use disorders, and housing stability. Results of current jail processes for identifying SMI were also reviewed and compared with the standardized screening results. In addition, the process for follow-up referral, assessment, and services was also assessed. Presenters will share several findings including prevalence of SMI and other risk factors among those booked into jail; likelihood for follow-up referral, assessment, and services within the jail; and the impact of funding configuration and structure on services provided. Participants will be able to: 1.Define what a validated, standardized, and objective screen is and describe its importance in identifying mental health

concerns at jail booking; 2. Apply APA principles for provision of psychiatric services in jails to current identification, referral, and service processes within their county jail; 3. Summarize prevalence of three key risk factors among those booked into county jails across the state; and 4. Recall the impact of funding and organizational structure on the provision of mental health services within jails.

10:00am – 11:30am

3. Increasing and Improving Multi-Cultural Competency Among Behavioral Health Practitioners, Clinicians and Key Decision Makers
   - *Hakeem Lumumba, PhD, LMSW, LPC, NCC, CAADC, MAT, CCS-M, & ACS, President/CEO, H.L. Counseling Enterprise, Inc.*

Consumers with co-occurring and substance use disorders are highly diverse regarding race, ethnicity, sexual orientation, religious orientation, socio-economic status, geographical locations, physical appearances, and languages. We continue to experience non-traditional consumers (e.g., Asian descent, East India descent, physical disabled, LGBT) seeking treatment for their behavioral health disorders. However, most of our treatment methods are based on Etic view point (i.e., viewing Western concepts of normality and abnormality as applicable to all cultures). As the result, we are experiencing increase consumer no-show rates and poor follow up. To reverse these trends, behavioral health clinicians and leaders must become culturally competent. This presentation will be geared towards improving and increasing cultural competence among providers to improve treatment outcomes among our diverse consumers. Participants will be able to: 1. Analyze their cultural competency barriers; 2. Apply Maslow's Hierarchy of Needs to Behavioral Health Treatment; and 3. Apply Bandura Self Efficacy theory to Behavioral Health Treatment.

10:00am – 11:30am

4. Discovering the Joy of Caring for Ourselves and Other: Identifying and Preventing Abuse and Neglect
   - *Lois Shulman, Vice Chairperson, Oakland Community Health Network*

Discovering the joy of caring for another is intentional. Learning to care for ourselves, feeling value, with compassion and understanding, provides the opportunity to experience joy. Joy felt and understood can then be intentionally shared. Learning to identify and avoid abusive and neglectful behaviors opens the door to communication. Abusive and neglectful behaviors can happen by feeling overstressed by life circumstances; by working conditions; and/or by persons we are caring for responding in ways that are a challenge. This session focuses on how to forgive ourselves as we identify our own stress triggers and stress busters; to create person centered relationships with those we care for; and to develop skills, including active listening to support our intention. The joy of caring is a gift to oneself and to others. Participants will be able to: 1. Demonstrate self-care, forgiveness, understanding and compassion; 2. Identify behaviors that are abusive and neglectful; and 3. Employ tools to ensure the opportunity to discover joy in caring for one-self and others.

10:00am – 11:30am

5. Applied Behavioral Analysis (ABA): More Than Just Autism Treatment?
   - *Steven P. Sparks, PhD, BCBA-D, Owner, Behavior Analyst, Sparks Behavioral Services*

This workshop will provide a basic description of the science of behavior analysis, a description and explanation of a wide variety of applications of behavior analysis, and the services (other than autism) that are currently available in the community mental health system. Participants will be able to: 1. Describe the science of behavior; 2. List at least three applications of behavior analysis; and 3. Describe behavior analytic services available to consumers of the community mental health System.

10:00am – 11:30am

6. Boardworks 2.0: Board Member Orientation & the Role of Board Members in the Rights Protection Process
   - *Robert Sheehan, CEO, Michigan Association of Community Mental Health Boards*
   - *Andrew Silver, BA, Director of Training, Office of Recipient Rights, Michigan Department of Health and Human Services*

This session is designed for new and current board members. We will start with a brief keynote address, followed by presentations on Orientation to the Governance and Leadership Program and Critical Updates. We will conclude with an opportunity to discuss board related planning and action considerations relative to the day's learning. Orientation: New board members are provided (a) an overview of the Learning Program and (b) a brief summary overview of basic and key substantive and technical information contained in the Learning Program Conference Presentation Series of nine workshops that constitute the core curriculum. Update: Current board members are provided a comprehensive update on the most critical issues for the upcoming year. This particularly includes matters of the state and federal budgets, MDHHS's PIHP and CMHSP contracts and critical policy issues. A portion of this workshop will cover the role of the CMHSP Board as it relates to the Rights Protection Process. Attendees will learn how the Board relates to the Recipient Rights Advisory Committee, to the selection of the Recipient Rights Director and its role in the Recipient Rights Appeals Committee. The session will review the rights of recipients as enumerated in the Mental Health Code, discuss the role of rights in the protection of consumers, training requirements for agency staff, confidentiality issues, the Recipient Rights Annual Report and how the Board can use this tool for process improvement. Participants will be able to: 1. Understand their role as Board Members in the

Rights Complaint Process; 2. Identify at least 2 factors that explain the relationship of the Board to the Recipient Rights Advisory Committee; and 3. Participate in and react proactively to the review of the Annual Recipient Rights Report.

11:30am – 12:20pm Group Lunch

12:20pm – 1:20pm Keynote: There Has Always Been Drinking in America: Alcohol, History, Culture, and What it all Means for Prevention

- *Rodney A. Wambeam, PhD, Senior Research Scientist, Wyoming Survey & Analysis Center of the University of Wyoming*

Americans drink to celebrate and to mourn. We toast a new addition to our family, an engagement, a marriage, a new job and a life well-lived. We open a bottle to break bread with friends, to watch sports, to pray, and to drown our sorrows. But we also suffer from addiction, violence, motor vehicle crashes, and death, all at the hands of alcohol. This keynote explores America's cultural relationship to alcohol, from the thirteen colonies and prohibition to today's music and movies. In prevention, we often focus so intently on our communities and strategies that we fail to step back and look at the much, much bigger picture of the cultural and historical context of what we are trying to accomplish. Using humor and examples from history, movies, music, television, and more, Dr. Rodney Wambeam provides the larger context of what it means to prevent the misuse, abuse and devastating consequences of a substance that has always been part of the American experience. Participants will be able to: 1. Describe the role alcohol played in early America when alcohol was considered safer than water; 2. Understand past prevention efforts that focused upon a moral approach to prevention and why they "failed;" 3. Examine how popular culture (movies, television, music, social media, and more) help to define how Americans use and feel about alcohol; and 4. Recognize how understanding historical and cultural context can improve our prevention efforts and lead to better outcomes.

Concurrent Workshops:

1:30pm – 3:00pm

7. CareConnect360: Population Health & Integrated Care
   - *Kathy Boak, BS, CC360 Project Lead, Optum*
   - *Jackie Sproat, MSW, CSWM, Manager-Data, Payment & Integrity Section, Behavioral Health & Developmental Disabilities Administration, MI Department of Health and Human Services*

   CareConnect360 (CC360) is a web-based, statewide integrated care tool hosted by the MI Department of Health and Human Services (MDHHS), available free to PIHPs, CMHs, and their provider networks. It's a view into the MDHHS data warehouse: claims/encounters, eligibility, home help authorizations, pharmacy, vital records, ADTs, etc. CC360 shows the chronic medical conditions, medications and ER/IP utilization for consumers. CC360 allows care plans to be jointly coordinated by multiple organizations, including PIHPs and Medicaid Health Plans. This session will provide 1. An overview of information available in CC360 supporting integrated care, including new datasets (Home Help authorization and worker); 2. Instructions for using the MHP/PIHP care plan and care plan report; and 3) Highlights of population health tools supporting Performance Improvement Plans and PIHP incentives. Plans for future enhancements will be summarized, including identifying consumers for inclusion in MHP/PIHP care protocols, and expanded access to Medicare claims data. Participants will be able to: 1. Summarize information available in CC360 that supports the provision of integrated physical and behavioral health; 2. Use the CC360 Integrated Care Plan to coordinate care for high needs beneficiaries; 3. Produce a report showing how their CMH/PIHP is performing on measures such as Follow-up After Hospitalization for Mental Illness; and 4. Produce lists of highest ED utilizers in their CMH, consumers with 3+ chronic conditions, recently deceased consumers, and create a case load list of consumers to automatically be notified of an ED visit, inpatient admission, or discharge.

1:30pm – 3:00pm

8. The Buddy-to-Buddy Volunteer Veteran Program
   - *Adrienne Lapidos, PhD, Assistant Research Scientist, University of Michigan*
   - *Kathryn Melcher, BA, Program Manager, Buddy-to-Buddy Program, M-SPAN Programs, University of Michigan Depression Center*

   In 2009 the University of Michigan Depression Center and Department of Psychiatry, in partnership with the Army National Guard and other key stakeholders, developed Buddy-to-Buddy (B2B), a program that supports mental health and wellness in service members and Veterans through outreach, support, and community linkages provided by trained volunteer veterans. B2B now supports over 130 trained volunteer Veterans throughout the state as they provide free, confidential support to thousands of service members and veterans. The current presentation will describe the B2B model, describe its linkages with community mental health in the State of Michigan, describe the role of military cultural competence in fighting stigma, and explore how continued collaboration between community mental health and B2B can help support Veterans' wellbeing in Michigan. A volunteer Veteran serving in the program will speak about his experiences. Participants will be able to: 1. Describe the B2B Volunteer Veteran Program; 2. Explain the role of military cultural competency in fighting stigma; and 3. Specify

how B2B and community mental health can partner to improve Veteran wellbeing in Michigan.

1:30pm – 3:00pm

9. **Inside Michigan's Corrections Mental Health Program: Understanding Ser**vices, Population Trends and Needs of our Returning Citizens
   - *J. David Dawdy, MA, LLP, Director, Mental Health Services, MI Department of Corrections*

   Over the course of the past decade, the overall prison population in Michigan has declined while the overall number of prisoners receiving mental health services has increased. Characteristics of this population will be discussed and attendees will receive an overview of the continuum of services within the Michigan Department of Corrections. A primary focus will be on the reentry needs of returning citizens, including an overview of current practices and a vision of how further community engagement and collaboration will promote offender success, reduce revolving door recidivism and build communities. Participants will be able to: 1. Describe three programs of services provided within prison; 2. Identify three population trends or traits; and 3. Summarize a model of improved coordination that includes three correlates for their work or their local community.

1:30pm – 3:00pm

10. Managing an External Audit – Before, During and After the Visit
    - *Dale K. Howe, PhD in Public Administration, Owner, DK Howe Consulting, LLC*

    There are multiple layers of auditors working in Michigan now. Before they show up at your door, there are some things you can do to strengthen your position. There certainly are some things you do and don't want to do while they are on site. If you understand the process from a few steps back, you can get through the audit with less work, less stress, and at a lower cost. The workshop will cover the steps in a typical audit, some of the statistics used (what they mean, not how to calculate them), and how recoveries are calculated. Some of the audit programs have clear financial incentives for the auditors to find errors and recover revenue. Learning to manage an audit is an essential skill. Participants will be able to: 1. Explain the purpose of external audits; 2. Differentiate between internal and external audits; 3. Understand the meaning of the statistics involved (NOT how to calculate them); and 4. Appreciate the importance of clearly managed communications with the auditing entity.

1:30pm – 3:00pm

11. PMTO: Expanding the Boundaries
    - *Kim Batsche-McKenzie, LMSW, Manager of Services for Children with Serious Emotional Disturbances for the Division of Services to Children and Families, MI Department of Health and Human Services*
    - *Luann J. Gray, LMSW, Michigan PMTO State Coordinator, Kalamazoo Community Mental Health & Substance Abuse Services*
    - *Ronda SanCartier, LMSW, Interim Supervisor of Outpatient and Children's Intake, Kalamazoo Community Mental Health & Substance Abuse Services*

    This presentation will provide a brief overview of Michigan's Parent Management Training – Oregon (PMTO) Model which is an evidence-based practice (EBP). Attendees will gain knowledge about how PMTO can influence relationships across multiple environments and impact behaviors across all life domains. PMTO is a manualized model that encourages parents/caregivers to focus and build on their own individual strengths as well as their children's strengths. This model has been implemented successfully with families that have youth from the preschool years up through adolescence. PMTO works well with youth that may be experiencing a range of signs and symptoms including: overt antisocial behavior; covert antisocial behavior; trouble with attention and processing information; difficulty with problem solving; poor judgement skills; rapidly changing moods; difficulty in school; poor social skills; staying on task; difficulty planning or working toward a goal; cognitive distortions; difficulty identifying consequences of choices; and/or taking responsibility for their own actions. Implementing the PMTO model assists parents and caregivers in learning, practicing and mastering the parenting skills that can be used to impact the signs and symptoms of many diagnoses and lead to achieving the desired outcomes as defined by the parents/caregivers in the person-centered planning processes. This workshop will demonstrate how PMTO Core Parenting Practices can be utilized in achieving identified treatment goal outcomes. Participants will be able to: 1. Gain knowledge about Michigan's PMTO EBP model; 2. Define PMTO's five core parenting practices and how they match the needs for treatment; and 3. Identify how PMTO practices can be utilized in developing interventions, coping skills and/or strategies to lessen signs and symptoms of several diagnoses while achieving the desired treatment goal outcomes

1:30pm – 3:00pm

12. Boardworks 2.0: Management – System (Core Module)
    - *Christopher Pinter, MSW, Chief Executive Officer, Bay-Arenac Behavioral Health Authority*

    In this workshop you will focus on the public policy oriented and defined management and organizational structures. Participants will be able to: 1. Identify 2 management functions of public policy systems; 2. Explore 2 structural foundations of organizations as related to both managers and implementers of public policy; 3. Examine organizational infrastructure as related to both managers and implementers of public policy; 4. Learn 3 qualities of provider and manager types of public organizations, including "mixed" organizations and the cost and benefits of such an arrangement; and 5. Explore community systems as an ultimate unified community system.

3:00pm – 3:20pm Exhibitor Refreshment Break

Concurrent Workshops:

3:30pm – 5:00pm

13. The Intersection of Population Health Data and Complex Case Management to Improve Outcomes in Wayne County
    - *Chad June, BS, Deputy Chief Information Officer, Detroit Wayne Mental Health Authority*
    - *Julia Kyle, LMSW, MBA, Director of Integrated Healthcare Initiatives, Detroit Wayne Mental Health Authority*

    One of the greatest barriers to coordinating behavioral health and primary care is the lack of access to siloed health information. State-wide innovations and access to information through health information exchanges have helped open the door to whole person care, but is often not in a format that supports the quality improvement work necessary to address widespread health disparities. Through an IT/integrated care state block grant, the Detroit Wayne Mental Health Authority was able to purchase and disseminate a population health tool to a subset of large providers serving over 45,000 individuals each year. This project supports system-wide quality improvement projects, including, but not limited to, our NCQA complex case management program, which has resulted in significant reductions in urgent and emergent utilization. This session will describe the development of an innovative complex care management program at the specialty behavioral health payer and examine preliminary results in cost savings and outcomes. Participants will be able to: 1. Recognize 1-2 strategies for identifying population health tools that meet the needs of their organizations; 2. Identify the process for translating population health data into targeted clinical programs like complex case management; and 3. Describe 3 key features of complex case management that can impact service utilization and patient outcomes.

3:30pm – 5:00pm

14. Pediatric Partnerships Improve Access to Psychiatric Care for Vulnerable Populations
    - *Anne Kramer, MSW, Program Manager, Michigan Medicine Department of Psychiatry*
    - *Carol Wimmer, MA, LPC, LLP, Behavioral Health Consultant, Network 180*
    - *Matt Wojack, MSW/LMSW, Supervisor, Healthcare Integration, CMH Authority of Clinton-Eaton-Ingham Counties*

    The Michigan Child Collaborative Care Program (MC3), through collaboration with CMHs, provides guidance and support to primary care providers managing children, adolescents and young adults through age 26 and perinatal women with behavioral health problems. These patients, unable to access psychiatric care, may progress in severity to the point where they become in need of higher level care, such as CMH services. The presenters will present survey data on 1. The CMH experience of the MC3 Program in providing access to just-in-time behavioral health and psychiatry consultations and 2. How MC3 fits in within the provision of integrated care by CMH. Our data suggest there is universal appreciation of the value and utility of MC3, and its ability to expand the array of supports that communities have for youth in at-risk situations. The data also suggest ongoing engagement with providers is crucial to bring about effective utilization. The partnership between MC3 and CMH demonstrates how consumers receive timely services that effectively meet their needs. Participants will be able to: 1. Identify two ways psychiatry and behavioral health consultation impacts access to care; 2. Recognize at least three benefits and challenges of integrated care for organizations; and 3. Identify two ways psychiatry and behavioral health consultation fits the continuum of community based services.

3:30pm – 5:00pm

15. Why "Rehabilitation" vs "Criminalization" within Community Corrections System
    - *Dorothy Harmon, LLMSW, CADCM, Mental Health Jail Diversion Clinician/Case Manager, Macomb County Community Corrections Department*
    - *Windy Marion, BA, Clinician/Case Manager, CRP Facilitator, Macomb County Community Corrections through Comprehensive Youth Services*

    This workshop will provide a brief history of the operations and role of Community Corrections within the criminal justice system. The following areas will be discussed: information on specific populations within the criminal justice system; stigmas associated with addiction and individuals within the criminal justice system; and oppositions related to rehabilitation vs. criminalization; overview of the current programs available to individuals that are incarcerated or on probation within Macomb County. Details of updated programs and implementations of new programs for individuals within criminal justice system that struggle with medical issues or complications, substance abuse, co-occurring disorders, as well as substance abuse and criminalized thinking patterns and trauma based disorders will be covered. Participants will learn the importance of coordination of care and collaborative efforts within Community Corrections Programs and review the purpose of current programs and need to continue providing services within the criminal justice system with a focus of rehabilitation rather than criminalization. Participants will be able to: 1. Summarize the role of Community Corrections within the criminal justice system and recognize the stigmas associated with the population served within this system; 2. Describe populations served and programs available to specific populations within the criminal justice system and examine benefits of rehabilitation vs. criminalization; and 3. Identify the

need for continuation of programs for individuals within the criminal justice system.

3:30pm – 5:00pm

16. Integrated Care: How States are Working to Erase the Mind/Body Divide
    - *Dr. Michael Golinkoff, PhD, MBA, SVP AmeriHealth Caritas; President and CEO, PerformCare, AmeriHealth Caritas / PerformCare*
    - *Julia Griffith, MA, BSW, LLP, LPC, Director of Quality Management and Community Outreach, Blue Cross Complete of Michigan*
    - *Samantha Murphy, MS, Director of Behavioral Health Strategic Initiatives, AmeriHealth Caritas / PerformCare*

    People with serious mental illness (SMI) and the chronically physically ill with behavioral co-morbidities experience significant gaps in health care that result in shorter life expectancies, increased medical acuity, and higher health care costs. While this issue exists across the nation, each state has taken a different approach to implementing solutions. This workshop will review the value of integrated care for patients, compare and contrast different models and approaches, and give an overview of how policymakers, providers, advocates and payers have worked together to problem-solve local solutions. Participants will be able to: 1. Describe the value of an integrated approach for patients; 2. List three examples of systematic integrated care approaches; and 3. Understand the different approaches states utilize to support an integrated care system.

3:30pm – 5:00pm

17. Boardworks 2.0: Leadership – Legal (Core Module)
    - *Lisa K. Morse, Consultant, CMH Association of Michigan*

    This session is designed to provide information on the legal responsibilities of a community mental health agency (CMH) as well as a Prepaid Inpatient Health Plan (PIHP). Areas that will be covered include the Mental Health Code, specifically Chapter 2 on County CMH Programs, the contractual relationship that exists between the MI Department of Health and Human Services and the CMH (for both Medicaid services and non-Medicaid services) and what those contracts require, The Open Meetings Act, and the Freedom of Information Act (FOIA). Participants will understand their role in ensuring the legal responsibilities of the CMH are met. Participants will be able to: 1. Understand your statutory obligations under the Mental Health Code; 2. Understand at least 3 of the basic contractual obligations the Boards have with MDHHS; and 3. Examine both the Open Meetings Act and Freedom of Information Act.

3:30pm – 5:00pm

18. Moving from Awareness to Acceptance: Celebrate Neurodiversity!
    - *Alex Kimmel, Owner, The SelfDeterminator*

    Awareness campaigns are passé. Acceptance is where trust is present and therefore success can thrive! This is a powerful presentation that challenges commonly held untruths regarding disability and charges listeners towards acceptance and respect. Inclusion is about supporting a setting so all are equally valued, safe and welcome. Having a disability in and of itself has no bearing on how successful and fulfilling life can be. Neurodiversity is the acceptance and celebration of those that operate other than what most of the world considers to be normal and to help society to realize no one really has the right to name what someone else's normal should be.

Wednesday, May 2, 2018

7:30am – 12:00pm

Conference Registration and Exhibits Open

7:30am – 8:45am

Breakfast Activities

Regional Breakfast Meetings

Non-Member and Staff Networking Breakfast

9:00am – 10:00am

Keynote: Key Issues Update from MI Department of Health and Human Services
- *Lynda Zeller, Senior Deputy Director, Behavioral Health and Developmental Disabilities Administration, MI Department of Health and Human Services*

During this conference's Key Issues Update Lynda Zeller, the Senior Deputy Director of the MDHHS Bureau of Behavioral Health and Developmental Disability Services will discuss a wide range of issues that impact the CMH, PIHP, and provider systems, people and communities served by those systems. Lynda's remarks will focus on efforts to improve access: to psychiatric inpatient, to stronger home and community based services and supports, to a full spectrum of criminal justice diversion strategies at all intercept points, to high integrity person-centered planning, and to family-driven-youth-guided services for children and families. Lynda will highlight common themes that cross 298 policy and pilots, MIPAD, CARES Committee, Diversion Council, and the Opioid Commission. Participants will be able to: 1. List at least two current efforts to improve access and strengthen service systems in MDHHS; 2. Restate one common key issue of focus that crosses various councils, commissions and reports; and 3. Identify at least 2 common themes that cross 298

policy and pilots, MIPAD, CARES Committee, Diversion Council and the Opioid Commission.

10:00am – 10:20am Exhibitor Refreshment Break

Concurrent Workshops:

10:30am – 12:00pm

19. Individual Risks for Criminal Behavior and Effective Approaches for Change
    - *Joshua Colby, MA, LPC, CAADC, Therapist, Arbor Circle*

Increases in the rates of incarceration have led to a focus on reducing the population involved in the criminal justice system. While reducing this population will require intentional policy changes on a macro level, interest in interventions that reduce the risks for the individuals who are interacting with the criminal justice system have also been of concern. This workshop will focus on intervening with individuals who are part of the criminal justice system including those with co-occurring disorders to reduce their risks of further involvement. This workshop will explore individual risk factors for criminal behavior, beliefs that facilitate criminal behaviors and interventions that have been shown to reduce the risk of recidivism. Complex interactions between biology, human development, and structural issues in society will be explored as factors contributing to both criminal behavior and risk of sanction for criminal behaviors. The Risk, Need, Responsivity model will be suggested as a frame work and several cognitive, behavioral, and social learning strategies will be explored. Finally, participants will practice a cognitive restructuring task that can be used with individuals to develop more adaptive thinking in response to potentially risky situations. Participants will be able to: 1. Examine biological, genetic, and environmental factors that have been associated with higher risk of antisocial/criminal behavior; 2. Describe the three key components of the Risk, Need, Responsivity Model and 8 Criminogenic Needs; 3. Describe 9 Thinking Patterns that increase risk of criminal/antisocial behavior; and 4. Practice using a Cognitive Restructuring task that can be implemented with clients.

10:30am – 12:00pm

20. **What's Going On In Lansing –** Legislative Update
    - *Alan Bolter, Associate Director, CMH Association of Michigan*

Hear the latest goings on in the Michigan Legislature. What is the status of Section 298 and where do we go from here? What other issues in the FY19 budget will have an impact on the publicly funded mental health system and what are the legislative priorities moving through the House and Senate, what impact will the 2018 election on all of this? This workshop will provide an update on the latest legislation and budget issues impacting the CMH system and how members can convey our advocacy message moving forward.

10:30am – 12:00pm

21. Using Health Information Exchange to Align Physical and Behavioral Health
    - *Dr. Tim Pletcher, Doctor of Health Administration, Executive Director, Michigan Health Information Network Shared Services (MiHIN)*
    - *Marty Woodruff, MBA, Associate Director, Michigan Health Information Network Shared Services (MiHIN)*

Comprehensive patient-centered care cannot be fully realized without an alignment between physical and behavioral healthcare providers to share patient information, diagnoses, and treatment strategies. With updates to consent laws in Michigan and nationwide, this alignment is now happening. Learn how patient-centered care has evolved, what possibilities are realistic, and what to expect as we build a true, 360-degree view of the patient for all care team members. Understand how new data-sharing opportunities are creating processes for behavioral health providers to more effectively share information. Participants will be able to: 1. Describe the impact of new consent laws in Michigan; 2. Understand opportunities for behavioral health providers to share information through the statewide health information network; and 3. Examine capabilities for aligning physical and behavioral health using messages exchanged through the health information network.

10:30am – 12:00pm

22. **Modern Day Slavery and It's Associated Trauma**
    - *Dr. Agnes Ward, PhD, LP, CAADC, Program Supervisor, Macomb County CMH Services*

This presentation will focus on identifying different forms of human trafficking and the traumatic experiences victims of human trafficking undergo. The psychological and physical health consequences of trauma on the mind and body will be explored. Co-morbid disorders will be identified in this specialized population. Factors predisposing individuals to becoming victims of human trafficking will be explored. Participants will be able to: 1. Name the different types of human trafficking; 2. Cite the health problems associated with human trafficking; 3. Summarize the association between type of trauma inflicted on victims of human trafficking and associated disorders; and 4. Identify vulnerabilities which may play a role in becoming a victim of sex trafficking.

10:30am – 12:00pm

23. Why Father**s Matter: The Case for the Importance of the Father's Role in the Lives of their** Children
    - *Kevin Spizarny, LMSW, Administrator of Children's Services, Hegira Programs, Inc.*

This workshop will focus on the important role that fathers play in the lives of their children when they are present and active. By looking at the most up to date research, the presenter will highlight the positive impact that having a present and active father can have in the life of their children. This

workshop will discuss the positive benefits active fathers can have in helping children reach important developmental milestones for infant, toddler, school aged and adolescent children. The workshop will also discuss the beneficial aspects of including fathers in children's mental health treatment, and offer specific strategies to help engage fathers into their children's treatment. Participants will be able to: 1. Describe three positive outcomes for infants, school aged and adolescent children when fathers are present and active in their lives; 2. List three benefits of involving fathers in children's mental health treatment; and 3. Learn three strategies to engage and incorporate fathers into their children's mental health treatment.

10:30am – 12:00pm 24. Diverse Mental Health Coping Mechanisms

- *Daniel K. Arnold, BA Elementary Education, Child & Mental Health Advocate*

This workshop will teach clinicians about diverse coping mechanisms for the diverse consumer. We will look at forgiveness therapy, nutrition, responding to medicine noncompliance, holistic health, faith-based healing, and finding a balance between medication and balance of other techniques. Learn tools to reach the diverse consumer. There will be a Q & A session at the end of the workshop. Participants will be able to: 1. View at least four video interview depicting perspectives on various different coping mechanisms in mental health from extreme to relevant; 2. Learn and use different methods to respond to noncompliance; and 3. Take home techniques to reaching difficult consumer.

12:00pm **"To Go"** Lunch & Adjourment

This year's conference concludes at noon with a box lunch. You may enjoy your lunch before you leave or take it with you. **It's our hope that you'll join us for the Walk A Mile in My Shoes Rally at the** State Capitol in Lansing. The annual Rally draws 2,500 people and is an excellent opportunity to educate the public about behavioral health issues and intellectual and developmental disabilities. So, grab a box lunch and hit the road to Lansing!

Walk A Mile In My Shoes Rally
Wednesday, May 2, 2018
1:15pm
Capitol Building, Lansing

Conference Goals:

- To identify strategies in preparing for or implementing value-based (outcome) payment systems.
- To identify advocacy efforts at the local, state, or federal level, including self advocacy.
- To spotlight programs highlighted in the Mental Health and Wellness Commission Report (any with partnerships with local CMHs) including Training program for local CMHs/jails/courts regarding Crisis intervention training and Assisted Outpatient Treatment.
- To identify innovative initiatives designed to increase access to substance use disorder services.
- To discuss the plans to address the challenges and opportunities emerging due to the federal Home and Community Based Services rules and the "mega" Managed Care Rule changes.
- To address efforts to further the aims of state and federal policy initiatives, including: healthcare reform, healthcare integration, and health homes.
- To provide examples of local efforts to improve healthcare outcomes through a range of healthcare integration efforts such as: initiatives between CMHs, PIHPs, and BHIDD provider organizations and physical healthcare providers and payers such as FQHCs/Rural Health Centers/Hospitals/Medicaid health plans/Primary care physicians.
- To focus on evidence-based, best and promising practices by: 1) identifying strategies for overcoming barriers to EBP implementation; 2) showing how communities have embedded existing EBPs into their system for sustainability; and 3) increasing understanding of the ways in which continuous quality improvement in EBPs can improve outcomes and performance measures.
- To increase participants' awareness, knowledge, and skills, related to mental illness, developmental disability, substance use disorders, and trauma informed care.

COMMUNITY MENTAL HEALTH PARTNERSHIP OF SOUTHEAST MICHIGAN
REGULAR BOARD MEETING MINUTES
March 14, 2018

Members Present: Judy Ackley, Greg Adams, Barb Cox, Susan Fortney, Roxanne Garber, Sandra Libstorff, Charles Londo, Caroline Richardson, Ralph Tillotson

Members Absent: Martha Bloom, Charles Coleman, Kent Martinez-Kratz, Sharon Slaton

Staff Present: Connie Conklin, Jane Terwilliger, Kathryn Szewczuk (phone), Stephannie Weary, Lisa Jennings, James Colaianne, Suzanne Stolz

Others Present: Laurie Lutomski

I. Call to Order
Meeting called to order at 6:00 p.m. by Board Chair R. Tillotson

II. Roll Call
- A quorum of members present was confirmed.

III. Consideration to Adopt the Agenda as Presented

Motion by S. Fortney, supported by G. Adams, to approve the agenda
Motion carried

IV. Consideration to Approve the Minutes of the February 14, 2018 Regular Meeting and Waive the Reading Thereof

Motion by R. Garber, supported by C. Richardson, to approve the minutes of February 14, 2018 Regular Meeting and waive the reading thereof
Motion carried

V. Audience Participation

VI. Old Business
a. March Finance Report
S. Stolz presented. Discussion followed.

VII. New Business
a. Board Action Request

Motion by J. Ackley, supported by C. Richardson, to approve the amendments as presented in the board meeting packet
Motion carried

VIII. PIHP CEO Report to the Board
- J. Terwilliger provided regional and state updates.

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Motion by R. Garber, supported by S. Fortney, to pass the resolution to resolve the Disabled, Aged and Blind (DAB) and Temporary Assistance for Needy Families (TANFF) issues
Motion carried

IX. Adjournment

Motion by R. Garber, supported by J. Ackley, to adjourn the meeting
Motion carried

- Meeting adjourned at 6:55 p.m.

_____
Roxanne Garber, CMHPSM Board Secretary

DRAFT

COMMUNITY MENTAL HEALTH PARTNERSHIP OF SOUTHEAST MICHIGAN
REGULAR BOARD MEETING MINUTES
April 11, 2018

Members Present: Judy Ackley, Greg Adams, Martha Bloom, Barb Cox, Charles Coleman, Susan Fortney, Roxanne Garber, Sandra Libstorff, Charles Londo, Kent Martinez-Kratz, Sharon Slaton, Ralph Tillotson

Members Absent: Charles Coleman, Caroline Richardson

Staff Present: Connie Conklin, Jane Terwilliger, Stephannie Weary, Lisa Jennings, Suzanne Stolz, Marci Scalera

Others Present: Laurie Lutomski

I. Call to Order
Meeting called to order at 6:03 p.m. by Board Chair R. Tillotson.

II. Roll Call
- A quorum of members present was confirmed.

III. Consideration to Adopt the Agenda as Presented

Motion by S. Fortney, supported by S. Libstorff, to approve the agenda
Motion carried

IV. Consideration to Approve the Minutes of the March 14, 2018 Regular Meeting and Waive the Reading Thereof

Motion by S. Fortney, supported by M. Bloom, to approve the minutes of March 14, 2018 Regular Meeting and waive the reading thereof
Motion carried

V. Audience Participation

VI. Roslund Prestage & Company (RPC) Audited Financial Statements Presentation
- Derek Miller of RPC presented the highlights of the FY17 CMHPSM Financial Statements report.

Motion by B. Cox, supported by K. Martinez-Kratz, to accept to the FY17 CMHPSM Financial Statements report
Motion carried

VII. Old Business
a. April Finance Report
- S. Stolz presented. Discussion followed.

VIII. New Business
a. Board Action Request

DRAFT

Consideration to approve the amendments as presented in the board meeting packet

- J. Terwilliger presented 2 SUD contract amendments.

Motion by M. Bloom, supported by J. Ackley, to approve the amendments as presented in the board meeting packet
Motion carried

IX. PIHP CEO Report to the Board

a. Report from the SUD Oversight Policy Board (OPB)
   - OPB reviewed its dashboard and discussed the STR grants at its most recent meeting.

b. PAC Update
   - J. Terwilliger shared an update on CMH-PAC, the CMH Political Action Committee.

c. Board Governance Manual
   - Board members should review the manual and provide any comments to M. Scalera.

d. Other
   - J. Terwilliger provided an update on:
   - CRCT, the new electronic health record that went live on April 1
   - 298, including the state's selection of 3 CMH pilot sites
   - Lakeshore Regional Entity, which will be going into the State Risk Corridor
   - DABs funding
   - Criminal Justice SUD project through MCHE

X. Adjournment

Motion by J. Ackley, supported by R. Garber, to adjourn the meeting
Motion carried

- Meeting adjourned at 7:19 p.m.

_____
Roxanne Garber, CMHPSM Board Secretary

DRAFT

MONROE COMMUNITY MENTAL HEALTH AUTHORITY
Unaudited Budget to Actual Analysis
ENTERPRISE FUNDS
For the of Month of March 31, 2018

Revenues	2017-18 Original Budget	2017-18 Revised February Budget	2017-18 3/31/2018 Budget	2017-18 3/31/2018 Actual	Over/(under) Variance 3/31/2018 Budget to Actual
Medicaid - Current Year	$ 24,878,394	$ 25,501,016	$ 12,750,508	$ 13,506,099	$ 755,591
Healthy Michigan	1,788,831	1,831,486	915,743	1,075,972	160,229
Autism	1,232,688	1,232,688	616,344	732,047	115,703
Local Match	997,803	997,803	498,902	498,902	-
Bank Interest	14,500	19,500	9,750	10,470	720
PA423	258,882	191,882	95,941	41,390	(54,551)
DCH Grants	402,108	384,108	192,054	171,711	(20,343)
Children's Waiver	85,391	70,390	35,195	17,063	(18,132)
SSI & Consumer Rent	17,000	17,000	8,500	6,693	(1,807)
State GF-Operations	1,468,910	1,468,911	734,456	734,458	3
OBRA	117,955	114,955	57,478	57,789	312
Other Revenue (COFR, Misc., etc.)	29,519	22,519	11,259.50	5,403	(5,856)
Total Revenues	**$ 31,291,980**	**$ 31,852,258**	**$ 15,926,129**	**$ 16,857,997**	**$ 931,868**
Expenditures					
Salaries and Benefits	$ 9,262,011	$ 9,324,560	$ 4,662,280	$ 4,645,947	$ (16,333)
Supplies (Office, Operating, Maintenance, etc.)	226,089	226,089	113,045	152,311	39,266
Administrative Contracts	900,402	850,402	425,201	404,514	(20,687)
Clinical (Service) Contracts	18,385,151	19,508,272	9,754,136	10,045,506	291,370
State Institutions	181,846	181,846	90,923	44,871	(46,052)
Community Inpatient	1,021,003	1,171,003	585,502	650,692	65,191
Equipment & Equipment Maintenance	18,071	21,071	10,536	5,278	(5,258)
Travel and Meetings	127,790	97,790	48,895	19,012	(29,883)
Vehicles, Gas & Repairs	43,575	46,075	23,038	21,879	(1,158)
Community Promotion, Advertising, Etc.	13,375	13,375	6,688	9,596	2,909
Risk Management	132,805	132,805	66,403	66,146	(256)
Utilities & Phones	139,518	139,518	69,759	68,267	(1,492)
Rentals & Building Maintenance	85,915	328,070	164,035	160,453	(3,582)
Training	77,575	63,575	31,788	19,701	(12,086)
Depreciation, Bond Interest, Bad Debt	573,854	555,354	277,677	262,663	(15,014)
Audit and Legal Costs	103,000	103,000	51,500	55,255	3,755
Total Expenditures	**$ 31,291,980**	**$ 32,762,805**	**$ 16,381,403**	**$ 16,632,092**	**$ 250,690**
Change in Fund Balance +(-)	**$ 0**	**$ (910,547)**	**$ (455,274)**	**$ 225,905**	**$ 681,179**

MONROE COMMUNITY MENTAL HEALTH AUTHORITY

Unaudited Balance Sheet

GOVERNMENTAL FUNDS

As of March 31, 2018

	As of 3/31/2018
Assets	
CASH IN BANK	$ 2,544,273
INVESTMENT ACCOUNTS	2,263,740
ACCOUNTS RECEIVABLE	697,590
DUE FROM GRANTS	57,228
DUE FROM COUNTIES, STATE & AFFILIATION	2,975,158
PREPAIDS	623,059
TOTAL ASSETS	**$ 9,161,049**
Liabilities	
ACCOUNTS PAYABLE AND CONTRACTS	$ 5,742,076
DUE TO OTHER FUNDS	-
DUE TO COUNTIES, STATE & AFFILIATION	143,243
ACCRUED WAGES AND OTHER PAYROLL LIABILITIES	233,735
DEFERRED REVENUE	10,469
TOTAL LIABILITES	$ 6,129,523
Fund Balance	
BEGINNING YEAR FUND BALANCE	$ 2,805,621
CURRENT YEAR CHANGE IN FUND BALANCE +(-)	225,905
TOTAL FUND BALANCE	$ 3,031,526
TOTAL LIABILITIES + FUND BALANCE	**$ 9,161,049**

Month of Operations in Fund Balance (Unrestricted) =	**1.09**
Fund Balance Policy - 20% of Non-Medicaid Revenue =	**$ 839,964**

MONROE COMMUNITY MENTAL HEALTH AUTHORITY

Statement of Cash Flows

As of March 31, 2018

		For 3/31/2018
Beginning Cash Balance:		$ 2,624,633
Sources of Funds		
Revenues	$ 3,659,383	
Decrease in Accounts Receivables	5,670	
Decrease in Due from Grants	65,463	
Decrease in Due **from** Counties, State & Affilation	682,234	
Decrease in Prepaids	114,655	
Increase in Accounts Payables	319,961	
Increase in Due **to** Counties, State & Affilation	296	
Increase in Payroll Liabilities	33,041	
Total Sources of Funds		$ 4,880,703
Uses of Funds		
Expenditures	$ 2,697,323	
Total Uses of Funds		$ 2,697,323
Ending Cash Balance:		**$ 4,808,013**

Monroe Community Mental Health Authority
Statement of Investments
For Month Ending March 31, 2018

Investments	Date Opened	Maturity	Amount	Current Yield	Prior YTD Interest Earned YTD	FY 2018 Interest Earned YTD	Value As of 3/31/2018
Signature Bank, N.A.							
#1020676228	10/19/2017	10/19/2018	$ 1,035,000	0.84642%	$ -	$ 3,994	$ 1,038,994
#1020555463	3/8/2018	3/9/2019	$ 1,215,910	0.99505%	$ -	$ 762	$ 1,216,673
#1020145095	5/4/2017	5/4/2018	$ 12,830	0.84642%	$ 44	$ 98	$ 12,972
			$ 2,263,740		$ 44	$ 4,855	$ 2,268,639
Interest Earned on Current Checking and Closed Investment Accounts:						$ 5,885	
Total Interest Earned as of:	3/31/2018					$ 10,740	

Retiree Health Insurance Investment Morgan Stanley: Acct#458-018514-202	Beginning Balance	Deposits from Operations	Expenses	Investment Gain/(Loss)	Security Position Changes	Market Value 3/31/2018
As of: March 31, 2018	$ 2,439,886	-	36	(30,793)	1,859,046	$ 2,409,128
As of: February 28, 2018	$ 2,517,782	1,358	(17)	(79,238)		$ 2,439,886
As of: January 31, 2018	$ 2,403,297	1,358	(1,194)	114,321		$ 2,517,782
As of: December 31, 2017	$ 2,373,574	1,358	(5,269)	33,634		$ 2,403,297
As of: November 30, 2017	$ 2,337,829	1,358	(42)	34,429		$ 2,373,574
As of: October 31, 2017	$ 2,438,514	1,358	(134,617)	32,574		$ 2,337,829
As of: September 30, 2017	$ 2,271,108	155,193	(28,195)	40,408		$ 2,438,514
As of: August 31, 2017	$ 2,282,187	1,609	(21,073)	8,385		$ 2,271,108
As of: July 31, 2017	$ 2,120,089	163,723	(53,713)	52,089		$ 2,282,187
As of: June 30, 2017	$ 2,168,234	76,609	(137,002)	12,249		$ 2,120,089
As of: May 31, 2017	$ 2,121,663	45,349	(19,226)	20,447		$ 2,168,234
As of: April 30, 2017	$ 2,208,319	-	(108,275)	21,619		$ 2,121,663
	Total	**$ 449,273**	**$ (508,624)**	**$ 260,124**		
RETURN ON INVESTMENT			FY ROI	**4.49%**		
			YEAR ROI	**11.78%**		
			*OVERALL ROI	**9.21%**		

*Account Opened in January, 2010

Finance Department

Prepared By: JK - Finance Director

Monroe Community Mental Health Authority
Unaudited Budget to Actual Analysis
Board Expenses
For Month Ending March 31, 2018

	2017-18 Original Budget	2017-18 31-Mar Budget	2017-18 31-Mar Actual	Over/(under) Variance 31-Mar YTD Budget
Direct Expenditures				
Per Diems	$ 15,660	$ 7,830	$ 4,620	$ (3,210)
Travel - Mileage	8,768	4,384	2,990	(1,394)
Conferences	19,200	9,600	2,161	(7,439)
Other	0	-	47	47
Total Direct Expenditures	$ 43,628	$ 21,814	$ 9,818	$ (11,996)
InDirect Expenditures				
Administrative Contracts:				
Mich Assoc of CMH Boards	$ 13,290	$ 6,645	$ 6,645	$ -
Total InDirect Expenditures	$ 13,290	$ 6,645	$ 6,645	$ -
Total Expenditures	$ 56,918	$ 28,459	$ 16,463	$ (11,996)