



MONROE COMMUNITY MENTAL HEALTH AUTHORITY

BOARD MEETING

July 23, 2025 – 6:00 p.m. / Aspen Room

Draft Agenda

BOARD GUIDING PRINCIPLES:

- 1.1 Monroe Community Mental Health Authority (“Authority”) exists to help individuals with mental illnesses and/or intellectual/developmental disabilities so they can live, work, and play in their communities to their fullest potential. As a Certified Community Behavior Clinic (CCBHC), the Authority will provide mental health and/or substance use care/services, regardless of ability to pay, place of residence, or age, including developmentally appropriate care for children and youth.
- 1.2 Monroe Community Mental Health Authority strives to be the provider of choice for Monroe County by offering the highest quality of treatment with positive measurable outcomes, while maintaining competitive service rates with the State.
- 1.3 Monroe Community Mental Health Authority establishes and sustains a culture that values each staff member; holds staff to high standards; is fair and respectful; values creativity, and promotes collaborative thinking.
- 1.4 Monroe Community Mental Health Authority continues to establish collaborative community relationships that enable MCMHA to provide quality service to consumers.

BOARD RULES OF CONDUCT:

- a. Speak only after being acknowledged by the Chair and only to the Chair.
- b. Keep deliberation focused on the issue and don’t make it personal.
- c. Divulge all pertinent information related to agenda items before action is taken.
- d. Seek to understand before becoming understood.
- e. Seek to do no harm.

CITIZEN RULES OF CONDUCT:

- a. In order for our Board to move efficiently through the meeting agenda, we ask that everyone present conduct themselves respectfully and with decorum. Anyone who chooses not to comply with this will be asked to leave the building.

MISSION STATEMENT: Enrich lives and promote wellness.

VISION STATEMENT: To be a valued/active partner in an integrated System of Care that improves the health and wellness of our community.

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

	<u>Guide</u>
I. Call to Order	01 min
II. Roll Call	02 min
III. Pledge of Allegiance	02 min
IV. Motion to Adopt the Agenda as Presented	02 min
V. Motion to Approve the Minutes from the July 16, 2025 Board Meeting and waive the Reading Thereof	02 min
VI. Public Comments <i>“The Board will listen respectfully to public comments but will not respond directly during the meeting. You can expect a follow up contact from the Chief Executive Officer or representative within 24 hours if your comment is about a specific problem or complaint. Comments shall be limited to 3 minutes”.</i>	03 min/Person
VII. Presentations, Recognition, and Celebrations a. Clinical Report – Crystal Palmer	20 min
IX. Board Committee Reports a. Committee Chair Reports i. Bylaws & Policy ii. Community Relations iii. Executive b. Appointments to Board Committees	05 min

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|--------------|--|----------------------|-------------------------------|--------|---------------------------------------|--------|-------------------|--------|----------------------------|---------------|
| X. | Items for Board Action | 15 min | | | | | | | | |
| | <ul style="list-style-type: none"> a. Motion to Approve the Consent Agenda Less Item _____ <ul style="list-style-type: none"> i. Service Contracts as Presented ii. Administrative Contracts as Presented b. Motion to Approve a Six (6) Month Pilot with VelloHealth for the Cost of \$58,000 | | | | | | | | | |
| XI. | Authority and Regional Policy Review/Approval (<i>Executive Summary in Packet</i>) | 02 min | | | | | | | | |
| | <ul style="list-style-type: none"> a. Motion to Approve the Authority Policy, Procedure, and Exhibits as Presented <ul style="list-style-type: none"> i. Policy: <table border="0" style="margin-left: 20px;"> <tr> <td style="padding-right: 20px;">HR4052</td> <td>Employee Photo Consent Policy</td> </tr> <tr> <td>HR4029</td> <td>Social Security Number Privacy Policy</td> </tr> <tr> <td>HR4043</td> <td>Anti-Fraud Policy</td> </tr> <tr> <td>HR4006</td> <td>Drug-Free Workplace Policy</td> </tr> </table> ii. Procedure: HR4043-P1 Anti-Fraud Procedure iii. Exhibit: HR4052-E1 Employee Photo Consent Form Exhibit iv. Rescind: N/A v. Relocate: N/A b. Motion to Approve the Regional Policies as Presented <ul style="list-style-type: none"> i. Policy: PI6009 Incident Reporting Policy | HR4052 | Employee Photo Consent Policy | HR4029 | Social Security Number Privacy Policy | HR4043 | Anti-Fraud Policy | HR4006 | Drug-Free Workplace Policy | 02 min |
| HR4052 | Employee Photo Consent Policy | | | | | | | | | |
| HR4029 | Social Security Number Privacy Policy | | | | | | | | | |
| HR4043 | Anti-Fraud Policy | | | | | | | | | |
| HR4006 | Drug-Free Workplace Policy | | | | | | | | | |
| XII. | Relationship with the Region, County, and Others | 05 min | | | | | | | | |
| | <ul style="list-style-type: none"> a. Regional PIHP Board Meeting Minutes – Did not meet in July b. CMHAM Policy and Legislation Committee Report – Rebecca Pasko | | | | | | | | | |
| XIII. | Items from the Chief Executive Officer | 10 min | | | | | | | | |
| | <ul style="list-style-type: none"> a. Chief Executive Officer’s Report – Lisa Graham | | | | | | | | | |
| XIV. | New Business | 00 min | | | | | | | | |
| XV. | Public Comments | 03 min/person | | | | | | | | |
| XVI. | Board Member Announcements | 03 min/person | | | | | | | | |
| XVII. | Adjournment | 01 min | | | | | | | | |

The next regular scheduled meeting for the Monroe Community Mental Health Authority Board is for Wednesday, August 20, 2025 at 6:00pm.

LG/dp 2:34pm



BOARD OF DIRECTORS REGULAR MEETING MINUTES
July 16, 2025

Present: Rebecca Pasko, Chairperson; John Burkardt, Vice Chairperson; Susan Fortney; Secretary; Mike Humphries; Deb Staelgraeve; Ken Papenhagen; Dawn Asper; LaMar Frederick; Reda Biniecki; and Becca Curley

Excused: Joan Canning and Naomi Stoner

Absent:

Staff: Lisa Graham, Ken Melvin, and Debi Andrews

Guests: Dr. Frances Jackson, Parliamentarian; and 6 guests were present

I. CALL TO ORDER

The Board Chair, Rebecca Pasko, called the meeting to order at 6:00 p.m.

II. ROLL CALL

Roll Call confirmed a quorum existed.

III. PLEDGE OF ALLEGIANCE

The Pledge of Allegiance was led by Rebecca Pasko.

V. CONSIDERATION TO ADOPT THE DRAFT AMENDED AGENDA AS PRESENTED

Rebecca Pasko commented the agenda and Board Packet have been amended. Items IX d and X a were added to the agenda along with a Board Action Request in the Board Packet.

Dawn Asper moved to adopt the draft amended agenda as presented. Susan Fortney supported. Motion carried unanimously.

VI. CONSIDERATION TO APPROVE THE MINUTES FROM THE JUNE 25, 2025 BOARD MEETING AND WAIVE THE READING THEREOF

John Burkardt moved to approve the minutes for the June 25, 2025 Board Meeting and waive the reading thereof. Becca Curley supported. Motion carried unanimously.

VII. BOARD MEETING EVALUATION REPORT

The Board Meeting Evaluation Report from the June 25, 2025 Board Meeting was reviewed.

VIII. PUBLIC COMMENTS

There were no public comments.

IX. PRESENTATIONS

- a. VelloHealth – Jim Brown introduced Nathaniel Weiss, founder and CEO of VelloHealth, a company that's innovating how technology supports community-based behavioral health. As many board members know, our outreach teams navigate complex environments each day to deliver client-centered care. The tools we give them must be just as dynamic. VelloHealth's proprietary mobile application is purpose-built to enhance service delivery in the field: providing smart routing, secure communication, and real-time access to client information. More importantly, it seamlessly integrates with our current electronic health record system, eliminating redundant data entry and strengthening care coordination.

Our proposed six-month pilot project with VelloHealth will allow us to evaluate how this platform supports key functions across ACT, Case Management, and Mobile Crisis teams. We're particularly interested in how it may streamline documentation, strengthen crisis response logistics, and elevate the safety and effectiveness of staff interactions with clients.

Lisa Graham commented that she feels good about the presentation the board is about to see. This will strengthen our Strategic Plan. It speaks to staff retention, improving clinical outcomes, and impacts budget as documentation can be done quicker.

Nathaniel Weiss provided an overview of who VelloHealth is, described the proposed pilot between Monroe and VelloHealth, what VelloHealth does, successes with other agencies, and what a partnership could look like in action. Mr. Weiss answered board member questions.

Lisa Graham thanked Mr. Weiss for presentation and thanked the Board for hearing the presentation. It is an interesting and exciting solution for us. VelloHealth will be up for consideration at the July 23, 2025 Board Meeting.

- b. Operations Report – Bridgitte Gates presented the Operations Report, highlighting updates from Revel Marketing, Monroe County Fair, Community Presence, Customer Services, 3rd Quarter Grievances, and Kiosk data.
- i. Working with Revel on the Behavioral Health Urgent Care marketing plan.
 - ii. MCMHA will have a booth at the Monroe County Fair. Staff have volunteered their time.
 - iii. MCMHA continues to provide a presence in the community – booths, educational events.
 - iv. Grievances: Data from June was presented.
 - v. Pulse for Good: Kiosk data from provided 27 total responses from the lobby and prescriber kiosks only.
 1. Comments made where low stars were received:
 - a. Office appointments are not available when I am available
 - b. After school appointments are not available
 - c. My appointment was cancelled/rescheduled, and I wasn't notified
 - d. My worker was working from home.
 - e. Staff met with not friendly
 - f. Building is hard to find

X. ITEMS FOR BOARD CONSIDERATION

- a. Board Action Request: VelloHealth – A presentation was provided by Nathaniel Weiss, founder and CEO of VelloHealth. A Board Action Request with detailed information was also included in the Board Packet for review. Consideration for VelloHealth will occur at the July 23, 2025 Board Meeting.
- b. Service Contracts - Alicia Riggs presented the Service Contracts for Board consideration.
- c. Administrative Contracts – Alicia Riggs presented the Administrative Contracts for Board consideration.

- d. Board Action Request: Behavioral Health Urgent Care Lease – We have been working with ProMedica on a lease agreement for Behavioral Health Urgent Care. We have come to an agreement and Chris Greenwade, ProMedica, Eun Lim and Daniel Schairbaum, Dykema are here to review the high points of the lease agreement and answer questions. Lisa Graham commented that a Board Action Request is included in the Board Packet and that normally we like to give the Board a week before consideration, however, due to its timely nature, Lisa is requesting the Board to consider approving this evening.

Chris Greenwade worked with Alicia Riggs, MCMHA and Eun Lim, Dykema to develop a lease agreement. Mr. Lim presented the high points of the lease, covering that there are 8 units at 1000 square feet that were condominiums that have changed to office space. The lease is for three (3) years and after three years it will renew automatically. Either party has a right to terminate the lease by providing 180-day notice to the other party. Rent cost is \$1 annually. The Monroe tenant will maintain the premise interior and the landlord will maintain the exterior. The plan is to do an inspection before the delivery date. If the premise is not acceptable, the lease allows for termination within 90 days. Zoning for a Behavioral Health Urgent Care is permitted for this location.

Chris Greenwade, Eun Lim, and Daniel Schairbaum answered board member questions.

Mike Humphries commented that this is something we have been working on for a long period of time and knew this is where it was going to end up. Mike appreciated the lease agreement that ProMedica has offered MCMHA. Even if we do an inspection and find something catastrophic, we can get out of the lease within 90 days. The utilities should not be much of an issue. That is a low risk and should move forward.

Lisa Graham thanked Chris Greenwade, Eun Lim, and Daniel Schairbaum for their time this evening.

XI. ITEMS FOR BOARD ACTION

- a. **Motion to Approve a 3-Year Lease Agreement Between Monroe Community Mental Health Authority and ProMedica Monroe Regional Hospital for the Property Located at 316 Colonial Court, Monroe, MI 48162 for Purposes of Establishing a Behavioral Health Urgent Care**

Mike Humphries moved to approve a 3-year lease agreement between Monroe Community Mental Health Authority and ProMedica Monroe Regional Hospital for the property located at 316 Colonial Court, Monroe, MI 48162 for purposes of establishing a Behavioral Health Urgent Care Clinic with the option to terminate within 90 days if the premise is not acceptable. Susan Fortney supported. Roll call: In favor: Humphries, Staelgraeve, Papenhagen, Asper, Fortney, Burkardt, Pasko, Frederick, Biniecki, and Curley; Opposed: none. Motion adopted unanimously.

XII. FISCAL FINANCE REPORT

Ken Melvin introduced Debi Andrews from Rehmann Finance Team. We continue to bring Rehmann resources on board to help in different ways. Debi is assisting with CCBHC and shared a little about herself with the Board. Debi has been in the behavioral health field for 15 years and has been at Rehmann for 10 months. Debi commented she is happy to be back in the CMH system.

- a. Fiscal Finance Report: Ken Melvin presented the May financials, highlighting:
- Statement of Activities:
 1. Revenue is trending/projected higher than last year, as expected. This is due to budgetary, and rate increases from the PIHP capitation and CCBHC.
 2. Spending is largely in line with the prior year with the exception of provider network. We expect to have increased costs as we pushed out DCW increases and targeted specialized residential rates. We also have a conservative IBNR estimate to account for other potential increases and ABA rate changes.
 3. Expecting to contribute \$319,665 to the fund balance primarily driven by ongoing efforts to reduce non-Medicaid spending and increase service delivery to Medicaid individuals.

ii. Statement of Activities – Mental Health Budget-to-Actual:

1. Revenue is trending/projected higher than budget for Medicaid as we see slight increases for waiver payments. CCBHC revenue is lower than expected as we have lags with T-1040 reporting. County appropriation revenue is lower than budgeted due to timing. We expect to receive the full budget. Other revenue is trending high due to a provider refund received.
2. Salary and benefit expense are trending lower than budget in total. Mostly due to lower than anticipated benefit costs in addition to vacancies of staff positions.
3. Provider network expense is higher than anticipated as mentioned in the bullet above.

iii. FY2025 Revenue and Expenses by Fund Source:

1. The CCBHC Medicaid program is showing a surplus of \$823,070 through this reporting period. However, CCBHC non-Medicaid is trending over budget.
2. Traditional State General Fund spending is lower than budgeted. This is a result of efforts around Medicaid enrollment and tracking of deductibles.

LaMar Frederick asked if Ken Melvin has heard anything about a potential impact to Health Michigan. Ken commented that he believes there will be an impact. There are some directed payments that may impact hospitals and how our rates interact with that. They are anticipating an analysis for the State of Michigan and Ken has not received that information yet.

b. Other Comments:

- i. Work Requirements: We are funded on all Medicaid eligibles in the County. If they fall off Medicaid it will also impact us. We are keeping a pulse on this and if we receive a report, will bring back to the board with some recommendations.
- ii. CCBHC Direct Pay: This is where MDHHS wants to bypass the PIHP and pay the CMHs directly. There isn't a plan on how this will work yet and they want to implement by 10/1/25.
- iii. Rate Adjustments: Rates came out and we may get another one before the end of the year and anticipating this will be a positive boost for us.
- iv. Audits: The auditors were not able to present this evening due to a conflict. We have this on our radar and would like to have them present at a future meeting.
- v. Budget Planning for FY26: Brining the Fiscal Year 2026 budget to the Board in September for review and approval.

XIII. NEW BUSINESS

There was no new business.

XIV. PUBLIC COMMENTS

There were no public comments.

Mike Humphries commented that a month ago there was a lot of items on the agenda for CMS. Ken Melvin commented that we have two paths we can go down. Path one, we can change our name with the IRS which there are varying times on how long that may take, and our legal team felt this could take up to 12 months. Path two has challenges in which we will have to update our NPI and navigating that process is a question mark. It could be simple, or it may not be. We also have to update our title for banking information. Both paths have challenges. Our bankers will weigh in on this and will bring this back next week if needed.

Mike Humphries commented that if NPI is the issue, get a new one as you can have more than 1 for a business.

Dr. Frances Jackson commented that when the Board postpones a matter and does not take it up at the next Board Meeting, the matter falls to the ground. There will need to be a new motion added to the agenda.

Dr. Frances Jackson explained the difference between a motion to table a matter versus a motion to postpone a matter.

The motion regarding the legal name change that was postponed has fell to the ground. A new motion will be brought back to the Board next week if one is needed.

XV. BOARD MEMBER ANNOUNCEMENTS

Mike Humphries requested clarification from the Chair on what a board working committee is and elaborate what that work is in comparison to the work the Board is doing. Mike also asked if signing up for committees was first come first serve?

Rebecca Pasko provided an example using the Business Operations Committee. The work on the committee would be project based such as Medicaid changes, the PIHP Procurement, and a Millage. Committee members would be participating, researching, and understanding. Administration is not part of committee meetings unless necessary, this is a time to meet, to share with the committee what they have learned and then sharing that with the Board. For first come first serve, we followed the same process as past practice.

Ken Papenhagen will not be in attendance for the July 23, 2025 Board Meeting.

Dawn Asper commented that she is happy to hear that people already volunteered for the fair.

Susan Fortney is thrilled that we are going to do a Behavioral Health Urgent Care.

John Burkardt commented on the agencies Transportation Policy and waiting to hear further information on whether insurance will allow board members to use the agency van.

XVI. ADJOURNMENT

Rebecca Pasko thanked everyone and adjourned the meeting at 8:00pm.

Submitted by,

Susan Fortney, Secretary

LG/dp
7/19/25

BOARD CLINICAL REPORT EXECUTIVE SUMMARY

July 2025

QUALITY WORKFORCE

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

- MCMHA continues to recruit and hire staff for current vacancies, which is nine (9) at this time. Two (2) positions are new for the Behavioral Health Urgent Care.

TRUSTED COMMUNITY PARTNER

Strategic Plan Goal 2: Serve as a Responsive and Reliable Community Partner

- There were 17 universal referrals made in June. 82% received some type of follow-up, services authorized, etc. 0% declined any further intervention, and 18% MCMHA didn't have enough information for follow-up or received no response.
- Certified Peer Support Specialists (CPSS) continue to provide support at the ALCC. The CPSS did engage in seven (7) programs/activities and zero (0) 1:1 meeting during the month of June.

ACCOUNTABLE STEWARDS OF PUBLIC DOLLARS

Strategic Plan Goal 3: Develop and Implement a Stable yet Agile Financial Strategy that Supports MCMHA's Mission and Operates in Accordance with Federal and State Regulations.

- This goal is addressed by the Finance Department.

SERVICES PROMOTE RECOVERY

Strategic Plan Goal 4: At All Levels of the Organization, Services Provided Meet the Needs of the Customer

- Crisis Mobile was deployed 96 times in June, which averaged 0.83 hours of face-to-face interaction time.
- The average response time for Crisis Mobile was approximately 20.25 minutes, which is likely due to 67% of the calls from the 48161 and 48162 zip codes.
- There were multiple referral sources for Crisis Mobile; 60% were from the Monroe County Sheriff's Department and Monroe City Police; 24% were from Access Dept/CMH, 14% were self-referral and 2% from a school.
- MCMHA is looking to expand utilization of the universal referral form with Heartbeat of Monroe.
- There were 483 appointments scheduled for the Benesh Building in FY25 with 77% occurring in the office.
- Enrollment for the CCBHC has decreased by 47 members over the last month. This is a 2% decrease in enrollment.
- MCMHA currently has 58 enrollees in the Behavioral Health Home program.

CONSUMER VOICE INFORMS DECISION MAKING

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

- This goal is being addressed by the Operations Department re: on consumer voice re: satisfaction, etc.

MISCELLANEOUS

- The data for incoming calls being answered is 96% for FY25, which meets MCMHA's goal of 95%.
- MCMHA was alerted by MDHHS on June 25th that we will be awarded Quality Bonus Payments for FY24. Tentatively, MCMHA will be awarded \$608,688 with an opportunity for additional funding.

QUALITY WORKFORCE

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

Objective #1: MCMHA's workforce meets the needs of the agency.

- MCMHA's staff receive all training necessary for their respective positions annually.

The Community Mental Health Association of Michigan hosted its annual Summer Conference June 9 - 11th. This year's conference theme was "The Power of Community". Keynotes focused on Understanding Stress and Vicarious Trauma, Supporting each Other through Community, Leading from Lived Experience, and Federal Policy Updates. The conference brings together behavioral health professionals throughout Michigan to network and learn together. The Chief Clinical Officer, Chief Operations Officer, and the CCBHC Program Director were in attendance.

Child & Family Program Director and Supervisor attended the Michigan Bureau of Children's Coordinated Health, Policy, and Supports and the Children's Services Administration's Child Welfare/Community Mental Health Cross System Learning Event in Ann Arbor, June 24th. Keeping youth safe while addressing the needs of youth transitioning systems such as foster care and/or juvenile justice back into communities while having intensive behavioral and mental health needs was the focus. Former NFL player Gaelin Elmore presented his own lived experience, encouraging everyone to be the difference for all youth they encounter by creating environments for belonging.

Objective #2: Provider panel is adequate to meet the needs of the agency.

- Assess South County service options and make recommendations.

No updates as of this month re: South County services.

Additionally, we do not have a delay in service for adult services re: therapy but do currently have a delay in service for Child and Family therapy for approximately 13 individuals. The Child and Family team is providing case management services to 3 of these individuals and the other 9 have requested therapy only. We also have one case that is receiving case management but has requested home-based services. We are currently exploring options in order to ensure delivery of services.

Due to the transportation limitations of the Clubhouse and the number of individuals interested in participating but needing transportation, we have developed a system to allow partial attendance based on a modified transportation list. Individuals who request transportation would like to attend five (5) days a week but can only attend one (1) to three (3) days a week at the moment. We are exploring all the options in order to ensure Clubhouse services are available to those requesting the service.

The Clinical Department still has vacancies and continues to work with the Human Resources Department to fill these positions. We have the following vacancies as of July 16th:

- Case Service Manager – I/DD
- Case Service Manager – Adult (2 positions)
- Peer Support Specialist (PT/FT – 2 positions)
- Outpatient Therapist

BOARD CLINICAL REPORT

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- Access Screener
- Crisis Care Clinician (2 – NEW POSITIONS)

TRUSTED COMMUNITY PARTNER

Strategic Plan Goal 2: Serve as a Responsive and Reliable Community Partner

Objective #1: Critical Incident Stress Management Team responds to community incidents as requested.

Critical Incident Stress Management (CISM)

During this reporting period, we have not had any deployments. When MCMHA is made aware of events/incidents that occur in the community, we do reach out to offer this service. At times, it is utilized, and other times other community resources have been utilized.

Objective #2: MCMHA provides education and awareness of mental health resources in the community.

Education and Awareness

The River Raisin Clubhouse hosted the Michigan Clubhouse Coalition General Meeting on July 9th, marking the first time ever that the MCMHA Clubhouse program has hosted this statewide gathering. The Clubhouse welcomed 40 visitors representing 6 Clubhouses in person, and 30 additional Clubhouses joined virtually from across the state. It was a proud moment for the team and members to showcase the beautiful new building and the vibrant spirit of the Clubhouse community.

Visitors expressed overwhelmingly positive feedback about the hospitality, the energy of the members, and the impressive progress the Clubhouse has made. Notably, the new Vice President of Goodwill of Greater Detroit was in attendance. She shared how proud she is of the growth and extended her mentorship and support moving forward. She had previously visited the former location in the Benesh Building, and remarked on how welcoming, visible, and inspiring the new location is.

MCMHA hosted a meeting with Lenawee and Livingston Counties who were interested in learning more about our crisis mobile services as they work to emulate parts of our model in their community. They were interested in learning from our implementation of the program. We have a standing offer in place for them to come out and see our crisis services in operation if they would like.

The CCBHC Program Director met with representatives from the Veterans Affairs Ann Arbor Health Care System June 4th and met with the County of Monroe Veterans Coordinator on June 12th and June 17th to increase partnership between the three organizations and discuss outreach opportunities to increase services to veterans in the Monroe community.

A planning meeting for MCMHA's annual Mental Health Summit was held June 6th. The MH Summit will take place in October with the tentative focus being on crisis response topics. More information will be shared as it is available.

A National Alliance on Mental Illness (NAMI) Walk & Fundraising Planning Meeting was held June 23rd. MCMHA will have a walk team and begin fundraising efforts leading up to the September 20th Walk.

The Intellectual/Developmental Disability (I/DD) Program Supervisor was able to secure a learning event for staff working with this population to learn how to promote a savings account for our consumers with an I/DD

BOARD CLINICAL REPORT

July 2025

diagnosis. Scott DeVarona, the Executive Director of the Michigan Achieving a Better Life Experience (MiABLE) program provided a presentation virtually on Wednesday, June 18th, to help staff understand the benefits of our families opening a MiABLE account. Due to recent changes in the eligibility rules for Medicaid, some of our consumers have faced the loss of Medicaid and their covered services. Through a MiABLE Disability Savings Program, individuals with disabilities and their families can save funds for Qualified Disability Expenses that support health, independence, and quality of life without jeopardizing eligibility for necessary federal benefits. MCMHA's Network Benefits Specialist was also able to attend this training and is now able to assist individuals needing to utilize this option to maintain their Medicaid coverage. (For more information about MiABLE : <https://www.michigan.gov/setwithmet/mi-529/miabile/frequently-asked-questions>)

Universal Referral

MCMHA continues to utilize the Universal Referral Form program which allows some of our community partners the opportunity to have a quick and easy way of referring to individuals they encounter that they believe to be in need. MCMHA has now has 12 agencies plus law enforcement utilizing the universal referral form. A list of the agencies is as follows:

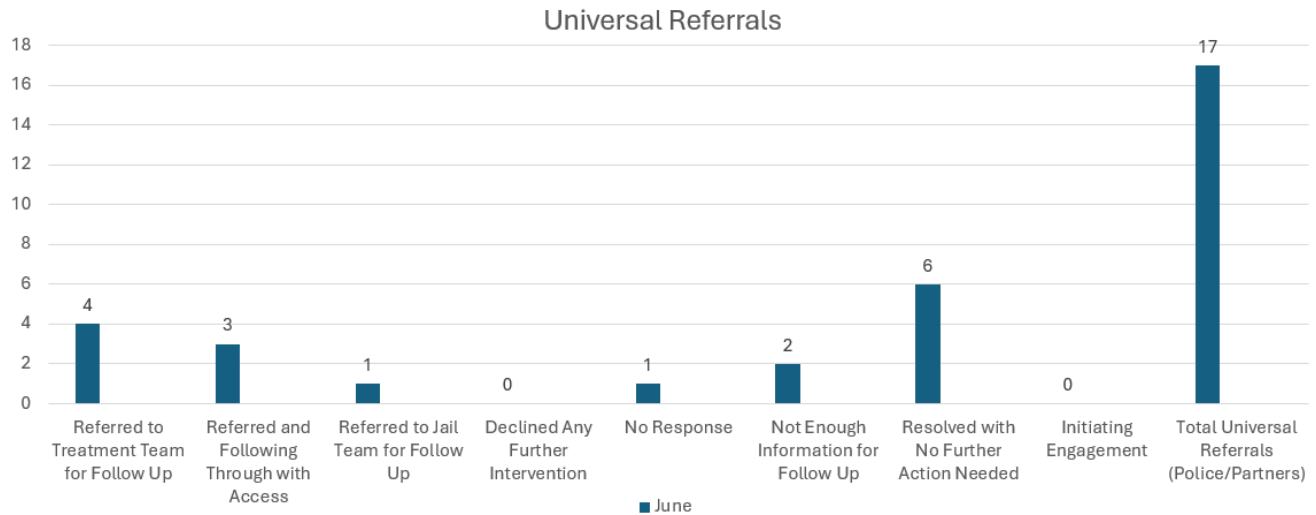
- Opportunity Center at the ALCC
- Salvation Army
- Disabilities Network
- Paula's House
- Fairview
- Saleh Center
- Health Department's Maternal and Child Health Services
- Monroe Housing Commission
- YMCA
- Michigan Works!
- Oaks of Righteousness
- ProMedica Physicians Monroe Pediatrics – Dr. Gandert

Heartbeat of Monroe is interested in utilizing the universal referral. The Access/Crisis/Diversion Director will be meeting with them in the month of July to discuss the form and process.

During the month of June, there have been 17 universal mental health referrals, including law enforcement and community referrals. The outcomes of these cases are as follows:

BOARD CLINICAL REPORT

July 2025



Opportunity Center at the ALCC

Monroe Community Mental Health Authority (MCMHA) continues to partner with the Opportunity Center at the ALCC by placing peers' services within the center on a consistent schedule. Certified Peer Support Specialists/Parent Support Partners meet individuals at the Center on Mondays and Thursdays from 12-4pm for anyone interested. These days have the highest volume of contacts and services. Appointments will be continuously monitored, and availability will be increased if the need changes.

Peers continue to help link and coordinate services, including engaging those who need community mental health services or those involved in them. In the month of June, MCMHA Peer Support Staff provided zero (0) 1:1 meetings/appointments and the peers did engage in seven (7) programs/activities within the Opportunity Center.

The supervisor for the YPSS is still trying to coordinate with the ALCC supervisor to schedule a meeting to discuss opportunities to expand the service for youth.

Crisis Mobile Response Team

Please see the attached report (Attachment #1) regarding data from the Crisis Mobile Response Team for the months of June.

ACCOUNTABLE STEWARDS OF PUBLIC DOLLARS

Strategic Plan Goal 3: Develop and Implement a Stable yet Agile Financial Strategy that Supports MCMHA's Mission and Operates in Accordance with Federal and State Regulations.

This goal is addressed by the Finance Department.

SERVICES PROMOTE RECOVERY

Strategic Plan Goal 4: At All Levels of the Organization, Services Provided Meet the Needs of the Customer

Objective #1: Individuals access services timely.

- All services are delivered timely
- Services are delivered at a location that is convenient for the consumer

BOARD CLINICAL REPORT

July 2025

Benesh Expansion

The data below identifies the individuals' zip codes scheduled at the Benesh building during FY25. Note that the information includes all appointments, whether held in-person or virtually.

Zip Code	Location	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Total
40219	Louisville, KY	0	0	0	0	0	0	0	0	1	1
48101	Ann Arbor	0	0	0	0	0	0	0	0	0	0
48103	Ann Arbor	0	0	0	0	0	0	0	0	0	0
48104	Ann Arbor	1	0	0	0	0	0	0	0	0	1
48105	Ann Arbor	0	0	0	0	0	0	0	0	0	0
48111	Belleville	0	0	0	0	0	0	0	0	0	0
48117	Carleton	5	2	0	2	2	5	3	0	0	19
48131	Dundee	0	0	1	1	1	3	4	1	3	14
48133	Erie	6	3	1	0	1	0	0	0	0	11
48134	Flat Rock	0	0	0	0	0	1	0	0	0	1
48135	Garden City	0	0	0	0	0	0	0	0	0	0
48140	Ida	0	0	1	0	0	1	0	0	1	3
48144	Lambertville	0	0	2	1	2	0	1	1	3	10
48145	LaSalle	0	0	0	1	0	1	0	1	0	3
48153	Maybee	0	0	0	0	0	0	0	0	0	0
48157	Luna Pier	1	0	1	1	2	0	0	0	1	6
48159	Maybee	1	3	4	0	1	2	0	0	0	11
48160	Milan	1	0	0	3	2	2	1	0	0	9
48161	Monroe	20	22	13	30	25	32	13	20	24	199
48162	Monroe	17	11	10	9	16	13	12	14	9	111
48164	New Boston	0	0	0	0	0	0	0	0	0	0
48166	Newport	2	10	5	8	2	5	1	5	4	42
48177	Samaria	0	0	0	0	0	0	0	0	0	0
48179	South Rockwood	0	0	0	0	0	0	0	0	0	0
48180	Taylor	0	0	0	0	0	0	1	1	0	2
48182	Temperance	8	2	0	2	3	2	0	2	3	22
48191	Willis	0	0	0	0	0	2	0	0	0	2
48192	Wyandotte	0	0	0	0	0	0	2	0	0	2
48193	Riverview	0	0	0	0	0	0	0	0	1	
48197	Ypsilanti	0	0	0	0	0	1	0	0	0	1
48198	Ypsilanti	0	0	0	0	0	0	0	0	0	0
48214	Detroit	0	0	0	0	0	0	0	0	0	0
48336	Fowlerville	0	0	0	0	0	0	0	0	0	0
48817	Corunna	0	0	0	0	0	0	0	0	0	0
49221	Adrian	0	0	0	1	0	0	0	0	0	1
49267	Ottawa Lake	0	1	0	1	1	1	0	0	0	4
49270	Petersburg	1	0	0	1	0	1	1	2	2	8
49276	Riga	0	0	0	0	0	0	0	0	0	0
Total		63	54	38	61	58	72	39	47	52	483

Below the table provided indicates out of the total number of appointments scheduled each month for FY25, how many of those appointments were in-person at the Benesh Building; and out of all appointments scheduled, whether in-person or virtual, how many were kept.

	% Appointments in Office	% Kept Appointments (in-person/virtual)
October 2024	91%	47%
November 2024	78%	45%
December 2024	87%	53%
January 2025	89%	49%
February 2025	79%	50%
March 2025	60%	63%
April 2025	72%	51%

BOARD CLINICAL REPORT

July 2025

May 2025	79%	53%
June 2025	60%	48%

Substance Use Disorder (SUD) Screening and Referral Data

This data will be reported quarterly (January, April, July, and October). 3rd Quarter (April 1, 2025, through June 30, 2025) data is provided below:

- Total SUD Screenings = 248
- Total SUD call activity = 625
- Total SUD Requests = 277
- Total SUD Admissions = 220

Certified Community Behavioral Health Clinic (CCBHC)

As of last month, there were 2,098 members currently enrolled in CCBHC through the WSA, which is a decrease of 47 enrollees or 2% since last reported in June. This number will continue to fluctuate as consumers enroll and disenroll in services. This remains to be around 80% of our consumers.

In May, MDHHS released a memo that indicated CCBHC funding would come directly from MDHHS beginning October 2025. Various workgroups are being created to inform people about the next steps and problem solving for achieving this goal. CCBHC Workgroups include Utilization Management, Programmatic/Quality Reporting, Substance Use Disorder, Fee for Service/Waiver Support Application, and Information Technology. The workgroups began meeting in June and have had MCMHA representatives attending. The groups will provide feedback and recommendations to MDHHS regarding transition needs and the next steps.

MCMHA leadership has met twice in June (June 16th and June 23rd) to discuss CCBHC Quality Metrics and plan for continuous quality improvement for CCBHC and MDHHS Quality metrics.

MCMHA was alerted by MDHHS on June 25th that we will be awarded Quality Bonus Payments for FY24. Tentatively, MCMHA will be awarded \$608,688 with an opportunity for additional funding. If a CCBHC does not meet pre-established benchmarks for QBP measures, the potential distribution amount will be added to a QBP redistribution pool specific to each measure. Funds in the pool will be distributed equally to the clinics in the top 25% of performance on each measure. Given the possibility that measure rates may change, redistribution pool amounts will be shared with final award notices.

The CCBHC Implementation Meeting was held June 26th. The focus of this meeting was reviewing follow up action items for enhancing Monroe CMHA's Zero Suicide Implementation strategy, the CCBHC Direct Payment transition and workgroup updates, and our annual needs assessment update.

Collection of the Annual Patient Experience of Care (PEC) Surveys (youth and adult) began in May. 300 youth and 300 adult consumers were sent letters inviting them to complete the survey on paper or online. Surveys were also collected onsite at Monroe's Mental Health Fun Day, and a survey invitation was posted on Facebook. Participants are entered to win a \$25 gift card. Survey collection will continue with reminder post cards being sent out in future months. This is a CCBHC required survey with data submitted to MDHHS annually.

Objective #2: MCMHA delivers Evidenced-Based services

- Transition Age Youth Services
- Dialectical Behavioral Therapy Skills Group

BOARD CLINICAL REPORT

July 2025

Transition Age Youth Services

The Transition Age Youth program is informed by the TIP (Transition to Independence Process) Model which emphasizes youth voice and choice and supports youth and young adults with their transition to adulthood. The TIP Model is a strength-based, youth-driven framework that was developed for working with youth and young adults (14-29 years old) with emotional/behavioral difficulties. The clinical team is currently transitioning cases and inviting consumers whose needs might be best met by this model. The Children's Supervisor and the Transition Facilitator are working with the Program Director, community stakeholders, and the state coordinator and contractor to support our growth in this program.

The Transition Facilitator is actively providing TIP (Transition to Independence Process) to seven (7) Transition Aged Youth. While still in the early stages of the process, the Facilitator has already observed two (2) young adults move from contemplation stage of change to actively planning or working towards their identified goals. It has been noted that these two (2) youths have been stagnant in their progress for some time, and without the TIP/TAY program likely would not have made the progress they have. Transition Facilitator continues to reach out to other staff in the Child and Family department to identify more youth/young adults that are appropriate for the service.

Dialectical Behavioral Therapy (DBT) Skills Group

The DBT team has been established, and each member has completed training. MCMHA submitted the DBT application to the PIHP on April 29th for review, and the PIHP submitted the application to MDHHS on May 1st. Since then, MDHHS has requested additional information; therefore, we are still awaiting approval to utilize the modifier. As previously stated, the DBT Team has successfully started their first group as of June 5th. The group is scheduled weekly along with individual therapy sessions. The primary members of the DBT Team will be attending DBT Foundational Training to help support their skills and continue to build the DBT program the last week in July.

Monroe CMHA is waiting for confirmation from the MDHHS MiFAST team for a review date. MDHHS has received MCMHA's application for a DBT team and is in review of the request. This is a CCBHC required service.

Social Skills Group

The Early Childhood Clinical Team is just wrapping up on a Social Skills Group for children with early childhood social-emotional disorders. This group was offered to children who receive services within our Infant and early childhood mental health team (IMH). Two clinicians, with support from one of our interns, worked with a small group of young children on personal boundaries, classroom and home transitions, and emotional regulation. The team would like to thank Runyons for donating some carpet squares which helped the group to understand personal space as well. The group was attended by up to 8 children under the age of six with five completing.

Parenting Through Change group continues to occur for parents of children diagnosed with a Serious Emotional Disturbance (SED). They have just passed the halfway point with six (6) of the 10 sessions completed with approximately five (5) parents. This session is being held during evening hours to accommodate family schedules.

BOARD CLINICAL REPORT

July 2025

Objective #3: Integrated healthcare is provided to all consumers.

- Behavioral Health Home
- Peer-Run Wellness Groups

Behavioral Health Home (BHH)

The Behavioral Health Home (BHH) provides comprehensive care management and coordination services to Medicaid recipients with a select serious mental illness/serious emotional disturbance (SMI/SED) diagnosis. Participation is voluntary and enrolled recipient may opt-out at any time.

The program has three goals: 1) improve care management; 2) improve care coordination between physical and behavioral health care services; and 3) improve care transitions between primary, specialty, and inpatient settings of care.

MCMHA currently has 58 individuals enrolled in the BHH program which is an increase from 55 reported in June. The nurse continues to explore these services with individuals that meet the medical criteria for the added support of the BHH program and who have active Medicaid each month.

Peer-Run Wellness Groups

At this time there is not an active peer group. MCMHA experienced a reduction of two (2) peer support specialists and are currently in the hiring process to replace these positions. Additionally, specialized training will be the focus for the incoming staff so that these groups can be restarted and provided to our consumers. Staff will need to complete their peer support certification prior to specialized training for the WHAM group. The next peer certification training is set for November 2025. At this time, we do not have an estimated timeframe of when these can be restarted.

Objective #4: Behavioral Health Urgent Care opens on 10/1/25.

Behavioral Health Urgent Care

A space has been secured for Behavioral Health Urgent Care (BHUC), 222 Colonial Court, Monroe 48162 (Building C 223-226). The Operations Department is ensuring everything is set up on the property.

Planning for Monroe CMHA's Behavioral Health Urgent Care (BHUC) continues. As previously stated, leadership attended an onsite tour of Hegira Health's COPE BHUC on June 3rd and attended Genesee Health Systems BHUC Open House on June 18th. MCMHA leadership has begun to host weekly meetings to guide the implementation of the BHUC. As a reminder, the BHUC will tentatively open September 2025.

Objective #5: Open two (2) Group Homes in Monroe County (5-6 beds).

The Chief Operations Officer (COO) will be reporting on this objective.

Crisis Mobile Response Team

As previously stated above, please see the attached report (Attachment #1) regarding data from the Crisis Mobile Response Team for the month of June.

BOARD CLINICAL REPORT

July 2025

CONSUMER VOICE INFORMS DECISION MAKING

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

This goal is being addressed by the Operations Department re: on consumer voice re: satisfaction, etc.

MISCELLANEOUS

Call Volume Data

Below is the call volume data for Fiscal Year 25.

	October-24	November-24	December-24	January-25	February-25	March-25	April-25	May-25	June-25
Incoming Calls	5027	3943	2340	3791	2831	3067	4513	4580	4374
Incoming calls minus abandon calls	4906	3808	2224	3534	2757	2982	4409	4466	4244
Calls Answered	4557	3487	2057	2498	2486	2778	4099	4134	3989
Missed/Abandoned Calls	121	135	116	257	345	285	414	445	381
Abandoned Calls	462	430	274	280	74	85	104	114	130
% incoming calls answered	91%	88%	88%	66%	88%	91%	91%	90%	91%
% incoming calls answered minus abandon calls	98%	97%	95%	93%	97%	97%	98%	98%	97%

Key: Abandoned means that no one was on the other line when the call was answered.

Missed is someone calls in and the call wasn't answered as staff could have been on their phones taking care of others. Duplication of missed and abandoned.

As stated previously, MCMHA is setting an internal goal of 95% of calls answered. As you can see, for the first eight months of Fiscal Year 2025, we **average 96%**, which is meeting our goal.

Certification

The Program Director and a Home-Based Therapist have successfully completed the requirements for the Strengths & Strategies (S&S) Training. This is an evidence-informed practice designed to work with families with a child, ages birth to 21 with a Fetal Alcohol Spectrum Disorder (FASD). They are now authorized to use the S&S modifier for this service when providing family training, home-based therapy, individual therapy, or family therapy.

Select Month:: 2025 - 06 (1) ▾



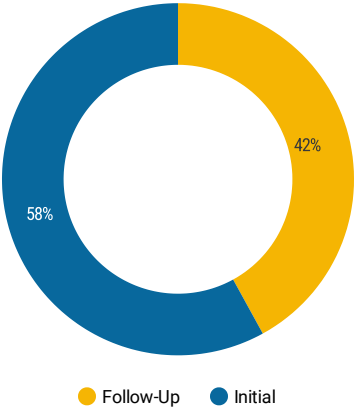
Monroe County CMH Crisis Mobile
Utilization Report

Deployments - Number of encounters, Number of Follow Ups:

Total Crisis Mobile Deployments

96

Mo... 1 ▴	Init... 2 ▴	#	%
2025 - 06	Follow-Up	40	42%
2025 - 06	Initial	56	58%

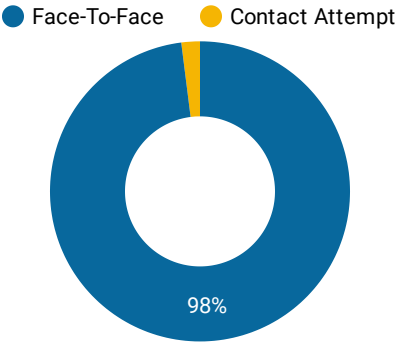


Month ▴	Contact Type	Hours
2025 - 06	Indirect Contact (Phone/Email/Other)	0
2025 - 06	Contact Attempt	0.75
2025 - 06	Face-To-Face	49.87

Average Face-to-Face Interaction Time (Hours)

0.83

Month	Avg F2F Contact ▾
2025 - 06	0.83



Select Month:: 2025 - 06

(1) ▾

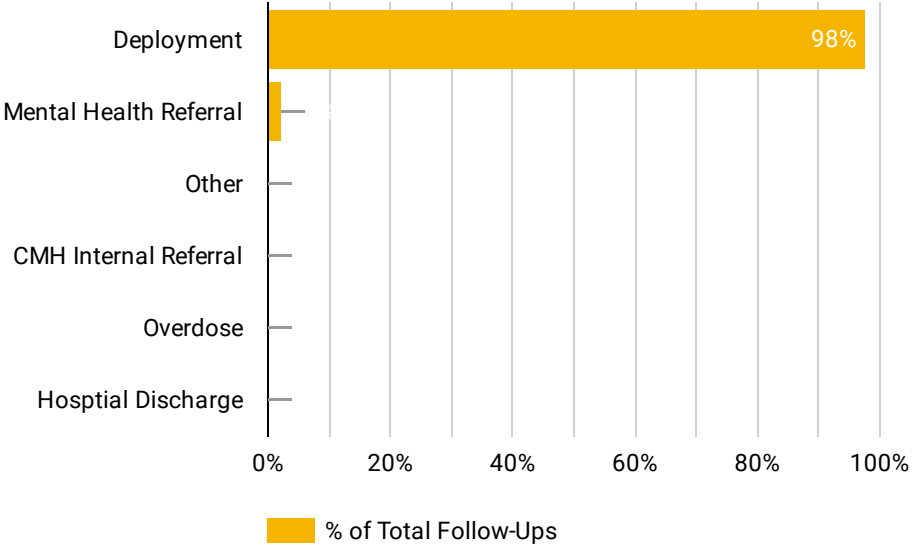


Monroe County CMH Crisis Mobile Utilization Report

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

Note: Tracking for follow-ups started October 2024

Month ① ▴	Type ② ▴	#	%
2025 - 06	CMH Internal Referral	0	0%
2025 - 06	Deployment	40	97.56%
2025 - 06	Hospital Discharge	0	0%
2025 - 06	Mental Health Referral	1	2.44%
2025 - 06	Other	0	0%
2025 - 06	Overdose	0	0%

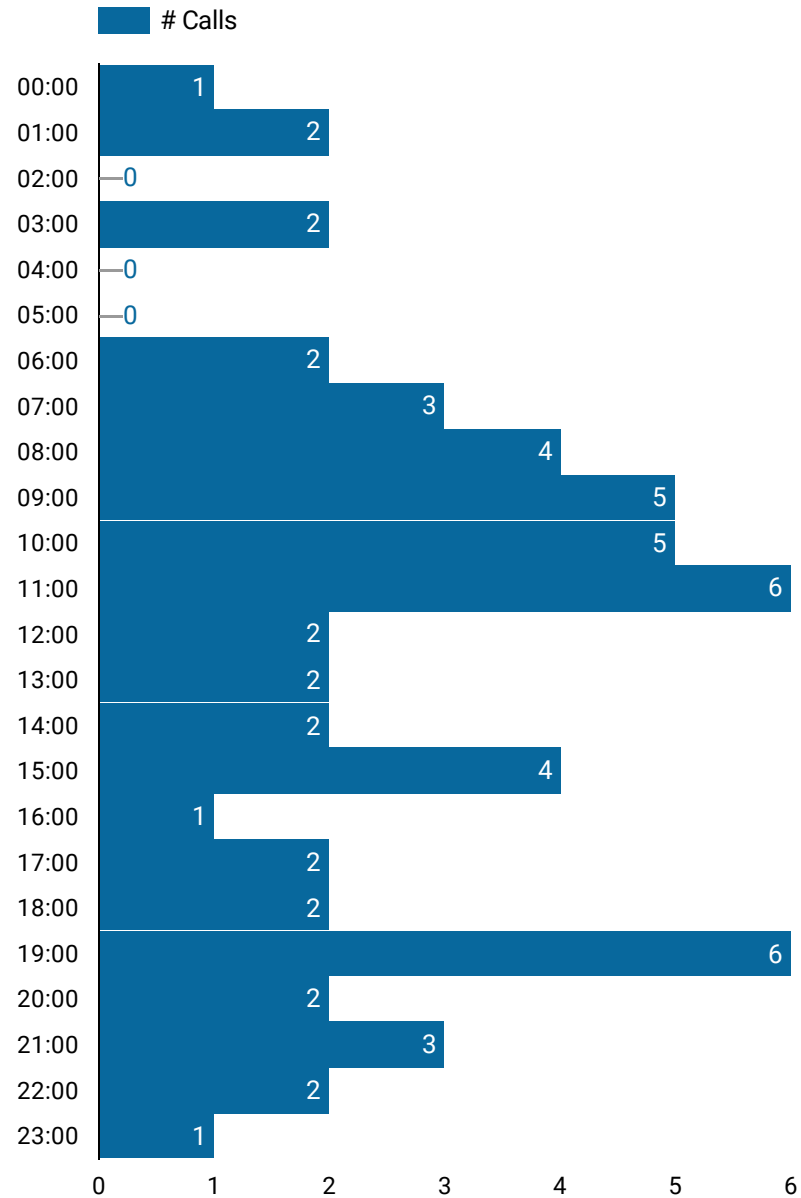


Select Month:: 2025 - 06

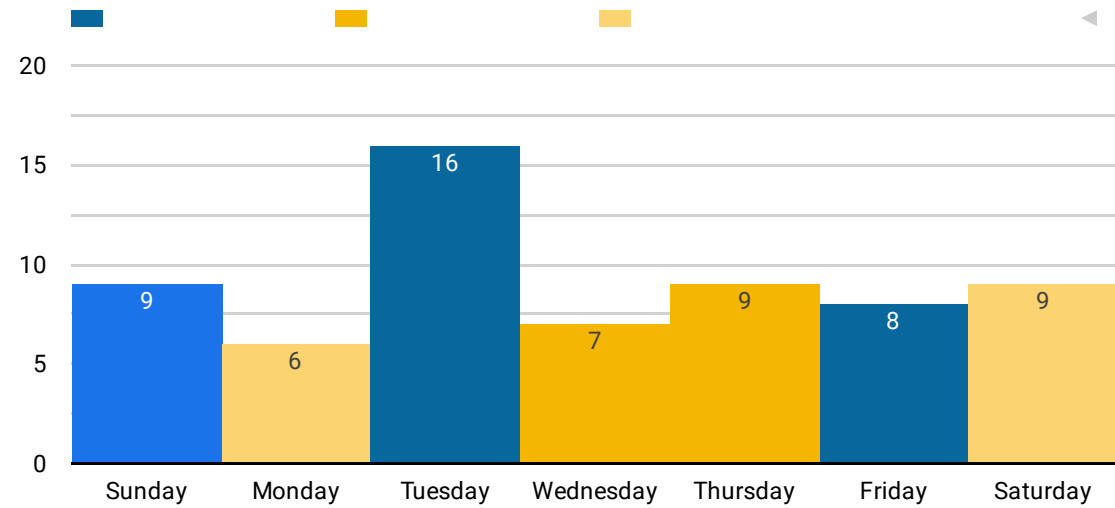
(1) ▾

Time of Calls

Calls, by hour:



Calls, by Weekday:



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

Average Response Time (Minutes)

20.25

Month

2025 - 06

Avg. Response Time ▾

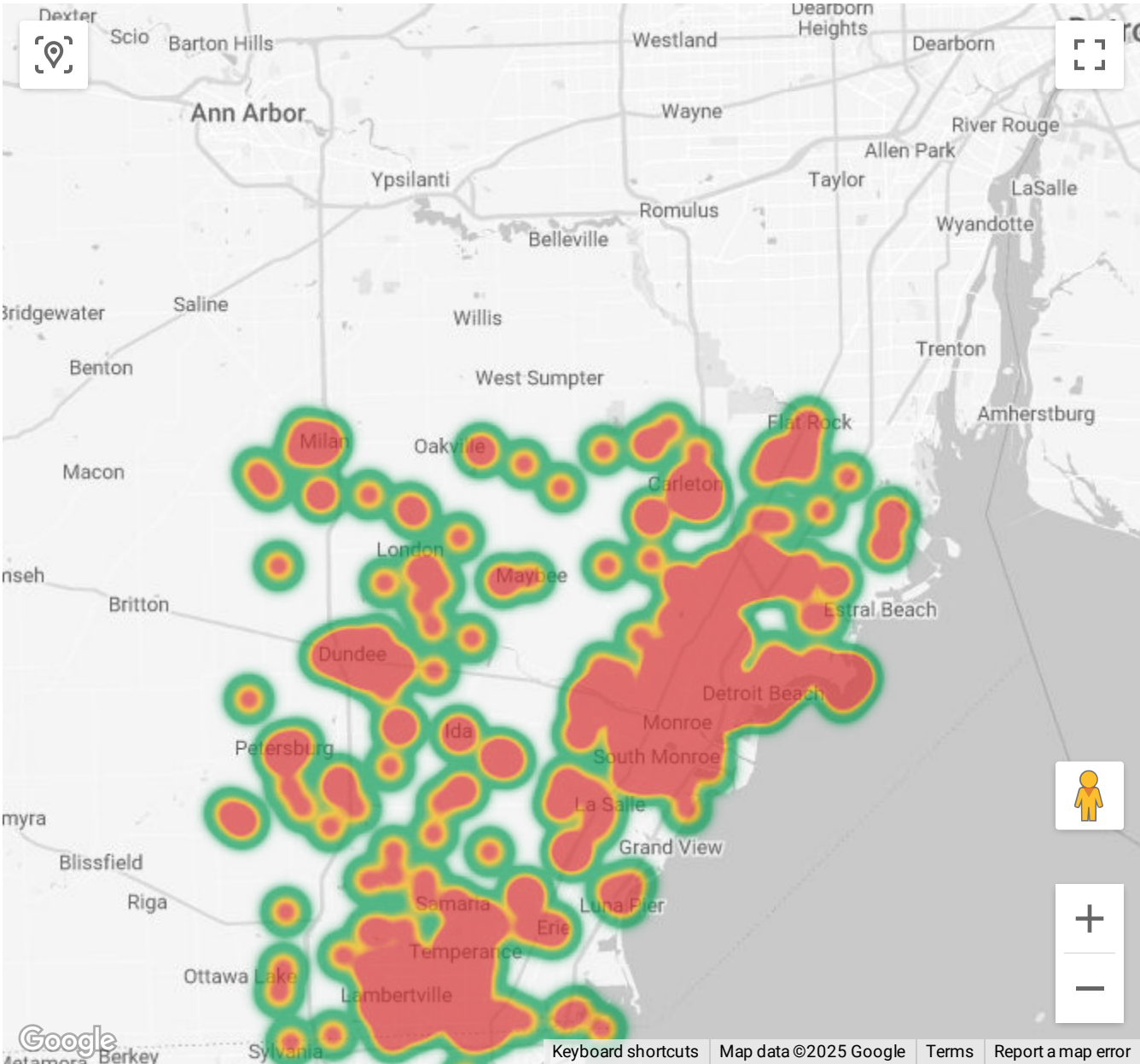
20.25

Select Month:: 2025 - 06

(1) ▾

Location

Mapping of locations deployed to:

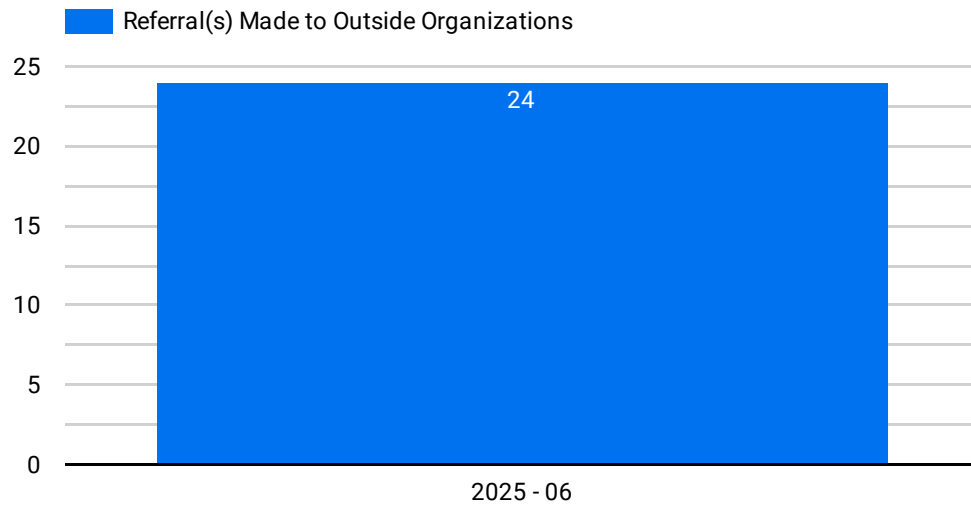


Month ▴	Zipcode	#	%
2025 - 06	48182	3	6%
2025 - 06	48160	0	0%
2025 - 06	48173	0	0%
2025 - 06	48166	6	12%
2025 - 06	48117	4	8%
2025 - 06	48134	1	2%
2025 - 06	48161	11	21%
2025 - 06	48162	24	46%

Select Month:: 2025 - 06

(1) ▾

Number of referrals made and where they were referred to:



Mo...	Referred To:	#	%
2025 - 06	Arrowhead Behavioral Health	0	0%
2025 - 06	Behavioral Health Treatment	1	3%
2025 - 06	CMH	21	57%
2025 - 06	Family Counseling and Shelter Services of Monroe	0	0%
2025 - 06	Fire Station	0	0%
2025 - 06	Gabby's Ladder	2	5%
2025 - 06	Harbor Light	4	11%
2025 - 06	Henry Ford Wyandotte	0	0%
2025 - 06	Holistic Wellness	0	0%
2025 - 06	Lemon Tree	0	0%
2025 - 06	MCOP	1	3%
2025 - 06	Michigan Works	0	0%
2025 - 06	Monroe County Animal Control	0	0%
2025 - 06	Paula's House	0	0%
2025 - 06	ProMedica ER	3	8%
2025 - 06	Pure Psych	0	0%
2025 - 06	RAW	0	0%
2025 - 06	Resource Flyer	1	3%
2025 - 06	SUD Treatment	2	5%
2025 - 06	Salvation Army Harbor Light	2	5%
2025 - 06	St. Joe's	0	0%

Select Month:: 2025 - 06

(1) ▾

Where Referrals are Coming From:

Month / # Calls	
Deployed by:	2025 - 06
Monroe County Sheriff's Dept.	27
CMH	9
Self	8
Monroe City Police	6
ACCESS	5
Police Mental Health Referral	1
School	1

Primary Issue or Diagnosis:

([New question starting 12/2023](#)).

Month / #	
Issue/Diagnosis	2025 - 06
Thought Disorder	12
Suicidal Ideation	16
Substance Abuse	6
Neurocognitive	4
Homicidal Ideation	1
Environmental	12
Domestic Violence	0

Select Month:: 2025 - 06(1) ▾

Consumers, New and Repeats:

	Month ❶ ▲	New or Repeat Cons... ❷ ▲	#
1.	2025 - 06	New	32
2.	2025 - 06	Repeat	29

Number of Narcan Kits Distributed:

Narcan Kits Distributed
0

Number of calls per population - Race

Month / # / %		
2025 - 06		
Race	#	%
White	43	80%
Unknown	2	4%
Other Race	2	4%
Native Hawaiian or other Pacific	1	2%
Multiracial	3	6%
Black or African American	3	6%

Select Month:: 2025 - 06

(1) ▾

Number of calls per population - Age

Month / # / %			
2025 - 06			
Age		#	%
0 to 9		2	4%
10 to 17		7	14%
18 to 28		9	18%
29 to 39		11	22%
40 to 50		10	20%
51 to 61		7	14%
62 to 72		3	6%
73 to 83		0	0%
84 to 94		1	2%
95 +		0	0%
Not Collected		0	0%



BOARD BYLAWS & POLICY COMMITTEE

Thursday, July 17, 2025

5:00pm

MAJOR COMMITTEE RESPONSIBILITIES

1. Monitor and maintain the Board Bylaws and Board Governance Policy Manual
2. Review Authority and Regional Policy, Procedures, and Exhibits
3. Make recommendations to the full Board

COMMITTEE MEMBERS

Vacant, Chair; John Burkardt; Susan Fortney; and Rebecca Pasko (Ex-Officio).

DRAFT MINUTES

I. CALL TO ORDER

Rebecca Pasko called the meeting to order at 5:00pm. Rebecca Pasko, Susan Fortney, John Burkardt (Virtually/at 5:22pm), and Lisa Graham were present.

II. COMMITTEE BUSINESS

- a. Authority Policy, Procedures, and Exhibits (Review/Recommend Approval)

Policies:	HR4052 Employee Photo Consent Policy HR4029 Social Security Number Privacy Policy HR4043 Anti-Fraud Policy HR4006 Drug-Free Workplace Policy
Procedures:	HR4043-P1 Anti-Fraud Procedure
Exhibits:	HR4043-E1 Employee Photo Consent Form Exhibit
Rescind:	N/A
Relocate:	N/A

The committee has reviewed the Authority Policy, Procedures, and Exhibits and recommends that the Board approve at their July 23, 2025 meeting.

- b. Regional Policies

Policies:	PI6009 Incident Reporting Policy
------------------	----------------------------------

The committee has reviewed the Regional Policies and recommends that the Board approve at their July 23, 2025 meeting.

III. REVIEW BOARD BYLAWS

- a. Election of Officers – How to Resolve a Tie Vote
 - i. Susan Fortney presented findings of her research from Robert's Rules of Order, the Mental Health Code, and Open Meetings Act on how to resolve a tie. Overall, a tie vote typically requires a specific process written in the organization Bylaws and/or Governance Policy Manual which we do not have language of in either.
 - ii. Rebecca Pasko commented that she spoke with Alan Bolter and Bob Sheehan on what they do if a vote resulted in a tie and they both encouraged taking the time speak with board members and working it out together.
 - iii. The review of the Bylaws has begun. Upon completion of said review, the Bylaws will be sent to the full Board for review and feedback prior to bringing to the full Board for consideration.

IV. REVIEW BOARD GOVERNANCE POLICY MANUAL

- a. Policy 4.3 Monitoring Chief Executive Officer Performance
 - i. The committee reviewed Policy 4.3 and amended language under Section 1 to include the Community Relations Chair as part of the Performance Evaluation Committee.
 - ii. The committee recommended to send the amended Policy 4.3 to the full Board for a period of review and feedback. If feedback is received, the committee will review at their August meeting. If no feedback is received, the committee recommends adding only Policy 4.3 to the August 27, 2025 board agenda for Board consideration with a 2/3 vote.
 - iii. The review of the Governance Policy Manual has begun. Outside of Policy 4.3, upon completion of said review, the Governance Policy Manual will be sent to the full Board for review and feedback prior to bringing to the full Board for consideration.

V. PARKING LOT

- a. Annually/July: Begin Review of Board Bylaws
- b. Annually/July: Begin Review of Governance Policy Manual

VI. AJOURNMENT

The meeting adjourned at 6:21pm.

VII. NEXT MEETING

The Next Meeting of the Board Bylaws & Policy Committee is scheduled for **Thursday, August 21, 2025** at 4:00pm.

Respectfully submitted,

Rebecca Pasko (dp)

Rebecca Pasko
Committee Ex-Officio
7/18/25



BOARD COMMUNITY RELATIONS AD-HOC COMMITTEE

Thursday, July 17, 2025

4:00pm

MAJOR COMMITTEE RESPONSIBILITIES

1. To foster a trusting relationship between MCMHA and the community it serves.

COMMITTEE MEMBERS

Vacant, Chair; Dawn Asper; Rebecca Curley; Susan Fortney; Naomi Stoner; and Rebecca Pasko (Ex-Officio)

DRAFT MINUTES

I. CALL TO ORDER

Rebecca Pasko called the meeting to order at 4:00pm. Rebecca Pasko, Susan Fortney, Lisa Graham, and Bridgitte Gates were present. Dawn Asper, Naomi Stoner, and Becca Curley were excused.

II. COMMITTEE CHANGES

- a. Rebecca Pasko reminded committee members that beginning in August there will be new committee membership for the Community Relations Committee. Rebecca has already addressed the full Board regarding the focus of having working committees for specific projects when needed. Administrative staff will not need to attend unless necessary.

III. COMMUNITY EVENTS

- a. Rebecca Pasko commented that she would like to see at least two more events a year sponsored by MCMHA outside of the Mental Health Fun Day and Town Hall.
- b. Susan Fortney suggested expanding MCMHA's role during the Monroe County Fair to include a speaker or to possibly hold a wellness event and have advertised on their electronic billboard.
 - i. Bridgitte Gates will follow up on what could be done as an expanded role during the Monroe County Fair and cost to hold an event there outside of fair week.
 - ii. Lisa Graham suggested an event on Veteran's Day and focus on veterans.
 - iii. Susan Fortney commented that the library has programs every month and suggested sponsoring a program; suggested Senior Centers could benefit from a wellness event such as signs and symptoms of depression and anxiety in later years of life; and having presence if the Monroe County Community College has job fairs.
 - iv. Rebecca Pasko commented that there is high probability of doing a millage and suggested a community event for this purpose, when it would come time.
 - v. Lisa Graham commented that the Town Hall is scheduled for October 22, 2025.

IV. REVEL MARKETING UPDATE / FOLLOW-UP

- a. Working with Revel for an Awareness Campaign for Behavioral Health Urgent Care (BHUC) and will do advertising for "Coming Soon" in August to let the community know this is coming, where we will be located, and hours of operation. We will be educating the agencies that will most likely be referring to us. The state requirement is to be up and running by October 1, 2025. Our goal is to be ready by September 1, 2025, however, we have received information from ProMedica that there will be a delay of getting into the building until August 1st as they need to remove some equipment and sensitive information. Once we are able to get into the building, we will evaluate our goal for September 1st. Lisa is looking to have Revel do a video to promote BHUC and a short commercial as well that will run at our local theatre. Lisa would also like to have an open house, something similar to Clubhouse but on a smaller scale, for the community to see the space.

V. NEXT AGENDA

- a. Town Hall

VI. PARKING LOT

- a. Town Hall – October 22, 2025
- b. Revel Marketing – Awareness Campaign for Behavioral Health Urgent Care

VII. AJOURNMENT

The meeting adjourned at 4:22pm.

VIII. NEXT MEETING

The Next Meeting of the Board Community Relations Committee is scheduled for **Thursday, August 21, 2025** at 5:00pm in the Aspen Room.

Respectfully submitted,

Rebecca Pasko (dp)

Rebecca Pasko
Committee Ex-Officio

7/18/25



BOARD EXECUTIVE COMMITTEE

Thursday, July 17, 2025 / 6:00pm in Aspen

MAJOR COMMITTEE RESPONSIBILITIES

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

COMMITTEE MEMBERS

Rebecca Pasko, Chair
John Burkardt, Vice Chair
Susan Fortney, Secretary

I. CALL TO ORDER

Rebecca Pasko called the meeting to order at 6:26pm. Rebecca Pasko, John Burkardt (Virtual), Susan Fortney, and Lisa Graham were present.

II. REVIEW OF THIS MONTH'S BOARD MEETING

- a. Board Agenda – Reviewed
- b. Presentation – Clinical Report

III. ITEMS FOR DISCUSSION

- a. Purpose of Executive Committee
 - i. Rebecca Pasko would like to see the Executive Committee as having a good collaborative working relationship with the Chief Executive Officer. The committee will meet monthly and review items that may need Board consideration in order to be fully prepared before bringing information to the Board.
 - o Susan Fortney commented that it is a wonderful time to build collaborative relationships, and it will give her insight to what Lisa Graham is planning and have the opportunity to share her views.
 - o Lisa Graham commented that she feels the Executive Committee can be of greater value beyond creating board agendas and looks forward to a good collaborative relationship not only with the Executive Committee but with the full Board.
- b. Board Meeting Evaluation Process
 - i. Rebecca Pasko requested to remove the Board Meeting Evaluation Report from the board agenda and to provide to the full Board through email. The Executive Committee will review the Board Meeting Evaluation Reports for any trends and focus on addressing those when necessary. The annual Board Meeting Evaluation Report along with the annual board member Self Performance Evaluation Questionnaire Report will be reviewed annually at a Board Workshop.
- c. Board Member Application
 - i. Rebecca Pasko commented there is a need to update the Board Member Application for the County with an additional question for CCBHC requirements. The MCMHA Board of Directors may not have more than 50% of the governing board derive more than 10% of their annual income from the health care industry. An attestation is required for all board members, and we want to ensure that a question is added to the application to remain in compliance. In addition to the CCBHC required question, Rebecca would also like to add a question or statement on what is expected as a board member, how many hours can a candidate give (time commitment), and list meeting dates/times so that a candidate knows up front if they would be able to participate.
 - o John Burkardt requested the board application define what a working committee is in a general sense. Rebecca Pasko will work on the language.
 - ii. The Executive Committee will review the Board Member Application questions and make amendments as needed. The committee would like to complete the amendments and be prepared for when the County advertises for new board members annually in February.
 - iii. Add to next Executive Committee agenda.
- d. Chief Executive Officer Contract
 - i. Tabled to August meeting.
- e. Review of Board Agenda
 - i. The committee reviewed the agenda for the July 23, 2025 Board Meeting.
 - ii. Lisa Graham commented that regardless of a motion needed or not at this time, she will provide an update on the attorney's recommendation for the legal name change at the Board Meeting.

IV. ACTION ITEMS FOR FUTURE BOARD MEETING AGENDA

- a. Jan – Annual Recipient Rights Report
- b. Feb – CMHSP Annual Submission
- c. Apr – Appoint Nominating Committee
- d. May – Election of Officers and PIHP Board Representative
- e. Jun – Board Committee Sign Up
- f. Jul – Appoint Committee Members and Chairs
- g. Aug – Bylaws and Governance Policy Manual

- h. Sep – FY2026 Proposed Board Budget
- i. Nov – CMHAM Conferences and NATCON26 Conference, and 2026 Board Meeting Calendar
- j. Dec – Board and Executive Leadership Holiday Dinner Event – December 5, 2025

V. NEXT AGENDA

- a. Board Member Application
- b. Chief Executive Officer Contract
- c. Board and Executive Leadership Holiday Dinner Event

VI. AJOURNMENT

The meeting adjourned at 7:11pm.

VII. NEXT MEETING

The Next Meeting of the Executive Committee is scheduled for **August 21, 2025** at 6:00pm in the Aspen Room.

Respectfully submitted,

Rebecca Pasko (dp)

Rebecca Pasko
Board Chairperson

7/18/25



**MONROE
COMMUNITY
MENTAL
HEALTH
AUTHORITY**

FY2025/2026 BOARD COMMITTEES

*"Vision: That people are empowered and supported
to reach their maximum potential"*

BYLAWS & POLICY (Ad-Hoc): (5)

Becca Curley (C)	Reda Biniecki
Joan Canning	John Burkardt
Susan Fortney	Rebecca Pasko, (EO)

CMHPSM BOARD REP:

Current Term:

Curley, Rebecca	7/1/25 – 6/30/28
Pasko, Rebecca	7/1/24 – 6/30/27
Frederick, LaMar	7/1/23 – 6/30/26

EXECUTIVE: (3)

Rebecca Pasko	Board Chair
John Burkardt	Board Vice Chair
Susan Fortney	Board Secretary

CLINICAL OPERATIONS (Ad-Hoc): (5)

Naomi Stoner (C)	Rebecca Pasko, (EO)
Susan Fortney	
Joan Canning	

COMMUNITY RELATIONS (Ad-Hoc): (5)

Ken Papenhagen (C)	Susan Fortney
Deb Staelgraeve	Mike Humphries
Dawn Asper	Rebecca Pasko, (EO)

BUSINESS OPERATIONS (Ad-Hoc): (5)

LaMar Frederick (C)	Rebecca Pasko, (EO)
Reda Biniecki	
Becca Curley	

NOMINATIONS: (1)

Appointed at April Board Meeting

PERFORMANCE EVALUATION: (5)

Board Chair	Business Ops Chair
Board Vice-Chair	Clinical Ops Chair
Board Secretary	Community Rel Chair*

*In process for Board approval on August 27, 2025

RECIPIENT RIGHTS ADVISORY COUNCIL: (1)

Susan Fortney	Representative
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Suspended Committees:

Membership Screening

Meetings for Endorsement:

County Commissioners Meeting	Board Chair
MCMHA Committees - Ex Officio	Board Chair
CMHPSM Board Meeting	Representatives
CMHAM Legislation & Policy	Rebecca Pasko



MCMHA Finance Board Action Request

Service Contract(s) and Amendments

Wednesday, July 16, 2025

Action Requested : Consideration to approve Mental Health Service Contract(s) / Amendments as presented:

PROVIDER	CONTRACT TERM	SERVICE DESCRIPTION	FY2022-2024 RATE / UNIT		FY2024-2026 RATE / UNIT		ADDITIONAL INFORMATION
Hospitals							
N/A							
Community Living Supports (CLS) / Supported Employment / Respite							
Beacon Specialized Living Services, Inc	7/1/25-9/30/26	Community Living Supports Enhanced 1:1 support			\$35.00	Per hour	Addition of a service to our current agreement based on consumer need.
Residential Opportunities Inc	10/1/25-9/30/26	Community Living Supports	\$187.59	Per diem	\$187.59	Per diem	Contract renewal.
		Personal Care in Licensed Specialized Residential Setting	\$151.43	Per diem	\$151.43	Per diem	
		Treatment Plan Review	\$79.61	Encounter	\$79.61	Encounter	
		Behavior Treatment Plan Monitoring	\$388.75	Encounter	\$388.75	Encounter	
Guardian Trac LLC	7/1/25-9/30/26	Skill Building	\$5.78	15 Minutes	\$5.78	15 Minutes	Rate modification to reflect the unique billing structure of the program.
			\$2.89		\$3.82		
			\$1.93		\$3.82		
			\$1.45		\$3.82		
			\$1.16		\$3.82		
			\$.97		\$3.82		
Moriah Incorporated dba Eisenhower Center	7/1/25-9/30/26	Behavior Identification assessment			\$177.32	Encounter	Code change.
Autism / Waiver Services							
N/A							



MCMHA Finance Board Action Request

Administrative Contracts(s)

Wednesday, July 16, 2025

Action Requested : Consideration to approve Mental Health Administrative Contract(s) / Amendments as presented:

CONTRACTOR	CONTRACT TERM	DEPARTMENT	SERVICE DESCRIPTION	BUDGET	ADDITIONAL INFORMATION
Phillip Archer	10/1/25-9/30/27	PHS	Renewal of current agreement with a 3.5% increase.	\$233/hour for 9 hours per week	
Frances Jackson LLC	6/1/25-8/30/25		Parliamentarian consultation for the MCMHA Board of Directors.	\$75/hour Mileage for travel to and from meetings to be paid at the current IRS approved rate	The agreement is for a 3 month period with an option to extend an additional 3 months.
Snow Chiu Wu	10/1/25-9/30/26	IT	Consultation and report development	\$90/hour not to exceed \$70,000 annually	

BOARD ACTION REQUEST

July 23, 2025

ACTION REQUESTED:

To approve a six-month pilot with VelloHealth in order to assess the effectiveness of its mobile application in providing community-based care to our consumers.

Background:

VelloHealth offers a unique proprietary mobile app solution that supports every aspect of community-based care delivery. Teams access client information, document visits, track medications, and manage crises through one intuitive interface. Smart routing, secure messaging, and AI-assisted documentation help teams work efficiently. VelloHealth is purpose-built for community outreach, and interfaces seamlessly with our electronic health record (PCE Systems/CRCT), eliminating duplicate data entry. The app also allows teams immediate access to client information through their mobile devices. Staff can view current medications, care plans, and safety details while providing community-based services. Teams can quickly find and update essential information about medications, treatment plans, and safety strategies. Teams can also share critical updates with colleagues to coordinate better care. The app is HIPAA-compliant and allows staff to share updates and coordinate care through secure team and client group channels.

In addition, Vello's mobile application software can:

- Visualize client locations and optimize daily routes with interactive mapping tools. Teams can plan and manage travel logistics from an intuitive interface.
- Manage crisis calls and dispatch responders efficiently. Track response times, coordinate team locations, and document interventions - all interfaced with your EHR.
- Turn field conversations with clients into structured progress notes and client-centered documentation using speech recognition and AI assistance.
- Access emergency support through the SOS alert button on every screen. One tap notifies supervisors with exact location details and enables 911 access.

Monroe CMHA is looking to partner with VelloHealth in a six-month pilot project to evaluate the effectiveness of their mobile application software. During this evaluation period the agency will be assessing the effectiveness of the mobile application in a number of areas:

ACT:

- Tracking of medications, managing appointments, engagement time, treatment goals, and crisis plans.

Case Management:

- Tracking of client visits, engagement time.
- Documentation efficiency.

Mobile Crisis:

- Location monitoring and tracking of crisis team(s)
- Field deployment of mobile crisis team.
- Track response times, coordinating team locations, and document interventions

Rollout /Cost

If approved, a phased implementation will be implemented beginning with the ACT team, followed by the MI Adult Services team, and finally the Mobile Crisis team. After the six-month deployment period, VelloHealth and Monroe CMHA would decide whether to continue / expand the VelloHealth software implementation. The pilot would begin September 1, 2025, and run through February 28, 2026.

Total cost for the six-month trial period: \$58,500.

RECOMMENDATION:

To approve a six-month contract with VelloHealth in the amount of \$58,500.



REVIEW AND APPROVAL / July 23, 2025

Local (MCMHA) and Regional (CMHPSM) Policy, Procedure, and Exhibits

Executive Summary:

- There are four local policies, one procedure, one exhibit, and zero to be rescinded. There is one regional policy.
- This document serves as an Executive Summary of the policies for review and approval at the July 23, 2025 Board Meeting.

LOCAL: Policy, Procedure, and Exhibits	Reason for Revision	Summary
HR4052 Employee Photo Consent Policy	3-Year Review	<p><u>Purpose:</u> To address employee concerns and objections, and obtain written informed consent prior to using an employee's photographs, image, video and or voice as part of the employer's intranet, web site, web documents, newsletter, and /or social media sites.</p> <p><u>Policy:</u> MCMHA shall obtain written employee consent prior to using an employee's image, photograph, video and/or voice on the employer's intranet, web site, newsletter, and /or social media sites. Informed consent is not required in the use of employee photographs for identification badges.</p> <p><u>Significant Changes:</u> There were no significant changes.</p>
HR4029 Social Security Number Privacy Policy	3-Year Review	<p><u>Purpose:</u> To protect employee social security numbers.</p> <p><u>Policy:</u> It is the policy of Monroe Community Mental Health Authority to protect the confidentiality of Social Security numbers obtained in the ordinary course of Monroe Community Mental Health Authority's staff, contracted providers, board members and consumers. No person shall knowingly obtain, store, transfer, use, disclose or dispose of a Social Security number that Monroe Community Mental Health Authority obtains or possesses except in accordance with the Michigan Social Security Number Privacy Act, Public Act 454 of 2004, MCL 4445.81 and this Policy. Any employee violating the provisions of this policy will be subject to discipline up to and including termination of employment.</p> <p>If this policy, or any part thereof, conflicts with a state law, state law shall supersede this policy, or the relevant portion thereof.</p> <p><u>Significant Changes:</u> There were no significant changes.</p>

HR4043 Anti-Fraud Policy	3-Year Review	<p><u>Purpose:</u> Establish an anti-fraud policy to enforce controls and to aid in the prevention and detection of fraud, theft, waste, or abuse against the agency.</p> <p>Promote consistent, legal, and ethical organizational behavior by:</p> <ul style="list-style-type: none"> • assigning responsibility for reporting fraud, theft, waste or abuse • providing guidelines to conduct investigations of suspected fraudulent behavior <p><u>Policy:</u> It is the Policy of the Authority that any FRAUD, THEFT, WASTE, OR ABUSE or suspected FRAUD, THEFT, WASTE, OR ABUSE involving an employee, a consultant, vendor, contractor, outside agency or person doing business with the Agency or in any other relationship with the Agency shall not be tolerated.</p> <p><u>Significant Changes:</u> There were no significant changes. Title changes only.</p>
HR4006 Drug-Free Workplace Policy	3-Year Review	<p><u>Purpose:</u> In accordance with the Federal Drug-Free Workplace Act of 1988, Monroe Community Mental Health Authority (MCMHA) is committed to maintaining a safe, healthy, and productive environment free from substance abuse. Alcohol and drug misuse pose significant risks to our mission, and this policy reflects our commitment to a drug-free workplace while supporting the well-being of our employees.</p> <p><u>Policy:</u> The unlawful manufacture, distribution, dispensation, possession, or use of controlled substances or intoxicants is strictly prohibited on MCMHA premises or while conducting business off-site. This includes alcohol, illegal drugs, and marijuana, which remains prohibited under federal law.</p> <p><u>Significant Changes:</u> Amendments included language and title changes, added definitions.</p>
HR4043-P1 Anti-Fraud Procedure	3-Year Review	<p><u>Significant Changes:</u> There were no significant changes. Title changes only.</p>
HR4052-E1 Employee Photo Consent Form Exhibit	3-Year Review	<p><u>Significant Changes:</u> There were no significant changes.</p>

REGIONAL: Policy and Exhibits	Reason for Revision	Summary
PI6009 Incident Reporting	3-Year Review	<p><u>Purpose:</u> To provide guidelines for timely reporting, monitoring, reviewing, and evaluating unusual and/or unexpected incidents which occur to individuals found eligible for service and has a current admission to a Community Mental Health Service Provider and/or Certified Community Behavioral Health Clinic to receive medically necessary services.</p> <p>To ensure that the information derived from incident reporting is used to identify opportunities for improvement.</p> <p><u>Policy:</u> It is the policy of the CMHPSM that unusual and significant incidents (as defined below) involving active consumers/individuals served will be reported and investigated in a timely manner, with appropriate follow up and/or remedial action steps taken to prevent reoccurrence. The Incident Reporting process is a retrospective peer review process to improve services or enhance treatment for consumers/individuals served. Any records, data and knowledge collected in this process are confidential and considered peer review documents and are to be protected as such. Therefore, this information is not available by record requests, under the Freedom of Information Act (FOIA) or by subpoena.</p> <p><u>Significant Changes:</u> Two additional categories of incidents have been added per Joint Commission standard. Additional clarification of what to do regarding incidents that occur for closed cases.</p>

RESCIND: Policy and Exhibits	Reason for Rescind
N/A	

CEO REPORT

July 23, 2025

SERVICES PROMOTE RECOVERY

Ion Labs: Earlier this month, MCMHA secured an agreement with Ion Labs to occupy space within our Raisinville site in order to provide a drawing station/lab services to our consumers. At this point, there is no rent being charged and Ion Labs is providing the staff and equipment, with MCMHA providing the space.

Behavioral Health Urgent Care: MCMHA's access to our BHUC site has been delayed by two weeks. We continue to plan for a 9/1 opening date, however, this delay could impact our goal. Per our CCBHC contract, we must have the BHUC open by 10/1. CMH is following up on the property inspection that the current lease allows and working with Revel to create a community awareness campaign. A full presentation on the BHUC will be on August board agenda.

FEDERAL/STATE/REGIONAL

PIHP Procurement: MDHHS has not yet released the RFP for PIHP Procurement. Community Mental Health Association of Michigan (CMHAM) continues to push back against this change to our public behavioral health system. Simultaneously, CMHs are learning about developing proposals to address the RFP when it becomes available.

Late last month, MCMHA hosted Senator Joe Bellino and Representative Jamie Thompson to provide education on the risks of the PIHP Procurement. Alan Bolter (CMHAM) and James Colaianne (PIHP) attended to support MCMHA.

Next month, I will ask this Board to consider a Resolution Opposing PIHP Procurement.

Federal Medicaid Changes: MCMHA leadership is actively seeking to prepare for the impact of the federal changes to Medicaid that were signed into law earlier this month. We continue to work with CMHAM and MDHHS to get information as it becomes available.

COMMUNITY PARTNERS/COMMUNITY AWARENESS

Monroe County Fair: Monroe CMHA and River Raisin Clubhouse have booths in the Merchant's Building next week. We will promote our presence at the Fair on our Facebook page daily next week.

SAFE Project: Monroe County Sheriff's Office invited MCMHA to partner on the SAFE Project. The SAFE Program is a means for allowing better communication between first responders and residents with special needs, or other disabilities, regarding critical information before an emergency occurs. The mission is to protect citizens while managing the needs of its most vulnerable citizens such as children, the elderly, and those with physical or cognitive disabilities.

Respectfully Submitted,



Lisa Graham, LMSW