



BOARD OF DIRECTORS REGULAR MEETING MINUTES
August 27, 2025

Present: Rebecca Pasko, Chairperson; Susan Fortney, Secretary; Mike Humphries; Ken Papenhagen; Dawn Asper; Naomi Stoner; LaMar Frederick; Becca Curley; and Joan Canning

Excused: John Burkardt, Vice Chairperson and Reda Biniecki

Absent:

Staff: Lisa Graham

Guests: Dr. Frances Jackson, Parliamentarian; and 5 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.

Rebecca Pasko requested a moment of silence for the loss of life this morning for those children at the Catholic School.

IV. CONSIDERATION TO ADOPT THE DRAFT AGENDA AS PRESENTED

The items in the Board Packet are as presented on the agenda. Rebecca Pasko asked if there were any changes to the agenda. Hearing no changes, the agenda was approved by unanimous consent.

VI. CONSIDERATION TO APPROVE THE MINUTES FROM THE AUGUST 20, 2025 BOARD MEETING AND WAIVE THE READING THEREOF

The August 20, 2025 Board Meeting minutes in the Board Packet are as presented. Rebecca Pasko asked if there were any changes to minutes. Hearing no changes, the August 20, 2025 Board Meeting minutes were approved by unanimous consent.

VII. PUBLIC COMMENTS

There were no public comments.

IX. PRESENTATIONS, RECOGNITIONS, AND CELEBRATIONS

- a. **Years of Service Awards** – Lisa Graham congratulated and recognized Amanda Ostroski and Stephanie Woodruff for their 5 Years of Service, Chelsea Blackburn and Regina Melkonian for their 10 Years of Service, Deb Mason for 15 Years of Service, and Nicole Yeary for 25 Years of Service.
- b. **Clinical Report** – The Clinical Report was provided in the Board Packet for review. Highlights from the Clinical Executive Summary are as follows:
 - i. **Executive Summary**
 1. MCMHA continues to recruit and hire staff for current vacancies, which is 10 at this time. Four (4) positions are newly created.
 2. There were 15 universal referrals made in July. 80% received some type of follow-up, authorized services, etc. 0% declined any further intervention, and 20% MCMHA didn't have enough information for follow-up or received no response.
 3. Certified Peer Support Specialists (CPSS) continue to provide support at the ALCC. The CPSS did engage in three (3) programs/activities and zero (0) 1:1 meeting during the month of July.
 4. Crisis Mobile was deployed 57 times in July, which averaged 0.79 hours of face-to-face interaction time.
 5. The average response time for Crisis Mobile was approximately 22.87 minutes, which is likely due to 53% of the calls from the 48161 and 48162 zip codes.
 6. There were multiple referral sources for Crisis Mobile; 67% were from the Monroe County Sheriff's Department and Monroe City Police; 15% were from Access Dept/CMH, and 18% were self-referral.
 7. There were 551 appointments scheduled for the Benesh Building in FY25 with 76% occurring in the office.
 8. Enrollment for the CCBHC has increased by 52 members over the last month. This is a 2.5% increase in enrollment.
 9. MCMHA currently has 60 enrollees in the Behavioral Health Home program.
 10. The Patient Experience of Care Survey is being collected for CCBHC and we have approximately a 17% response rate.
 11. The data for incoming calls being answered is 97% for FY25, which meets MCMHA's goal of 95%.
 - ii. **Additional Information**
 1. As previously stated, MCMHA was awarded Quality Bonus Payments for FY24 of \$608,688. On July 31st, we were notified we received an additional \$167,262 of redistribution funds for a total of \$775,950.
 2. River Raisin Clubhouse will be hosting a Spaghetti Dinner Fundraiser on August 21st from 4:00-8:00pm.
- c. **Human Resources Report** – Jim Brown presented the 2nd and 3rd Quarter Human Resources Report highlighting staffing, exit interviews, grievances, training, satisfaction survey, and compliance.
 - i. **Staffing** – There were 7 news hires in 2nd quarter and 6 new hires in 3rd quarter. There were 3 terminations in 2nd quarter and 7 terminations in 3rd quarter. There are currently 12 open positions.
 - ii. **Exit Interviews** – A 3rd party organization conducts the exit interviews and come 4th quarter there should be enough information to review a more in-depth analysis for turnover.
 - iii. **Grievances** – Instituted a grievance process to assist in resolving conflict. There was 1 grievance filed in 2nd quarter over professional communication, and it was successfully resolved.
 - iv. **Training** – The Corporate Trainer is working very hard and diligently to provide training for staff. In 2nd quarter 345 learners were trained and in 3rd quarter 681 learners were trained. Next quarter priorities are to deepen clinical skills in communication, Trauma-Informed Care, and Motivational Interviewing. Mental Health First Aid was also provided to the community.
 - v. **Satisfaction Survey** – A training survey comparison for FY2024 versus FY2025 was provided. In every area, the numbers increased. Our staff find this to be extremely valuable. You want staff to feel that they are properly being trained to do their job.
 - vi. **Compliance activity** for 2nd and 3rd quarter were provided for review.

- d. **Operations Report** – Bridgitte Gates presented the Operations Report highlighting items against the Strategic Plan Priorities, Trusted Community Partner and Services Promote Recovery.
- i. Behavioral Health Urgent Care (BHUC) – Working with Revel on a BHUC Awareness Campaign; in process of creating brochures and flyers for BHUC; setting a website link; and selected a logo.
 - ii. 2nd quarter grievances were presented.
 - iii. Pulse for Good kiosk data was presented.
 - iv. A new child prescriber, Dr. Alauldeen Ali is estimated to start on September 29, 2025. Dr. Ali will be available from 8:00am – 6:00pm Monday through Friday for in person appointments.
 - v. The 3rd quarter provider report was presented. Staff retention increased by 2%, training compliance remains above 95%, and the greatest challenge remains to be retention and recruitment of staff, although the greatest success is also staff retention and recruitment of staff.

Mike Humphries asked when the deadline was for BHUC to open. Bridgitte Gates commented that the goal is to be open by September 29, 2025 to meet the state requirement of October 1, 2025.

Sabrina Bergman, CCBHC Program Director, commented that we are currently providing BHUC services since Crisis Mobile began to meet the requirements of CCBHC. Monroe's CCBHC certification is not at risk due to the state requirement of October 1, 2025. As an agency, we chose to choose another building to provide BHUC services. We are going to be billing the same services as we have been.

- d. **Finance Report** – Lisa Graham provided a high-level overview of the June financials. We have a net position of \$525,000 surplus right now. This does not include the CCBHC metrics quality bonus funds. We are doing well this year financially and expecting to end the year with putting a decent amount of funds into our reserve. We are showing a profit for CCBHC by \$847,000 but will need to offset that with Medicaid and CCBHC costs.

Last week we received the rates for FY2026, and our region is looking like we will receive a 6% reduction in rates from last year. Of the 10 current PIHPs, 7 received increases and 3 received decreases. That is not great news, but it is offset by the region that has a full risk reserve, and we do not anticipate an issue with the budget for FY2026 that will be presented next month. At this point, we don't have any reason to think that Region 6 will exist after next year. Any money that is in our risk reserve will go to who wins the bid for PIHP Procurement.

We are in a good position locally, making a profit finally with CCBHC and being able to contribute funds into our reserve.

Dawn Asper suggested a press release for the Behavioral Health Urgent Care and include information on who we can serve.

- a. **Behavioral Health Urgent Care (BHUC)** – A BHUC is a designated intervention/treatment location offering an alternative to community hospital Emergency Departments, serving guests with urgent primary behavioral health needs, providing triage and referral services. Key function of a BHUC is a medical screening, case management, referrals, brief solution focused therapy, and psychiatry as needed. Populations that can be served are those with mental health conditions, substance use disorder (SUD), co-occurring, serious emotional disturbances, and mental health and intellectual/developmental disabilities. The BHUC model is intended to divert guests experiencing behavioral health crises from Emergency Departments or hospitals. Services will include initial triage, brief assessment, stabilization and intervention, nursing assessment and intervention, psychiatric intervention, crisis case management, and disposition and discharge planning. Beginning October 1, 2025, hours of operation will be Monday through Friday from 11:00am to 7:00pm located next to ProMedica Regional Hospital on Colonial Drive. MCMHA is working on a staff leasing agreement with Catholic Charities/St. Joe's Center of Hope for peer recovery coaching services for those that have primary SUD needs. Potential partnerships are being explored to provide overnight shelter for individuals receiving care. What a BHUC is not – emergency medical care, long-term or intensive treatment, inpatient hospitalization, court-mandated evaluations or forensic requests, return to work or school

evaluations/clearances, routine medication prescriptions or refills, voluntary vs. involuntary commitments, and medical detoxification. As MCMHA continues to grow its Crisis Response Service array, we will continue to evaluate the county's needs for greater crisis services.

Lisa Graham suggested a line item be added to the financials to monitor how much BHUC is costing and at the same time measure the value of service provided.

Naomi Stoner noted the location of the BHUC will be very helpful for the community.

X. BOARD COMMITTEE REPORTS

a. Committee Chair Reports

- i. Bylaws & Policy/Becca Curley, Chair – The committee is currently reviewing the Bylaws to ensure that we are in compliance with how things should be done according to parliamentary rule and Robert's Rules of Order.
 - ii. Performance Evaluation/Rebecca Pasko, Chair – Lisa Graham reported on 3rd quarter performance. It was a beneficial performance evaluation and decided to review the opportunity for a different performance evaluation tool for next year's CEO evaluation. The committee will be meeting next month to review and discuss.
- b. Board Workshop August 30, 2025 – Rebecca Pasko reminded the Board that there is a Board Workshop scheduled for Saturday, August 30, 2-25 from 10:00am – 2:00pm for a training with Dr. Frances Jackson, Parliamentarian.

XI. ITEMS FOR BOARD CONSIDERATION

- a. Service Contracts - Presented by Bridgitte Gates.
- b. Administrative Contracts - Presented by Bridgitte Gates.
- c. FY2025 Provider Stabilization Funding – At the August 13, 2025 PIHP Board Meeting, the Board voted to do a 5% rate adjuster payment based on actual services provided for 1st and 2nd quarter. Monroe will receive 1.2 million. The funds will be a pass-through from the region to local and local will pass through to providers.
- d. Resolution to Oppose PIHP Procurement - The PIHP Procurement is moving right along. A lot of us across the state are working hard to oppose the procurement process. The RFP has been issued. We still would like to put it on record that we do oppose this and believe strongly that this is a step away from privatization. The request is for the Board to take action to oppose the Resolution for PIHP Procurement.
- e. Governance Policy 4.3: Monitoring Chief Executive Officer Performance – The Community Relations Chair has been added to the Performance Evaluation Committee.
- f. CMHPSM Oversight Policy Board – Re-Appointment for Dave O'Dell – The Oversight Policy Board oversees and manages the SUD contracts. In our region, each CMH has 3 representatives to that Board. Dave O'Dell would like to serve for an additional 3-Year Term, he is very active in our community, and a great representative for us. If approved, this would be Dave's 4th Term.

XII. ITEMS FOR BOARD ACTION

a. Motion to Approve the Consent Agenda Less Item _____

Dawn Asper moved to approve the Service Contracts as presented. Becca Curley supported. Discussion followed. Rebecca Pasko asked if there were any objections to approve. Hearing no objection, the Services Contracts were approved as presented by unanimous consent.

Ken Papenhagen moved to approve the Administrative Contracts as presented. Dawn Asper supported. Discussion followed. Rebecca Pasko asked if there were any objections to approve. Hearing no objection, the Administrative Contracts were approved as presented by unanimous consent.

b. Motion to Approve the Provider Stabilization Funding Pass-Through from the PIHP to MCMHA for FY2025

Becca Curley moved to approve the provider stabilization funding pass-through from the PIHP to MCMHA for FY2025. Ken Papenhagen supported. Discussion followed. Rebecca Pasko asked if there were any objections to approve. Hearing no objection, the provider stabilization funding pass-through from the PIHP to MCMHA for FY2025 is approved by unanimous consent.

c. Motion to Adopt the Resolution to Oppose PIHP Procurement

Joan Canning moved to adopt the Resolution to Oppose PIHP Procurement. Naomi Stoner supported. Rebecca Pasko asked if there were any objections to adopt. Hearing no objections, the Resolution to Oppose PIHP Procurement is adopted by unanimous consent.

d. Motion to Recommend the Monroe County Board of Commissioners to Consider Adopting the Resolution to Oppose PIHP Procurement

Dawn Asper moved to recommend the Monroe County Board of Commissioners to consider adopting the Resolution to Oppose PIHP Procurement. Susan Fortney supported. Discussion followed. Rebecca Pasko asked if there were any objections to recommend. Hearing no objection, the recommendation for the Monroe County Board of Commissioners to consider adopting the Resolution to Oppose PIHP Procurement is approved by unanimous consent.

Lisa Graham will attend a Monroe County Board of Commissioners Meeting to provide further information on the PIHP Procurement.

e. Motion to Approve the Amended Governance Policy 4.3 Monitoring Chief Executive Officer Performance (2/3 vote)

Ken Papenhagen moved to approve the amended Governance Policy 4.3 Monitoring Chief Executive Officer Performance. Joan Canning supported. Discussion followed. Rebecca Pasko requested a raise of hands to approve by a 2/3 vote. In favor: nine; opposed: none; motion carried.

f. Motion to Recommend Re-Appointment for Dave O'Dell to the CMHPSM Oversight Policy Board for the Term of 10/1/25 through 9/30/28

Becca Curley moved to recommend re-appointment for Dave O'Dell to the CMHPSM Oversight Policy Board for the Term of 10/1/25 through 9/30/28. Dawn Asper supported. Rebecca Pasko asked if there were any objections to approve. Hearing no objections, the recommendation to re-appoint Dave O'Dell to the CMHPSM Oversight Policy Board is approved by unanimous consent.

g. Motion to Accept the Resignation Letter of Board Member Deb Staelgraeve Submitted on August 7, 2025

Susan Fortney moved to accept the resignation letter of board member Deb Staelgraeve with regret submitted on August 7, 2025 and to send a letter from the CEO expressing our gratitude for her service. Ken Papenhagen supported. Discussion followed. Rebecca Pasko asked if there were any objections to approve. Hearing no objections, the amended motion to accept the resignation letter of Deb Staelgraeve is approved by unanimous consent.

X. AUTHORITY AND REGIONAL POLICY REVIEW/APPROVAL

a. Motion to Approve the Authority Policy, Procedure, and Exhibits as Presented

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|------|-------------------|------------|---|
| i. | Policy: | EOC2009 | Renovation and Project Management Policy |
| ii. | Procedure: | EOC2009-P1 | Renovation and Project Management Procedure |
| iii. | Exhibit: | EOC2009-E1 | Renovation and Project Management Forms |
| iv. | Rescind: | POC7064-E4 | Nutrition Screen Exhibit |
| v. | Relocate: | N/A | |

LaMar Frederick shared his concerns for either additional language to be considered for the correct insurance and liability for contracts, or to create a new policy/procedure.

Jim Brown commented that we do need to have a procedure in place for our contracts to ensure they have the correct insurance and liability and may need to have an additional policy to address LaMar's concern. LaMar's concern brought forward this evening is not with the policy, procedure, or exhibit up for current approval.

Ken Papenhagen moved to postpone the approval of the authority policy, procedure, and Exhibits to the next Board Meeting. Joan Canning supported. All in favor: all; oppose: none; motion to postpone carries with unanimous consent.

b. Motion to Approve the Regional Policies as Presented

i. Policy: N/A

There were no regional policies for approval in August.

XII. RELATIONSHIP WITH THE REGION, COUNTY, AND OTHERS

- a. Regional PIHP Board Meeting Minutes – Lamar Frederick commented that the focus of the meeting was on the PIHP Procurement and FY2025 stabilization funding for the provider network.
- b. CMHAM Policy and Legislation Committee Report – Did not meet in August.

Joan Canning was excused at 7:36pm.

XIII. ITEMS FROM THE CHIEF EXECUTIVE OFFICER

- a. Lisa Graham presented the CEO Report highlighting: River Raisin Clubhouse; Clinical Audits; Joint Commission Accreditation; St. Joes Center of Hope Partnership; PIHP Procurement; Special Assessment; MCMHA Legal Name Change; Supporting Student Mental Health; SAFE Program; and River Raisin Clubhouse fundraiser.

XIII. NEW BUSINESS

There was no new business.

XIV. PUBLIC COMMENTS

There were no public comments.

XV. BOARD MEMBER ANNOUNCEMENTS

Naomi Stoner commented that there was a lot of positive information in the Board Packet and it's great to hear all of the great work being put into MCMHA, you are doing a great job!

Susan Fortney reminded board members to turn in their board meeting evaluations and reimbursement forms before leaving.

Dawn Asper thanked the staff that received awards for their years of service and longevity.

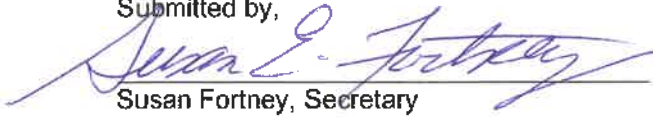
Mike Humphries commented that he is excited about the Behavioral Health Urgent Care and that we have been talking about this for a long time and now and seeing it come to fruition; and even though I voted in favor of having the County Commissioners oppose the Resolution for PIHP Procurement, I have an issue with the funds to lobby the Government. Mike does not like this even though it is only 7 thousand dollars.

Rebecca Pasko mentioned that it is Jim Brown's birthday tomorrow, Happy Birthday; reminded board members of the Board Workshop on Saturday, August 30, 2025; and that the next Board Meeting is scheduled for Wednesday, September 17, 2025 at 6:00pm.

XVI. ADJOURNMENT

Rebecca Pasko adjourned the meeting at 7:51pm.

Submitted by,


Susan Fortney, Secretary

LG/dp
9/8/25