

**SAGINAW COUNTY COMMUNITY MENTAL HEALTH AUTHORITY
CITIZENS ADVISORY COMMITTEE MEETING
MAY 7, 2020 6:00 p.m.**

Toll Free Number: (877) 336-1831 / Access Code: 9525591#

Minutes

Due to the COVID-19 Public Health Emergency this CAC Meeting was held virtually by telephone. Sandra Lindsey, CEO will make opening comments to layout the communication protocol to help with meeting efficiency.

PRESENT: Lyn Bradfield, Ann Finta, Arletta French, Vicki Mikolajski, Deb Nagel, Cheryl Nelson, Jim Nesbit, Tracey Roat, Lisa Sawyer, Eileen Vescio, Sally Weber, Joan Williams

ABSENT: Tony Krasinski-excused, Maggie Davis-excused

STAFF: Sandra Lindsey, Ryan Mulder

GUESTS:

I. CALL TO ORDER

Ann Finta, Chair called the meeting to order at 6:00 p.m. Verification of the public posting was acknowledged and a quorum was established.

Ann welcomed everyone to tonight's meeting. Review and Acceptance of the Minutes of May 7, 2020.

Motion by Lisa Sawyer and supported by Vicki Mikolajski to approve the minutes of March 5, 2020 as written. Motion carried.

II. NEW BUSINESS

A. MSHN Citizen's Advisory Council Update

There was not update as the April 17 meeting was cancelled due to COVID-19 pandemic.

B. Future CAC Agenda Items

If the CAC has any other subjects they would like to see covered they are encouraged to send their ideas to Ryan. Recommendations as of today's meeting include:

- MUTT Update
- CHAP
- CMU Co-Location Project
- Transition Aged Youth TAY Program
- School-based Mental Health
- Client Health Self-Management Project
- STARS Rides for Wellness

III. OLD BUSINESS

A. Attendance Log

The Attendance Log was reviewed by the Citizens Advisory Committee.

Motion by Vicki Mikolajski and supported by Lisa Sawyer to approve the Attendance Log. Motion carried.

B. Membership

The Membership Log was reviewed by the Citizens Advisory Committee. It was noted there are still CAC vacancies:

1. Community

Motion by Lisa Sawyer and supported by Eileen Vescio to approve the Membership Log. Motion carried.

IV. CEO REPORT – SANDRA LINDSEY

Reporting to CMH Board on Friday with what is going on in SCCMHA Network on COVID-19 Pandemic. Sandy noted the following week by week:

Week of March 16-20

- All group service programs are closed, including Community Ties North and South, SVRCs Supported Employment and workshop, Friends for Recovery Drop In, Bayside Lodge and Guardian Angels Respite at St Marys' is serving a handful of consumers.
- All of our buildings with the exception of Hancock are closed to visitors.
- The Hancock building is also limiting visitors to the buildings, screening for COVID. Mostly consumers coming in for psychiatric appointments and injections. We are working with all prescribers to extend medication prescriptions to avoid the need to come in for med appointments and this is going well. We are lucky in that we seem to have enough personal protective equipment for front door screeners and medical staff at Hancock.
- Genoa pharmacy remains open for now and is delivering medication to group homes and consumers homes and still providing our Med Drop Program though be it with added safety measures for staff.
- GLBHC staff have temporarily moved out of the Hancock building.
- Crisis services staff continue to work from the Covenant ED after 4 p.m. 24/7
- This week we also launched telephonic outreach to consumers by therapists.
- We have cancelled all face to face training and meetings and moved to on line learning and Skype only meetings though the emergency period however long that is.
- Sandy has also pushed out the myStrength electronic support application across the Saginaw Community and shared it with our MSHN CMHSP Partners.

Week of March 23-27

- We closed the following SCCMHA sites yesterday: Towerline, Bay Road, Supported Employment and Housing Resource Center.
- We have sorted staff into the following groups to determine who we would send home as per the Governor's Executive Order. (Note: all of our staff are being paid their regular compensation.)

Group A: Essential Services at Hancock (on site) - these are staff members that must stay physically present on the job which includes: Security, Psychiatry, Nursing, Senior Management, Crisis Services, Central Access and Intake, Genoa Pharmacy, Information Systems, Network Services and a scaled back group of administrative support staff to assist the functions that must remain open. There is in addition, a small group left at Albert and Woods Center, including: Contract and Property Management, Human

Resources, and Custodial deployment. The building however is accepting no visitors except supply deliveries.

Group B: Clinical Teams working remotely (Essential services remote) from home unless face to face visits are needed. This group also includes other staff working remotely;

- a. Family Support Services, Infant Mental Health, Wrap Around, Transitional Youth Services and MUTT for kids/youth with SED,
- b. Adult Community Support Services teams for Adults with Mental Illness
- c. Supports Coordination Teams for persons with Intellectual/Developmental Disabilities including the team for consumers on the Autism Spectrum
- d. Self Determination Coordinators
- e. Care management/UM
- f. Housing Resources Supervisor
- g. Finance Staff – two Finance Department supervisors that can move funding where needed and pay claims are working remotely
- h. Auditing- with the supervisor working on site, these staff are working on chart audits to help clinical teams since the release of new telehealth billing codes.

Note: we have CSS staff on call to come in should we need them to work on Jail consultation and Supports Coordinators to process Family Support Subsidy applications.

Group C: These are non- essential staff that have been sent home and include; OBRA/PASSAR, Community Ties North and South, Supported Employment, Enhanced Health Staff (OTs, PTs, Registered Dieticians & Speech Therapy). Quality Staff, Transportation, Custodial staff are still working but a percentage will be cut back and sent home after we completely deep clean and sanitize the buildings we have closed. We also have enhanced custodial attention at Hancock for obvious reasons. Also sent home were trainers and support staff from Training and Continuing Education Department - with the supervisor working remotely and Auditing with the supervisor working on site at A & W.

- IS department is connecting all of the clinical staff as well as select non-clinical staff to their supervisors via Skype. Clinical supervisors meet via Skype first thing every morning to discuss high risk cases and strategies to support consumers and to determine who must be.
- MDHHS sent out the new telehealth billing codes and related guidance late last week, which has been critical.
- Personal Protection Equipment (PPE) will be a problem at SCCMHA as it is everywhere.
- I am working with HR on a packet of information for the staff that will go out by Friday or Monday
- Our Crisis Department telephone number is experiencing increased traffic as you might imagine and so Information System staff are working on the technology to forward calls that are not about acute psychiatric emergencies and hospital pre-admission screening to our Mobile Urgent Treatment Team staff that are all working remotely to answer these kinds of calls.
- We are receiving daily reports on the rate of infections from the Saginaw Health Department and the MDHHS Michigan Health Information Alert System.
- Guidance from MDHHS is coming out daily and feeds the "To Do List".

Week of April 6-9

Operations:

There have been numerous conference calls with MSHN and MDHHS to inform the system and I believe the team at MDHHS is being wonderfully responsive. Some issues are out of their control as they await answers to numerous questions around more flexibility for the Medicaid benefit and funding from the Centers for Medicare and Medicaid Services (CMS).

The Hancock building has a tent at the front door now each day to provide privacy and safety for consumers presenting for medication injections.

The breakthrough this week was getting the last of the details settled with MDHHS on Telehealth billing codes and adding them to our claims payment system. We are doing a test run of our system on Monday to catch any bugs and will then move forward with the processing of telehealth claims. There has been no interruption of other claims since all of this began. Bottom line, providers in the contracted network are getting paid.

Another breakthrough this week, was the go live of our new telehealth platform Doxy.me. This is a way for our staff in a HIPPA compliant electronic platform to be able to more easily connect visually with consumers and families through their cell phones or other devices.

Week of April 13-17

Started reporting data to Board:

Public Health Stats for Saginaw County As of 04/16/2020 at 10:05 a.m.

Total Tests Submitted 1239

Negative Tests 377

Pending Tests 512

Positive Tests 350

Recovered 23

Deaths 20

SCCMHA COVID Consumer Illness as of 4-17-20

20 New Cases Showing Illness

8 Consumers have Positive Tests

5 Consumers have Negative Tests

1 Consumer with Test Pending

6 Not Tested (but active symptoms suggest presumptive infection)

SCCMHA Selected as Subgrantee to MDHHS SAMHSA COVID Emergency Services Grant: SCCMHA was invited to be a subgrantee to the MDHHS SAMHSA COVID Emergency Services Grant on Thursday before Easter. Our invitation was also extended to the Detroit/Wayne CMH, Genesee CMH, AuSable Valley CMH and Muskegon CMH. The anticipated SCCMHA award will be around \$302,000.

MDHHS Receiving \$5 Million dollars of COVID Relief Funding for CMHSPs – not yet sure of our allocation. Potential utility to cover non-Medicaid costs will be much more flexible.

Personal Protection Equipment (PPE):

SCCMHA had more deliveries of PPE this week which we need badly. We are stepping in to purchase for most of the residential providers in our network, because we can order in volume large enough so that there is some chance the orders will be filled. Many providers were seeing their smaller orders cancelled. We have enough PPE for now for our forward-facing staff at Hancock that are treating consumers and the Crisis staff at the Covenant ED. All staff including those admin staff at both Hancock and A&W are essential and we started masking on Monday unless we are in our private offices with the doors closed and all meetings large and small are being conducted via Skype. MDHHS is asking for PPE and sanitation supply estimates going forward by close of business next Monday network wide, anticipating the gradual lifting of the Stay at Home Executive Order at the end of the month. That means appropriate PPE for daily use for over 1,500 staff across our network which is a daunting number. Granted the need is less for administrative staff, and higher for residential and clinical staff but even so, whether or not this much PPE can be secured state-wide remains to be seen.

Residential Network Support:

Most of the week has been occupied with planning for residential staffing support. We have developed a tiered plan of support focused first on doing everything to support the ability of Group Home and other Community Living Support (CLS) provider agencies to maintain their work force so consumers can stay in their current living situation.

Our efforts were greatly assisted today when the MSHN CEOs agreed that all CMHSPs as needed would offer a direct care staff wage increase of \$2.00/hour plus 15% bump to cover taxes and administrative costs through May 31, 2020.

Note: the residential staffing challenge is not being experienced uniformly across the MSHN region.

The COVID Residential Consumer and Network Support Group (CRCNSG) Develop a 2-Tiered Strategy:

Tier One: Support to the Residential Provider Workforce to Keep Consumers Safe and in Their Current Settings:

- Understand and be informed about staffing needs of providers based upon continued daily reporting to the COVID Illness Reporting Spreadsheet and other reports from providers, our nurses, Infection Control, record holders, and consumer/family reporting, first responder reporting or other outside reporters we cannot yet imagine. Determine what staff will manage requests with a single phone number to which staffing needs are made 24/7.
- Press MSHN and region wide CEOs to implement a DC wage increase ASAP
- Develop the processes for the recall of SCCMHA Furloughed staff members with appropriate training, experience, background checks, knowledge of the population and individual consumers in care, with recall guidance from our Human Resources Dept.
- Develop training for our staff (with safe social distancing and with PPE) in medications for the staff called in to perform this work as this is not a role they have played at CTS & CTN unless they are currently working or have formerly worked in residential settings, which is true for many.
- Develop the process for the identification of specific staffing needs in the network, to provide staffing both generally to settings and to consumers individually, specifically those with complex needs.

- Continue to identify and provide PPE and train in its use, for existing and replacement SCCMHA staff in these settings
- Determine the expanded role for SCCMHA nursing and dietician support to at risk consumers virtual and face to face.
- Determine if residential providers have extra transportation needs that we could help with.

Tier Two: Location of Alternative Care Site for Consumers

Continue to move forward with the development of an alternative care site for consumers which will be located at our Lamson building. This will be a last resort for COVID test positive consumers that cannot be managed in their existing settings. The number of beds we will open at this location is still under discussion though it is likely to be 6-8 beds. This location has been chosen as we already control the site which is currently empty. It as you may know is a setting with enough space, restrooms, a shower, kitchen, washer and dryer, technology and barrier free set up to meet the needs of the most disabled consumers we serve and is familiar to many of the consumers that will need this setting. Our development of the site, is being shaped by the CDC Guidance to Long Term Care Facilities.

- The CRCNS Group will determine the staffing plan for three shifts including supervision and custodial services
- Ordering of Beds and needed supplies including PPE is well underway
- Plans for food will consist of take-out ordering from nearby restaurants for of meals and snacks with consideration for food allergies and specialized meal prep for those special meal prep needs like those consumers with swallowing issues.
- Referral process and criteria for who will be admitted is underway
- Enhanced Health Services (Nursing, Dietary, consider OT and ABA)is underway
- Transportation Service needs to and from the facility are underway
- Clinical Documentation needs in Sentri II are under development with Sentri II direct messaging to record holders a part of the plan.
- 24/7 building security will be performed by our regular vender Conley Security
- Communication plans with families and guardians (to let them know where consumers are) is under development as there will be no visitors allowed into the site. assess our tech capacity at the site for electronic visual communications with families. Determine if the Doxy.me application can be used in the setting for the purpose of connecting with others.

Week of April 20-24

- Stay Home Stay Safe EO Extended
- By now you have no doubt learned that Governor Whitmore has extended the Stay Home Stay Safe Order until May 15th. Included in this order was a \$2.00/hour direct care staff wage increase.
- Saginaw Public Health COVID Stats
Note: I am not sure why the SPHD has changed the COVID Data table below, but you can find more details on their website at the link below.
<https://www.saginawpublichealth.org/coronavirus/covid-19-cases-in-saginaw-county/> as of 04/24/2020 at 10:05 a.m.
- Positive Tests 535
Recovered 63
Deaths 41

- SCCMHA COVID Consumer Illness as of 4-24-20
New consumer cases showing illness 9
Previously submitted consumer name with update 1
Consumers tested 8
Positive results 5
Negative results 1
Pending results 2
Not tested 2
Showing active COVID symptoms 2
- Personal Protective Equipment (PPE)
We had some good news from MDHHS this week regarding PPE for the PHIP/CMHSP system. The State of Michigan PPR stockpile is opening to our system and we hope to learn next week what volume of equipment is being shipped to MSHN for distribution to the CMHSPs. MSHN has worked on a formula for distribution among the 12 CMHSPs. The MSHN CMHSP CEOs approved the methodology today and we also agreed to be responsible for the local distribution of PPE to the MSHN SUD providers in our counties.
- Federal COVID Relief Funding to CMHSPs State-wide
Last week I reported that MDHHS has \$5 million dollars to distribute to CMHSPs but we still have not received the funds nor has the distribution formula been shared with us. We did learn that the funds will come in one lump sum and it will be cost settled at year end if not spent. Sandy has sent a couple of automated letters to U.S. Rep. Dan Kildee in this regard asking him to support these efforts.
- Residential Network Support
We have two 6-person group homes serving very complex consumers that have had multiple residents test positive for COVID this week.
- Senior Management Planning for Re-opening Board Operated and Closed Network Services
Discussion with senior management for how and when and under what provisions, services will be re-opened, will start next week. Much of these decisions will be conditional upon the adequacy of PPE.
- Renovations and Repairs
Renovations at the Hancock Building for the group room space on the first floor will commence next week. Repair work at the Albert and Woods Center to the exterior balcony on the back of the building has already begun. Lastly, we also anticipate the restart of adding additional treatment space to the Children, Youth and Family Services space on Bay Road and some modifications for expanded staff at Towerline.

Week of April 27-May1

- Saginaw Public Health COVID Stats
Positive Cases in Saginaw as of yesterday 4/30/20
See Saginaw Public Health Website for more details.
<https://www.saginawpublichealth.org/coronavirus/covid-19-cases-in-saginaw-county/> As of 04/30/2020 at 10:05 a.m.
Positive Tests 664
Recovered 91

Deaths 59

- SCCMHA Consumer COVID Illness Report:
New consumer cases showing illness 21
New consumer cases tested 7
Positive results 1
Negative results 4
Pending results 2
Not tested 10
Did not report if tested or not tested 4
Consumer showing active symptoms 13
- Federal COVID Relief Funding to CMHSPs
MDHHS The SCCMHA allocation was \$176, 690.00.
- MDHHS also Provided Guidance on Funding Changes in Response to COVID-19
The following subjects were covered in the Guidance but have not yet been approved by the Centers for Medicare and Medicaid Services (CMS).
 - Guidance on the MDHHS Direct Care Staff Increase for the period of April 1- June 30th.
 - Retroactive changes back to October 1st for changes to the PIHP Risk Corridor and the calculation of Medicaid Savings
 - Mandated sub-capitated contracting based on 95% of historical costs over the last 2 years (primarily focused to support residential service providers (MI/IDD/SUD).
 - Mandated inpatient psych per diem increase of 25%- effective April 1-Sept 30 for those hospitals and units taking COVID -19 positive patients/consumers.
- SCCMHA Received Funding Notice from SAMHSA as Certified Community Behavior Health Clinic (CCBHC)
Our award for FY 2021 is \$1,943,798. We submitted the application on March 10 before COVID hit.

V. OTHER INFORMATION

Lyn noted that she works for Region 7 and they have delivered 500 (5 day) food boxes and 100 (10 day) food boxes to individuals 60 or over. Deliveries are right to their home. Toilet paper, masks, hand sanitizer available as well. Reach out to Region 7 at 800-858-1637 (area agency on aging). Not income based just need based.

VI. ADJOURNMENT

Motion by Joan Williams and supported by Arletta French to adjourn the meeting at 6:50. Motion carried.