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

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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: Ann Finta, Vicki Mikolajski, Cheryl Nelson, Jim Nesbit, Eileen Vescio, Sally Weber,

Joan Williams, Arletta French, Deb Nagel, Lisa Sawyer

ABSENT: Tracey Roat-excused, Lyn Bradfield-excused, Maggie Davis-excused, Tony Krasinski-

excused

STAFF: Sandra Lindsey, Charlotte Fondren, John Burages, Jennifer Keilitz, Ryan Mulder

GUESTS: Jenny Barnett (housemate of Cheryl Nelson)

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 June 4, 2020.

Motion by Vicki Mikolajski and supported by Eileen Vescio to approve the minutes of June 4, 2020 as written. Motion carried.

II. SCHOOL TO COMMUNITY TRANSITION PLANNING GUIDELINES FROM MDHHS CONTRACT

Charlotte Fondren, Director of Services for Persons with Intellectual and Developmental Disabilities reviewed a PowerPoint on Community Transition Planning from MDHHS Contract. The following was noted:

- Introduction
- Development and Transition
- Special Education-To-Community Transition Planning Practice Recommendation Guideline
- Definition of Transition Services
- Statement of Purpose
- CMHSP's Responsibility
- Current Practices
- MDHHS Philosophy and Values
- Essential Elements
- CMHSP's Responsibilities to Schools
- CMHSP Request from the Schools
- Community Liaison is Lynn White

The Committee was able to ask questions / make comment. See CAC packet for details.

Motion made by Jim Nesbit and supported by Arletta French to receive and file the School to Community Transition Planning from MDHHS Contract as presented. Motion Carried.

III. HOUSING PRACTICES GUIDELINES FROM MDHHS CONTRACT

John Burages, Director of Services for Persons with Mental Illness reviewed a PowerPoint on the Housing Practices Guidelines from MDHHS Contract. The following was noted:

- Definition of Key Words (Affordable, Habitable and Safe, Housing, Responsible Mental Health Agency or RMHA's)
- Policy
 - Housing is a basic need
 - o All consumers have the right to pursue housing of their own choice
 - Housing could include licensed settings, an individual's own home or the home of another
 - o Services and supports shall be provided regardless of where an individual lives
 - RMHS's shall educate and assist consumers in locating safe, habitable and affordable housing
 - Process of locating suitable housing shall be directed by a consumer's interest, involvement, and informed choice
- Standards
 - RMHA's shall develop policies and create mechanisms that give predominate consideration to consumer's choice in selecting where and with whom they live
 - RMHA policies and mechanisms shall also:
 - Ensure RMHA-supported housing blends into community
 - Promote home ownership, individual choice, autonomy
 - Assure housing is accessible to the consumer and is compliant with applicable standards for occupancy, health, and safety
 - Be sensitive of and consider ethnic and cultural preferences
 - Encourage and support self-sufficiency
 - Provide for ongoing assessment of housing needs
 - Provide assistance in coordinating resources to meet basic housing needs

The Committee was able to ask questions / make comment. See CAC packet for details.

Motion made by Vicki Mikolajski and supported by Lisa Sawyer to receive and file the Housing Practice Guideline from MDHHS Contract as presented. Motion Carried.

IV. RECIPROCITY & EFFICIENCY POLICY STANDARDS FROM MDHHS CONTRACT

Jennifer Keilitz, Director of Network Services, Public Policy and Continuing Ed reviewed a PowerPoint on Reciprocity & Efficiency Policy Standards from MDHHS Contract. The following was noted:

- Policy is actually attached to the PIHP contract
- PIHP region passes along to us to assist with management and implementation
- Purpose is to assure providers have some consistency in compliance standards
- Reciprocity and Efficiency Policy Standards
 - General Standards
 - Procurement
- Provider/Program Monitoring
 - It is recognized that each PIHP may have developed unique tools for provider performance and compliance oversight and monitoring, due to the decentralized service delivery and network management in the state.
 - For provider monitoring as required by MDHHS or other routine on-site compliance reviews or monitoring, PIHP system or CMHSPs are expected to have a process, where at minimum, providers in good standing and/or at acceptable

- levels of performance are allowed a review waiver and/or modified/streamlined review at some regular interval.
- For purposes of this policy, it is recognized that service provider performance across a contracted system may vary from site to site, creating varied responses. It is further recognized that transparency in shared information may include both strengths and weaknesses.
- Expedited provider program/site reviews using reciprocal procedures could include any combination of the following:
 - PIHP/CMHSP sharing of recent review reports or outcomes
 - Reduction of the depth of a review in any given cycle based on positive provider performance
 - Verification of limited, priority only, review elements and /or conductions through a remote, off-site process
 - Simplified review protocols for programs located in the jurisdiction of another primary system
 - Joint or split system audits of providers by two or more systems
 - On-line audit processes and/or methods which otherwise reduce the total amount of time spent by providers in such activities
- Training/Continuing Education
 - For mandatory required training, each responsible organization must have reasonable provisions for facilitating the acceptance of validated training – and where possible if indicated, offering expedited alternative – for individuals for whom relevant, comparable training was provided by similar systems. Acceptance may general consider the following:
 - Length of time individual worked in a prior, similar role
 - Length of time since the last validated training or experience
 - Comparableness of curriculum content elements
 - Employer recommendations relative to performance
 - Partial training credit
 - Testing out for competency
 - Abbreviated training options
 - Self-study and/or on-line training

The Committee was able to ask questions / make comment. See CAC packet for details.

Motion made by Jim Nesbit and supported by Sally Weber to receive and file the Reciprocity & Efficiency Policy Standards from MDHHS Contract as presented. Motion Carried.

V. NEW BUSINESS

A. MSHN Citizen's Advisory Council Update

There was a June 12 meeting that was held online. 15 members were present. Reviewed the minutes from Feb. 14 meeting. Key items discussed:

- MSHN Phased Reopening / CMHSP Planning regarding COVID-19
- CMHSP Local Updates
- Other Business MIAble being a helpful resource for tax advantages savings programs for persons with disabilities
- Next Meeting Aug. 14

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

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

C. Confidentiality Agreement

Ryan thanked the CAC for taking the time to sign and return their copies of the Confidentially Agreements. As of right now only one member has not returned it. Ryan will reach out to this individual by mail requesting they do so ASAP.

D. FY 2021 Public Hearing – 10/1/20 by Zoom Conference

Sandy / Ryan noted that the date of the FY 2021 SCCMHA Public Hearing is Thursday, October 1, 2020 at 5:30 PM. It will be held via Zoom Conference. The hearing posting and Zoom Conference Info will be sent out closer to the hearing.

VI. OLD BUSINESS

A. Attendance Log

The Attendance Log was reviewed by the Citizens Advisory Committee.

Motion by Vicki Mikolajski and supported by Joan Williams 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 Joan Williams to approve the Membership Log. Motion carried.

VII. CEO REPORT – SANDRA LINDSEY

Sandy noted that things are going really well in residential network. There have been COVID-19 outbreaks but members of the provider network have handled things appropriately to keep consumers and staff safe. It was noted that the MSHN allowed for premium pay increases for direct care workers as well as payments for unusual expenses such as PPE. Sandy could not be more appreciative of the efforts of SCCMHA residential providers and indicated how very proud she was of the residential network performance.

Also, in the midst of COVID-19 pandemic our Albert & Woods center experienced high Shiawassee River water levels as result of dam failures in Gladwin and Midland County. Several SCCMHA vendors helped us prepare for the potential flood and were successful in mitigating the risk (NetSource One, Remer, SBU, VanHerweg Electric, Wobig, etc.).

SCCMHA is currently looking at plans for non-residential programs for reopening (with social distancing, PPE, etc. in place). All of our SCCMHA sites were closed except for the Hancock and A&W Center. As of right now, all buildings have not reopened minus transportation and day program staff that are still laid off. Telehealth modalities are being used to serve individuals on caseholders caseloads.

SCCMHA just finished writing the 'Essential Behavioral Health Services Directive: When to Provide in Person Care'. Services have continued at Hancock (Health Home, Genoa Pharmacy, Central Access and Intake, Crisis Intervention Services). Crisis staff have done a

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great job as well coving three shifts 24/7 every day since the pandemic began. Special thanks to the staff that staffed second and third shifts at the Covenant Emergency Care Center.

SCCMHA's Return to Work Plan is posted on the SCCMHA website (under 'For our Staff'). Password is 'scmha'.

SCCMHA has been selected by SAMHSA as a new CCBHC site. We're currently working through our Gap Analysis that was put together in our last previous submission from 2016. This year (2020) is largely a planning year for CCBHC implementation here in Saginaw.

Yesterday the State of Michigan was selected as a CCBHC Expansion State as well. Sandy is hopeful the the state of Michigan embracing the model will lead to long-term CCBHS financial sustainability and that the CCBHC model will inform the PIHP/CMH system redesign.

Construction has almost concluded to the former Room 142 at Hancock. There have been numerous other capital improvement projects underway using funding from the Capital Bonds sold by the County to make this financial support for capital projects affordable for SCCMHA. Projects included building renovations and technology infrastructure.

MSHN and MDHHS Audits happened over the last couple of weeks. Still waiting on the final written reports but the exit conferences seem to suggest we did well.

Saginaw County is forecasting a \$276K reduction in local match to SCCMHA for FY 2021. More news upcoming on this but Sandy continues to hold firm to the position that the County cannot legally unilaterally reduce their match obligation without demonstrating financial hardship to MDHHS.

VIII. OTHER INFORMATION

SCCMHA's Annual Progress Report was included in your packet for tonight's meeting. Sandy / Ryan encouraged CAC members to give it a good read. Sandy explained that it is very" text dense" but that it was decided to use the Annual Report this year to tell the CMH statutory safety net story.

Ann gave kudos to SCCMHA training department for their hard work with virtual trainings online and also Genoa pharmacy for their work during pandemic as well.

IX. ADJOURNMENT

Motion by Lisa Sawyer and supported by Jim Nesbit to adjourn the meeting at 7:13. Motion carried.