



Detroit Wayne Integrated Health Network

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FULL BOARD Wednesday, January 19, 2022 1:00 P.M AGENDA (Revised)

- I. CALL TO ORDER**
- II. ROLL CALL**
- III. APPROVAL OF THE AGENDA**
- IV. MOMENT OF SILENCE**
- V. APPROVAL OF BOARD MINUTES** – Special Full Board Meeting – November 3, 2021
Full Board Meeting – November 17, 2021
- VI. RECEIVE AND FILE** – Approved Finance Committee Minutes – November 3, 2021
Approved Program Compliance Committee Minutes – November 10, 2021
- VII. ANNOUNCEMENTS**
 - A) Network Announcements
 - B) Board Member Announcements
- VIII. SWEARING IN CEREMONY – Judge Freddie Burton**
- IX. BOARD COMMITTEE REPORTS**
 - A) Board Chair Report
 - 1) Update Board Member Appointment - City of Detroit
 - 2) Nominating Committee – Confirmation of Committee Appointments
 - 3) Update Metro Region Virtual Meeting – December 2, 2021
 - 4) New Board Member Orientation – January 21, 2022 (Virtual)
 - 5) Community Mental Health Association of Michigan (CMHAM) Winter Conference
February 7th -9th 2022, Kalamazoo, Michigan (Virtual)
 - 6) National Council for Wellbeing – NatCon22 April 11th -13th 2022 National Harbor,
Washington D.C.
 - 7) Chamber of Commerce Policy Conference - May 31 – June 3, 2022 Mackinac Island,
Michigan
 - B) Executive Committee
 - 1) Board Study Session
 - 2) CEO Incentive Compensation Performance Objectives
 - 3) Annual Report to the Commission
 - 4) Dissolution of Board Building Ad Hoc Committee

Board of Directors

Angelo Glenn, Chairperson
Dorothy Burrell
Kevin McNamara

Kenya Ruth, Vice Chairperson
Lynne F. Carter, M.D.
Bernard Parker

Dora Brown, Treasurer
Michelle Jawad

Dr. Cynthia Tauog, Secretary
Jonathan C. Kinloch

Eric W. Doeh, President and CEO



- C) Finance Committee
- D) Program Compliance Committee
- E) Recipient Rights Advisory Committee

X. SUBSTANCE USE DISORDER OVERSIGHT (SUD) POLICY BOARD REPORT

XI. AD HOC COMMITTEE REPORTS

- A) Policy/Bylaw Committee
- B) Board Building Committee

XII. PRESIDENT AND CEO MONTHLY REPORT

XIII. UNFINISHED BUSINESS

Staff Recommendations:

- A. BA #19-62 (Revision 2) Pyratech Security *(Finance)*
- B. BA #20-49 (Revision 2) OBRA/PASARR Services-Neighborhood Services Organization (NSO) *(Program Compliance)*
- C. BA #20-54 (Revision 4) HEDIS/NCQA Professional Consulting Services *(Finance)*
- D. BA #21-13 (Revision 3) Wayne County Health, Human & Veteran Services – Third Circuit Court, Clinic for Child Study *(Program Compliance)*
- E. BA #21-69 (Revised) DWIHN Proposed General Fund Program Allocation – The Children’s Center Foster Care Program *(Program Compliance)*
- F. BA #22-12 (Revision1) DWIHN FY 2021/2022 Operating Budget *(Finance)*

XIV. NEW BUSINESS

Staff Recommendations:

- A. BA #22-35 – Westcomm Inc. *(Finance)*
- B. BA#22-41 – Michigan Child Collaborative Care Program (MC3) & the Behavioral Health Consultant – Starfish Family Services *(Program Compliance)*
- C. BA#22-42 – Substance Use Disorder (SUD)Parenting Post-Partum Women Pilot-Elmhurst Home, Inc. *(Program Compliance)*
- D. BA#22-43 - Wayne Health Mobile Outreach Clinic – Wayne State University Physicians’ Group *(Program Compliance)*
- E. BA#22-44 – Infant and Early Childhood Mental Health Consultation in Home Visiting (IECMHC-HV) *(Program Compliance)*
- F. BA #22-45 –Special Media Outreach Initiative *(Finance)*

XV. PROVIDER PRESENTATION – Changing Lives & Staying Sober (C.L.A.S.S.)

XVI. REVIEW OF ACTION ITEMS

XVII. GOOD & WELFARE/PUBLIC COMMENT/ANNOUNCEMENTS

Members of the public are welcome to address the Board during this time for no more than two minutes. (The Board Liaison will notify the Chair when the time limit has been met.) Individuals are encouraged to identify themselves and fill out a comment card to leave with the Board Liaison; however, those individuals that do not want to identify themselves may still address the Board. Issues raised during Good and Welfare/Public Comment that are of concern to the general public and may initiate an inquiry and follow-up will be responded to and may be posted to the website. Feedback will be posted within a reasonable timeframe (information that is HIPAA related or of a confidential nature will not be posted but rather responded to on an individual basis).

XVIII. ADJOURNMENT



DETROIT WAYNE INTEGRATED HEALTH NETWORK
SPECIAL FULL BOARD MEETING
Meeting Minutes
Virtual
Wednesday, November 3, 2021
3:00 pm.

BOARD MEMBERS PRESENT

Angelo Glenn, Chairperson

Kenya Ruth, Vice Chairperson

Dora Brown, Treasurer

Dr. Cynthia Tauег, Secretary

Dorothy Burrell

Michelle Jawad

Commissioner Jonathan C. Kinloch

Kevin McNamara

Bernard Parker

BOARD MEMBERS EXCUSED: Lynne F. Carter, M.D.

GUEST(S): None

CALL TO ORDER

The meeting was called to order at 3:06 p.m. by Ms. Ruth, Vice Chairperson

ROLL CALL

Roll call was taken by Dr. Tauег, Board Secretary and a quorum was present.

APPROVAL OF THE AGENDA

Ms. Ruth Vice Chairperson welcomed everyone to the meeting and called for a motion on the agenda.

It was moved by Mr. Parker and supported by Ms. Jawad to accept the agenda as presented. Motion carried unanimously.

MOMENT OF SILENCE

The Vice Chairperson called for a moment of silence. Moment of Silence taken.

Board Action #22-30 PA 152 Waiver- S. Durant, CFO reporting. **The Vice Chair called for a motion.**

Motion: It was moved by Mr. Parker and supported by Mr. Glenn approval of BA #22-30. Discussion ensued regarding quorum of the board and the number of votes needed to approve the recommendation. Attorney Turner provided quorum and noted that a 2/3 vote of the board was needed for the recommendation to pass which would be seven (7) votes in the affirmative. Discussion ensued regarding the modification to the board action which was different than what was originally presented to the board which was DWHN covering 80% of the cost of BC/BS healthcare and employees covering the remaining costs which would amount to DWHN paying approximately \$800,000.00. The Board action currently being presented is DWHN covering 90% of the cost of healthcare and employees covering 10% which amounts to DWHN paying approximately \$1,100,000.00. The change in the amount is to recognize that these are extraordinary times and to show appreciation to our employees who continue to serve. Dr. Tauег noted that she was in support of the original board action of the 80/20 split; however, she did have some concerns with the change to 90/10 split; she was in support of the associates; however, she was concerned as to how this would impact DWHN in the future and she felt the timing was off. Staff is requesting an exemption from PA 152 (the "Act") to permit DWHN to subsidize the healthcare coverage for the upcoming 2022 plan year for an estimated amount of \$1,100,000 which represents the estimated 90% of DWHN employer costs. Passed in 2011, the Act limits a public

employer's expenditures for medical benefits for its employees by imposing a "hard cap" on those expenditures. With two-thirds approval by the governing body **each year**, Section 8 of the Act allows the employer to exempt itself from the imposition of the hard cap.

DWIHN's administration has worked closely with Daly Merritt, our benefits broker, to secure quality and low-cost health care for staff. The broker requested quotes from other health plans however they refused to submit an offer due to lack of a competitive rate compared to the current carrier. Therefore, despite our best efforts, the cost of medical healthcare coverage for the staff under Blue Cross Blue Shield/BCN increased by 30% for the 2022 plan year, as compared to an increase of 3.70% in the hard cap.

Due to restrictions under the Act, 100% of the 26.3% (30%-3.70%) increase must be borne by employees. Approval of the board action would allow a waiver of the hard cap provision and permit DWIHN to fund the aforementioned amount above hard cap. This board action must come before the Board each year prior to the open enrollment period and **is not** automatically extended beyond the date indicated 12/31/22.

The Vice Chair requested a roll call vote which was taken by Board Secretary, Dr. Tauæg. Ms. Brown; Ms. Burrell; Mr. Glenn; Commissioner Kinloch; and Ms. Ruth; Ms. Jawad; Mr. McNamara and Mr. Parker voted Yea; and Dr. Tauæg abstained. **Motion carried.**

REVIEW OF ACTION ITEMS

None.

GOOD AND WELFARE/PUBLIC COMMENT

The Vice Chair read the Good and Welfare statement. There was one written request to address the board from Ms. S. Flores; however, there was no response from Ms. Flores when recognized by the Board Vice Chair Ms. Ruth nor was she on the call. Ms. Durant thanked the board on behalf of all of the DWIHN employees.

ADJOURNMENT

There being no further business, the Board Vice Chair, Ms. Ruth called for a motion to adjourn. **It was moved by Ms. Jawad and second by Ms. Brown to adjourn. The motion carried unanimously and the meeting adjourned at 3:18 p.m.**

Submitted by:
Lillian M. Blackshire
Board Liaison



**DETROIT WAYNE INTEGRATED HEALTH NETWORK
FULL BOARD MEETING
Meeting Minutes
Virtual
Wednesday, November 17, 2021
1:00 pm.**

BOARD MEMBERS PRESENT

Kenya Ruth, Vice Chairperson
Dora Brown, Treasurer
Dr. Cynthia Tauzeg, Secretary
Dorothy Burrell

Michelle Jawad
Commissioner Jonathan C. Kinloch
Kevin McNamara
Bernard Parker

BOARD MEMBERS EXCUSED: Mr. Angelo Glenn, Chair; and Lynne F. Carter; M.D.

GUEST(S): None

CALL TO ORDER

The meeting was called to order at 1:08 p.m. by Ms. Kenya Ruth, Vice Chairperson

ROLL CALL

Roll call was taken by the Board Liaison, Lillian Blackshire and a quorum was present. Dr. Tauzeg was scheduled to join the meeting later.

APPROVAL OF THE AGENDA

Ms. Ruth, Vice Chairperson welcomed everyone to the meeting; noted that Mr. Glenn, Board Chair was excused as he was on vacation and called for a motion on the agenda.

It was moved by Ms. Brown and supported by Mr. Parker approval of the agenda as presented. Motion carried unanimously.

MOMENT OF SILENCE

The Chairperson called for a moment of silence. Moment of Silence taken.

APPROVAL OF BOARD MINUTES

The Chair called for a motion on the Board minutes from the Full Board meeting of October 20, 2021. **It was moved by Commissioner Kinloch and supported by Ms. Brown to accept the Full Board minutes of October 20, 2021 with any necessary corrections. Motion carried unanimously.**

The Chair called for a motion on the Special Full Board minutes from the meetings of October 6, 2021 and September 24, 2021. **It was moved by Commissioner Kinloch and supported by Ms. Brown to accept the Special Full Board minutes from the meetings of October 6th and September 24th, 2021 with any necessary corrections. Motion carried unanimously.**

RECEIVE AND FILE

The approved Finance Committee minutes from the meeting of October 6, 2021 and the approved Program Compliance Committee minutes from the meeting of October 13, 2021 were received and filed.

ANNOUNCEMENTS

Network Announcements

T. Devon, Director of Communications noted there is a Community Health and Vaccine event for the City of Detroit this Saturday, November 20th from 12:00 p.m. to 4:00 p.m. sponsored by DWIHN as well as other community partners including the City of Detroit; Children's Hospital and Henry Ford Hospital at Cass Technical High School located on 2nd Avenue in Detroit, Michigan; a flyer was sent earlier today and additional information can be obtained from the Board Liaison.

Board Announcements

There were no Board Announcements.

Board Chair Report

Board Vice Chair, Ms. Ruth requested an update on the Wayne County and City of Detroit appointments. It was reported by Ms. B. Blackwell, Chief of Staff that Wayne County is working on their vacancy and a selection has been made at this time. Mr. William Phillips has been nominated and has gone through the Health and Human Services Committee. He is slated to be presented to the full Wayne County Commission tomorrow, Thursday, November 18th 2021. She will keep this body informed. New Board member orientation will be scheduled with the Board Liaison for both Mr. Phillips and Ms. Gail Perry-Mason. We are awaiting the arrival of the City of Detroit's appointment Ms. Perry-Mason; she has been appointed by Mayor Duggan's office and fully appointed by the Wayne County Commission. Board Vice Chair Ruth gave a verbal report on the Community Mental Health Association of Michigan (CMHAM) 2021 Annual Fall Conference; it was reported that she, Mr. Glenn; Mr. Doeh and Ms. Blackwell attended the conference along with other staff members. Ms. Andrea Smith and her team gave a presentation; overall it was a great informative conference; information was provided on the attack on mental health; the Senate Bills and the advocacy that has been put into place. Mr. Doeh reported that the department (MDHHS) has not taken a position as of yet; Director Hertel spoke on the department's position which is very watchful as the department has not declared a position. There did seem to be some support for Representative Whiteford's bill as it seems to be the more palatable of the two bills and Representative Whiteford has been very accommodating in sitting down with him and other PIHP leaders. Mr. Doeh has had an opportunity to meet with Senator Shirkey to discuss the bill and DWIHN and is scheduled to meet with him the first week of December. An overview was provided on the CIT training; our partnership with the Detroit Police Department; several other law enforcement agencies and the expansion plan with the 8th precinct.

It was noted that the Metro Region meeting will be held on December 2, 2021 with Macomb hosting. Ms. Ruth and Commissioner Kinloch plan to attend the meeting in person.

The National Council for Wellbeing -NatCon 22 will be held in Washington, D.C. April 11th -13th. Ms. Ruth plans to attend the conference and interested board members should notify the board liaison.

Executive Committee

Board Chair, Ms. Ruth, gave a verbal report. It was reported that the Executive Committee met on Monday, October 18th 2021. There were several items for discussion. BA#22-38 Employee Healthcare FY 2022 and BA# 22-40 Michigan Department of Health and Human Services PIHP Contract were presented and recommended to full board for approval; both are on the agenda.

The Board Chair Mr. Glenn is scheduling a meeting with Mr. Doeh during the month of December to discuss the CEO Incentive Compensation Performance Objectives. Board meetings, both committee and Full Board will be cancelled for the month of December per discussion with the Board Chair and

a motion was made at the Board Executive Committee meeting to cancel the meetings for the month of December.

Finance Committee

Ms. Dora Brown, Treasurer and Chair of the Finance Committee, gave a verbal report of the highlights from the Finance Committee and noted the committee met virtually on Wednesday, November 3, 2021. There was some really good news to report. DWIHN will be providing \$4.3 million dollars in stability payments to 13 of the 26 eligible providers. There will be a one-time lump sum payment that will go to Providers and staff members projected for December of 2021 just before the holidays for employees who were employed on September 30th of 2021 which was when our fiscal year ended. There is also a one-time payment to various residential providers for overtime premiums for services rendered during the FY September 2021 and there will be an across the board provider rate increase in early 2022; the projected increase will be between 5% to 10%. There was a Board Action #22-30 PA 152 Waiver (Healthcare) that was waived by the Board at the Special Full Board meeting held on November 3, 2021 by a 2/3 vote and it was approved by the Board that there would be a 90/10 split for Healthcare funding. There were five board actions that were presented and moved to full board for approval BA#20-35; BA#21-68; BA#22-18; BA#22-19; and BA#22-39. The liquidity of the organization remains stable and the cash flow is sufficient to support the operations. There was no further discussion. The report was received and filed.

The Chair inquired from legal as to whether a motion was necessary to accept the recommendation from the Executive Committee to cancel the December Board meetings. Attorney Turner noted that approval was necessary from the Board for the cancellation of the December meetings. The Chair requested a motion from the Board. **Motion:** It was moved by Mr. McNamara and supported by Ms. Brown that Board meetings for the month of December be cancelled. Mr. Parker inquired as to whether or not the motion included the committee meetings Finance, Programs Compliance and Executive as well as the Full Board meeting. It was determined that the motion was to cover all of the meetings for the month of December. The maker of the motion, Mr. McNamara restated the motion. **Motion:** It was moved by Mr. McNamara and supported by Ms. Brown that the Full Board meetings and all board committee meetings for the month of December be cancelled. There was no further discussion. **Motion carried.**

Program Compliance Committee

The Program Compliance Committee report will be deferred to the January Full Board meeting.

Recipient Rights Advisory Committee

Ms. Ruth, Chair of the Recipient Rights Advisory Committee (RRAC) noted that Ms. M. Strong, Deputy Director of Recipient Rights would give the RRAC report. A verbal report was provided with a written report to follow after the meeting. It was reported the Recipient Rights Advisory Committee met on November 1, 2021 at 1:00 pm. They are in the process of preparing the Annual Report which was shared with the entire committee on November 1, 2021. The RRAC committee is required by the State of Michigan to make at least three recommendations/goals for the ORR department which are to increase staffing levels; increase training for the committee regarding policies, new procedures and changes mandated by the State and to continue to work with the department. A new Investigator, Mr. Z. Flynn has been hired. The Elliot Team developed an initiative entitled "Mentoring 2.0 Process" which offers support for each other regarding processing investigations. Mr. Witcher has done an excellent job of empowering his investigators. An update on the number of complaints was provided for the months of September and October; for the month of September a total of 105 allegations were received; 17 were Outside of Provider Jurisdiction; 3 were No Rights Involved; 85 were actual investigations; 12 were closed and 73 remain open. For the month of October, a total of 126 allegations were received; 13 were Outside Provider Jurisdiction; 3 are No

Rights Involved; 110 investigations were opened; one case was closed and 109 cases remain open. There were 369 participants registered for Recipient Rights Training in the month of September; 216 participants attended the virtual class; 172 passed and there were 197 individuals that were “no shows.” There were 409 participants registered for Recipient Rights Training for the month of October; 236 attended the virtual class; 203 passed and there 206 “no shows.” The Recipient Rights department is requesting all providers ensure their employees are trained within 30 days of their hire to remain in compliance with the Mental Health Code Citation **MHC 1755(5)(f), Standard 3.3.1**. The department will begin to impose the \$50.00 fee for failing to train their staff within 30 days of hire. We are currently working on a policy to ensure compliance by implementing the \$50.00 fee. The monitoring team conducted 121 Site Reviews for the month of September and 17 Site Reviews for the month of October. The Annual Report was discussed and is due to the State on December 31, 2021. The Recipient Rights department is continuing to work with the Substance Use Disorder department; when a complaint is received involving a substance abuse center it is forwarded to the Director of SUD for processing. A training was provided on how complaints are received and processed to the Investigators. There was no additional discussion on the Recipient Rights Advisory Committee report. The Board Chair, Ms. Ruth noted that during COVID the Recipient Rights department has received a numerous amount of complaints; however, the department continues to do an outstanding job even though a number of staff members are new and the department has been understaffed. She thanked the department for their continued dedication.

The Board Chair, Ms. Ruth noted the reports of the Board Chair; Executive Committee and Recipient Rights Advisory Committee were received and filed.

SUBSTANCE USE DISORDER OVERSIGHT (SUD) POLICY BOARD REPORT

Mr. Tom Adams, SUD Oversight Policy Board Chair provided a verbal report. A written report will be submitted for the record after the meeting. It was reported the SUD Oversight Policy Board met on November 15th 2021. There was one board action from the MDHHS there was an award received from the Michigan Department of Health and Human Services (MDHHS) for a one-year contract for parenting a post-partum Women’s Pilot Program; a portion of the monies will be allocated for treatment services, care coordination; data collection and administrative costs. There was also a discussion about the Children’s Initiative department regarding the School Success Initiative as well as the Call Center. Dr. Arfken, Vice Chair of SUD Oversight Policy Board worked with the Call Center to minimize complaints and make sure that access be as quick and as thorough as possible and that problems be handled as quickly as possible. It was reported that the complaints were minimal and the complaints that were noted were those that needed additional attention for handling. A study session is being planned for the first of the year. There was discussion regarding any time sensitive matters that may need to be taken up during the month of December. It was noted there were none at this time. There was no further discussion.

The Chair noted the report of the Substance Use Disorder Oversight Policy Board was received and filed.

AD HOC COMMITTEE REPORTS

Policy/Bylaws Committee

There was no report.

Board Building Committee

The Committee Chair, Ms. Brown provided a brief verbal report and noted that two board actions one for Flagstar and the other for the architect would be on the agenda for today; an update would be provided in the President and CEO monthly report.

PRESIDENT AND CEO MONTHLY REPORT

Mr. Doeh, CEO, reported. A written report was provided for the record. Mr. Doeh noted that in light of the December board and committee meetings being cancelled a notice be sent immediately to notify providers and the public of the cancelled meeting. It was reported that we continue to be in opposition of the Shirkey bill along with the advocacy groups and the people we serve. The Association is in support of the Whiteford bill, but not all parts of it. We have met with many of our stakeholders who continue to be supportive as well; along with the County Executive and the Mayor. A meeting was held with Representative Whiteford and some of our recommendations have been put forth in her latest draft. An overview was provided of the movement of the bill over the holiday recess and it was noted that not all Republicans are in support of the Shirkey bill. Representative Whiteford would prefer for Mental Health to remain within the Community Mental health arena and the structure that she is pushing for is the administrative service organization; however, there is still much to be worked out.

It was reported that twenty-six (26) providers from four (4) lines of business were eligible for a stability payment Thirteen (13) of the providers responded and were eligible for a total payment amount of \$4.3 million. It was noted that Providers are in a pinch when it comes to having ample staff to support the work and we will continue to work with them as we move forward. We have been able to have engagements with the members of the community as well as members in the business district here at 707 Milwaukee. Thus far community members are willing to testify on our behalf in front of the city as to their support of our headquarters over on Woodward; the business district members have also shared their support for our Care Center to be constructed at 707 W. Milwaukee so these are exciting things to look forward to. We will be moving toward the hiring of a Chief Network Officer within the coming weeks; we have also posted for a Chief Strategic Officer position and with the Behavioral Health Home and the Certified Community Behavioral Health Clinic (CCBHC) we need to strengthen our clinical team and the hiring of a Strategic Officer will play an important role with our NCQA requirements; our expansion and collaboration with our health plans and the mobile health clinics will also be huge responsibilities for that individual from an operational standpoint. The hiring of a Chief Network Officer is going to play a huge role in the operational matter and he has been trying to juggle both. Mr. Singla has been an asset to our organization not only as CIO but also serving in the role of Chief Network Officer and has done a fine job. An overview was provided of the tremendous work that has been done by the Chief Clinical Officer and others on the team. He thanked the board for the waiver with the healthcare and noted the appreciation of the DWIHN employees. He also noted that he was excited about the presentation with Wayne Health and that this has been a terrific partnership as they are an outreach services of not only mental health services; but also, preventative services. Discussion ensued regarding the status of integrated health. It was noted that we are working with three health plans, Priority Health, which we have several members in common and have been able to share data; we have had to reset with Blue Care Network as this is an organization that we share close to 10,000 members in common. The platform will probably be the same. It was reported that things have not progressed as quickly with Henry Ford and we are considering if we want to stay committed to this one or consider them down the road. It was noted by Mr. Singla that we are on track in terms of putting together not only a more detailed plans as well as an application. We will have better services; improve access; and our alignment is geared toward the integration of member engagement and creating access and opportunities to provide more holistic care. Mr. Parker noted that it is important to show that we are working with the health plans and that we have a collaborataive effort moving forward

and at some point we are able to make an announcement that we are doing this and we get as much attention as possible so that we can communicate that to the legislators. There was no further discussion. The report of the President and CEO was received and filed.

UNFINISHED BUSINESS

Staff Recommendations:

A. BA #20-35 (Revision 2) – Tetra Tech – M. Maskey, Facilities Manager reporting. Staff is requesting modification of Board action #20-35R with TetraTech of Michigan, our existing architectural and engineering firm. The request is that the current contract amount be modified in an amount not to exceed of \$1,863,850.00 bringing the total contract amount to \$3,012,250.00. The modification will allow TetraTech to renovate the Woodward Building to provide office space for staff. Office space will be provided on floors one and two, a board room will be provided on the first floor and mix of facilities and office space will be provided on the lower level. The Milwaukee building will be renovated to provide mental health crisis stabilization services for the surrounding community. Crisis stabilization spaces will be provided on the first floor and crisis residential space will be developed on the second floor. Outdoor spaces will be developed. DWIHN has requested TetraTech to provide a proposal to assist with needed City Zoning submissions; City plan reviews, construction document development; bidding assistance and construction administration services. The Vice Chair called for a motion. **Motion:** It was moved by Ms. Brown and supported by Mr. Parker approval of Board Action #20-35 (Revision2). There was no further discussion. **Motion carried.**

B. BA #21-48 (Revised) – Community Foundation of SE Michigan’s Opioid Partnership – DWHIN’s Provider Network. The Chair called for a motion. – **Motion:** It was moved by Ms. Brown and supported by Mr. Parker approval of BA #21-48 (Revised). Staff requesting board approval for a two-month (time only) extension to the FY ’21 contract for an amount not to exceed \$151,984 with Wayne State University (\$28,000); Quality Behavioral Health (\$43,000); Wayne County Health Communities (\$30,000); and Abundant Recovery Services (\$43,000). The revised contract term is October 1, 2020 to December 1, 2021. **Motion carried.**

C. BA#21-68 (Revised) – Flagstar Bank S. Durant, Chief Financial Officer reporting. The Chair called for a motion. **Motion:** It was moved by Ms. Brown and supported by Mr. Parker approval of BA#21-68 (Revised). Staff is requesting approval to enter into a financing agreement with Flagstar Bank in the amount not to exceed \$10,000,000. The financing agreement includes construction costs and equipment loan for the Woodward building. The term of the construction loan is for 42 months after the estimated 18-month construction draw period with a 20-year amortization period. In addition, the agreement include financing 80% of the invoice cost of new equipment. The term of the equipment loan is interest only for 18 months followed by monthly payments for 42 months based on a 5-year amortization period. The interest rate; non-refundable commitment fee and balloon payment information was provided in the Board action. There was no further discussion. **Motion carried.**

NEW BUSINESS

Staff Recommendations:

A. BA #22-18 – Graham Media – T. Devon, Director of Communications reporting. The Chair called for a motion. **Motion:** It was moved by Mr. Parker and supported by Ms. Brown approval of BA#22-18. Staff is requesting the approval of a nine (9) month contract effective January 1, 2022 through September 30, 2022 for an amount not to exceed \$50,000 with WDIV-TV4/Graham Media. The services would include messaging discussing mental health, stigma, access to care and many other relevant topics. **Motion carried.**

B. BA #22-19 Scripps – T. Devon, Director of Communications reporting. The Chair called for a motion. **Motion:** It was moved by Ms. Brown and supported by Mr. Parker approval of BA #22-19. Staff requesting board approval of an eleven month contract effective November 17, 2021 through September 30, 2022 for an amount not to exceed \$50,000 with Scripps Media Inc. The services will include mental health and educational messaging across three media channels, WXYZ-TV7; TV 20 and Bounce. There was no further discussion. **Motion carried.**

C. BA #22-25 School Success Initiative FY 21/22 – E. Reynolds, Clinical Officer reporting. The Chair called for a motion. **Motion:** It was moved by Ms. Jawad and supported by Ms. Brown approval of BA#22-25. Staff requesting board approval for FY 21/22 contract totaling \$3.6 million to extend funding for the CMH entities delivering the School Success Initiative program. The overall performance expectation is to ensure students and their families have access to community mental health services within a school-based setting and provide evidence-based psychoeducation training and intervention to children and school professionals. Discussion ensued regarding increasing the number of student participants; getting the youth to partner with us; the curriculum and the delivery of the services. **Motion carried with Ms. Jawad abstaining from LAHC and Mr. Parker abstaining the Barack Obama Leadership Academy due to conflict of interest.**

D. BA#22-31 Treatment Foster Care Oregon (TFCO) the Guidance Center C. Phipps, Director of Children's Initiatives reporting. Staff requesting board approval for a one-year contract between DWIHN and The Guidance Center to continue implementation of the TFCO Initiative for FY 21/22. Funding for this contract is through the State of Michigan, Department of Health and Human Services' grant for \$409,180.00. The state grant is received from Wayne State University. There was no further discussion.

E. BA #22-36 MI Health Link Demonstration Project – All Well-Being Services J. White, Director of Managed Care Operations reporting. Staff requesting board approval for a one-year contract with the five Integrated Care Organizations to receive and disburse Medicare dollars to reimburse the Affiliated Providers for the calendar year ended December 31, 2022 for an estimated amount of \$9,886,123.00 in conjunction with the MI-Health Link Demonstration Project. There was no further discussion.

F. BA#22-37 WDIV TV-4 Communications – Graham Media Group. J. Davis, Director of SUD reporting. Staff requesting board approval for a one-year contract with WDIV TV-4 for an amount not to exceed \$50,500.00. The campaign includes five months to air 22+ 30-second messages during various time slots including prime time. The funding source is PA2 dollars and the SUD Oversight Board has approved this request. There was no further discussion.

The Chair called for a motion on BA#22-31; BA#22-36; and BA #22-37. **Motion:** It was moved by Commissioner Kinloch and supported by Ms. Brown approval of BA#22-31; BA#22-36; and BA#22-37. There was no further discussion. **Motion carried.**

G. BA #22-38 Employee Healthcare FY 2022 J. Connally, Director of Human Resources reporting. The Chair called for a motion. **Motion:** It was moved by Ms. Brown and supported by Ms. Jawad approval of BA#22-38. Staff is requesting approval of a one-year contract effective January 1, 2022 through December 31, 2022 for an estimated amount of \$5.3 million for the provision of comprehensive health (BCBS-\$4,969,000); dental (Dental-\$240,000/Golden Dental \$64,000); and optical (EyeMed -\$27,000) benefit to qualifying DWIHN employees. Current Labor agreements require that DWIHN provide healthcare coverage to all of its qualifying, active employees. Providers were selected through a bid process conducted by Daly Merritt. The amount is estimated based on the actual employee count of two hundred eighty-eight (288). There was no further discussion. **Motion carried.**

H. BA#22-39 Floyd Allen & Associates Y. Turner, Deputy Legal Counsel and J. Connally, Director of Human Resources reporting. The Chair called for a motion. **Motion:** It was moved by Mr. Parker and supported by Ms. Brown approval of BA#22-39. Staff is requesting approval of a contract between DWIHN and the Allen Law Group. DWIHN is entering the Agreement for legal services for the period of October 1, 2021 through September 30, 2022 for an amount not to exceed \$125, 000. The Allen Law Group has a unique understanding of DWIHN's business and provides expertise in employment, law, labor negotiations and other projects as assigned. They will continue to supplement the Legal Department and have agreed to a flat fee of \$12,000 per month to provide DWIHN with access to two attorneys for transactional matters. This flat rate results in major costs savings to DWIHN as it equates to the salary of approximately 1.5 FTE's. The Allen Law Group has previously provided legal services to DWIHN. It is in the best interest of DWIHN to continue to utilize their services. There was no further discussion. **Motion carried.**

I. BA#22-40 Michigan Department of Health and Human Services Y. Turner, Deputy Legal Counsel reporting. The Chair called for a motion. **Motion:** It was moved by Commissioner Kinloch and supported by Ms. Jawad of BA#22-40. Staff is requesting approval of the Detroit Wayne Integrated Health Network (DWIHN) Prepaid Inpatient Health Plan (PIHP) contract with the State of Michigan's Department of Health and Human Service (MDHHS) for Fiscal Year ended September 30, 2022. The purpose of this contract is for MDHHS to obtain DWIHN's services to manage the following; Medicaid (including HSW, HRA and DHS); Healthy Michigan Plan (including HRA); Autism; Medicaid; SED Waiver, SUD Block Grant and Children's Waiver. The estimated value of the contract is \$834,718,010 and is contingent upon and subject to enactment of legislative appropriations and availability of funds. This board action encompasses the mandated payment for Hospital Rate Adjustment (HRA) to the community hospitals; Medicaid drawdown and IPA tax payments to the State of Michigan. MDHHS issued a Change Notice extending the term of the PIHP Agreement for one year while changes to the contractual language continues to be negotiated. It is anticipated that an amendment is forthcoming in the near future. Discussion ensued regarding the committee that viewed the contract and the increase in the contract. Mr. Parker requested information on the areas that had been increased in the contract. There was no further discussion. **Motion carried.**

PROVIDER PRESENTATION – Wayne Health Phillip D. Levy, M.D. MPH, FACEP, FAHA, FACC and Chief Innovation Officer reporting. A PowerPoint presentation was provided for the record. The presentation included information on the COVID 19 Mobile Testing Unit which included the number of nasal swab tests conducted, tests results by date; age, sex and number of tests by patient cities. The number of COVID 19 vaccinations information was also provided and included the doses given; number vaccinated; the number fully vaccinated and percentages of those fully vaccinated which was 78.8%. An abstract was provided on the Phoenix Program (Population Health Outcomes and Information Exchange Program) which noted outcomes for Public Health improvement which includes better care coordination; resource allocation; program evaluations and evidence of benefits; service coordination; and stakeholder engagement to name a few. Funding sources and additional services that the mobile unit provided was also presented. There was also an overview provided on hypertension in Metro Detroit. The Board Vice Chair, Ms. Ruth thanked Dr. Levy for the presentation and noted the good work of the mobile unit was definitely appreciated.

REVIEW OF ACTION ITEMS

It was requested by the CEO, Mr. Doeh that the December Full Board and committee meetings cancellation notice be posted by Friday, November 19, 2021.

It was requested that a written report be provided to the Board that included detailed information on the Schools Success Initiative for FY 20/21. Report should include the names of the schools in the program; the number of schools that actually participated in the program; the services that were provided and the utilization rates.

A written report was requested that notes the areas that had been increased for BA#22-40 Michigan Department of Health and Human Services PIHP Contract.

GOOD AND WELFARE/PUBLIC COMMENT

The Board Vice Chair, Ms. Ruth read the Good and Welfare/Public Comment statement. There were two members of the public that addressed the board.

Ms. P. Riggio, a parent and advocate addressed the board on the length of time that it takes to get things done within Detroit Wayne Integrated Health Network. She provided information on services provided under the intellectual developmental disability program; gave a history of the process that her daughter went through with obtaining services from CLS and noted that there is another center near her home that her daughter can obtain employment; however, the process has been lengthy one in getting them recognized as a Provider in our system.

Ms. R. Riggio, a client addressed the board regarding the program that she participates in through CLS and noted that she needed to find another job and would like to work at the Learning, Living Enrichment Center that is near her home and could provide more hours.

ADJOURNMENT

There being no further business, the Board Vice Chair, Ms. Ruth called for a motion to adjourn. **It was moved by Ms. Brown and second by Mr. Parker to adjourn. The motion carried unanimously and the meeting adjourned at 3:01 p.m.**

Submitted by:
Lillian M. Blackshire
Board Liaison

FINANCE COMMITTEE

MINUTES

NOVEMBER 3, 2021

1:00 P.M.

**707 W. MILWAUKEE ST.
DETROIT, MI 48202
(ZOOM)**

**MEETING
CALLED BY**

I. Ms. Dora Brown, Chair called the meeting to order at 1:02p.m.

**TYPE OF
MEETING**

Finance Committee Meeting

FACILITATOR

Ms. Dora Brown, Chair – Finance Committee

NOTE TAKER

Lillian M. Blackshire, Board Liaison

Finance Committee Members Present:

Ms. Dora Brown, Chair
Mr. Kevin McNamara, Vice Chair
Commissioner Jonathan C. Kinloch
Mr. Bernard Parker
Ms. Kenya Ruth

Committee Members Excused: None

ATTENDEES

Board Members Present:

Ms. Dorothy Burrell
Ms. Michelle Jawad
Dr. Cynthia Tauog

Board Members Excused: Mr. Angelo Glenn

Staff: Mr. Eric Doeh, CEO; Ms. Stacie Durant, CFO; Ms. Yolanda Turner, Deputy Legal Counsel; Ms. Tiffany Devon, Director of Communications; and Mr. Mike Maskey, Facilities Manager

Guests: None.

AGENDA TOPICS

II. Roll Call

Ms. Lillian Blackshire, Board Liaison

DISCUSSION

Roll Call was taken by Ms. Blackshire and a quorum was present.

III. Committee Member Remarks

The Chair, Ms. Brown, called for any Committee remarks. There were no remarks.

IV. Approval of Agenda

The Chair, Ms. Brown called for a motion on the agenda. There were no changes or modifications requested to the agenda. **Motion:** It was moved by Ms. Ruth and supported by Commissioner Kinloch approval of the agenda. **Motion carried.**

V. Follow-up Items:

There were no follow up items noted on the agenda.

VI. Approval of the Meeting Minutes

The Chair, Ms. Brown called for a motion on the Finance Committee minutes from the meeting of Wednesday, October 6, 2021. **Motion:** It was moved by Mr. McNamara and supported by Ms. Ruth approval of the Finance Committee minutes from the meeting of Wednesday, October 6, 2021. There were no corrections to the minutes. **Motion carried.** Minutes accepted as presented.

VII. Presentation of the Monthly Finance Report

S. Durant, CFO presented the Monthly Finance report. A written report ending September 30, 2021 was provided for the record. Network Finance accomplishments and noteworthy items were as follows:

DWIHN Finance Team is working on the fiscal year ended September 30, 2021 financial statements in conjunction with the annual audit. Audited financial statements will be presented at the May 2022 finance committee meeting.

DWIHN obtained an updated Flagstar term sheet based on the revised plans for the Woodward location. Refer to revised Board action #21-68R under unfinished business. The terms are consistent with those approved by the board under the initial board action approved in June 2021. Upon final costing plans for Milwaukee, a board action will be presented to include the additional loan.

In response to a letter dated October 1, 2021, twenty-six (26) providers from four (4) lines of business were eligible for a stability payment. Thirteen (13) of the providers responded and were eligible for a total payment amount of \$4.3 million. The claims will be adjusted and payment will be disbursed over the next few weeks.

In addition to the aforementioned \$4.3 million in stability payments, DWIHN will be offering two additional network wide stability payments: (1) a lump sum retention payment to all provider staff that serve DWIHN members, both clinical and administrative, employed on September 30, 2021. The amount of the payment is unknown at this time pending the results of the survey due on November 12, 2021; and (2) Payment of overtime premiums (i.e. half time) for certain residential providers, in whole or part, for services performed during the fiscal year ended September 30, 2021. Although DWIHN's standardized rate of \$18.54/hr. factor in an overtime component, give the staff shortages, providers incurred an excess amount of overtime during the year. DWIHN anticipates disbursing the funds to providers in time for the holiday. DWIHN will have a better estimate of the amount available for distribution pending receipt of key funding information from MDHHS; we are hopeful this information will arrive by November 12th. DWIHN will keep the board apprised.

DWIHN will be implementing an across the board provider rate increase in January/February 2022 (potentially retroactive to October 1, 2021). Finance is awaiting receipt of a few Medicaid payments prior to determining the amount; however, the increase will be between 5-10 percent. Discussion ensued regarding the overtime payment amounts and the number of hours the payment would be based upon; the dollars that would be used to make the one-time lump sum payments and if the board need to approve the retention payment expenditures. CFO Durant noted the money for the incentive plans for our providers is within the budget and is only an allocation of the monies that have been approved as the money and the expenses are a part of the approved board budget. Discussion also ensued regarding the increase of the rates. It was noted that new rates are not being established; we are just adding on and giving something similar to a cost of living increase.

DWIHN is requesting a waiver of PA 152 of 2011 as applicable under section 8(1) "By a 2/3 vote of its governing body each year, prior to the beginning of the medical benefit plan coverage year, a local unit of government may exempt itself from the requirements of this act for the next succeeding medical benefit plan coverage year." The table included in the Board action depicts, currently during plan year 2021, DWIHN and employees are funding healthcare at 85% and 15%, respectively. The proposed waiver will result in DWIHN and Employees funding 86% and 14% respectively. In addition, the second table depicts the average over the past four (4) years, DWIHN has incurred \$3.6 million less in administrative costs compared to budget. Based on the unaudited fiscal year ended 2021; there is approximately \$3 million in excess budget compared to actuals. Thus, the \$800,000 request per the waiver is included in the approved budget. CFO Durant noted that there were questions asked earlier regarding language that allows this governing body to waive the hard cap – Legal has performed a review and the language has been included in the board action; the waiver does not carry over from year to year and would have to be approved each year by the board; and the percentages of what we are currently paying are also in the board action. It was noted that there was earlier discussion regarding if this action would impact the providers – a document was provided in the board action that outlined the last four fiscal years approved, adopted and amended administrative budget and DWIHN's actual audited administrative costs. Discussion ensued regarding the Board action and if DWIHN opted out of the hard cap could DWIHN pay 90% and the employees pay 10% which would still be in budget and would amount to approximately \$1.1 million dollars. There was also discussion regarding the context of the request and remaining aware of the legislature.

The Chair, Ms. Brown noted the Monthly Finance Report ending September 30, 2021 was received and filed.

VIII. Unfinished Business – Staff Recommendations:

a. **Board Action #20-35 (Revision 2) – Tetra Tech** – M. Maskey, Facilities Manager reporting. Staff is requesting modification of Board action #20-35R with TetraTech of Michigan, our existing architectural and engineering firm. The request is that the current contract amount be modified in an amount not to exceed of \$1,863,850.00 bringing the total contract amount to \$3,012,250.00. The modification will allow TetraTech to renovate the Woodward Building to provide office space for staff. Office space will be provided on floors one and two, a board room will be provided on the first floor and mix of facilities and office space will be provided on the lower level. The Milwaukee building will be renovated to provide mental health crisis stabilization services for the surrounding community. Crisis stabilization spaces will be provided on the first floor and crisis residential space will be developed on the second floor. Outdoor spaces will able be developed. DWIHN has requested TetraTech to provide a proposal to assist with needed City Zoning submissions; City plan reviews, construction document development; bidding assistance and construction administration services. The Chair, Ms. Brown called for a motion on Board Action #20-35(Revised). **Motion.** It was moved by Mr. McNamara and supported by Ms. Ruth approval of Board Action #20-35 (Revised) to Full Board. **Motion carried.**

b. **Board Action #21-68 (Revised) – Flagstar Bank** – S. Durant, CFO reporting. Staff is requesting approval to enter into a financing agreement with Flagstar Bank in the amount not to exceed \$10,000,000. The financing agreement includes construction costs and equipment loan for the Woodward building. The term of the construction loan is for 42 months after the estimated 18-month construction draw period with a 20-year amortization period. In addition, the agreement include financing 80% of the invoice cost of new equipment. The term of the equipment loan is interest only for 18 months followed by monthly payments for 42 months based on a 5-year amortization period. The interest rate; non-refundable commitment fee and balloon payment information was provided in the Board action. The Chair, Ms. Brown called for a motion on Board Action #21-68 (Revised).

Motion. It was moved by Ms. Ruth and supported by Mr. McNamara approval of Board Action #21-68 (Revised) to Full Board. **Motion carried.**

IX. New Business – Staff Recommendations:

a. Board Action #22-18 – Graham Media Group – T. Devon, Director of Communications reporting. The Chair called for a motion. **Motion:** It was moved by Mr. Parker and supported by Commissioner Kinloch approval of BA#22-18 to Full Board. Staff is requesting the approval of a nine (9) month contract effective January 1, 2022 through September 30, 2022 for an amount not to exceed \$50,000 with WDIV-TV4/Graham Media. The services would include messaging discussing mental health, stigma, access to care and many other relevant topics. **Motion carried.**

b. Board Action #22-19 Scripps – T. Devon, Director of Communication reporting. The Chair called for a motion. **Motion:** It was moved by Mr. Parker and supported by Ms. Ruth approval of BA #22-19 to Full Board. Staff requesting board approval of an eleven-month contract effective November 17, 2021 through September 30, 2022 for an amount not to exceed \$50,000 with Scripps Media Inc. The services will include mental health and educational messaging across three media channels, WXYZ-TV7; TV 20 and Bounce. **Motion carried.**

c. Board Action #22-30 PA 152 Waiver- S. Durant, CFO reporting. Staff is requesting an exemption from PA 152 (the “Act”) to permit DWIHN to subsidize the healthcare coverage for the upcoming 2022 plan year for an estimated amount of \$800,000. Passed in 2011, the Act limits a public employer’s expenditures for medical benefits for its employees by imposing a “hard cap” on those expenditures. With two-thirds approval by the governing body each year, Section 8 of the Act allows the employer to exempt itself from the imposition of the hard cap. DWIHN’s administration has worked closely with Daly Merritt, our benefits broker, to secure quality and low-cost health care for staff. The broker requested quotes from other health plans however they refused to submit an offer due to lack of a competitive rate compared to the current carrier. Therefore, despite our best efforts, the cost of medical healthcare coverage for the staff under Blue Cross Blue Shield/BCN increased by 30% for the 2022 plan year, as compared to an increase of 3.70% in the hard cap. Due to restrictions under the Act, 100% of the 26.3% (30%-3.70%) increase must be borne by employees. Approval of the board action would allow a waiver of the hard cap provision and permit DWIHN to fund the aforementioned amount above hard cap. This board action must come before the Board each year prior to the open enrollment period and **is not** automatically extended beyond the date indicated 12/31/22. The Chair called for a motion. **Motion:** It was moved by Ms. Ruth and supported by Commissioner Kinloch approval of Board action #22-30 to Full Board. Discussion ensued regarding the recommendation that the split be as discussed earlier that DWIHN would pay 90% and employees would pay 10%. **Amended Motion:** The motion was amended by Ms. Ruth and supported Commissioner Kinloch to modify the Board action to reflect that DWIHN pay 90% of the cost and employees pay the remaining 10% of the cost of medical healthcare coverage. **Motion carried.** This Board action will move to the Special Full Board meeting scheduled immediately following the Finance Committee meeting.

d. Board Action #22-39 Allen Law Group – Y. Turner, Deputy Legal Counsel and J. Connally, Director of Human Resources reporting. The Chair called for a motion. **Motion:** It was moved by Mr. McNamara and supported by Mr. Parker approval of BA#22-39 to Full Board. Staff is requesting approval of a contract between DWIHN and the Allen Law Group. DWIHN is entering the Agreement for legal services for the period of October 1, 2021 through September 30, 2022 for an amount not to exceed \$125, 000. The Allen Law Group has a unique understanding of DWIHN’s business and provides expertise in employment, law, labor negotiations and other projects as assigned. They will continue to supplement the Legal Department and have agreed to a flat fee of \$12,000 per month to provide DWIHN with access

to two attorneys for transactional matters. This flat rate results in major costs savings to DWIHN as it equates to the salary of approximately 1.5 FTE's. The Allen Law Group has previously provided legal services to DWIHN. It is in the best interest of DWIHN to continue to utilize their services. **Motion carried.**

X. Good and Welfare/Public Comment – The Chair read the Good and Welfare/Public Comment statement. There were no members of the public to address the committee and there were no written comments.

XI. Adjournment – There being no further business; The Chair, Ms. Brown called for a motion to adjourn. **Motion:** It was moved by Ms. Ruth and supported by Mr. McNamara to adjourn the meeting. **Motion carried.** The meeting adjourned at 2:00 p.m.

**FOLLOW-UP
ITEMS**

PROGRAM COMPLIANCE COMMITTEE

MINUTES

NOVEMBER 10, 2021

1:00 P.M.

VIRTUAL MEETING

MEETING CALLED BY	I. Dr. Cynthia Taueg, Program Compliance Chair at 1:00 p.m.
TYPE OF MEETING	Program Compliance Committee
FACILITATOR	Dr. Cynthia Taueg, Chair
NOTE TAKER	Sonya Davis
TIMEKEEPER	
ATTENDEES	<p>Committee Members: Dorothy Burrell; Michelle Jawad; and Dr. Cynthia Taueg</p> <p>Committee Members Excused: Dr. Lynne Carter</p> <p>Board Member(s): Board Vice-Chair, Kenya Ruth</p> <p>Staff: Miriam Bielski; Brooke Blackwell; Jacquelyn Davis; Judy Davis; Eric Doeh; Dr. Shama Faheem; Shirley Hirsch; Bernard Hooper; Melissa Moody; Cassandra Phipps; Rhianna Pitts; Vicky Politowski; Ebony Reynolds; April Siebert; Yolanda Turner; Michele Vasconcellos; Daniel West and June White</p>

AGENDA TOPICS

II. Moment of Silence

DISCUSSION	The Chair called for a moment of silence.
CONCLUSIONS	Moment of silence was taken.

III. Roll Call

DISCUSSION	The Chair called for a roll call.
CONCLUSIONS	Roll call was taken by Board Liaison, Lillian Blackshire at 1:00 p.m. There was no quorum. Roll call was retaken at 1:20 p.m. There was a quorum.

IV. Approval of the Agenda

DISCUSSION/ CONCLUSIONS	The Chair called for approval of the agenda. Motion: It was moved by Ms. Jawad and supported by Mrs. Burrell to approve the agenda. Dr. Taueg asked if there were any changes/modifications to the agenda. There were no changes/modifications to the agenda. Motion carried
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V. Follow-Up Items from Previous Meetings

<p>DISCUSSION/ CONCLUSIONS</p>	<p>A. DWIHN Jail Diversion Initiatives – Provide more information on DPD Co-Response for all precincts – Andrea Smith, Director of Workforce Training and Program Development submitted and provided more information on DWIHN’s Jail Diversion Initiatives. Mrs. Smith reported that efforts continue with the Third Circuit Court, 36th District Court and Wayne County Sheriff’s Office to move the Jail Navigator program along. Police departments continue to express interest in the CIT program. Central City Integrated Health (CCIH) serves as the lead behavioral health provider for the homeless outreach team. CNS and Team Wellness continue to support law enforcement through our co-response partnership with the Detroit Police Department. This partnership is sponsored through grants for a two-year period – Flinn Foundation (\$200,000/\$100,000 per year); Hudson Webber (\$400,000/\$200,000 per year); COTS (\$241,768); and Ballmer Foundation (\$400,000/\$200,000 per year). DWIHN has also contributed \$800,000 annually for this partnership.</p> <p>B. QAPIP Work Plan Update for FY 20/21 – Have a discussion on providing board members with a one-page talking point on the findings of DWIHN’s Reviews with MDHHS – April Smith, Director of Quality Improvement submitted to the committee a one-page talking point summary on the findings of DWIHN’s Reviews with the Michigan Department of Health and Human Services (MDHHS).</p>
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VI. Approval of Meeting Minutes

<p>DISCUSSION/ CONCLUSIONS</p>	<p>The Chair called for approval of the October 13, 2021 meeting minutes. Motion: It was moved by Ms. Jawad and supported by Mrs. Burrell to approve the October 13, 2021 meeting minutes. Dr. Tauzeg asked if there were any changes/modifications to the meeting minutes. There were no changes/modifications to the meeting minutes. Motion carried.</p>
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VII. Reports

<p>DISCUSSION/ CONCLUSIONS</p>	<p>A. Chief Medical Officer – Dr. Shama Faheem, Chief Medical Officer submitted and gave highlights of her Chief Medical Officer’s report. Dr. Faheem reported:</p> <ol style="list-style-type: none"> 1. Behavioral Health Outreach – Staff continue to facilitate, train and provide information on mental health education and awareness and suicide prevention to the community, teachers, students, hospitals and law enforcement in Wayne County. 2. Quality Improvement – DWIHN continues to meet most of the Performance Indicators except in the following areas – Crisis screening in three hours (adults only); Access of services or Biopsychosocial within 14 days of request has been relatively lower than other regions throughout the State but does not have a standard compliance cut-off yet; Seven-day hospital follow-up (children only); and Recidivism or readmissions in 30 days (adults only). Trends of increasing compliance of more than 1% each quarter indicates a chance to meet this number in FY 2022 (Q1). 3. DWIHN-EMS Initiative – Data sharing has occurred between the two entities and more than 30% of EMS callers have been identified as DWIHN’s clients. An internal process has been developed to refer individuals with high medical calls to complex case management and those with behavioral health calls will be referred for case consultations with CRSP.
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4. **DWIHN Justice Involved Initiatives** – Continued efforts with the Third Circuit Court, 36th District Court and Wayne County Sheriff's Office to move the Jail Navigator program along – 5 members engaged and being monitored by the Navigator.

Dr. Taueg opened the floor for discussion. Discussion ensued. The Chair noted that the Chief Medical Officer's report has been received and placed on file.

B. **Corporate Compliance Report** – Bernard Hooper, Director of Corporate Compliance submitted and gave an update on the Corporate Compliance report. Mr. Hooper reported:

1. **United States Secret Service** – Corporate Compliance has been collaborating with the U.S. Secret Service regarding alleged financial crimes involving service providers. It was determined that none of the alleged entities were DWIHN's service providers. Corporate Compliance referred the U.S. Secret Service's agents to Michelle Warstler, MDHHS/OIG.
2. **Potential Conflict of Interest regarding Autism Spectrum Disorder (ASD) Assessment** – During the course of an ASD RFP, a clinician was identified as engaging in employment or consulting with various ASD Providers Intake Assessments. This is considered a conflict of interest and hinders the intentions of DWIHN to increase the capacity of ASD intake assessment clinicians within the system. Corporate Compliance and the ASD Network have notified the clinician in question and will notify providers regarding hiring the same clinicians within the ASD Network to provide intake and progress assessment services.

Dr. Taueg opened the floor for discussion. Discussion ensued. The Chair noted that the Corporate Compliance update has been received and placed on file.

VIII. Year-End Reports -

A. **Access Call Center** – Miriam Bielski, Director of the Access Call Center submitted and gave highlights of the Access Call Center's year-end report. Ms. Bielski reported the Call Center is meeting all standards and above standards for the month of October. Since the inception of the Call Center, staff has maintained abandonment rate and almost at 100% in many areas. There were a few concerns with the pandemic and staffing shortage in August and September with ProtoCall during the transition of the Call Center but working on a resolution. The Call Center was redesigned by leveraging phone equipment to enhance call flow. The backlog resulting from the transition has been resolved. Dr. Taueg opened the floor for discussion. There was no discussion. The Chair noted that the Access Call Center's year-end report has been received and placed on file.

B. **Children's Initiatives** – Cassandra Phipps, Director of Children's Initiatives submitted and gave highlights of the Children's Initiatives' year-end report. Ms. Phipps reported:

1. **Children Services** – DWIHN served a total 16,769 children, youth and families of Wayne County with Serious Emotional Disturbance (SED) and Intellectual/Developmental Disability (IDD) this fiscal year with Intensive Services and Evidenced-Based Practices.
2. **Youth United** – This youth-led initiative promotes youth voice and youth partnership in the Wayne County System of Care (SOC). They have hosted the Annual Youth Spotlight Awards; a bowling fundraiser at the Garden Bowl; facilitated various courageous conversation discussions, anti-stigma busting workshops and virtual game nights. They also hosted a statewide

Youth Summit "Aftermath of Trauma and provided the Empowerment Grant of \$500 to a young adult to coordinate a youth-led event in the community.

3. **Special Projects** – DWIHN's I.T. Department and Children's Providers gifted about 230 laptops and iPads to the youth in the community; DWIHN's Finance Department and Children's Providers worked together to develop a value-based incentive model to incentivize providers and offer stability to the provider network; Staff has begun the process for two Children's Providers (Starfish and Community Living Services) to offer Wrap-Around services to those with intellectual and developmental disabilities; and Development Center now provides additional services for infant and early childhood programs through the Home Visiting Grant.

Dr. Taueg opened the floor for discussion. There was no discussion. The Chair noted that the Children's Initiatives' year-end report has been received and placed on file.

- C. **Clinical Practice Improvement (CPI)** – Ebony Reynolds, Clinical Officer of Clinical Practice Improvement submitted and gave highlights of the Clinical Practice Improvement's and Autism Spectrum Disorder's year-end reports. Ms. Reynolds reported:

1. **Assertive Community Treatment (ACT)** – CPI completed the annual ACT Fidelity Reviews. The Guidance Center, Community Care Services and Lincoln Behavioral Services met the benchmark and an overall score of 93%. There were nine ACT Providers in the DWIHN Network, four of which received the hospital incentive for being below the threshold of 6.73 hospital days.
2. **MedDrop** – There are eight providers that participate in this program. There have been 49 admissions with no re-admissions. There were three successful discharges and one deceased individual. Members are between the ages of 20 to 75 years old.
3. **Jail Services** – DWIHN has a partnership with Probate Court for the Assisted Outpatient Treatment (AOT) program which began July 1, 2021. The AOT orders are shared between DWIHN and Probate Court to help coordinate care for members. Wayne County Jail Mental Health Unit saw 1849 new admissions and 1309 were treated from October through June. The contract with Wellpath ended September 30, 2021 and staff coordinated with the new provider, Naphcare to improve services and outcomes. There were 393 members released from jail and connected with a DWIHN provider. Staff developed an Infant Mental Health Screening to bring 0-6 months population access screening to DWIHN to ensure equitable access to children and their families.
4. **Autism Spectrum Disorder (ASD)** – Two new Independent Evaluators were added to improve the timeliness standards and potential bias of ABA providers providing diagnoses. There were 2009 open cases at the end of (Q4) FY '20/21. An ASD RFP was issued to the public to meet the growing demands of access to services in specific demographic areas in Wayne County. Two new ABA providers were awarded, increasing members' choice of locations to five new sites bringing the total sites to receive ABA services to 31. There are a total 16 ABA providers across Wayne County.

Dr. Taueg opened the floor for discussion. Discussion ensued. The committee requested more information/plan and feedback for Returning Citizens' initiatives. (Action) The Chair noted that the Clinical Practice Improvement's and Autism Spectrum Disorder's year-end reports have been noted and placed on file.

- D. Crisis Services** – Daniel West, Director of Crisis Services submitted and gave highlights of the Crisis Services' year-end report. Mr. West reported that Diversion rates improved for children but a slight decrease of 1% for adults. Staff continue to improve communication with CRSP providers and community contacts to alleviate re-admissions to an inpatient level of care and assisting in appropriate discharges of members into the least restrictive environments. A newly mobile outreach clinician has been added providing education and access to DWIHN's services through the partnership with Wayne Health. There has been 447 Crisis Alerts received for the year and the diversion rate is 64%, which positively impacted recidivism. DWIHN developed a Steering Committee with providers from the network to develop a plan for reducing psychiatric inpatient and recidivism. A procedure has been implemented for Assisted Outpatient Treatment (AOT) orders received from Probate Court and staff coordinates with the member's CRSP to develop or revise their treatment plan. All Crisis Screening Providers have resumed face-to-face screening. For FY 21/22, Crisis Services' department plans to establish a contract with Beaumont Hospital Psychiatric Inpatient Facility; implement the next phase of the mobile outreach to include mobile crisis services and expand to shelters; implement recommendations from the Steering Committee to reduce psychiatric inpatient and recidivism; apply for RFP for Crisis Stabilization Unit with the State; and develop a workplan and RFP for the Crisis Care Center. Dr. Tauzeg opened the floor for discussion. There was no discussion. The Chair noted that the Crisis Services' year-end report has been received and placed on file.
- E. Customer Service** – Michele Vasconcellos, Director of Customer Service submitted and gave highlights of the Customer Service's year-end report. Ms. Vasconcellos reported that their main focus for FY 20/21 has been on improving customer experience with service; ensuring appropriate engagement in choice of service and care; ensuring customer's enrollee rights and satisfaction; enhancing customer and public information awareness; meeting NCQA re-accreditation and other contractor regulatory compliance expectations; and ensuring members continue to receive uninterrupted customer service during the pandemic. The Call Center and Welcome Center received a combined total of 25,657 calls of which the abandonment rate exceeded 11% (standard abandonment rate is less than 5%). Family Subsidy handled 6,456 calls and processed over 1,220 applications remotely without any interruption of services during this fiscal year. The Grievance division processed 324 calls, addressed 96 actual grievances and provided numerous trainings to address updates and technical assistance. The Appeals division processed 355 appeals related calls, 21 were addressed and there were no State Fair Hearings conducted this fiscal year. A system-wide appeals training was conducted to the CRSP network. Thirty-nine CRSP provider site reviews were conducted to ensure compliance standards were addressed and maintained in the areas of Customer Service, Grievances, Appeals and Enrollee Rights. Dr. Tauzeg opened the floor for discussion. There was no discussion. The Chair noted that the Customer Service's year-end report has been received and placed on file.
- F. Integrated Health Care** – Vicky Politowski, Director of Integrated Health submitted and gave highlights of the Integrated Health Care's year-end report. Ms. Politowski reported staff processed over 4,400 MI Health Link referrals for services from the ICOs during this fiscal year and behavioral health care was coordinated for over 1,000 members. Staff performed monthly Care Coordination Data Sharing meetings with each of the eight Medicaid Health Plans (MHP) serving Wayne County. Staff participated in the integration pilot projects with Blue Cross Complete of Michigan and Total Health Care/Priority

Health Care. Hepatitis A vaccination clinics were set up at DWIHN's SUD provider sites through collaboration with the Detroit Health Department. The division managed six Quality Improvement Plans in the areas of follow-up visit with a Mental Health Practitioner after psychiatric hospitalization, adherence to Antipsychotic Medication; adherence to Antidepressant Medication; decreasing the use of multiple antipsychotic medications; diabetes screening for people with Schizophrenia or Bipolar Disorder who are receiving Atypical Antipsychotic Medication; and Hepatitis A risk reduction. Sixty-three Complex Case Management cases were opened and the majority of these members met their plan of care goals and connected to behavioral and physical health care providers. The department applied for and was awarded block grant funding for this fiscal year in the area of Integrated Care. Dr. Tauzeg opened the floor for discussion. There was no discussion. The Chair noted that the Integrated Health Care's year-end report has been received and placed on file.

- G. **Managed Care Operations** – June White, Director of Managed Care Operations submitted and gave highlights of the Managed Care Operations' year-end report. Ms. White reported that they have processed 400 contracts for signature to our provider network for FY 2022. The Provider Survey was distributed to approximately 400 providers' organizations and had a 35% increase in responses which is 13% more than last fiscal year. The Practitioner Survey received 280 responses, a 17% increase from last fiscal year. The department received and reviewed over 1,500 quarterly reports from providers to ensure contractual compliance. Future projects for FY 2022, streamline and implement a Network Adequacy analysis of the Network; improve our online Provider/Practitioner directory on our website; enhance our Provider Manual to be more user friendly; create a sanction module in our MH-WIN system; train providers on the Risk Matrix; set up Provider Orientation meetings for new and existing providers; and streamline letters and reports from providers and staff for better monitoring. Dr. Tauzeg opened the floor for discussion. There was no discussion. The Chair noted that the Managed Care Operations' year-end report has been received and placed on file.
- H. **Residential Services** – Shirley Hirsch, Director of Residential Services submitted and gave highlights of the Residential Services' year-end report. Ms. Hirsch reported that staff has held trainings for the Standardized Progress Note Refresher and Residential Tracking of COFR cases. The department has developed a Quality Improvement Residential Provider Case Record Review Checklist, CRSP Case Management Monthly Monitoring Note, and a Residential Authorizations Appeal Letter for providers. Staff has also implemented a Residential Acceptance/Denial for Brokering Letter for Specialized Placements. Staff has received training from the I.T. department on Claims Cube. The Residential Review Committee was created to conduct comprehensive reviews of complex cases presented by the CRSP. The department continue ongoing reporting on COVID-19 positive cases, deaths, vaccinations and booster shots as they become available. Dr. Tauzeg opened the floor for discussion. There was no discussion. The Chair noted that the Residential Services' year-end report has been received and placed on file.
- I. **Substance Use Disorder** – Judy Davis, Director Substance Use Disorder submitted and gave highlights of the Substance Use Disorder's year-end report. Mrs. Davis reported that DWIHN has administered more than 10,000 Narcan kits in the community and ensured adequate access to treatment for individuals seeking recovery from opioid use disorder, including Medication-Assisted Treatment (MAT) services. Two treatment programs have been identified to distribute free Naloxone kits through the use of vending machines (Abundant

Community Recovery Services and Quality Behavioral Health). There is no cost to the provider to implement a vending machine for naloxone distribution. In FY 2021, DWIHN has enrolled 152 members into opioid health home services. The majority enrolled were African American males over the ages of 55. The mobile care unit programs continue to exceed expectations increasing access to services and Naloxone. DWIHN has received over \$3M in revenue to respond to the COVID crisis in FY 21 and continued revenue growth in FY 22 through MDHHS' prioritization of dollars directed service delivery, emphasis on COVID. There were 23-SUD provider staff who tested positive, 148 clients and 7 deaths reported during FY 21. There were 145 members treated and provided SUD services in the implemented COVID recovery homes for individuals that either tested positive and/or experiencing COVID symptoms. Dr. Taueg opened the floor for discussion. There was no discussion. The Chair noted that the Substance Use Disorder's year-end report has been received and placed on file.

J. Utilization Management – Rhianna Pitts, Utilization Management Administrator submitted and gave highlights of the Utilization Management's quarterly report. Ms. Pitts reported that at the end of September 2021, 1,037 slots out of 1,084 Habilitation Supports Waiver slots have been filled. There were 1,470 Autism authorization requests approved during the 4th quarter. There are 2,112 cases currently opened in the benefit. There were 1,152 approvals for the General Fund authorizations for Q4. There were 2,257 Inpatient Admissions for Q4, 44% increase from Q3. There was a total of 105 MI Health Link authorizations across all ICOs, a 13.2% decrease from Q3. There were 1,159 approvals within 24-hours for SUD urgent authorizations for Q4. Staff continue to review member's length of stay utilizing the Milliman Care Guidelines (MCG) and criteria for continued stay. There were 18 denials that did not meet the guidelines for Q4. Dr. Taueg opened the floor for discussion. There was no discussion. The Chair noted that the Utilization Management's quarterly report has been received and placed on file.

IX. School Success Initiative (SSI) Update – PowerPoint Presentation

**DISCUSSION/
CONCLUSIONS**

Ebony Reynolds, Clinical Officer of the Clinical Practice Improvement submitted and gave an update on the School Success Initiative. Ms. Reynolds reported that Phase I (Accessibility of Services and Phase II (Standardization of Services) of the School Success Initiative have been presented and approved by DWIH's Board of Directors. There are currently five preschools that the School Success Initiative is delivering services to. DWIHN has developed a School Success Initiative Flyer in three languages (English, Spanish and Arabic); partnered in outreach events to explain the services; and added more children's billboards that are showcased in Wayne County to increase awareness of services. Staff is currently working on Phase III (Coordination with Teen Health Clinics). DWIHN has partnered with three school-based health centers (Ascension, Beaumont and Henry Ford Teen Health Clinics) to refer students to the clinic for health needs and to DWIHN's Access Department for community mental health needs. Over the past year, 11,268 SSI services were delivered to 1,334 students. The SSI services are currently located in 71 schools in Wayne County (25-Detroit schools and 46-Out-Wayne). Dr. Taueg opened the floor for discussion. There was no discussion. The Chair noted that the School Success Initiative Update has been received and placed on file.

X. Strategic Plan Pillar - Customer

DISCUSSION/ CONCLUSIONS	<i>The Strategic Plan Customer Pillar was deferred to the next Program Compliance Committee Meeting.</i>
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XI. Quality Review(s) -

DISCUSSION/ CONCLUSIONS	A. QAPIP Work Plan FY 2021 Update - <i>The QAPIP Work Plan FY 2021 Update was deferred to the next Program Compliance Committee Meeting.</i>

XII. Chief Clinical Officer's (CCO) Report

DISCUSSION/ CONCLUSIONS	<p>Melissa Moody, Chief Clinical Officer submitted a full report and gave highlights on the Chief Clinical Officer's report. Mrs. Moody reported:</p> <ul style="list-style-type: none"> A. COVID-19 & Inpatient Psychiatric Hospitalization -As of 10/31/21, Hospitalization's data showed an increase in admissions for the month of October (632) compared to 623 admissions in September. There were six reported case of COVID-19 Positive inpatient in October 2021 (September 2021 - 1 case). B. COVID-19 Intensive Crisis Stabilization Services - There was an approximate 5% increase in crisis stabilization services provided in October 2021 (456) compared to September 2021 (434). C. COVID-19 Urgent Behavioral Health Urgent Care Sites - There was a slight increase in overall utilization of Urgent Behavioral Health Urgent Care Services in October 2021. D. COVID-19 Recovery Housing/Recovery Support Services - There was a significant rise in persons served in the utilization of COVID-19 recovery homes in the month of October 2021 (44) compared to September 2021 (7). E. COVID-19 Pre-Placement Housing - There were no pre-placement housing for the month of October 2021 (September 2021 - 0). F. Residential Department Report of COVID-19 Impact - There were four new reported cases of COVID-19 in October 2021 and 0 reported deaths. G. Vaccinations - Licensed Residential Homes - A combined total of 90.4% of members in licensed settings have been fully vaccinated. H. Vaccinations - Unlicensed Homes - There was no change noted in vaccinations in the month of October 2021. I. Clinical Initiative Updates <ul style="list-style-type: none"> 1. Certified Community Behavioral Health Clinic (CCBHC) - State Demonstration - The Guidance Center is the designated CCBHC Site for Region 7. Coordinated, integrated and comprehensive services for all individuals diagnosed with a mental illness or substance use disorder are provided through this clinic. It focuses on increased access to care, crisis response, formal coordination with health care providers, care management, linkage to social services, educational services, criminal justice/law enforcement and veteran's services 24/7/365. This model was launched on 10/1/21 and currently have 255 members enrolled. 2. Opioid Health Home (OHH) - DWIHN currently has 160 enrolled members receiving this comprehensive array of integrated healthcare services.
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Dr. Taueg opened the floor for discussion. There was no discussion. The Chair noted that the Chief Clinical Officer's report has been received and placed on file.

XIII. Unfinished Business

DISCUSSION/ CONCLUSIONS

B. **BA #21-48 (Revised)** – Community Foundation of SE Michigan's Opioid Partnership – DWIHN's Provider Network – The Chair called for a motion on BA #21-48 (Revised). **Motion:** It was moved by Ms. Jawad and supported by Mrs. Burrell to move BA #21-48 (Revised) to Full Board for approval. Staff requesting board approval for a two-month (time only) extension to the FY '21 contract for an amount not to exceed \$151,984 with Wayne State University (\$28,000); Quality Behavioral Health (\$43,000); Wayne County Health Communities (\$30,000); and Abundant Recovery Services (\$43,000). The revised contract term is October 1, 2020 to December 1, 2021. Dr. Taueg opened the floor for discussion. There was no discussion. **Motion carried.**

XIV. New Business: Staff Recommendation(s)

DISCUSSION/ CONCLUSIONS

- A. **BA #22-25** – School Success Initiative FY 21/22 – **11 CMH Providers (Listed in Board Action)** – Staff requesting board approval for FY 21/22 contract totaling \$3.6 million to extend funding for the CMH entities delivering the School Success Initiative program. The overall performance expectation is to ensure students and their families have access to community mental health services within a school-based setting and provide evidence-based psychoeducation training and intervention to children and school professionals. Dr. Taueg opened the floor for discussion. Discussion ensued. **Motion carried.**
- B. **BA #22-31** – Treatment Foster Care Oregon (TFCO) – The Guidance Center – Staff requesting board approval for a one-year contract between DWIHN and The Guidance Center to continue implementation of the TFCO Initiative for FY 21/22. Funding for this contract is through the State of Michigan, Department of Health and Human Services' grant for \$409,180.00. The state grant is received from Wayne State University. Dr. Taueg opened the floor for discussion. There was no discussion.
- C. **BA #22-36** – MI-Health Link Demonstration Project – Adult Well Services - Staff requesting board approval for a one-year contract with the five Integrated Care Organizations to receive and disburse Medicare dollars to reimburse the Affiliated Providers for the calendar year ended December 31, 2022 for an estimated amount of \$9,886,123.00 in conjunction with the MI-Health Link Demonstration Project. Dr. Taueg opened the floor for discussion. There was no discussion.
- D. **BA #22-37** – WDIV TV-4 Communication – Graham Media Group – Staff requesting board approval for a one-year contract with WDIV TV-4 for an amount not to exceed \$50,500.00. The campaign includes five months to air 22+ 30-second messages during various time slots including prime time. The funding source is PA2 dollars and the SUD Oversight Board has approved this request. Dr. Taueg opened the floor for discussion. There was no discussion.
- The Chair bundled the board actions and called for a motion on BA #22-25; BA #22-31; BA #22-36; and BA #22-37. **Motion:** It was moved by Ms. Jawad and supported by Mrs. Burrell to move BA #22-25; BA #22-31; BA #22-36; and BA#22-37 to Full

Board for approval. Dr. Taueg opened the floor for further discussion. There was no further discussion. **Motion carried.**

XV. Good and Welfare/Public Comment

**DISCUSSION/
CONCLUSIONS**

There was no Good and Welfare/Public Comment to review.

ACTION ITEMS	Responsible Person	Due Date
1. Year-End Reports (Clinical Practice Improvement) – Provide more information/plan and feedback for Returning Citizens' initiative.	Ebony Reynolds	January 12, 2022

The Chair called for a motion to adjourn the meeting. **Motion:** It was moved by Ms. Jawad and supported by Mrs. Burrell to adjourn the meeting. **Motion carried.**

ADJOURNED: 3:00 p.m.

NEXT VIRTUAL MEETING: Wednesday, January 12, 2022 at 1:00 p.m.

WILLIAM A. PHILLIPS
wphillips@piemanagement.com

EDUCATION: UNIVERSITY OF MINNESOTA LAW SCHOOL

J.D., 1996
Minnesota Journal of Law and Inequality
Director, Bankruptcy Clinic
Law Council
Admissions Committee

DELAWARE STATE UNIVERSITY

M.B.A., 1993
Athletic Academic Enhancement Program Coordinator
Men's Basketball Team Most Inspirational Award

DELAWARE STATE UNIVERSITY

B.B.A., 1990
Men's Basketball Team Captain
Who's Who Among College Students, Listed in 1990 edition

YOUNGSTOWN STATE UNIVERSITY

9/86 - 6/87

EXPERIENCE: P.I.E. MANAGEMENT, L.L.C.

President and C.E.O., 2002-Present
Staffing Industry Analysts 100 Fastest Growing Staffing Firms 2017, 2014 and 2010
ICIC 100 -2017 and 2020

PEPPER HAMILTON LLP

Sports, Corporate and Securities Groups
Of Counsel, 2004 – 2008
Associate, 2001 – 2003

MILLER, CANFIELD, PADDOCK AND STONE

East Michigan Business Services Practice Group
Associate, 1996 – 2001
Summer Associate, 1995

OFFICE OF THE MINNESOTA ATTORNEY GENERAL

Labor and Human Services Sections
Law Clerk, 10/94 - 4/95

MICHIGAN DEPARTMENT OF LABOR

Michigan Occupational Safety and Health Section, Appeals Division
Law Clerk, 7/94 - 9/94

FORD MOTOR COMPANY

Owner Relations Department, Lincoln Core Group
Customer Service Representative, 7/92 - 8/93

DELAWARE STATE UNIVERSITY

Office of the Dean, School of Business
Graduate Assistant, 9/91 - 7/92

LAND O'LAKES, INC.

R-TECH AND ADVANCE FOOD SCIENCES, INC.
Marketing Assistant, 5/91 - 9/91

- MEMBERSHIPS:** First Independence National Bank, Broad of Directors, 2014-Present
- First Independence Corporation, Broad of Directors, 2006-Present
- Board of Directors, Detroit Regional Chamber, 2021-Present
- Board of Directors and Vice Chairman of Executive Committee,
Detroit Economic Growth Corporation, 2002-2008
- Board of Directors, Detroit Super Bowl XL Host Committee
- Michigan Athletic Board of Control (appointed by Governor), 2002- 2004
- Board of Directors, City of Detroit Local Development Finance Authority
(appointed by Mayor)
- Board of Directors and General Counsel of Booker T. Washington Business Association,
2004 - 2006
- Client Review and Admissions Committee, Frontline Accelerator for Science and
Technology (FAST) program, an initiative of the Wayne State University Research and
Technology Park
- Detroit Metropolitan Bar Association (Chair, Sports Law Committee of
the Entertainment and Sport Law Section, 1997 – 2000)
- State Bar of Michigan, 1996-Present
- 2002 - 2003 Leadership Detroit XXIV Class
- 2003 Crain's Detroit Business 40 under 40
- Goldman Sachs 10,000 Small Businesses (Detroit Cohort II) 2014
- EY Entrepreneurs Access Network (Cohort 1) 2021
- ACTIVITIES:** Member of Word of Faith International Christian Center

Good afternoon, Honorable Board the RRAC meeting was held on January 7, 2022, at 11:00 am to 1:00pm.

Reporting: We submitted our annual report on December 23, 2021, after our CEO Eric Doeh reviewed and approved its submission. The ORR reporting period is for October 1 through September 30, 2021. The report was a 35-page report documenting 1110 allegations, 898 Investigations, and 287 Substantiated Investigations.

The complaint sources were as follows: from recipients 326 allegations, from staff 327, from ORR staff 140, from guardians/family 202, from the community and general public 82, which totaled 1110.

Each year staff has been the highest reporting mechanisms informing our office on violations of our recipient's rights and we appreciate their dedication.

For a detailed summary: There are remaining sections however for the sake of time, I will ensure all Board members receive a copy of the full report for review.

Please review the report and if you have any questions please contact our Recipient Rights Director Polly McCalister.

Appeals:

Our office received 19 appeals, we accepted 18, that met the criteria for appeal, which is **and** 10 were upheld, 8 were sent back for reinvestigation. A recipient can file an appeal if they feel:

- the investigative findings of the Rights Office were not consistent with the facts, or with the law, rules, or policies of the agency;
- the action, or proposed action of the agency director did not provide adequate resolution;
or
- the Rights Office did not start or finish the investigation in a timely manner.

The RRAC committee is required by the State of Michigan to make at least three recommendations/goals for the ORR department and we established three.

The State also requires the RRAC to make three recommendations, our committee selected to make the following.

- 1, To increase staffing levels in the ORR department.
2. To ensure all committee members receive training to be well rounded and informed. This should include DWIH polices, IPOS explanations should be included in this training to assist our committee with making decisions on appeals.
3. Try to have more information se we can make decisions before sending the appeals cases back.

Population	
MI	Adult Mentally Ill
DD	Developmentally Disabled Adult or Child
SED	Child with Serious Emotional Disturbance
SEDW	This is a 1915(c) waiver (Home and Community-Based Services Waiver) for children with serious emotional disturbance. This waiver is administered through Community Mental Health Services Programs (CMHSPs) in partnership with other community agencies and is available in a limited number of counties. Eligible consumers must meet current MDCH contract criteria for the state psychiatric hospital for children and demonstrate serious functional limitations that impair the child's ability to function in the community.
DD-CWP	This is a 1915(c) waiver (Home and Community-Based Services Waiver) for children with developmental disabilities who have challenging behaviors and/or complex medical needs. This waiver is administered through Community Mental Health Services Programs (CMHSPs) and is available statewide. Eligible consumers must be eligible for, and at risk of, placement in an Intermediate Care Facility for the Mentally Retarded (ICF/MR).
HSW	The Habilitation Supports Waiver is a 1915(c) waiver (Home and Community-Based Services Waiver) for people who have developmental disabilities and who meet the eligibility requirements: have active Medicaid, live in the community, and otherwise need the level of services provided by an intermediate care facility for mental retardation (ICF/MR) if not for the HSW. There are no age limitations for enrollment in the HSW. This waiver is administered through Prepaid Inpatient Health Plans (PIHPs) and affiliate Community Mental Health Services Programs (CMHSPs). The HSW is available statewide.

Accomplished
Discontinued
Ongoing

7221	Abuse class I
7224	Abuse class I - Sexual Abuse
72221	Abuse class II - nonaccidental act
72222	Abuse class II - unreasonable force
72223	Abuse class II - emotional harm
72224	Abuse class II - treating as incompetent
72225	Abuse class II - exploitation
7223	Abuse class III
72251	Neglect class I
72252	Neglect class I - failure to report

72261	Neglect class II
72262	Neglect class II - failure to report
72271	Neglect class III
72272	Neglect class III - failure to report
7304	Funds - Ability to spend or use as desired
7487	Access by P & A to records
7760	Access to rights system
7263	Access to telephone, mail
7840	Appeal process/mediation
7130	Choice of physician/mental health professional
7041	Civil rights: discrimination, accessibility, accommodation, etc
7780	Complaint investigation process
7262	Contact with attorneys or others regarding legal matters
7486	Correction of record
7305	Delivery of money upon release
1708	Dignity and respect
7481	Disclosure of confidential information
7303	Easy access to money in account
7170	Electro convulsive therapy (ect)
7302	Facility account
7520	Failure to report (other than Abuse/Neglect)
7111	Family dignity & respect
7264	Funds for postage, stationery, telephone usage
4630	Independent clinical examination
7029	Information on family planning
7003	Informed consent
4510	Involuntary admission process
7360	Labor & compensation
7086	Least restrictive setting
7080	Mental health services suited to condition
0000	No right involved
7140	Notice of clinical status/progress
7190	Notice of medication side effects

7060	Notice/explanation of rights
4980	Objection to hospitalization (minor)
7113	Opportunity to provide information
0001	Outside provider jurisdiction
7125	Person-Centered - assessment of needs
7124	Person-Centered - participation by individual(s) of choice
7123	Person-Centered - requests for review
7122	Person-Centered - timely development
7121	Person-Centered Process
7242	Photo - identification
7243	Photo - objection
7241	Photo - prior consent
7244	Photo - release to others/return
7245	Photo - storage/destruction
7100	Physical and mental exams
7047	Presumption of competency
7501	Privileged communication
7267	Property - access to entertainment materials, information, news
7285	Property - exclusions
7283	Property - inspection at reasonable times
7286	Property - limitations
7281	Property - possession and use
7289	Property - protection
7287	Property - receipts to recipient and to designated individual
7282	Property - storage space
7288	Property - waiver
7180	Psychotropic drugs
7112	Receipt of general education information
7044	Religious practice
7400	Restraint
7441	Restrictions/limitations
7545	Retaliation/harassment
7081	Safe environment
7301	Safeguarding money

7082	Sanitary/humane environment
7284	Search/seizure
7420	Seclusion
4090	Second opinion - denial of hospitalization
7050	Second opinion - denial of services
7150	Services of mental health professional
7160	Surgery
4190	Termination of voluntary hospitalization (adult)
7049	Treatment by spiritual means
7266	Uncensored mail
7261	Visits
7045	Voting
7485	Withholding of information (includes recipient access to records)
7265	Written and posted limitations, if established

drop down on Complaint Data tab
Allegan County CMH Services
Ascension Borgess Hospital
Ascension Macomb-Oakland Hospital, Madison Heights Campus
Ascension Macomb-Oakland Hospital, Warren Campus
Ascension Providence Hospital, Southfield Campus
Ascension Providence Rochester Hospital
Ascension St John Hospital
AuSable Valley Community Mental Health Authority
Barry County CMHA
Bay-Arenac Behavioral Health
Beaumont Hospital Farmington Hills Geropsychiatry
Beaumont Hospital - Royal Oak
Beaumont Hospital - Taylor
Behavioral Center of Michigan
Berrien MHA/Riverwood
Brightwell Behavioral Health

Bronson Battle Creek - Fieldstone Center
Bronson Lakeview Community Hospital
Caro Center
Cedar Creek Hospital
Center for Forensic Psychiatry
Centra Wellness Network
Community Mental Health and Substance Abuse Services of St Joseph County
CMH for Central Michigan
CMH of Ottawa County
CMHA of Clinton Eaton Ingham Counties
Copper County CMHS
Detroit Wayne Integrated Health Network
DMC - Detroit Receiving Hospital
DMC - Sinal-Grace Hospital
Forest View Hospital
Garden City Hospital
Genesee Health System
Gogebic CMHA
Graiot Integrated Health Network
Harbor Oaks Hospital
Havenwyck Hospital
Hawthorn Center
HealthSource Saginaw
HealthWest
Henry Ford Allegiance Health
Henry Ford Kingswood Hospital
Henry Ford Macomb Hospital
Henry Ford Wyandotte Hospital
Hiawatha Behavioral Health
Hillsdale Hospital
Holland Hospital
Hurley Medical Center
Huron Behavioral Health
Integrated Services of Kalamazoo
Kalamazoo Psychiatric Hospital
Lapeer County CMH

Lenawee CMH Authority
LifeWays
Livingston County CMH Authority
Macomb County CMH Services
McLaren Bay Region
McLaren - Flint
McLaren Greater Lansing
McLaren - Lapeer Region
McLaren Macomb
McLaren Oakland
McLaren Port Huron
Memorial Healthcare - Owosso
Mercy Health St Marys
Mercy Health Partners - Hackley Campus
Michigan Medicine Health Systems
MidMichigan Medical Center - Alpena
MidMichigan Medical Center – Gratiot
MidMichigan Medical Center - Midland
Monroe CMH Authority
Montcalm Care Network
Munson Medical Center
network180
Newaygo County Mental Health
North County CMH
Northeast Michigan CMH Authority
Northern Lakes CMH
Northpointe Behavioral Healthcare System
Oakland Community Health Network
Oaklawn Hospital
Pathways
Pine Rest Christian Mental Health Services
Pines Behavioral Health Services
Pontiac General Hospital
ProMedica Coldwater Regional Hospital
ProMedica Monroe Regional Hospital
Saginaw County Community Mental Health Authority
Samaritan Behavioral Center

Sarillac County CMH Authority
Shawasssee Health and Wellness
Sparrow-St Lawrence Hospital
Spectrum Health Lakeland Hospital
St. Clair County Community Mental Health Authority
St Joseph Mercy Hospital
St Joseph Mercy Hospital - Chelsea
St Joseph Mercy Oakland Hospital
St Mary's Hospital - Livonia
StoneCrest Center
Summit Pointe Behavioral Health
The Right Door for Hope, Recovery and Wellness
Tuscola Behavioral Health Systems
UP Health System - Marquette
Van Buren CMH Authority (PMS)
Walter Reuther Psychiatric Hospital
War Memorial Hospital's Behavioral Health Center
Washtenaw County Community Mental Health
West Michigan CMH
Woodlands Behavioral Healthcare Network

Section II: Intervention & Investigation substantiation data for:

Detroit Wayne Integrated Health Network

Category (from Complaint Data)	Specific Provider Type	Specific Remedial Action	Specific Remedial Action	Specific Remedial Action	Specific Remedial Action	Specific Remedial Action	Specific Remedial Action	Specific Remedial Action	Specific Remedial Action	Specific Remedial Action (no drop down)	MI	DD	SED	SED	DD	HSW
Major class III	Residential DD	Suspension	Training								1					1
Major class III	Residential DD	Suspension	Written Reprimand	Training	Other						3					3
Major class III	Residential DD	Suspension	Written Reprimand	Training	Verbal Counseling						2					2
Major class III	Residential DD	Suspension									5					5
Major class III	Residential DD	Suspension									3					3
Major class III	Residential DD	Verbal Counseling									1					1
Major class III	Residential DD	Written Reprimand	Suspension	Employment Termination							3					3
Major class III	Residential DD	Written Reprimand	Suspension	Staff Transfer							2					2
Major class III	Residential DD	Written Reprimand	Suspension								1					1
Major class III	Residential DD	Written Reprimand	Suspension								1					1
Major class III	Residential DD	Written Reprimand	Training	Verbal Counseling							2					2
Major class III	Residential DD	Written Reprimand									1					1
Major class III	Residential DD	Written Reprimand									1					1
Major class III	Residential DD	Written Reprimand									1					1
Major class III	Residential DD	Written Reprimand	Other								3					3
Major class III	Residential MI	Contract Action	Contract Action	Other							1					1
Major class III	Residential MI	Contract Action									1					1
Major class III	Residential MI	Employee left the agency, but substantiated									1					1
Major class III	Residential MI	Employment Termination	Employment Termination	Employee left the agency, but substantiated							1					1
Major class III	Residential MI	Employment Termination	Employee left the agency, but substantiated								3					3
Major class III	Residential MI	Pending									1					1
Major class III	Residential MI	Written Reprimand	Suspension	Training							1					1
Major class III	Residential MI	Written Reprimand	Training	Demotion							1					1
Major class III	SIP	Suspension									4					4
Major class II - failure to report	Other	Written Reprimand									1					1
Major class III - failure to report	Residential MI	Employee left the agency, but substantiated	Written Reprimand	Training							1					1
Rep - unsafe development	Out Patient	Written Counseling	Training	Other	Other						1					1
Person Contacted - linely develop	Out Patient	Written Counseling	Training	Other	Other						1					1
Person Contacted Process	Workshop (vocational)	Pending									1					1
Photo prior consent	Other	Employment Termination									1					1
Property - possession and use	Other	Employment Termination	Staff Transfer								1					1
Property - possession and use	Residential DD	Employee left the agency, but substantiated	Training								1					1
Property - possession and use	Residential MI	Policy Review/Development									1					1
Property - protection	Residential MI	Other									1					1
Residence/infirmary	Other	Verbal Counseling	Training								1					1
Residence/infirmary	Residential DD	Verbal Counseling	Training								1					1
Residence/infirmary	Residential MI	Plan of Service/Revision									2					2
Residence/infirmary	Residential MI	Training									1					1
Residence/infirmary	SIP	Suspension	Employment Termination								3					3
Residence/infirmary	Other	Employment Termination	Contract Action								1					1
Residence/infirmary	Residential DD	Contract Action	Contract Action								1					1
Residence/infirmary	Residential DD	Contract Action									1					1
Residence/infirmary	Residential MI	Contract Action									1					1
Residence/infirmary	Day Program DD	Written Reprimand	Suspension	Employment Termination							11					11
Residence/infirmary	Other	Environmental Repair/Enhancement									4					4
Residence/infirmary	Residential DD	Environmental Repair/Enhancement									1					1
Residence/infirmary	Residential DD	Training	Written Reprimand								1					1
Residence/infirmary	Residential DD	Verbal Counseling	Resign Transfer to another Provider/State	Policy Review/Development							2					2
Residence/infirmary	Residential DD	Written Reprimand	Training	Other							3					3
Residence/infirmary	Residential MI	Employment Termination									2					2
Residence/infirmary	Residential MI	Environmental Repair/Enhancement	Resign Transfer to Another Provider/State								1					1

REMEDATION TOTALS

Section II: Intervention & Investigation substantiation data for: **Detroit Wayne Integrated Health Network**

Category (from Complaint Data)	Specific Provider Type	Specific Remedial Action	Specific Remedial Action	Specific Remedial Action	Specific Remedial Action	Specific Remedial Action	Specific Remedial Action	Specific Remedial Action	Specific Remedial Action	Specific Remedial Action	Specific Remedial Action (no drop down)	MI	DD	SED	SED	DD	HSW	
State environment	Residential MI	Environmental Repair/Enhancement																
State environment	Residential MI	Other																
State environment	Residential MI	Receptor Transfer to another Provider/Site																
State environment	Residential MI	Training	Verbal Counseling															
Sanitary/humane environment	Other	Environmental Repair/Enhancement	Policy Review/Development	Environmental Repair/Enhancement														
Sanitary/humane environment	Residential MI	Correct Action																
Sanitary/humane environment	Residential MI	Correct Action																
Sanitary/humane environment	Residential MI	Written Counseling																
Sanitary/humane environment	Residential MI	Written Counseling																
Sanitary/humane environment	Residential MI	Verbal Counseling																
Sanitary/humane environment	Out Patient	Suspension																
Sanitary/humane environment	Residential DD	Policy Review/Development	Written Reprimand															
Sanitary/humane environment	Residential MI	Verbal Counseling	Training															
Sanitary/humane environment	Other	Training																
Sanitary/humane environment	Residential DD	Employee left the agency, but substantiated																
Sanitary/humane environment	Residential MI	Verbal Counseling																
Sanitary/humane environment	Residential DD	Verbal Counseling	Other															
Sanitary/humane environment	Residential DD	Policy Review/Development																
Sanitary/humane environment	Other	Policy Review/Development																
Sanitary/humane environment	Residential DD	Employee left the agency, but substantiated																
Sanitary/humane environment	Residential MI	Verbal Counseling																
Sanitary/humane environment	Residential DD	Policy Review/Development																
Sanitary/humane environment	Other	Policy Review/Development																

REMEDICATION TOTALS

Section II: Intervention & Investigation substantiation data for: **Detroit Wayne Integrated Health Network**

Category (from Complaint Data)	Specific Provider Type	Specific Remedial Action	Specific Remedial Action	Specific Remedial Action	Specific Remedial Action	Specific Remedial Action	Specific Remedial Action	Specific Remedial Action	Specific Remedial Action (no drop down)	M	DD	SED	SED W	DD CMP	HSW

REMEDIATION TOTALS

Detroit Wayne Integrated Health Network
SECTION II: ANNUAL TRAINING ACTIVITY
 Part A: Training Received by Office Staff (Please only list trainings related to rights protection)

LIST THE NAMES OF ALL STAFF HERE
Adams, Vickie
Aiele, Ashley
Alexander, Ann
Arnold, Annette
Askew, Brian
Chandra, Nisha
Copeland, Krystal
Frazier, Jacqueline
Gilreath, Robert
Green, Edna
Grybel, Christina
Hamer, Dorothy
Harris, Brian
Hicks, Lynda
Hollis-Neely, LaShanda
Jackson, ArReana
Jackson, Gay
Jones, Gwena
Knight, Carol
Little, Kimberly
Livous, Michelle
Louie, Nerissa
Maudin, Trina
McCallister, Polly
Oliver, Michael
Pride, Schakerra
Robinson, McKeba
Roseberry, Rodney
Schneider, Matthew

Staff Name (drop down, you have to scroll up to see the names)	MDHHS-ORR Course Number	Topic of Training Received	CEU Type (drop down)	# Hours
Aiele, Ashley	RC21-PreCon	Deceptive Analysis	I - Operations	3.00
Aiele, Ashley	RC20-GS1	Detecting Deception in a Verbal and Written Statement	I - Operations	1.50
Aiele, Ashley	RC20-03	Interviewing Consumers with Personality Disorders	I - Operations	1.50
Aiele, Ashley	RC20-04	Journey Toward a Rights Focused Environment-Strategies for Change	I - Operations	1.50
Aiele, Ashley	RC20-08	Sexuality is a Natural Part of the Human Experience, Even Under Guardianship	IV - Augmented Training	1.50
Aiele, Ashley	RC20 LPHRT	LPH Roundtable	I - Operations	1.50
Aiele, Ashley	RC20-12	Disrupting the Impacts of Implicit Bias and Micro-Aggressions: Being Respectful and Responding to Community Trauma: Strategies to Create a Culture of Staff	IV - Augmented Training	1.50
Aiele, Ashley	RC20-14	CMH Roundtable	IV - Augmented Training	1.50
Aiele, Ashley	RC20 CMHRT	CMH Roundtable	I - Operations	1.50
Aiele, Ashley	RC20-18	Guardianship Reform: Kicking the Can Down the Road	II - Legal Foundations	1.50
Aiele, Ashley	RC20-GS1	Velvet Covered Steel: How to Think Communicate and Act with Resilience	IV - Augmented Training	1.50
Aiele, Ashley	RC21-PreCon	Deceptive Analysis	I - Operations	3.00
Alexander, Ann	RCA21-14	Racism: A Public Health Crisis	IV - Augmented Training	2.00
Alexander, Ann	RC21-PreCon	Deceptive Analysis	I - Operations	3.00
Alexander, Ann	RC21-PreCon	Deceptive Analysis	I - Operations	3.00
Alexander, Ann	RC20-01	Evidence Analysis	I - Operations	1.50
Alexander, Ann	RC20-05	SUD Recipient Rights	I - Operations	1.50
Alexander, Ann	RC20-09	Practicing Effective Management	IV - Augmented Training	1.50
Alexander, Ann	RC20-12	Disrupting the Impacts of Implicit Bias and Micro-Aggressions: Being Respectful and Responding to Community Trauma: Strategies to Create a Culture of Staff	IV - Augmented Training	1.50
Alexander, Ann	RC20-14	LPH Roundtable	IV - Augmented Training	1.50
Alexander, Ann	RC20 LPHRT	LPH Roundtable	I - Operations	1.50
Alexander, Ann	RC20-18	Guardianship Reform: Kicking the Can Down the Road	II - Legal Foundations	1.50
Alexander, Ann	RC20-GS1	Velvet Covered Steel: How to Think Communicate and Act with Resilience	IV - Augmented Training	1.50
Alexander, Ann	17-37	Cultural Competence/Diversity (Previously Cultural Competence: A Foundational	IV - Augmented Training	0.50
Alexander, Ann	17-38	HIPAA Basic	II - Legal Foundations	0.50
Alexander, Ann	RCA21-06	Update from MDHHS	I - Operations	1.00
Arnold, Annette	RCA21-52	MDHHS Self Determination Conference 8-25/26-2021	IV - Augmented Training	6.00
Arnold, Annette	RCA21-14	Racism: A Public Health Crisis	IV - Augmented Training	2.00
Arnold, Annette	RCA21-01	Why Supported Decision Making?	IV - Augmented Training	1.50

CATEGORY TOTALS	
I - Operations	177.50
II - Legal Foundations	30.50
III - Leadership	0.00
IV - Augmented Training	106.50
Non-CEU	9.00

THESE NUMBERS WILL AUTO-FILL

Jackson, AriReana	RC20-17	Interviewing Children with Autism and Developmental Disabilities	I - Operations	1.50
Jackson, Gay	RC20-G51	Detecting Deception in a Verbal and Written Statement	I - Operations	1.50
Jackson, Gay	RC20-03	Interviewing Consumers with Personality Disorders	I - Operations	1.50
Jackson, Gay	RC20-05	SUD Recipient Rights	I - Operations	1.50
Jackson, Gay	RC20-09	Practicing Effective Management	IV - Augmented Training	1.50
Jackson, Gay	RC20 LPHRT	LPH Roundtable	I - Operations	1.50
Jackson, Gay	RC20-11	Speaking on the Fly	I - Operations	1.50
Jackson, Gay	RC20-15	NGRI Policy Updates	I - Operations	1.50
Jackson, Gay	RC20 CMHRT	CMH Roundtable	I - Operations	1.50
Jackson, Gay	RC20-16	Medication Over Objection: Rights and Responsibilities	II - Legal Foundations	1.50
Jackson, Gay	RC20-G51	Velvet Covered Steel: How to Think Communicate and Act with Resilience	IV - Augmented Training	1.50
Jackson, Gay	RCA21-52	MDHHS Self Determination Conference 8-25/26-2021	IV - Augmented Training	6.00
Jones, Gwena	RC21-PreCon	Deceptive Analysis	I - Operations	3.00
Jones, Gwena	RCA20-61	Behavioral Health and Coronavirus: Challenges and Opportunities	IV - Augmented Training	1.00
Jones, Gwena	RC21-PreCon	Deceptive Analysis	I - Operations	3.00
Jones, Gwena	Fall Conference	Understanding Moral Injury	Non-CEU	
Knight, Carol	RCA20-61	Behavioral Health and Coronavirus: Challenges and Opportunities	IV - Augmented Training	1.00
Knight, Carol	RCA21-09	Avoiding Burnout	IV - Augmented Training	1.50
Knight, Carol	RCA21-10	What's Going on in Lansing	I - Operations	1.50
Knight, Carol	RC21-PreCon	Deceptive Analysis	I - Operations	3.00
Knight, Carol	RC21-PreCon	Deceptive Analysis	I - Operations	3.00
Knight, Carol	RC20-02	What's New in Lansing	I - Operations	1.50
Knight, Carol	RC20-03	Interviewing Consumers with Personality Disorders	I - Operations	1.50
Knight, Carol	RC20 CMHRT	CMH Roundtable	I - Operations	1.50
Knight, Carol	RC20-05	SUD Recipient Rights	I - Operations	1.50
Knight, Carol	RC20-08	Sexuality is a Natural Part of the Human Experience: Even Under Guardianship	IV - Augmented Training	1.50
Knight, Carol	RC20 LPHRT	LPH Roundtable	I - Operations	1.50
Knight, Carol	RC20-10	Moving from Challenging to Rewarding Conversations	IV - Augmented Training	1.50
Knight, Carol	RC20-17	Interviewing Children with Autism and Developmental Disabilities	I - Operations	1.50
Knight, Carol	RC20-G51	Velvet Covered Steel: How to Think Communicate and Act with Resilience	IV - Augmented Training	1.50
Little, Kimberly	RC21-PreCon	Deceptive Analysis	I - Operations	3.00
Little, Kimberly	RC21-PreCon	Deceptive Analysis	I - Operations	3.00
Little, Kimberly	RC20-G51	Detecting Deception in a Verbal and Written Statement	I - Operations	1.50
Little, Kimberly	RC20-01	Evidence Analysis	I - Operations	1.50

Little, Kimberly	RC20-05	SUD Recipient Rights	I - Operations	1.50
Little, Kimberly	RC20-08	Sexuality is a Natural Part of the Human Experience: Even Under Guardianship	IV - Augmented Training	1.50
Little, Kimberly	RC20-11	Speaking on the Fly	I - Operations	1.50
Little, Kimberly	RC20-13	Behavioral Health Mediation Program with the Community Dispute Resolution Program	II - Legal Foundations	1.50
Little, Kimberly	RC20-18	Guardianship Reform: Kicking the Can Down the Road	II - Legal Foundations	1.50
Livous, Michelle	RC20-GS1	Detecting Deception in a Verbal and Written Statement	I - Operations	1.50
Livous, Michelle	RC20-02	What's New in Lansing	I - Operations	1.50
Livous, Michelle	RC20-04	Journey Toward a Rights Focused Environment: Strategies for Change	I - Operations	1.50
Livous, Michelle	RC20-08	Sexuality is a Natural Part of the Human Experience: Even Under Guardianship	IV - Augmented Training	1.50
Livous, Michelle	RC20 LPHRT	LPH Roundtable	I - Operations	1.50
Livous, Michelle	RC20-12	Disrupting the Impacts of Implicit Bias and Micro-Aggressions: Being Respectful and Responding to Community Trauma	IV - Augmented Training	1.50
Livous, Michelle	RC20-14	Strategies to Create a Culture of Staff	IV - Augmented Training	1.50
Livous, Michelle	RC20 CMHRT	CMH Roundtable	I - Operations	1.50
Livous, Michelle	RC20-17	Interviewing Children with Autism and Developmental Disabilities	I - Operations	1.50
Livous, Michelle	RC20-GS1	Velvet Covered Steel: How to Think Communicate and Act with Resilience	IV - Augmented Training	1.50
Louie, Nerissa	RC20-02	What's New in Lansing	I - Operations	1.50
Louie, Nerissa	RC20-GS1	Detecting Deception in a Verbal and Written Statement	I - Operations	1.50
Louie, Nerissa	RC20 CMHRT	CMH Roundtable	I - Operations	1.50
Louie, Nerissa	RC20-04	Journey Toward a Rights Focused Environment: Strategies for Change	I - Operations	1.50
Louie, Nerissa	RC20-07	BHBDA Updates	IV - Augmented Training	1.50
Louie, Nerissa	RC20-12	Disrupting the Impacts of Implicit Bias and Micro-Aggressions: Being Respectful and Responding to Community Trauma	IV - Augmented Training	1.50
Louie, Nerissa	RC20-14	Strategies to Create a Culture of Staff	IV - Augmented Training	1.50
Louie, Nerissa	RC20 LPHRT	LPH Roundtable	I - Operations	1.50
Louie, Nerissa	RC20-16	Medication Over-Objection: Rights and Responsibilities	II - Legal Foundations	1.50
Louie, Nerissa	RC20-GS1	Velvet Covered Steel: How to Think Communicate and Act with Resilience	IV - Augmented Training	1.50
Mccalister, Polly	ORRCMHQC	CMH Directors Quarterly Call	I - Operations	1.50
Mccalister, Polly	RCA21-52	MDHHS Self-Determination Conference 8-25/26-2021	IV - Augmented Training	6.00
Mccalister, Polly	RC21-PreCon	Deceptive Analysis	I - Operations	3.00
Mccalister, Polly	RC20-02	What's New in Lansing	I - Operations	1.50
Mccalister, Polly	RC20-05	SUD Recipient Rights	I - Operations	1.50
Mccalister, Polly	RC20-08	Sexuality is a Natural Part of the Human Experience: Even Under Guardianship	IV - Augmented Training	1.50
Mccalister, Polly	RC20-12	Disrupting the Impacts of Implicit Bias and Micro-Aggressions: Being Respectful and	IV - Augmented Training	1.50
Mccalister, Polly	RC20-15	NGRI Policy Updates	I - Operations	1.50
Mccalister, Polly	RC20 CMHRT	CMH Roundtable	I - Operations	1.50

Mccalister, Polly	RC20-17	Interviewing Children with Autism and Developmental Disabilities	I - Operations	1.50
Mccalister, Polly	RC20-G51	Velvet Covered Steel: How to Think Communicate and Act with Resilience	IV - Augmented Training	1.50
Mccalister, Polly	ORRCMDHC	CMH Directors Interim Call	I - Operations	1.00
Mccalister, Polly	ORR21CMHOC	CMH Directors Quarterly Call	I - Operations	1.50
Mccalister, Polly	RC21-PreCon	Deceptive Analysis	I - Operations	3.00
Oliver, Michael	17-37	Cultural Competence/Diversity (Previously Cultural Competence: A Foundational	IV - Augmented Training	0.50
Oliver, Michael	17-38	HIPAA Basic	II - Legal Foundations	0.50
Oliver, Michael	RCA21-06	Update from MDHHS	I - Operations	1.00
Oliver, Michael	RCA21-14	Racism: A Public Health Crisis	IV - Augmented Training	2.00
Oliver, Michael	RCA20-61	Behavioral Health and Coronavirus: Challenges and Opportunities	IV - Augmented Training	1.00
Oliver, Michael	RC20-G51	Detecting Deception in a Verbal and Written Statement	I - Operations	1.50
Oliver, Michael	RC20-02	What's New in Lansing	I - Operations	1.50
Oliver, Michael	RC20-05	SUD Recipient Rights	I - Operations	1.50
Oliver, Michael	RC20-07	BHDDA Updates	IV - Augmented Training	1.50
Oliver, Michael	RC20 LPHRT	LPH Roundtable	I - Operations	1.50
Oliver, Michael	RC20-11	Speaking on the Fly	I - Operations	1.50
Oliver, Michael	RC20-13	Behavioral Health Mediation Program with the Community Dispute Resolution Program	II - Legal Foundations	1.50
Oliver, Michael	RC20 CMHRT	CMH Roundtable	I - Operations	1.50
Oliver, Michael	RC20-18	Guardianship Reform: Kicking the Can Down the Road	II - Legal Foundations	1.50
Oliver, Michael	RC20-G51	Velvet Covered Steel: How to Think Communicate and Act with Resilience	IV - Augmented Training	1.50
Oliver, Michael	17-35	Person-Centered Planning	Non-CEU	1.00
Oliver, Michael	Fall Conference	Understanding Moral Injury	Non-CEU	
Pride, Schakerra	RCA21-12	Supported Decision Making, Session 3	IV - Augmented Training	1.50
Pride, Schakerra	17-37	Cultural Competence/Diversity (Previously Cultural Competence: A Foundational	IV - Augmented Training	0.50
Pride, Schakerra	N/A	Medicare & Medicaid General Compliance Training	Non-CEU	0.50
Pride, Schakerra	17-38	HIPAA Basic	II - Legal Foundations	0.50
Pride, Schakerra	17-35	Person-Centered Planning with Adult Children and Families	Non-CEU	1.00
Pride, Schakerra	N/A	Recipient Rights Refresher	Non-CEU	0.50
Pride, Schakerra	RCA21-52	MDHHS Self Determination Conference 8-25/26-2021	IV - Augmented Training	6.00
Pride, Schakerra	RC20-G51	Detecting Deception in a Verbal and Written Statement	I - Operations	1.50
Pride, Schakerra	RC20-01	Evidence Analysis	I - Operations	1.50
Pride, Schakerra	RC20-06	Uniting Joint Commission Standards with Recipient Rights	I - Operations	1.50
Pride, Schakerra	RC20-07	BHDDA Updates	IV - Augmented Training	1.50

Pride, Schakerra	RC20-12	Disrupting the Impacts of Implicit Bias and Micro-Aggressions: Being Respectful and Professional Is Not Enough	IV - Augmented Training	1.50
Pride, Schakerra	RC20-14	Responding to Community Trauma: Strategies to Create a Culture of Staff Wellness	IV - Augmented Training	1.50
Pride, Schakerra	RC20-16	Medication Over Objection: Rights and Responsibilities	II - Legal Foundations	1.50
Pride, Schakerra	RC20-651	Velvet Covered Steel: How to Think Communicate and Act with Resilience	IV - Augmented Training	1.50
Roseberry, Rodney	RC21-PreCon	Deceptive Analysis	I - Operations	3.00
Roseberry, Rodney	RC21-PreCon	Deceptive Analysis	I - Operations	3.00
Roseberry, Rodney	RC20-651	Detecting Deception in a Verbal and Written Statement	I - Operations	1.50
Roseberry, Rodney	RC20-01	Evidence Analysis	I - Operations	1.50
Roseberry, Rodney	RC20-04	Journey Toward a Rights Focused Environment- Strategies for Change	I - Operations	1.50
Roseberry, Rodney	RC20-07	BHDDA Updates	IV - Augmented Training	1.50
Roseberry, Rodney	RC20 CMHRT	CMH Roundtable	I - Operations	1.50
Roseberry, Rodney	RC20-16	Medication Over Objection: Rights and Responsibilities	II - Legal Foundations	1.50
Roseberry, Rodney	RC20-651	Velvet Covered Steel: How to Think Communicate and Act with Resilience	IV - Augmented Training	1.50
Schneider, Matthew	#ORR21-70	Building Blocks of Report Writing	I - Operations	4.50
Schneider, Matthew	RCA21-22	MDHHS Requirements for BIPRC and Occupational Therapy Evaluations	I - Operations	1.50
Schneider, Matthew	RC20-651	Detecting Deception in a Verbal and Written Statement	I - Operations	1.50
Schneider, Matthew	RC20-01	Evidence Analysis	I - Operations	1.50
Schneider, Matthew	RC20-04	Journey Toward a Rights Focused Environment- Strategies for Change	I - Operations	1.50
Schneider, Matthew	RC20-07	BHDDA Updates	IV - Augmented Training	1.50
Schneider, Matthew	RC20-12	Disrupting the Impacts of Implicit Bias and Micro-Aggressions: Being Respectful and Professional Is Not Enough	IV - Augmented Training	1.50
Schneider, Matthew	RC20-13	Behavioral Health Mediation Program with the Community Dispute Resolution Program	II - Legal Foundations	1.50
Schneider, Matthew	RC20-18	Guardianship Reform: Kicking the Can Down the Road	II - Legal Foundations	1.50
Schneider, Matthew	RC20-651	Velvet Covered Steel: How to Think Communicate and Act with Resilience	IV - Augmented Training	1.50
Scott, Magnolia	RCA21-52	MDHHS Self Determination Conference 8-25/26-2021	IV - Augmented Training	6.00
Sims, Edward	RC21-PreCon	Deceptive Analysis	I - Operations	3.00
Sims, Edward	RC20 CMHRT	CMH Roundtable	I - Operations	1.50
Sims, Edward	RC20-651	Velvet Covered Steel: How to Think Communicate and Act with Resilience	IV - Augmented Training	1.50
Sims, Edward	RC20-04	Journey Toward a Rights Focused Environment- Strategies for Change	I - Operations	1.50
Sims, Edward	RC20-07	BHDDA Updates	IV - Augmented Training	1.50
Sims, Edward	RC20 LPHRT	LPH Roundtable	I - Operations	1.50
Sims, Edward	RC20-18	Guardianship Reform: Kicking the Can Down the Road	II - Legal Foundations	1.50
Sims, Edward	RC20-01	Evidence Analysis	I - Operations	1.50
Sims, Edward	RC21-PreCon	Deceptive Analysis	I - Operations	3.00
Sterritt, Jeri	RC21-PreCon	Deceptive Analysis	I - Operations	3.00

Sterrett, Jeri	17-37	Cultural Competence/Diversity (Previously Cultural Competence: A Foundational Course)	IV - Augmented Training	0.50
Sterrett, Jeri	17-38	HIPAA Basic	II - Legal Foundations	0.50
Sterrett, Jeri	RCA21-51	Understanding Your Mental Health Rights	I - Operations	1.50
Sterrett, Jeri	RC21-PreCon	Deceptive Analysis	I - Operations	3.00
Sterrett, Jeri	RC20-G51	Detecting Deception in a Verbal and Written Statement	I - Operations	1.50
Sterrett, Jeri	RC20-03	Interviewing Consumers with Personality Disorders	I - Operations	1.50
Sterrett, Jeri	RC20-04	Journey Toward a Rights Focused Environment- Strategies for Change	I - Operations	1.50
Sterrett, Jeri	RC20-07	BHDDA Updates	IV - Augmented Training	1.50
Sterrett, Jeri	RC20-12	Disrupting the Impacts of Implicit Bias and Micro-Aggressions: Being Respectful and Professional is Not Enough	IV - Augmented Training	1.50
Sterrett, Jeri	RC20-14	Responding to Community Trauma: Strategies to Create a Culture of Staff Wellness	IV - Augmented Training	1.50
Sterrett, Jeri	RC20 CMHRT	CMH Roundtable	I - Operations	1.50
Sterrett, Jeri	RC20-16	Medication Over Objection: Rights and Responsibilities	II - Legal Foundations	1.50
Sterrett, Jeri	RC20-G51	Velvet Covered Steel: How to Think Communicate and Act with Resilience	IV - Augmented Training	1.50
Strong, Mignon	ORRCMHDC	CMH Directors Interim Call	I - Operations	1.00
Strong, Mignon	ORRCMHQC	CMH Directors Quarterly Call	I - Operations	1.50
Strong, Mignon	ORR21CMHQC	CMH Directors Quarterly Call	I - Operations	1.50
Strong, Mignon	RCA19-089	Virtual Ethics for Social Work, Substance Use Disorder, Recipient Rights Professionals & Psychologists	IV - Augmented Training	6.00
Strong, Mignon	RCA21-22	MDHHS Requirements for BTPRC and Occupational Therapy Evaluations	I - Operations	1.50
Strong, Mignon	RCA21-52	MDHHS Self Determination Conference 8-25/26-2021	IV - Augmented Training	6.00
Strong, Mignon	RC21-PreCon	Deceptive Analysis	I - Operations	3.00
Strong, Mignon	RC20-G51	Detecting Deception in a Verbal and Written Statement	I - Operations	1.50
Strong, Mignon	RC20-02	What's New in Lansing	I - Operations	1.50
Strong, Mignon	RC20-06	Uniting Joint Commission Standards with Recipient Rights	I - Operations	1.50
Strong, Mignon	RC20-07	BHDDA Updates	IV - Augmented Training	1.50
Strong, Mignon	RC20 LPHRT	LPH Roundtable	I - Operations	1.50
Strong, Mignon	RC20-11	Speaking on the Fly	I - Operations	1.50
Strong, Mignon	RC20-15	NGRI Policy Updates	I - Operations	1.50
Strong, Mignon	RC20 CMHRT	CMH Roundtable	I - Operations	1.50
Strong, Mignon	RC20-16	Medication Over Objection: Rights and Responsibilities	II - Legal Foundations	1.50
Strong, Mignon	RC20-G51	Velvet Covered Steel: How to Think Communicate and Act with Resilience	IV - Augmented Training	1.50
Strong, Mignon	RC21-PreCon	Deceptive Analysis	I - Operations	3.00
Wells, Joyce	RCA21-52	MDHHS Self Determination Conference 8-25/26-2021	IV - Augmented Training	6.00
Wells, Joyce	RC20-01	Evidence Analysis	I - Operations	1.50
Wells, Joyce	RC20-G51	Detecting Deception in a Verbal and Written Statement	I - Operations	1.50
Wells, Joyce	RC20-04	Journey Toward a Rights Focused Environment- Strategies for Change	I - Operations	1.50

Wells, Joyce	RC20-09	Practicing Effective Management	IV - Augmented Training	1.50
Wells, Joyce	RC20-10	Moving from Challenging to Rewarding Conversations	IV - Augmented Training	1.50
Wells, Joyce	RC20-13	Behavioral Health Mediation Program with the Community Dispute Resolution Program	II - Legal Foundations	1.50
Wells, Joyce	RC20-18	Guardianship Reform: Kicking the Can Down the Road	II - Legal Foundations	1.50
Wells, Joyce	RC20-GS1	Velvet Covered Steel: How to Think Communicate and Act with Resilience	IV - Augmented Training	1.50
Williams, Nicole	RC21-PreCon	Deceptive Analysis	I - Operations	3.00
Williams, Nicole	RC20-GS1	Detecting Deception in a Verbal and Written Statement	I - Operations	1.50
Williams, Nicole	RC20-03	Interviewing Consumers with Personality Disorders	I - Operations	1.50
Williams, Nicole	RC20-09	Practicing Effective Management	IV - Augmented Training	1.50
Williams, Nicole	RC20 LPHRT	LPH Roundtable	I - Operations	1.50
Williams, Nicole	RC20-14	Responding to Community Trauma: Strategies to Create a Culture of Staff Wellness	IV - Augmented Training	1.50
Williams, Nicole	RC20 CMHRT	CMH Roundtable	I - Operations	1.50
Williams, Nicole	RC20-17	Interviewing Children with Autism and Developmental Disabilities	I - Operations	1.50
Williams, Nicole	RC20-GS1	Velvet Covered Steel: How to Think Communicate and Act with Resilience	IV - Augmented Training	1.50
Williams, Nicole	RC20-GS1	Detecting Deception in a Verbal and Written Statement	I - Operations	1.50
Williams, Nicole	RC21-PreCon	Deceptive Analysis	I - Operations	3.00
Witcher, Chad	RCA21-19	Introduction to Diversity, Equity and Inclusion	IV - Augmented Training	1.50
Witcher, Chad	RCA21-22	MDHHS Requirements for BTPRC and Occupational Therapy Evaluations	I - Operations	1.50
Witcher, Chad	RCA21-49	Confidentiality	II - Legal Foundations	2.00
Witcher, Chad	RCA21-52	MDHHS Self Determination Conference 8-25/26-2021	IV - Augmented Training	6.00
Witcher, Chad	RC21-PreCon	Deceptive Analysis	I - Operations	3.00
Witcher, Chad	RC21-PreCon	Deceptive Analysis	I - Operations	3.00
Witcher, Chad	RC20-GS1	Detecting Deception in a Verbal and Written Statement	I - Operations	1.50
Witcher, Chad	RC20-04	Journey Toward a Rights Focused Environment- Strategies for Change	I - Operations	1.50
Witcher, Chad	RC20-09	Practicing Effective Management	IV - Augmented Training	1.50
Witcher, Chad	RC20-12	Disrupting the Impacts of Implicit Bias and Micro-Aggressions: Being Respectful and Professional is NOT Enough	IV - Augmented Training	1.50
Witcher, Chad	RC20-13	Behavioral Health Mediation Program with the Community Dispute Resolution Program	II - Legal Foundations	1.50
Witcher, Chad	RC20-18	Guardianship Reform: Kicking the Can Down the Road	II - Legal Foundations	1.50
Witcher, Chad	RC20-GS1	Velvet Covered Steel: How to Think Communicate and Act with Resilience	IV - Augmented Training	1.50

Detroit Wayne Integrated Health Network

SECTION III: DESIRED OUTCOMES FOR THE OFFICE & PROGRESS OF PREVIOUS OUTCOMES

Progress on Outcomes established by the office for FY 20/21. Pick from the drop-down in Outcome and indicate if goal was accomplished, was accomplished, discontinued, or remains ongoing. Checking ongoing will result in that outcome being self-populated in the FY 21/22 goal section below.

1 Provide on-site trainings, at least quarterly, to meet contractually required tri-annual training standards.

Outcome:

2 Reduce the time to close a case so there are zero cases closed beyond 75 days.

Outcome:

3 Continued evaluation of the office structure and processes to increase efficiency of each staff, as necessary.

Outcome:

4

Outcome:

5

Outcome:

Outcomes established by the office for NEXT FY

1 Provide on-site trainings, at least quarterly, to meet contractually required tri-annual training standards.

2 Reduce the time to close a case so there are zero cases closed beyond 75 days.

3 Continued evaluation of the office structure and processes to increase efficiency of each staff, as necessary.

4

5

Detroit Wayne Integrated Health Network

SECTION IV: RECOMMENDATIONS TO THE GOVERNING BOARD

The ORR & Advisory Committee recommends the following:

1.

To increase staffing levels in the ORR Department.

2.

Current RRAC Members and Recipient Rights Staff need systemic training to be well rounded. Updated DWIHN policies and both IPOS and IEP personal plans should be included in these trainings in order to help with the decision making processes.

3.

Try to have more information so we can make a decision before sending the cases back.

4.

NONE

5.

NONE

Detroit Wayne Integrated Health Network

STAFF CEU TRAINING HOURS TOTALS

THIS DATA WILL SELF-FILL

Staff Name	Operations	Legal Foundations	Leadership	Augmented Training	Non-CEU	Total Training for Staff
Adams, Vickie	0.00	0.00	0.00	0.00	0.00	0.00
Alele, Ashley	13.50	1.50	0.00	6.00	0.00	21.00
Alexander, Ann	11.50	2.00	0.00	8.50	0.00	22.00
Arnold, Annette	13.50	3.00	0.00	18.50	0.00	35.00
Askew, Brian	15.00	1.50	0.00	4.50	0.00	21.00
Chandra, Nisha	14.50	0.00	0.00	10.50	0.00	25.00
Copeland, Krystal	13.50	1.50	0.00	4.50	0.00	19.50
Frazier, Jacqueline	18.00	3.50	0.00	5.00	0.00	26.50
Gilreath, Robert	16.50	1.50	0.00	3.00	0.00	21.00
Green, Edna	6.00	1.50	0.00	8.00	0.00	15.50
Grybel, Christina	0.00	0.00	0.00	0.00	0.00	0.00
Hamer, Dorothy	13.50	0.00	0.00	4.50	0.00	18.00
Harris, Brian	10.50	3.00	0.00	12.00	9.00	34.50
Hicks, Lynda	11.50	1.50	0.00	15.00	0.00	28.00
Hollis-Neely, LaShanda	13.50	2.00	0.00	5.00	0.00	20.50
Jackson, ArReana	12.50	9.50	0.00	10.50	0.00	32.50
Jackson, Gay	10.50	1.50	0.00	9.00	0.00	21.00
Jones, Gwena	6.00	0.00	0.00	1.00	0.00	7.00
Knight, Carol	16.50	0.00	0.00	7.00	0.00	23.50
Little, Kimberly	12.00	3.00	0.00	1.50	0.00	16.50
Livous, Michelle	9.00	0.00	0.00	6.00	0.00	15.00

Population	
MI	Adult Mentally Ill
DD	Developmentally Disabled Adult or Child
SED	Child with Serious Emotional Disturbance
SEDW	This is a 1915(c) waiver (Home and Community-Based Services Waiver) for children with serious emotional disturbance. This waiver is administered through Community Mental Health Services Programs (CMHSPs) in partnership with other community agencies and is available in a limited number of counties. Eligible consumers must meet current MDCH contract criteria for the state psychiatric hospital for children and demonstrate serious functional limitations that impair the child's ability to function in the community.
DD-CWP	This is a 1915(c) waiver (Home and Community-Based Services Waiver) for children with developmental disabilities who have challenging behaviors and/or complex medical needs. This waiver is administered through Community Mental Health Services Programs (CMHSPs) and is available statewide. Eligible consumers must be eligible for, and at risk of, placement in an Intermediate Care Facility for the Mentally Retarded (ICF/MR).
HSW	The Habilitation Supports Waiver is a 1915(c) waiver (Home and Community-Based Services Waiver) for people who have developmental disabilities and who meet the eligibility requirements: have active Medicaid, live in the community, and otherwise need the level of services provided by an intermediate care facility for mental retardation (ICF/MR) if not for the HSW. There are no age limitations for enrollment in the HSW. This waiver is administered through Prepaid Inpatient Health Plans (PIHPs) and affiliate Community Mental Health Services Programs (CMHSPs). The HSW is available statewide.

Accomplished
 Discontinued
 Ongoing

7221	Abuse class I
7224	Abuse class I - Sexual Abuse
72221	Abuse class II - nonaccidental act
72222	Abuse class II - unreasonable force
72223	Abuse class II - emotional harm
72224	Abuse class II - treating as incompetent
72225	Abuse class II - exploitation
7223	Abuse class III
72251	Neglect class I
72252	Neglect class I - failure to report

72261	Neglect class II
72262	Neglect class II - failure to report
72271	Neglect class III
72272	Neglect class III - failure to report
7304	Funds - Ability to spend or use as desired
7487	Access by P & A to records
7760	Access to rights system
7263	Access to telephone, mail
7840	Appeal process/mediation
7130	Choice of physician/mental health professional
7041	Civil rights: discrimination, accessibility, accommodation, etc
7780	Complaint investigation process
7262	Contact with attorneys or others regarding legal matters
7486	Correction of record
7305	Delivery of money upon release
1708	Dignity and respect
7481	Disclosure of confidential information
7303	Easy access to money in account
7170	Electro convulsive therapy (ect)
7302	Facility account
7520	Failure to report (other than Abuse/Neglect)
7111	Family dignity & respect
7264	Funds for postage, stationery, telephone usage
4630	Independent clinical examination
7029	Information on family planning
7003	Informed consent
4510	Involuntary admission process
7360	Labor & compensation
7086	Least restrictive setting
7080	Mental health services suited to condition
0000	No right involved
7140	Notice of clinical status/progress
7190	Notice of medication side effects

7060	Notice/explanation of rights
4980	Objection to hospitalization (minor)
7113	Opportunity to provide information
0001	Outside provider jurisdiction
7125	Person-Centered - assessment of needs
7124	Person-Centered- participation by individual(s) of choice
7123	Person-Centered - requests for review
7122	Person-Centered - timely development
7121	Person-Centered Process
7242	Photo - identification
7243	Photo - objection
7241	Photo - prior consent
7244	Photo - release to others/return
7245	Photo - storage/destruction
7100	Physical and mental exams
7047	Presumption of competency
7501	Privileged communication
7267	Property - access to entertainment materials, information, news
7285	Property - exclusions
7283	Property - inspection at reasonable times
7286	Property - limitations
7281	Property - possession and use
7289	Property - protection
7287	Property - receipts to recipient and to designated individual
7282	Property - storage space
7288	Property - waiver
7180	Psychotropic drugs
7112	Receipt of general education information
7044	Religious practice
7400	Restraint
7441	Restrictions/limitations
7545	Retaliation/harassment
7081	Safe environment
7301	Safeguarding money

7082	Sanitary/humane environment
7284	Search/seizure
7420	Seclusion
4090	Second opinion - denial of hospitalization
7050	Second opinion - denial of services
7150	Services of mental health professional
7160	Surgery
4190	Termination of voluntary hospitalization (adult)
7049	Treatment by spiritual means
7266	Uncensored mail
7261	Visits
7045	Voting
7485	Withholding of information (includes recipient access to records)
7265	Written and posted limitations, if established

drop down on Complaint Data tab
Allegan County CMH Services
Ascension Borgess Hospital
Ascension Macomb-Oakland Hospital, Madison Heights Campus
Ascension Macomb-Oakland Hospital, Warren Campus
Ascension Providence Hospital, Southfield Campus
Ascension Providence Rochester Hospital
Ascension St John Hospital
AuSable Valley Community Mental Health Authority
Barry County CMHA
Bay-Arenac Behavioral Health
Beaumont Hospital Farmington Hills Geropsychiatry
Beaumont Hospital - Royal Oak
Beaumont Hospital - Taylor
Behavioral Center of Michigan
Berrien MHA/Riverwood
Brightwell Behavioral Health

Bronson Battle Creek - Fieldstone Center
Bronson Lakeview Community Hospital
Caro Center
Cedar Creek Hospital
Center for Forensic Psychiatry
Centra Wellness Network
Community Mental Health and Substance Abuse Services of St Joseph County
CMH for Central Michigan
CMH of Ottawa County
CMHA of Clinton Eaton Ingham Counties
Copper Country CMHS
Detroit Wayne Integrated Health Network
DMC - Detroit Receiving Hospital
DMC - Sinai-Grace Hospital
Forest View Hospital
Garden City Hospital
Genesee Health System
Gogebic CMHA
Graiot Integrated Health Network
Harbor Oaks Hospital
Havenwyck Hospital
Hawthorn Center
HealthSource Saginaw
HealthWest
Henry Ford Allegiance Health
Henry Ford Kingswood Hospital
Henry Ford Macomb Hospital
Henry Ford Wyandotte Hospital
Hiawatha Behavioral Health
Hillsdale Hospital
Holland Hospital
Hurley Medical Center
Huron Behavioral Health
Integrated Services of Kalamazoo
Kalamazoo Psychiatric Hospital
Lapeer County CMH

Lenawee CMH Authority
LifeWays
Livingston County CMH Authority
Macomb County CMH Services
McLaren Bay Region
McLaren - Flint
McLaren Greater Lansing
McLaren - Lapeer Region
McLaren Macomb
McLaren Oakland
McLaren Port Huron
Memorial Healthcare - Owosso
Mercy Health St Marys
Mercy Health Partners - Hackley Campus
Michigan Medicine Health Systems
MidMichigan Medical Center - Alpena
MidMichigan Medical Center – Gratiot
MidMichigan Medical Center - Midland
Monroe CMH Authority
Montcalm Care Network
Munson Medical Center
network180
Newaygo County Mental Health
North County CMH
Northeast Michigan CMH Authority
Northern Lakes CMH
Northpointe Behavioral Healthcare System
Oakland Community Health Network
Oaklawn Hospital
Pathways
Pine Rest Christian Mental Health Services
Pines Behavioral Health Services
Pontiac General Hospital
ProMedica Coldwater Regional Hospital
ProMedica Monroe Regional Hospital
Saginaw County Community Mental Health Authority
Samaritan Behavioral Center

Santilac County CMH Authority
Shiawassee Health and Wellness
Sparrow-St Lawrence Hospital
Spectrum Health Lakeland Hospital
St. Clair County Community Mental Health Authority
St Joseph Mercy Hospital
St Joseph Mercy Hospital - Chelsea
St Joseph Mercy Oakland Hospital
St Mary's Hospital - Livonia
StoneCrest Center
Summit Pointe Behavioral Health
The Right Door for Hope, Recovery and Wellness
Tuscola Behavioral Health Systems
UP Health System - Marquette
Van Buren CMH Authority (PMS)
Walter Reuther Psychiatric Hospital
War Memorial Hospital's Behavioral Health Center
Washtenaw County Community Mental Health
West Michigan CMH
Woodlands Behavioral Healthcare Network



President and CEO Report to the Board

Eric Doeh

January 2022

As we move towards a new year, DWIHN will continue to pursue its clinical integration plans beginning with our pursuit of Certified Community Behavioral Health Clinics (CCBHC) status. In addition to this designation, our partnerships with health plans and Federal Qualified Health Centers (FQHCs) will be imperative as we become a service delivery organization. Moreover, the construction of our Care Center on Milwaukee Street and our headquarters on Woodward will be a focus in the new year. Financially, the organization is in a very good position to be innovative in our payment structure with providers and also be cognizant of our savings.

We will hire a Chief Strategic Officer in the coming weeks, along with a Compliance Officer. Filling these positions is necessary from both a strategic and a contractual obligation requirement. We have hired outside counsel for a limited period to avoid any conflict of interest as we seek a Compliance Officer.

As we embark on this new year, it is imperative that we focus on children services. Thus, in 2022, we will begin a campaign/initiative called “Mental Health Care—No Child Left Behind”. We are going to extend our scope and resources to reach the over 285,000 school-aged kids we have in Wayne County. Please expect more details on this campaign in the coming weeks.

The two proposed redesigns for behavioral health by the legislature continue to be a point of discussion and concern. MDHHS has not taken a position either on the Shirkey legislation or the Whiteford legislation. The stance continues to be that of “aggressively neutral”. We continue to work with our lobbyist firm, legislators, the provider network, our members and the Association to offer alternatives to these plans.

LEGAL

Opioid Litigation Update:

The Michigan Attorney General has agreed that DWIHN may apply to the Special Circumstance Fund (the “Fund”) pursuant to the pending settlement with three distributors and one manufacturer of opioids. Previously, DWIHN faced an uphill battle to recovery as DWIHN was not considered to be a governmental entity and was therefore excluded from the allocations that were distributed to the State and local governments. The Fund consists of 5% of the funds allocated to local governments and now the Detroit Wayne Integrated Health Network (“DWIHN”). It is estimated the Fund will pay out over 18 years the sum of \$19,400,000. Local governments who believe that their allocation was not fair (for example, they pay for opioid related services for other counties or cities) as well as DWIHN may apply to this Fund and an arbitrator will decide on the allocation for each applicant. This is a significant step towards DWIHN being positioned to recover in the opioid litigation. We will be working with our attorneys to submit an application to the Fund evidencing how DWIHN has been affected by the Opioid Crisis.

FINANCE

In response to the correspondence issued on October 1, 2021, 26 providers from four lines of business were eligible for a stability payment. Thirteen of the providers responded and were eligible for a total payment amount of \$4.3 million. The claims were adjusted and a payment was disbursed in December, 2021. In addition, DWIHN identified Clubhouse services as being eligible for the financial stability payment and requested similar information from those providers. As a result of the review, an additional \$1.6 million was paid to five Clubhouse providers. DWIHN issued a total of \$6.9 million in financial stability payments for the fiscal year ended September 30, 2021.

In addition to the aforementioned stability payments, DWIHN offered two additional network wide stability payments:

- 1) A lump sum retention payment to all provider staff that served DWIHN members, both clinical and administrative, employed on September 30, 2021. Approximately 90% of the providers responded after DWIHN made three separate attempts to reach out to non-responsive providers. On Monday, December 6, 2021, DWIHN issued \$24.7 million in retention payments to 292 providers for 13,000 full and part-time employees. In addition, 332 full-time and ten part-time/student intern DWIHN employees were also eligible for the retention payment, for a total of approximately \$755,000. DWIHN applied the same guidelines as the provider network. It should be noted that the amount disbursed to DWIHN employees were within the board approved budget for administrative costs for the fiscal year ended September 30, 2021.
- 2) Payments of overtime premiums (i.e. half time only) for certain residential providers, in part, for services performed during the fiscal year ended September 30, 2021. Although DWIHN's standardized rate of \$18.54/hr. factors in an overtime component, given the staff shortages, providers incurred an excess amount of overtime during the year. On December 7, 2021, DWIHN disbursed \$4.7 million to the provider network related to the overtime initiative.

Effective October 1, 2021, DWIHN will be implementing an across the board 5% rate increase for all fee for service programs, with the exception of Hospitals, COFR's, special provider negotiated rate contracts (i.e. Hope Network), Wayne County programs, Children's Crisis contracts, COPE, MHL, Fiscal Intermediaries, Med Drop, PMPM providers, and federally funded grant programs (i.e. PASARR). DWIHN will be working with PCE to update the MH-WIN contract records to reflect the revised rates as of January 1, 2022, however October through December claims will be retroactively adjusted and paid by early April, 2022.

On November 15, 2021, Michigan Department of Health and Human Services (MDHHS) approved the SED value-based incentive model. The SED Children's providers can earn up to \$2.5 million a year in value-based payments. In addition, on December 10, 2021, DWIHN met and introduced a similar value-based payment model to the AMI provider network. That same day, DWIHN submitted the request for approval to MDHHS; they have 25 days to respond however we anticipate implementation to be effective as of January 1, 2022. The AMI providers can earn up to \$5.5 million per year in value-based payments.

DWIHN will be completing the final phase of System's Transformation whereby we will be phasing in the self-directed members from Community Living Services (CLS). DWIHN will begin the transition on February 1, 2022 as members IPOS's expire. In an effort to ensure CLS can continue to fulfill the contract terms during the transitional period, DWIHN will continue paying CLS the administrative rate for the remainder of the fiscal year. Effective immediately, DWIHN will hire three FTE's to administer the program for a total cost of approximately \$400,000, which will result in a savings of \$1.4 million. A budget adjustment will be forthcoming for the aforementioned positions however it should be noted that the savings will occur in the next fiscal year.

ADVOCACY

On November 28, 2021, I was a featured guest on Spotlight with Chuck Stokes explaining the importance of Community Mental Health and the current Shirkey and Whiteford behavioral health redesign bills in Lansing.

<https://www.wxyz.com/news/political/spotlight-on-the-news/spotlight-on-the-news-tonya-myers-phillips-on-housing-dwihns-eric-doe-h-on-mental-health-help>

On December 1, 2021, DWIHN and PAA met with Senator Shirkey to discuss regional and statewide updates for the behavioral healthcare redesign.

INFORMATION TECHNOLOGY

Therefore Document Management System:

This is a collective effort project among all IT units. This project will take us to a digital solution to accommodate retention requirements, and reduce the need to accommodate physical storage:

- File Scanning – As part of moving towards a paperless and data driven organizational goal, we are continuing to leverage Therefore solution to provide solutions to several departments to scan and index documents for ease of access, availability and move away from dependence on paper and storage.
- E-Forms/Integrations – IT is working to evaluate and enable Therefore integration to allow outside entities to submit paperwork and documents to DWIHN via a web page. This will benefit departments even during the Milwaukee construction period.

Infrastructure:

- ManagedEngine/OpsManager: Internal systems monitoring and alerting for infrastructure, applications and services. This will allow DWIHN to monitor health and performance and integrate into incident management any issues as a result.
- Internal/External Firewall/BGP project. Working with vendor to complete fiber/hardware setup to allow additional IP address and close this security upgrade project with built in redundancy.
- Call Center high availability (HA) configuration underway. Working to enable a HA environment for Access Center to ensure we have redundancy built in to support those operations.

Security/HIPAA

- IT Security – IT has narrowed down vendor proposals for a security audit, policy review, and system/infrastructure testing to assist with bringing DWIHN into compliance with current security practice standards and ICO requirements.

ACCESS CENTER

DWIHN has been working on addressing the potential delays in getting members in service. This has been in the midst of several of our providers notifying us about putting holds on new intakes. We are working closely with those providers on identifying their plan for resuming intakes and working with all other providers to highlight the importance of timely access. Staffing shortages with providers has put hold to new intakes at some locations as well as to certain types of services Member no-show to the scheduled appointment has been another significant barrier.

Various DWIHN's departments are collaborating to improve Access to Services. Managed Care Operations, Clinical Departments, Quality Department and Access Department have been meeting with our providers to discuss their plans and actions steps to address the delays. We have created an Access Committee to evaluate our network Capacity and Access to service and will work on proposing plans for continued improvement.

FACILITIES



On November 15, 2021, DWIHN submitted the request for Special Land Use to the City of Detroit. On December 8, DWIHN met with Natasha Long from the W. Grand Blvd. Association to discuss our plans for the DWIHN Care Center.

CUSTOMER SERVICE

Customer Service convened oral health peers to discuss outcomes and lessons learned. We exceeded the goal to teach 100 unique individuals about oral health. Providing training and technical support to members interested in becoming Peer Mentors.

HUMAN RESOURCES

The Department of Human Resources continues to hire staff to augment our already exceptional workforce. HR completed open enrollment (insurance) for all employees. HR processed the retention payment made to DWIHN employees. HR also completed the Early Retirement offering made to DWIHN employees.

CHIEF CLINICAL OFFICER

Behavioral Health Outreach:

DWIHN organized efforts to provide outreach and assistance to schools, teachers and students after the tragic event of Oxford shooting as well as several other school threats and lockdowns. We developed resource page on our website to address the Oxford school mass shooting as well as other threats and lockdowns. (December) <https://dwihn.org/news-oxford-hs-grief-counseling-resources-list>. We also created Tri-county Workgroup to address Youth Mental Health especially in schools (a planning meeting was held on December 15, 2021).

On December 16, 2021, DWIHN hosted a Virtual Town Hall Meeting, “LET’S TALK ABOUT IT”, addressing School Safety/Violence, Mental Health, Grief/Loss and Suicide Prevention. Medical Director Newsletter addressing children and parent’s fear about return to school after the shooting was also issued in December.

With the continued rise of COVID-19 cases and the new variant, we have continued our advocacy and outreach efforts towards the pandemic.

- Biweekly Newsletter highlighting recent data and addressing safety protocols and vaccine hesitancy as well as Ask the Doc email responses to people’s vaccination/COVID questions.
- Interview for City of Detroit's Office of Disability Affairs for children, parents and vaccine hesitancy in the disability community (November 2021)
 - Video 1 <https://fb.watch/9evcm7av7H/> Shama Faheem, Part #1 (encouraging people to get the vaccine)
 - Video 2 <https://fb.watch/9ev7wG2ymn/> Shama Faheem, Part 2 (how to gradually resume in-person activities)
 - Video 3 <https://fb.watch/9ev8RvO-gi/> Cassandra Phipps (vaccines for children and parents)

Quality Improvement:

HSAG reviewed DWIHN in Summer 2021 for its new 3-year review cycle. We had some findings that needed Corrective Action Plans (CAPs), which have been submitted to HSAG. DWIHN is working internally with each Department to assure implementation of the CAPs. HSAG will do the second half of the review in Summer of 2022 and DWIHN’s Quality Department is working with each Department to assure they are reviewing and implementing requirements in term. Final Review of this 3-year cycle will happen in 2023.

INTEGRATED HEALTHCARE

Behavioral Health Home (BHH): Behavioral Health Home services will start in Region 7 on April 1, 2022. DWIHN is the Lead Entity and DWIHN has five Health Home partners. A MDHHS Behavioral Health Home kick-off meeting is scheduled for March 1-2, 2022. All of our Health Home partners have met BHH credentialing requirements and have been receiving training from the National Council for Behavioral Health. This will expand integrated physical and behavioral health services for both adults and/or children diagnosed with a serious mental illness or serious emotional impairment.

Opioid Health Home (OHH): On October 1, 2021 DWIHN began its Lead Entity role as an Opioid Health Home for persons with Medicaid and an Opioid use disorder. As of January 6 2022, there are 216 persons enrolled on OHH. Health Home Partners provide a full array of integrated health services including care management, specialty referrals, assessments, authorizations, treatment planning.

Certified Community Behavioral Health Clinic- State Demonstration (CCBHC): The Guidance Center is Region 7's State designated CCBHC provider. A CCBHC site provides coordinated, integrated, comprehensive services for all individuals diagnosed with a mental illness or substance use disorder. It focuses on increased access to care, 24/7/365 crisis response and formal coordination with health care. This model launched on 10/1/2021 and currently The Guidance Center has enrolled over 2,100 members.

Certified Community Behavioral Health Clinic- SAMHSA Expansion Grant: This SAMSHA grant provides funds directly to organizations that self-certify that they meet all of the CCBHC requirements. This funding is provided to expand current services and increase individuals access to care. DWIHN is currently working on this expansion grant opportunity when available to provide additional CCBHC services to individuals we support.

CLINICAL PRACTICE IMPROVEMENT

Wayne County Jail /Probate Court: There were a reported 69 releases from the Wayne County jail. Of those, 23 were linked to the assigned provider; 15 were placed in other correctional facilities or hospitalization; 5 were not Medicaid eligible members; and 26 were unassigned and linked to a DWIHN Jail provider. The Sheriff's Department is working with Team Wellness on familiar faces that come into the jail to provide wrap-around services. DWIHN has outreached to the Clinical Jail Mental Health Director to ensure data regarding individuals released from jail is provided to DWIHN to establish a proactive discharge plan.

There were fifty 50 Assisted Outpatient Treatment Orders reported from December 1-17, 2021. Of those, 5 were on a continuing hospitalization order; 4 were not Medicaid eligible; 5 were linked to the Access Center for a provider assignment; and 36 had the provider notified of the order.

Workforce Development: Currently reviewing DWIHN's core training requirements for adults and children, including supplemental trainings. Recommendations for the development of credentialing procedures specific to clinical specialty as well as compliance standards for practitioner completion of core trainings were established. In addition, Integrated healthcare trainings have been added to the DWIHN training grid.

RESIDENTIAL SERVICES

The DWIHN Residential Team continues to track and monitor requests for assistance from providers and resultant timeliness. During the month of December 2021, the Residential Team received 278 requests for assistance through e-mail and phone calls. This is a significant increase when compared to prior months. 70% were responded to within 24-48 hours, 2% were connected with other DWIHN departments for resolution, 19% required further investigation, and 9% were referred to a supervisor for further review and resolution. The Residential Team provides monthly authorization refresher trainings for CRSP providers,

in addition, DWIHN meets with CRSPs monthly to review system /process updates, identify potential barriers and discuss resolutions. The Residential Department received 533 residential service authorization requests in the month of October. 99.8% of those requests were provided a disposition within 14 days.

COVID-19 has continued to rise in recent months and we are seeing this impact in residential homes. There were 23 reported positive cases of COVID-19 in the month of December. This increase has put a strain on our provider network. DWIHN's Residential Director is actively adding additional Covid-19 Transition Homes to manage the increase in cases. It has also been noted that many DCW staff have not been vaccinated which puts our members at higher risk. DWIHN has sent a communication to Residential Providers strongly encouraging that their staff be vaccinated. Currently over 90.4% of persons living in licensed residential settings have been fully vaccinated. Over 67.5% of person living in unlicensed settings have been vaccinated (for a total of 82.3% members vaccinated in congregate settings). Currently, 515 members have received a booster vaccination.

CHILDREN'S INITIATIVES

School Success Initiative (SSI): In December 2021, the Children's Initiative Department provided resources to SSI Providers to support schools in Wayne County on School Safety in response to school shootings and threats. The SSI Redesign Project has met three goals: 1) Coordination with Teen Health Centers; 2) Increased Accessibility of Services; and 3) Implemented Standardization of Services. Coordinated with Wayne RESA to gain information for purchasing the Pre-K curriculum and for SSI Providers to attend the training in February 2022. DWIHN will continue to coordinate with the Access and IT Departments to create the calendar to schedule intake appointments, allow Providers to see the status of the SSI Tier 3 Referrals, and update the enrollment section to include the option for a member to decline services.

Some SSI Providers also offered resources and support to schools in Oakland County as well after the Oxford High School shooting incident. A list of resources has been developed and available on DWIHN website and also given to various school districts in Wayne County. DWIHN hosted a virtual Townhall ("Let's Talk About It") on December 16, 2021 to continue to provide education and support children and families in response to the recent school shooting. The townhall included Dr. James Henry, Professor at Western Michigan University, Co-Founder /Director of Children's Trauma Assessment Center, and a panel of nine participants to discuss mental health, school safety/violence, grief/loss and trauma.

Children's Services: On December 2, 2021, the 12th Annual Report to the Community event took place via Zoom Platform. There were 103 stakeholders who attended. At this event Cassandra Phipps, Director of Children's Initiatives, presented an overview of Connections' System of Care accomplishments for Fiscal Year 2020-2021. Stakeholders also received a copy of the Report to the Community which provides more detailed data from assessment tools and services provided by all System of Care providers.

Children's Initiatives continues to coordinate with DWIHN Access and IT Department to develop a screening process for individuals ages 0 to 6 for the Infant Mental Health Program. DWIHN is planning on moving this eligibility process from the providers back to DWIHN. A meeting was held with IMH Providers to discuss and received additional feedback to incorporate in the new changes.

Autism: ASD services were provided to 2,195 members in December which is an increase of 3 members from November. There were 111 referrals in the month of December. This was a slight decline from November, but it is based on partial month data. ABA providers have been provided direction on coordination of care considerations with CRSP agencies. Continued support is being provided to the members approved for ASD Benefit, but did not accept an ABA placement at time of appointment.

The ASD Benefit referral process was updated per Medicaid Provider Manual guidelines. A member interested in entry into the ASD Benefit must provide proof of a full medical and physical examination/

screening, within the past year, indicating further evaluation is recommended by the member's primary care physician in order to be scheduled for a comprehensive diagnostic evaluation.

SUBSTANCE USE SERVICES

Opioid Crisis:

DWIHN continues to train providers, health care workers, jail staff, drug court staff, community organizations and members of our community on how to use Naloxone to reverse opioid overdose. On December 10, 2021 the SUD Team distributed free Naloxone kits, Fentanyl Testing Strips and Sleeping Coats to ensure providers had necessary tools over the holiday to address this rising issue. DWIHN's Naloxone Initiative program has saved 807 lives since its inception. For the month of December there was twenty-four (24) saves. Again, the saved lives are under-reported, especially during this time of the COVID pandemic. The logs are coming in slowly from law enforcement and the community. DWIHN to date has distributed over 15,792 Naloxone kits and for the month of December DWIHN distributed 3,202. The Holiday Save a Life Drive distributed 389 Sleeping Coats, 2900 Naloxone Kits and 7100 Fentanyl Strips to providers.

Pandemic/COVID-19 Related Issues:

In the month of December, the SUD Department reported a total of 38 positive COVID cases and no deaths. In addition, of the number of positive COVID cases, 19 of the individuals reported they were full vaccinated. DWIHN serviced nine individuals at one of our three COVID sites.

A rise in the prevalence of gambling disorder during the pandemic has fueled DWIHN's SUD Department to build clinical capacity to support individuals with a gambling disorder that often co-occurs with SUD. SUD Department have increased the Gambling Residential Treatment (GRT) programs from one to three providers that offer GRT services. For the month of December, we service nine members for Gambling Residential Services.

Authorizations:

There was a reported total of 1,325 SUD authorizations approved during the month of December. This is a significant decrease from November, but it is only partial month reporting. 90% of the 33 Urgent Authorizations were authorized within 24 hours. There were 765 non-urgent authorizations and 478 (99%) were approved within 14 days.

UTILIZATION MANAGEMENT

MDHHS implemented CPT modifier changes to numerous CPT codes on 10/1/2021. DWIHN held several provider trainings to prepare for these changes. There were several resultant authorization issues related to the implementation of the updated modifiers. These issues have been resolved as received by the Procedure Code workgroup. These modifier changes also resulted in a disruption to the current Standard Authorization Guidelines (SUGs). DWIHN has been averaging of over 700 authorizations waiting for review in the Que. DWIHN cross trained additional staff in the UM Department to assist with these reviews.

DWIHN implemented an intake period where a set number of services can be provided without a pre-authorization for up to 60 days. DWIHN also reviewed the requirement of having a pre-authorization for Assessment services. This was a reported barrier to providing timely services to members. Upon further review DWIHN has determined that the pre-authorization requirement for Assessments will be discontinued.

December 2021 Authorization Outcomes:

- There were 1174 authorization reviews for non-urgent, services during the month of December. Out of the 1174 approvals, 96.7% were provided a disposition within 14 days of request.

- There were 40 MI Health Link authorizations received in December 20, 2021. This is a decrease from the previous month, but only reflects partial data.
- There were 318 hospital admissions in the month of December (as of 12/20/21) with an average length of stay (LOS) of 13 days. This is a 43% decrease in admissions compared to November, but an increase in LOS (from 11 to a 13-day average).
 - The UM Department conducts bi-weekly case conferences with DWIHN's physician to review inpatient admissions with lengths of stay equal to or beyond 14 days, while promoting interdepartmental collaboration with Crisis Services, Residential, Quality and Integrated Care. Additional weekly supervision is being provided to support staff and ensure members are receiving care that meets their needs, and when clinically appropriate, discharge back into the community.
- For those considered recidivistic (hospital readmission within 30 days of discharge) during any given month, we have seen a decrease from 15.1% in Quarter 4 to 13% (partial data) for Quarter 1. The State expectation is to be at 15% or less per quarter. There were a reported 18 recidivistic members in December (as of 12/20/21).

Self Determination: Community Living Services (CLS) currently is the administrator (ASO) for 856 members receiving Self-Directed Services. It was determined as a part of System Transformation, that this administration will transition to DWIHN by July 2022. Notifications have been provided to CLS, providers, fiscal intermediaries, and members. This change will coincide with member's IPOSs to ensure a smooth transition.

COMMUNICATIONS

On December 2, 2021, I was recognized with a Regional and State Leadership award by DWIHN provider, Black Family Development Inc. A short video was also shown during the "Hope and Healing Celebration": [Eric Doeh | Awardee Spotlight Interview](#).



On December 6, 2021, I was interviewed by Channel 4's Paula Tutman about the shortage of mental health professionals in the state of Michigan and how DWIHN is doing its part to help find solutions.

https://www.clickondetroit.com/video/news/2021/12/06/how-the-mental-health-help-shortage-is-impacting-those-trying-to-cope-with-oxford-high-school-shooting/?utm_source=facebook&utm_medium=social&utm_campaign=snd&utm_content=tutman&fbclid=IwAR2dQDfPwKNFuHvfZmzpFpmD69HqJJvzX2cjcVSFp82n3PIIgyKv8OT3ezk

On December 10, 2021, DWIHN deployed resources and supports following the Oxford High School shooting to ensure families, teachers and first responders were equipped with the necessary mental health tools needed to help cope with loss the trauma and meet their mental health needs of the community.

On December 11, 2021, I provided opening remarks during the 49th Annual Association of Chinese Americans Anniversary Celebration.



On December 16, 2021, following incidents at Oxford High School and the Plymouth Canton High School, DWIHN held a virtual town hall offering trauma related resources for students, parents, teachers, & first responders and discussed signs parents should look for if their children are struggling. panel of students, educators, parents, and mental health professionals in a dialogue on experiences of trauma in an effort to promote continued conversations within our communities. All are welcome to attend, learn coping strategies and signs/ways you can be there for a friend or child in need.

Our Ask the Dr segments continue in a bimonthly newsletter sent throughout our provider network and community stakeholders to help address and educate people about COVID-19. The newsletters send information about COVID-19, vaccinations and answers questions that are sent in by staff, people we serve, etc. Please visit AskTheDoc@dwihn.org

Television:

WDIV 12/7/21: WIHN was highlighted on WDIV as Mental Health resource:

<https://www.clickondetroit.com/health/2021/12/06/get-the-help-you-need-where-to-find-mental-health-services-in-southeast-michigan/>

Digital:

DWIHN was listed as a resource to help with holiday stress management, seasonal depression and isolation by the following news outlets:

WXYZ 12/13/21:Resources to help you manage stress during the holidays:

<https://www.wxyz.com/news/resources-to-help-you-manage-stress-during-the-holidays>

The News Herald 12/16/21: Column: Tips and resources to cope with seasonal depression and holiday blues:

<https://www.thenewsherald.com/2021/12/16/column-tips-and-resources-to-cope-with-seasonal-depression-and-holiday-blues/>

Pride Source 12/22/21: Feeling Alone? As COVID Numbers Surge, Here's How to Avoid Wintertime Isolation 5 tips for navigating the holidays and a COVID-impacted social network:

<https://pridesource.com/article/feeling-alone-as-covid-numbers-surge-heres-how-to-avoid-wintertime-isolation/>

Print:

As part of our media partnerships with local community newspapers, DWIHN messaging appeared in the Hamtramck Review as well as the Arab American News.



Community Outreach:

December 12, 2021 - SUD staff attended the Barbershop Health and Wellness Tour held at Shears and Shaves Salon in Detroit.

December 9, 2021 - Youth United held a professional development workshop on Accountability in the Workplace via Zoom. The workshop addressed what the definition of accountability is, how holding yourself accountable affects the workplace and several discussions expressing examples of how should hold ourselves accountable.

December 16, 2021 - Youth Move hosted a Winter Wonder bash meet and greet/holiday party at The Children's Center as a way to reach out to the community and engage more youth.

Social Media:

Top Performing Posts - Social media continues to see consistent growth and impressions over all four channels. Top performing posts across our social media channels were posts promoting DWIHN'S Virtual Townhall Meeting and the International Day of Person with Disabilities.



**MICHIGAN HEALTH
ENDOWMENT FUND**



Wayne County Racial Disparities in Behavioral Health

Dr. Karla Mitchell
01/18/2022

2022

TABLE OF CONTENTS

01.

PROJECT
OVERVIEW

You can describe the topic
of the section here

02.

PROJECT
TEAM

You can describe the topic
of the section here

03.

PROJECT
TIMELINE

You can describe the topic
of the section here

04.

PROJECT
STATUS

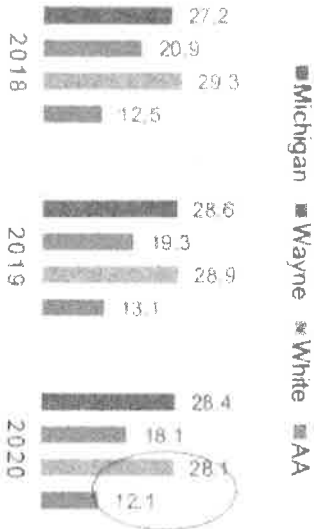
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of the section here

2021-2022 Discovery Plan
**Racial
Disparities In
Behavioral
Health**

Project Overview
SHAR AND CLASS have launched an initiative aimed at exploring what factors, influences, and or barriers are contributing to disparate SUD and Behavioral Health follow up services for African Americans following an emergency department crisis.

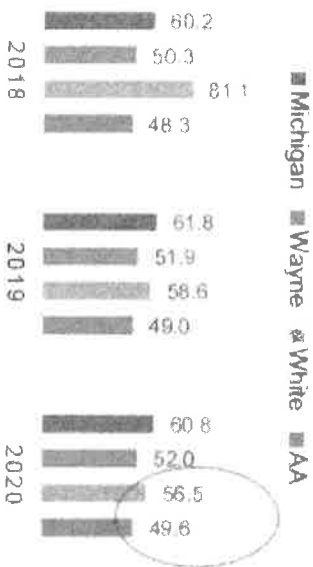
BH and SUD Specific Disparity

FOLLOW UP AFTER ED VISIT FOR ALCOHOL AND OTHER SUD (%)



Follow-up after ED visit for alcohol and other SUD, shows a disparity between Whites and African Americans in Wayne County in comparison to Michigan and the U.S. In 2020, the gap was -16.0 percentage points.

FOLLOW UP AFTER ED VISIT FOR BEHAVIORAL HEALTH (%)

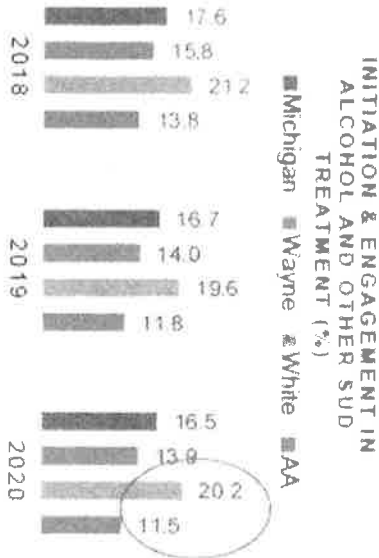


There was also a disparity between African Americans and White persons for follow-up after an ED visit for Behavioral Health with a gap of -6.9 percentage points.

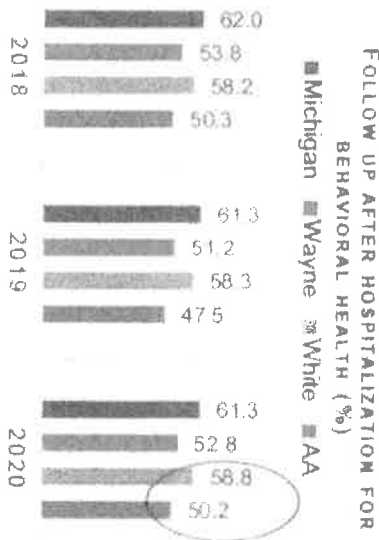
AA= African American, ED = Emergency Department, SUD = Substance Use Disorder, BH = Behavioral Health

BH and SUD Specific Disparity

AA= African American, ED = Emergency Department, SUD = Substance Use Disorder, BH = Behavioral Health



As for initiation and engagement for alcohol and SUD treatment, African Americans show a significant disparity in comparison to White persons. In 2020, the gap was -8.7 percentage points.



There were disparities in follow-up between African Americans and Whites after hospitalization for Behavioral Health episodes in 2018-2020. The gap in 2020 was equal to -8.5 percentage points.

Project Team

These efforts are focused on a year-long process that lays groundwork and guides the implementation of community-informed solutions.

The implementation phase of this project may begin as early as November 2022, with implementation plans due near the end of the planning year.



Judy Davis Karra Thomas



Dwight Vaughter



Dr. Karla Mitchell



Janet Ray



Jennifer Sulik

Project Timeline

Aug, 2021

Project Kickoff

Nov. 2021

Discovery Plan &
Data Design

Feb. 2022

Discovery Plan
Development

April 2022

Assessment &
Evaluation

June 2022

Sustainability Plan
Development

Aug. 2022

Implementation
Proposal

Data Collection Status

Campaign Summary

Name: CLASS - SHAR

From/Brand: MI Health Endowment Fund

Headline: SHAR/CLASS Racial Disparity Project

Broadcast Date: 01/06/2022

Date:

Audience: 98,000

ID: 1521446

Views: 17,403

Clicks: 1,066

View %: 17.76%

Click %: 1.09%

Campaign Creative

Racial Disparities in Behavioral Health

Why are African-Americans 20x more likely to return for follow-up care?

SHAR (Shaping Lives and Saving Selves) have partnered to lead a one-of-a-kind study and training program to address the needs of African-Americans who are 20x more likely to return for follow-up care.

SHAR

CLASS

This research often is designed to answer the question of why there are disparities in health care. We are looking for solutions to address the needs of African-American residents who have not received the same level of care and financial health as their white counterparts. We are looking for solutions that help us get the answers we need in order to create a solution.

100 GEN CARD

It's about the care you get. It's about the care you need. It's about the care you deserve. It's about the care you want. It's about the care you need. It's about the care you deserve. It's about the care you want.

2022

RACIAL
DISPARITIES



1,282

Surveys completed. 2,000 Surveys Targeted

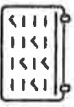
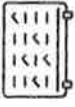


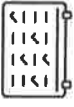
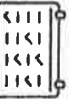
Next Steps.....

- Focus Group
- Interviews

Data Collection
Status

2022

Project Status

Aug 2021		Project Design	◆◆◆◆	Data design complete
Nov 2021		Data Collection	◆◆◆◆	Surveys on target Focus Groups/Interviews Pending
Feb 2022		Discovery Plan	◆◆◆◆	Data reporting / plan design pending
Apr 2022		Data Analysis	◆◆◆◆	Planned, on target
Jun 2022		Sustainability	◆◆◆◆	Planned, on target
Aug 2022		Reporting	◆◆◆◆	Planned, on target

Contact Information

Dwight Vaughter

SHAR, Inc

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Detroit, Michigan 48208

(313) 894-8444

www.sharinc.org



Dr. Karla Mitchell

C.L.A.S.S.

22000 Grand River #200

Detroit, Michigan 48219

(313) 412-2160

www.classagency.org



Thank You

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 19-62R2 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 1/19/2022

Name of Provider: Pyratech Security Systems Inc

Contract Title: Pyratech Security

Address where services are provided: 'None'

Presented to Finance Committee at its meeting on: 1/5/2022

Proposed Contract Term: 2/1/2022 to 1/31/2023

Amount of Contract: \$ 642,977.00 Previous Fiscal Year: \$ 480,050.00

Program Type: Continuation

Projected Number Served- Year 1: 0 Persons Served (previous fiscal year): 0

Date Contract First Initiated: 2/1/2019

Provider Impaneled (Y/N)? N

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

This board action is requesting the approval to exercise the one-year extension option from February 1, 2022 through January 31, 2023 for an amount not to exceed \$162,927 with Pyratech Security Systems. Pyratech provides physical security at DWIHN buildings. The contract was originally procured through the IFB process and issued for a 3-year contract with an one year extension option.

The total contract amount will not to exceed \$642,977.

Outstanding Quality Issues (Y/N)? N If yes, please describe:

Source of Funds: Multiple

Fee for Service (Y/N): N

Revenue	FY 22/23	Annualized
Multiple	\$ 642,977.00	\$ 642,977.00
	\$ 0.00	\$ 0.00

Total Revenue	\$ 642,977.00	\$ 642,977.00
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Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64922.817040.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Chief Executive Officer

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Eric Doeh

Stacie Durant

Signed: Thursday, December 16, 2021

Signed: Thursday, December 16, 2021

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19th day of January, 2022

- Approved
- Rejected
- Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature Lillian M. Blackshue
Board Liaison

Date 1/19/2022

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 20-49R2 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 1/19/2022

Name of Provider: Neighborhood Serv. Organizatio

Contract Title: OBRA/PASARR Services

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 1/12/2022

Proposed Contract Term: 4/1/2022 to 3/31/2023

Amount of Contract: \$ 6,687,360.00 Previous Fiscal Year: \$ 4,516,480.00

Program Type: Continuation

Projected Number Served- Year 1: 579 Persons Served (previous fiscal year): 1111

Date Contract First Initiated: 10/1/2015

Provider Impaneled (Y/N)? Y

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

This board action is requesting the approval of an one year contract extension for an estimated amount of \$2,229,120. This action would extend the OBRA/PASARR contract with Neighborhood Services Organization for one additional year commencing on April 01, 2022 through March 31, 2023. The cost of the one year extension is \$2,229,120; thus increasing the total cost of the contract to \$6,687,360.

Outstanding Quality Issues (Y/N)? Y If yes, please describe:

June 2018 MDHHS placed NSO on a corrective action plan for issues regarding the quality of assessments submitted.

Source of Funds: Other

Fee for Service (Y/N): Y

Revenue	FY 22/23	Annualized
---------	----------	------------

Board Action #: 20-49R2

Federal grant	\$ 6,687,360.00	\$ 6,687,360.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 6,687,360.00	\$ 6,687,360.00

Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64933.826155.02626

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Chief Executive Officer

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Eric Doeh

Stacie Durant

Signed: Wednesday, December 22, 2021

Signed: Wednesday, December 22, 2021

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19th day of January, 2022

Approved

Rejected

Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature William M. Blackshue
Board Liaison

Date 1/19/2022

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 20-54R(4) Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 1/19/2022

Name of Provider: Barr, Joseph J.

Contract Title: HEDIS/NCQA Professional Consultant Services

Address where services are provided: 'None'

Presented to Finance Committee at its meeting on: 1/5/2022

Proposed Contract Term: 1/5/2022 to 6/30/2022

Amount of Contract: \$ 187,940.00 Previous Fiscal Year: \$ 187,940.00

Program Type: Continuation

Projected Number Served- Year 1: 0 Persons Served (previous fiscal year): 0

Date Contract First Initiated: 8/19/2019

Provider Impaneled (Y/N)? N

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

This Board Action is to request a term extension only of contractual Professional IT services for the period from 1/1/22 - 6/30/22. The funds allocated are sufficient to support the additional six months of the contract.

We would like Mr. Barr to continue assisting on a part-time basis with helping us generate HEDIS measures which is one of the prime requirements from data standpoint when it comes to both state reporting and NCQA compliance. Mr Barr has been instrumental in developing Risk Matrix and is continuing to help us extend the functionality and rollout to entire network.

Outstanding Quality Issues (Y/N)? N If yes, please describe:

Source of Funds: Multiple

Fee for Service (Y/N): Y

Revenue	FY 21/22	Annualized
Multiple	\$ 187,940.00	\$ 187,940.00

	\$ 0.00	\$ 0.00
Total Revenue	\$ 187,940.00	\$ 187,940.00

Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64915.817000.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Chief Executive Officer

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Eric Doeh

Stacie Durant

Signed: Wednesday, December 8, 2021

Signed: Friday, December 3, 2021

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19th day of January, 2022

- Approved
- Rejected
- Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature William M. Blackshue
Board Liaison

Date 1/19/2022

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-13R3 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 1/19/2022

Name of Provider: Wayne County

Contract Title: Department of Health, Human & Veterans Services

Address where services are provided: 500 Griswold Street #10, Detroit, Michigan 48226

Presented to Program Compliance Committee at its meeting on: 1/12/2022

Proposed Contract Term: 10/1/2020 to 9/30/2021

Amount of Contract: \$ 11,190,000.00 Previous Fiscal Year: \$ 14,050,000.00

Program Type: Continuation

Projected Number Served- Year 1: 3,060 Persons Served (previous fiscal year): 4,375

Date Contract First Initiated: 1/1/1998

Provider Impaneled (Y/N)? Y

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

This board action is requesting the approval to amend the contract with The Third Circuit Court (3CC), Clinic for Child Study and increase funding by \$940,000 in general fund dollars for the fiscal year ended September 30, 2021. The contract amendment will include the Youth Assessment Screening Instrument (YASI). This tool is used to predict risk for future court involvement, mental health concerns, adverse childhood experiences (ACES) items as well as youth strengths. The assessments will provide an early opportunity to determine the juvenile's strengths, the risk of recidivism, as well as any needs for mental health and/or substance use treatment. At its conclusion, the YASI assessment will assist with treatment and dispositional recommendations to the judge. Thus, approval would bring the total amount of the 3CC allocation to \$1,540,000.

Outstanding Quality Issues (Y/N)? N If yes, please describe:

Source of Funds: General Fund

Fee for Service (Y/N): N

Board Action #: 21-13R3

Revenue	FY 20/21	Annualized
Medicaid	\$ 4,000,000.00	\$ 4,000,000.00
General Fund	\$ 7,190,000.00	\$ 7,190,000.00
Total Revenue	\$ 11,190,000.00	\$ 11,190,000.00

Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Chief Executive Officer

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Eric Doeh

Stacie Durant

Signed: Wednesday, December 15, 2021

Signed: Tuesday, December 14, 2021

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-69 R Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 1/19/2022

Name of Provider: Children's Center of Wayne County Inc.

Contract Title: DWIHN Proposed General Fund Program Allocation

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 1/12/2022

Proposed Contract Term: 10/1/2020 to 9/30/2021

Amount of Contract: \$ 3,800,000.00 Previous Fiscal Year: \$

Program Type: Modification

Projected Number Served- Year 1: 5,000 Persons Served (previous fiscal year): 5000

Date Contract First Initiated: 5/25/2021

Provider Impaneled (Y/N)? Y

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

This board action is requesting the approval to amend the initial board action and include The Children's Center (TCC) Foster Care program. The Children's Center will provide non-Medicaid billable behavioral health services for children and young adults in an/or transitioning out of the foster care system.

No additional funds are requested as funds allocated to the other programs in the initial board action will be reallocated to the foster care program.

In addition, this board action is include the Wayne Health as the provider for the Mobile outreach unit. The initial board action did not specifically reference the provider.

DWIHN is requesting that funds can be re-allocated between these specific programs without board approval to reduce the risk of lapsing funds to MDHHS.

Outstanding Quality Issues (Y/N)? N If yes, please describe:

Source of Funds: General Fund

Fee for Service (Y/N): N

Revenue	FY 20/21	Annualized
General Funds	\$ 3,800,000.00	\$ 3,800,000.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 3,800,000.00	\$ 3,800,000.00

Recommendation for contract (Continue/Modify/Discontinue): Modify

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)? Y

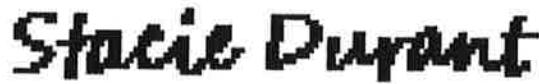
Approved for Submittal to Board:

Eric Doeh, Chief Executive Officer

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Signed: Monday, December 20, 2021

Signed: Monday, December 20, 2021

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19th day of January, 2022

Approved

Rejected

Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature William M. Blackshue
Board Liaison

Date 1/19/2022

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 22-12 R1 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 1/19/2022

Name of Provider: Detroit Wayne Integrated Health Network

Contract Title: FY 2021-2022 Operating Budget

Address where services are provided: 'None'

Presented to Finance Committee at its meeting on: 1/5/2022

Proposed Contract Term: 10/1/2021 to 9/30/2022

Amount of Contract: \$ 949,691,682.00 Previous Fiscal Year: \$ 927,640,119.00

Program Type: Modification

Projected Number Served- Year 1: 70,000 Persons Served (previous fiscal year): 70000

Date Contract First Initiated: 10/1/2021

Provider Impaneled (Y/N)?

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

This board action is requesting the approval to amend the FY 2022 Operating Budget. The amendment certifies/decertifies additional revenue of \$42,513,062 (net) as follows:

1. BA #22-35-001:

Certify Federal revenue of \$11,476,743 per a Milliman analysis of the PIHP Capitation Rates to determine the Certified Community Behavioral Health Clinic ("CCBHC") share of the rates (aka Supplemental). The additional revenue will be passed through to The Guidance Center and based on actual expenses incurred, MDHHS will cost settle the contract at year end.

2. BA #22-35-002:

Certify Medicaid/Healthy MI revenue of \$40,024,683 per Milliman's projection of the \$2.35/hr. Direct Care Worker wage hazard pay approved by Governor Whitmer in the FY22 State budget.

3. BA#22-35-002:

De-certify State General Fund revenue of \$8,988,364 per the FY22 Allocation to DWIHN from MDHHS.

4. In addition, the budget amendment includes increasing the budget for three (3) newly created positions at \$313,650 related to the hospital liaison team to handle crisis members in the hospitals; and three (3) newly created performance monitor positions at \$292,740. The three additional hospital liaison staff will assist in reducing hospital costs and divert members to lower levels of care. The three additional performance monitors will assist in ensuring DWIHN tracks and reviews key performance indicators requirements in the PIHP contract. The budgeted reserves were reduced by a like amount.

The revised FY 2022 operating budget, in the amount of \$949,691,682, includes revenues of \$21,460,905 (State General Funds); \$735,553,673 (Medicaid, DHS Incentive, Medicaid-Autism, Children's/SED Waiver, HAB); \$9,886,123 (MI Health Link); \$118,163,662 (Healthy MI - Mental Health and Substance Abuse); \$17,686,447 (Wayne County Local Match Funds); \$4,040,539 (PA2 Funds); \$4,988,983 (State Grant portion of OBRA, SUD); \$36,508,700 (Federal Grants/Federal Block Grants/SUD); \$362,650 (Local Grant Revenue); \$1,000,000 (Interest Income); and \$40,000 (Misc Revenue).

Outstanding Quality Issues (Y/N)? N If yes, please describe:

Source of Funds: Multiple

Fee for Service (Y/N): Y

Revenue	FY 21/22	Annualized
MULTIPLE	\$ 949,691,682.00	\$ 949,691,682.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 949,691,682.00	\$ 949,691,682.00

Recommendation for contract (Continue/Modify/Discontinue): Modify

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)? N

Approved for Submittal to Board:

Eric Doeh, Chief Executive Officer

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Eric Doeh

Page 27 of 77
Stacie Durant

Board Action #: 22-12 R1

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19th day of January, 2022

- Approved
- Rejected
- Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature Allison M. Blackshue
Board Liaison

Date 1/19/2022

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 22-35 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 1/19/2022

Name of Provider: Westcomm Inc

Contract Title: Westcomm Social Media Management

Address where services are provided: 'None'

Presented to Finance Committee at its meeting on: 1/5/2022

Proposed Contract Term: 2/1/2022 to 9/30/2022

Amount of Contract: \$ 55,600.00 Previous Fiscal Year: \$ 0.00

Program Type: New

Projected Number Served- Year 1: 100,000,000 Persons Served (previous fiscal year): 0

Date Contract First Initiated: 1/19/2022

Provider Impaneled (Y/N)?

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

The Communications Department would like to enter into a contract agreement with Westcomm, a social media management company. The contract would begin February 1, 2022 through September 30, 2022. The total cost of the eight month contract is \$55,600.

Westcomm was the second qualified bidder on an RFP issued in July 2020. The initial vendor selected was Equal Sign Partners however their contract was canceled due to the lack of disclosure of the use of a third party sub-contractor.

Outstanding Quality Issues (Y/N)? N If yes, please describe:

Source of Funds: Multiple

Fee for Service (Y/N): N

Revenue	FY 21/22	Annualized
Multiple	\$ 55,600.00	\$ 55,600.00

	\$ 0.00	\$ 0.00
Total Revenue	\$ 55,600.00	\$ 55,600.00

Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64910.901000.00000

In Budget (Y/N)?

Approved for Submittal to Board:

Eric Doeh, Chief Executive Officer

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Eric Doeh

Dhanetta Brown for Stacie Durant

Signed: Thursday, January 13, 2022

Signed: Thursday, January 13, 2022

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19th day of January, 2022

- Approved
- Rejected
- Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature Allison M. Blackshue
Board Liaison

Date 1/19/2022

DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 22-41 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 1/19/2022

Name of Provider: Starfish Family Services (MH)

Contract Title: Michigan Child Collaborative Care Program (MC3) and the Behavioral Health Consultant

Address where services are provided: 3000 Hively Road Inkster Mi 48141

Presented to Program Compliance Committee at its meeting on: 1/12/2022

Proposed Contract Term: 10/1/2021 to 9/30/2022

Amount of Contract: \$ 79,922.00 Previous Fiscal Year: \$ 75,488.00

Program Type: Continuation

Projected Number Served- Year 1: 860 Persons Served (previous fiscal year): 824

Date Contract First Initiated: 6/1/2015

Provider Impaneled (Y/N)?

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

This board action is requesting the approval of a one year contract for an amount not to exceed \$79,922. The Michigan Child Collaborative Care Program and Behavioral Health Consultant Project provides behavioral health consultation for local primary care providers with MC3 child, adolescent and prenatal psychiatrists. Starfish Family Services provides local oversight, in collaboration with MC3 program, of the Behavioral Health Consultant as they implement MC3 in Wayne County as well as work in concert with other regional Behavioral Health Consultants. Note the State of Michigan identified the agency to provide the Behavioral Health Consultant.

Services include:

- Regional Outreach to eligible providers to ensure utilization of the MC3 program;
- Linkage between Primary Care Providers and MC3 Psychiatrist;
- Coordination of care for children, adolescents, and perinatal women;
- Behavioral Health Consultant provides consultation services in designated primary care site; and
- Collection of required data and local utilization to facilitate the project evaluation.

Outstanding Quality Issues (Y/N)? N If yes, please describe:

Source of Funds: Other

Fee for Service (Y/N): N

Revenue	FY 21/22	Annualized
Federal grant	\$ 79,922.00	\$ 79,922.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 79,922.00	\$ 79,922.00

Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64933.822601.01021

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Chief Executive Officer

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Eric Doeh

Stacie Durant

Signed: Wednesday, December 1, 2021

Signed: Wednesday, December 1, 2021

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19th day of January, 2022

Approved

Rejected

Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature William M. Blackshue
Board Liaison

Date 1/19/2022

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: BA #22-42 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 1/19/2022

Name of Provider: Elmhurst Home Inc.

Contract Title: Parenting Post-Partum Women Pilot

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 1/12/2022

Proposed Contract Term: 10/1/2021 to 9/30/2022

Amount of Contract: \$ 267,302.00 Previous Fiscal Year: \$ 0.00

Program Type: New

Projected Number Served- Year 1: 100 Persons Served (previous fiscal year): 0

Date Contract First Initiated: 10/1/2021

Provider Impaneled (Y/N)?

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

The SUD is requesting approval of a one-year contract of the Parenting Post-Partum Women Pilot that has been awarded by MDHHS for \$267,302.00, in which \$223,456.00 will be allocated for treatment services, \$18,182.00 is for care coordination, and 1,364.00 is for GPRA and administrative cost total \$24,300.00. DWIHN, as the managed care organization, DWIHN will recruit Health Home Partners into their developing Opioid Health Home network to implement EBPs and support the needs of pregnant and parenting women and their families. Health Home Partners will include a family medical clinic, Opioid Treatment Programs. They will also provide care coordination and case management to help ensure that all the family's needs are met. The two providers selected to implement this program are Central City Integrated Health Network and Elmhurst/Naomi's Nest. The state of Michigan selected Central City Integrated Health, and DWINN selected Elmhurst /Naomi's Nest based on the population served.

The Authority has the discretion to allocate the funds among the providers based upon utilization as long as the total amount of the board action (i.e. contract amount) does not increase. As a result, budget may be decreased/increased among sub-recipients as long as overall budget does not change.

Providers are: **Elmhurst Home Inc** (\$121,501) and Central City Integrated Health (\$121,501).

Outstanding Quality Issues (Y/N)? N If yes, please describe:

Source of Funds: Block Grant

Fee for Service (Y/N): Y

Revenue	FY 21/22	Annualized
Federal Grant	\$ 267,302.00	\$ 267,302.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 267,302.00	\$ 267,302.00

Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical):

ACCOUNT NUMBER: 64932.826608.00000

In Budget (Y/N)?

Approved for Submittal to Board:

Eric Doeh, Chief Executive Officer

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Eric Doeh

Stacie Durant

Signed: Friday, December 17, 2021

Signed: Friday, December 17, 2021

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19th day of January, 2022

- Approved
- Rejected
- Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature William M. Blackshue
Board Liaison

Date 1/19/2022

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 22-43 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 1/19/2022

Name of Provider: WS University Physicians Group

Contract Title: Wayne Health-Mobile Outreach Clinic

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 1/12/2022

Proposed Contract Term: 10/1/2021 to 9/30/2022

Amount of Contract: \$ 565,000.00 Previous Fiscal Year: \$ 672,000.00

Program Type: New

Projected Number Served- Year 1: 2,000 Persons Served (previous fiscal year): N/A

Date Contract First Initiated: 10/1/2020

Provider Impaneled (Y/N)? Y

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

This board action is requesting the approval of a one year contract for the fiscal year ended September 30, 2022 for an amount not to exceed \$565,000 with WS University Physicians Group, dba Wayne Health (WH). Wayne Health is a mobile outreach clinic partnering with DWIHN to provide physical health screening, COVID Testing, COVID vaccinations and behavioral health screening.

WH shall provide the qualified professionals, vehicles, equipment, and materials necessary to provide the Primary care services including treatment, preventative and outreach services on a schedule and at various locations throughout Wayne County.

The current plan is to have these events based upon a set schedule where DWIHN Behavioral Health team will accompany WH Primary care team to provide the services up to 2 days a week.

Outstanding Quality Issues (Y/N)? N If yes, please describe:

Source of Funds: General Fund

Fee for Service (Y/N): N

Revenue	FY 21/22	Annualized
State General Fund	\$ 565,000.00	\$ 565,000.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 565,000.00	\$ 565,000.00

Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64931.827206.06300

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Chief Executive Officer

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Eric Doeh

Stacie Durant

Signed: Tuesday, January 4, 2022

Signed: Tuesday, January 4, 2022

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19th day of January, 2022

- Approved
- Rejected
- Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature William Blackshue
Board Liaison

Date 1/19/2022

DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 22-44 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 1/19/2022

Name of Provider: Development Centers Inc.

Contract Title: Infant and Early Childhood Mental Health Consultation in Home Visiting(IECMHC-HV)

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 1/12/2022

Proposed Contract Term: 10/1/2021 to 9/30/2022

Amount of Contract: \$ 53,913.00 Previous Fiscal Year: \$ 9,693.00

Program Type: Continuation

Projected Number Served- Year 1: 50 Persons Served (previous fiscal year): 0

Date Contract First Initiated: 9/1/2021

Provider Impaneled (Y/N)? Y

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

This board action is requesting the approval of a one year contract for the fiscal year ended September 30, 2022 in the amount not to exceed \$53,913. Infant and Early Childhood Mental Health Consultation (IECMHC) is a prevention based, indirect intervention that teams a mental health professional with home visiting programs to improve the social, emotional and behavioral health of children. IECMHC helps home visitors understand the social and emotional development of children; identifying and addressing the mental health needs of young children and their parents; enhancing strategies with specific issues or cases; identifying appropriate referral resources; and increasing the capacity to link families to needed mental health services.

Outstanding Quality Issues (Y/N)? N If yes, please describe:

Source of Funds: Block Grant

Fee for Service (Y/N): Y

Revenue	FY 21/22	Annualized
Federal Grant	\$ 53,913.00	\$ 53,913.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 53,913.00	\$ 53,913.00

Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64933.822608.00917

In Budget (Y/N)?

Approved for Submittal to Board:

Eric Doeh, Chief Executive Officer

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Eric Doeh

Stacie Durant

Signed: Friday, December 17, 2021

Signed: Wednesday, December 15, 2021

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19th day of January, 2022

- Approved
- Rejected
- Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature William M. Blackshue
Board Liaison

Date 1/19/2022

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 22-45 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 1/19/2022

Name of Provider: Outfront Media Inc., Michigan Chronicle Publishing Co., International Outdoor, Inc., Radio One, Scripps Media, Inc., Cumulus Media, Inc., Graham Media Group, Latino Press, Inc, The Arab American News, Hamtramck Review, WJBK TV Fox 2 Detroit, Ask the Messengers Inc, Brooklyn Outdoor, LLC, Comcast Holdings Corporations, Detroit Free Press Inc

Contract Title: Special Media Outreach Initiative

Address where services are provided: None'

Presented to Finance Committee at its meeting on: 1/5/2022

Proposed Contract Term: 1/1/2022 to 9/30/2022

Amount of Contract: \$ 30,000.00 Previous Fiscal Year: \$ 0.00

Program Type: New

Projected Number Served- Year 1: 0 Persons Served (previous fiscal year): 0

Date Contract First Initiated: 1/1/2022

Provider Impaneled (Y/N)? N

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

This board action is requesting the approval of a joint request between the Communications, SUD and Workforce Training and Development departments for an amount not to exceed \$30,000 for additional media services that would exceed the amount of approved FY'21-22 contracts. Approval of this board action would allow Communications to amend existing contracts should a special initiative arise with one of our media partners throughout FY '21-22.

The funding for this Board Action would come from three different departments: Communications, SUD and Workforce Training and Development. The Communications department would manage the Board Action should a special media opportunity arise throughout the year which may cause the current FY '21-22 contracts to exceed the approved amounts. A special Board Action in the amount of \$10,000 is being considered by the SUD Oversight Policy Advisory Board for the use of PA2 funding. This board action is contingent upon that approval.

The list of vendors are attached.

Outstanding Quality Issues (Y/N)? N If yes, please describe:

Source of Funds: Multiple

Fee for Service (Y/N): N

Revenue	FY 21/22	Annualized
Multiple	\$ 30,000.00	\$ 30,000.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 30,000.00	\$ 30,000.00

Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Chief Executive Officer

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Eric Doeh

Stacie Durant

Signed: Tuesday, December 14, 2021

Signed: Tuesday, December 14, 2021

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19th day of January, 2022

- Approved
- Rejected
- Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature William M. Blackshue
Board Liaison

Date 1/19/2022