



Detroit Wayne Integrated Health Network

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FULL BOARD/ANNUAL MEETING Wednesday, July 21, 2021 707 W. Milwaukee

(Virtual)

**Board Meeting 11:00 A.M. – 12:00 P.M.
Program 12:15 P.M.-**

AGENDA

- I. CALL TO ORDER**
- II. ROLL CALL**
- III. APPROVAL OF THE AGENDA**
- IV. MOMENT OF SILENCE**
- V. APPROVAL OF BOARD MINUTES** – Full Board Meeting – June 16, 2021
- VI. RECEIVE AND FILE** – Approved Finance Committee Minutes – June 2, 2021
Approved Program Compliance Committee Minutes – June 9, 2021
- VII. ANNOUNCEMENTS**
 - A) Network Announcements
 - B) Board Member Announcements
- VIII. BOARD COMMITTEE REPORTS**
 - A) Board Chair Report
 - 1) Update Board Study Session – June 23, 2021
 - 2) Budget Hearing (Joint Finance and Program Compliance Meeting – August 4th)
 - 3) Update New Board Member Appointment – City of Detroit
 - 4) Community Mental Health Association of Michigan (CMHAM) 2021 Annual Fall Conference – Grand Traverse, Michigan (October 25th & 26th)
 - B) Executive Committee
 - C) Finance Committee
 - D) Program Compliance Committee
 - E) Recipient Rights Advisory Committee

Board of Directors

William T. Riley, III, Chairperson
Dorothy Burrell
Kevin McNamara

Angelo Glenn, Vice Chairperson
Lynne F. Carter, M.D.
Bernard Parker

Dora Brown, Treasurer
Michelle Jawad
Kenya Ruth

Dr. Cynthia Taueg, Secretary
Jonathan C. Kinloch

Eric W. Doeh, Interim President and CEO



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

X. AD HOC COMMITTEE REPORTS

- A) Policy/Bylaw Committee
 - 1) Good and Welfare Policy Revisions (Policy #2016-14)
 - 2) Board Standards of Conduct Revisions (Policy #2016-17)
 - 3) Board Policies (15 &16; 18-21; 23 & 24)
- B) CEO Search Committee

XI. INTERIM PRESIDENT AND CEO MONTHLY REPORT

XII. UNFINISHED BUSINESS

Staff Recommendations:

- A. BA #19-45 (Revised) – Jail Navigator – Thomas Pettus *(Program Compliance)*
- B. BA #21-23 (Revision 3) –Provider Network System – DWIHN Provider Network *(Program Compliance)*
- C. BA #21-60 (Revised) – Michigan Peer Review Organization (MPRO) *(Program Compliance)*

XIII. NEW BUSINESS

Staff Recommendations:

- A. BA #21-64 – COVID -19 Mental Health Block Grant Supplemental Funding *(Program Compliance)*
- B. BA #21-67 – WIT, Inc. *(Finance)*
- C. BA #21-71 – American Society of Employees, Inc. *(Finance)*
- D. BA #21-72 – Plante & Moran, PLLC *(Finance)*

XIV. REVIEW OF ACTION ITEMS

XV. 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).

XVI. ADJOURNMENT



**DETROIT WAYNE INTEGRATED HEALTH NETWORK
FULL BOARD MEETING
Meeting Minutes
Virtual Meeting
Wednesday, June 16, 2021
1:00 p.m.**

BOARD MEMBERS PRESENT

William T. Riley, III, Chair

Angelo Glenn, Vice Chair

Dora Brown, Treasurer

Dr. Cynthia Tauog, Secretary

Dorothy Burrell

Lynne F. Carter, M.D.

Michelle Jawad

Commissioner Jonathan C. Kinloch

Kevin McNamara

Bernard Parker

Kenya Ruth

BOARD MEMBERS EXCUSED: None

GUEST(S): Mr. Kevin Sendi, JD; MBA; President and CEO and Mr. Greg Sandi, Lead Communications & Community Relations & Business Development New Oakland Family Centers

CALL TO ORDER

The meeting was called to order at 1:02 p.m. by Board Chair, William T. Riley, III.

ROLL CALL

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

APPROVAL OF THE AGENDA

Mr. Riley, III, Board Chair, welcomed everyone to the meeting and called for a motion on the agenda.

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

MOMENT OF SILENCE

The Chair, Chief Riley, III 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 May 19, 2021 **It was moved by Commissioner Kinloch and supported by Mr. Glenn to accept the Full Board minutes of May 19, 2021 with any necessary corrections. Motion carried unanimously.**

RECEIVE AND FILE

The approved Finance Committee minutes from the meeting of May 5, 2021 and the approved Program Compliance Committee minutes meeting of May 12, 2021 were received and filed.

ANNOUNCEMENTS

Network Announcements

T. Devon, Director of Communications noted that DWIHN is a co-sponsor of a Men's Health Event; this is a two-day event and all are welcome to attend. Mr. Josh Landon, TV2 will be one of the keynote speakers. Registration information will be sent to Board members.

Board Announcements

Mr. Parker invited Board members to the Juneteenth event that will be held at the Barack Obama Academy on June 19th located at 10800 E. Canfield, Detroit, Michigan between St. Jean and Warren. The school will celebrate its 22nd Juneteenth event from 1:00 p.m. to 3:00 p.m. in the rear playground; there will be speakers, food and entertainment. He noted that is glad that others throughout the country is recognizing Juneteenth as a national holiday.

Commissioner Kinloch invited Board members to an Essential Worker's Day that is being held in conjunction with SEIU Healthcare Michigan, tomorrow, June 17th at Mission Point Nursing Home located 2102 Orleans Street in Detroit, Michigan from 9:30 a.m. to 12:00 p.m. Governor Whitmer will recognize nursing homes and frontline workers; her announcement will be made at 10:15 a.m.

Board Chair Riley, III noted that the full Senate has voted to make Juneteenth a national holiday and it will be important to see what the House will do. It would be great if Juneteenth was made a national holiday. He encouraged board members to try to attend the events if their schedules permitted.

For the record, it was noted that Board member Ruth joined the call.

BOARD COMMITTEE REPORTS

Board Chair Report

Chief Riley, III gave a verbal report. The Board Executive Committee met on Monday, June 14th. It was reported the Board Study Session is scheduled for June 23, 2021 from 9:00 a.m. to 12:00 p.m. and there were several topics that would be covered including Integration – Behavioral Health Homes and Opioid Health Homes; System Transformation; the Crisis Assessment Center and DWIHN's financial health and stability. It was reported that the Annual meeting would be virtual and held on Wednesday, July 21, 2021 with the Full Board meeting beginning at 11:00 a.m. The City of Detroit has not submitted a recommendation to the Wayne County Commission for their appointment to the Board. A Budget Hearing, which is a joint meeting with the Finance and Program Compliance Committee will be held on Wednesday, August 4th and will run a little longer with a tentative ending time of 5:00 p.m. The purpose of the Hearing is to review the budget for the upcoming fiscal year.

Executive Committee

The Chair, Mr. Riley, III gave a verbal report. It was reported that Board Action #21-68 Crisis Center Financing was presented at Executive Committee and was on the agenda. CFO Durant noted that a term sheet had been received from Flagstar Bank for 75% of the financing for the Crisis Center construction. It was reported that BA #21-70 Crisis Center General Contractor RFP was also taken up at the Executive Committee. B. Blackwell reported and noted that five (5) proposals had been received; one was deemed non-responsive. The DeMaria building company had been selected; the contract is for 18 months and is in the amount of \$14,000,000 and is also on the agenda to be presented later. Commissioner Kinloch noted that he would not be supporting either board action as there had been issues raised by his constituents. He gave an overview of the types of concerns that had been presented. Mr. Doeh also gave an overview of the issues which included zoning as it pertains to the expansion of the parking lot and noted that was the only issue; however DWIHN would be having Town Halls to address the concerns of individuals in the area.

Finance Committee

Ms. Dora Brown, Treasurer and Chair of the Finance Committee, gave a verbal report of the highlights from the Finance Committee that met virtually on Wednesday, June 2, 2021. It was reported that DWIHN has approximately \$5 million dollars in additional funds and the following programs; Wayne

County Jails; the Summer Youth Program; the purchase of laptops and tablets for telehealth; Black Family Development and Starfish have been identified to receive funds. DWIHN would like to move forward with the funds as there is a September 30th deadline and we did not want to return funds to the state. It was also noted the CEO and Board Chair would work to reallocate funds if necessary. These funds are available due to the pandemic. The committee also discussed the FY 2021/2022 budget timeline and the budget will be discussed at the Budget Hearing which is the joint Finance and Program Compliance Committee meeting scheduled on August 4th. It was reported that DWIHN has submitted a financial stability letter to thirteen (13) Skill Building providers requiring certain data by May 31st in an effort to evaluate the amount of financial assistance that DWIHN will provide immediately. Skill building providers have incurred over 75% loss in revenue post pandemic. This immediate assistance is necessary to ensure the providers remain in business to serve our consumers once the pandemic subsides. Finance and Children's division are working on developing a payment incentive model for Children providers. We anticipate the framework will be developed, provider review, and MDHHS approval, in time for an October 1, 2021 implementation. Finances remain stable and should continue to remain stable throughout the year.

Program Compliance Committee

Dr. Carter, Committee Chair gave a verbal report. It was reported the committee met virtually on Wednesday, June 9, 2021. It was noted that quarterly reports were received from Children's Initiative; Clinical Practice Improvement; Customer Service; and Integrated Care. The Strategic Plan Quality Pillar was also received and filed. A report was received from the Corporate Compliance Officer that the Annual Home and Community Based Waiver Program had four items that needed to be corrected; a Plan of Correction had been submitted and since that time all items have been remedied and we have passed the annual review. It was also reported that the Quality Committee has investigated what appears to be some incorrect billing with one of our Providers; an update will be provided at the next meeting. There were several Board actions that were considered and moved to Full Board for approval – Board Action #21-13 (Revised) Wayne County Jail; Board Action #21-32 (Revision 4) Supplemental Block Grant Funding – DWIHN Provider Network; BA #21-33 (Revision 3) Electronic Nicotine Delivery System Vendor Education – The Youth Connection, Inc; Board Action #21-36 (Revised) Independent Evaluator for Autism Spectrum Disorder (ASD) – Children's Center of Wayne County, Inc. and Board Action #21-69 DWIHN Proposed General Fund Program Allocation-Black Family Development all are on the agenda for discussion later on the agenda.

It was moved by Commissioner Kinloch and supported by Ms. Ruth to accept the report of the Program Compliance Committee. There was no further discussion. The motion carried unanimously.

Recipient Rights Advisory Committee

Ms. Ruth, Chair of the Recipient Rights Advisory Committee (RRAC) noted there was no report; however, she expressed her appreciation to Ms. McAlister and her team for their hard work. Commissioner Kinloch noted that he has completed his Recipient Rights training and that the training was informative and provided a wealth of information. Ms. Ruth expressed her appreciation to the Commissioner for changing his schedule to accommodate the training.

SUBSTANCE USE DISORDER OVERSIGHT (SUD) POLICY BOARD REPORT

Mr. Glenn, Chair of the Substance Use Disorder (SUD) Oversight Policy Board noted there was no report as the SUD Oversight Policy Board was scheduled to meet on June 21st, 2021.

AD HOC COMMITTEE REPORTS

Policy/Bylaws Committee

Dr. Taueg reported the Policy/Bylaw Committee met on Tuesday, June 8, 2021. A verbal report was provided. It was reported the Committee had a robust discussion and there were several policies and Bylaws that were moved to Full Board for approval. There were changes regarding our ability to have electronic meetings, the current Open Meetings Act (OMA) allows for electronic participation in meetings when there

is a local emergency, such as we have now with COVID-19. When there is no local emergency, the OMA remains silent and we may need to meet in person, although the local emergency provision is in place now until June 30th; it can be extended to December 31st dependent upon what the local authorities determine and if the emergency still exists. An update was provided by Deputy Counsel Turner on the current status. It was reported that there was no further information as to whether or not the local state of emergency would be extended for the City of Detroit. There was a possibility that the order may be extended for Wayne County, but in order for this body to continue to meet virtually the local state of emergency would need to be extended by the health department in the City of Detroit. It was also noted that the OMA allows for electronic meetings to accommodate a member that is in active military duty or to accommodate a member to attend that is absent due to a medical emergency at least through December of 2021; after December 2021 the only provision that remains would be accommodate a member that is absent due to military duty so all of the changes to the bylaws that have been made use some pretty broad and general language. **The Committee recommends approval of the changes to the Bylaws.**

The Committee Chair Dr. Taueg noted the DWHIN Fund Balance Policy was reviewed and best practices recommend that we have an unrestricted fund balance of 10% of the budget or two months operating expense whichever is less. It was noted this an unrestricted reserve; it does not impact any current programs and we are not cutting any programs in order for us to achieve this goal. **The Committee recommends approval of this policy.**

The committee discussed the Board Self-Assessment Tool which is part of Policy #2016-11; a comment section was added to each question so that Board members may make notes or statements as they deem necessary. The Board Self-Assessment was deferred for 2021; however, there will be a board self-assessment conducted in 2022. **The Committee recommends approval of this policy.**

The committee discussed the Suspension and Debarment Policy which is Policy #2016-22; the policy was updated to reflect the separation of the Compliance Officer and the Purchasing Officer; formerly there was one person that performed both functions. This was more of an editorial exercise to clean up the policy to make it consistent with our current practices. **The Committee recommends approval of this policy.**

The committee discussed Board Policies 1 -5; 7 – 10; 12 & 13; there were updates to reflect the new name of the agency and other small non-substantive changes. **The Committee recommends approval of all of the aforementioned policies.**

The Committee Chair noted the Media Policy –#2016-06 will come back to the next meeting of the Policy Committee for review.

The Board Chair, Mr. Riley, III called for a motion to approve the DWIHN Board Bylaws as recommended by the Policy Committee. Deputy Counsel Turner noted that there would need to be a vote of at least 2/3 to amend the Bylaws. **Motion:** It was moved by Mr. Glenn and supported by Ms. Brown to approve Article VII Section 6-Telephonic Participation at Committee Meetings; Article IX – Meetings of the Network Board; Section 1- Open Meetings Act; Section 3(a) Telephonic Participation at Full Board Meetings; Section 4 – Special Meetings of the Board; and Section 4(d) Special Meetings by Telephone. A roll call vote was requested by Commissioner Kinloch and taken by the Dr. Taueg; Board Secretary. **The motion carried with Ms. Brown; Dr. Carter; Mr. Glenn; Ms. Jawad; Commissioner Kinloch; Mr. Parker; Chief Riley, III; Dr. Taueg; and Mr. McNamara voting Yea.**

The Chair, Mr. Riley, III called for a motion to approve the DWIHN Board Policies that were recommended for approval by the Policy/Bylaw Committee. **Motion:** It was moved by Mr. Glenn and supported by Ms. Ruth to approve the policies as recommended by the Policy/Bylaw Committee. The policies recommended for approval were the Attendance Policy –#2016-01; Stipend Policy – 2016-#02; Board Action and

Resolution Policy #2016-03; Issues/Advocacy Resolution Policy #2016-04; Board Member Travel Policy #2016-05; Annual Board Calendar-Policy – #2016-07; Board Development Policy –#2016-08; Board Operational Communications Policy- #2016-09; Board Portal and Posting Schedule –#2016-10; Board Self-Assessment Policy #2016-11; Board Conflict of Interest Policy- #2016-12; Delegation of Authority Policy-#2016-13; Suspension and Debarment Policy-2016-22 and the DWIHN Fund Balance Policy. **Motion carried.**

CEO Search Committee

The Board Chair, Mr. Riley, III requested an update on the CEO Search from Mr. J. Connally, Director of Human Resources, DWIHN. A verbal update was provided. It was noted that the CEO Search Committee met with Ms. Blair Miller of the Hunter Group to discuss the next steps in the CEO process. The position was posted on May 28th; a formal timeline was established with the finalization of the offer being made by the 3rd week of August. There have been over 30 submissions to the posting. It was decided at the Board Executive Committee meeting that a CEO Search Committee meeting would be scheduled for the first week of July.

The reports of the Policy/Bylaw Committee and CEO Search Committee were noted as being received and filed.

DETROIT WAYNE PROPOSED GENERAL FUND PROGRAM

Mr. E. Doeh, Interim CEO, DWIHN provided a verbal report. It was reported this matter was brought before the Finance Committee meeting as a proposal in terms of general fund dollars in an amount of \$5 million that we are proposing to allocate to a number of programs and initiatives such as the Summer Youth Program offering an additional \$200,000 to make sure that we sustain that program to its prior funding amount before the reduction in general fund. There were also some dollars being put forth for laptops in technology for telehealth to our residential communities. In terms of expanding our pilot program with the city of Detroit and DPD to other cities and police agencies there was \$500,000 towards the list of those cities that are contained in this packet. Mobile health services will provide assessments and physical health services in communities throughout Wayne County; there are some children providers that will also receive additional funding. It was noted the dollars must be spent within a designated period and if they are not spent before that period we can reallocate those funds. Mr. Doeh noted that communication with the Board Chair will take place when funding may not have or cannot be spent so that DWIHN can allocate it to programs and lines of business.

BEHAVIORAL HEALTH RESOLUTION #1 FY 2021-2022

Ms. B. Blackwell, Chief of Staff reported. A copy of the Resolution was included in the Board packet and was discussed at the Executive Committee. It was noted the resolution has been provided to our providers and County Commissioners. It was shared before the Commission Behavioral Health Task Force and it encapsulates the perspective of DWIHN and our thoughts and beliefs behind a lot of the integrated health proposals and bills that have been circulating around the network in our region. It was noted that this resolution puts the Board's and Network's perspective out about where we stand with putting people first in the behavioral health system and to try to ensure that our community-based behavior health continues to be the most effective and inclusive way of persons to receive person centered care. It is important that persons receive quality services that are consistent and uninterrupted and that there is inclusion. The Resolution has been shared with the legislators, the Conference of Western Wayne; the Downriver Community Conference; and our lobbyists and has received favorable feedback. The Resolution has been posted on the website and will be shared with staff and others in our Network. Discussion ensued regarding sending the Resolution with a cover letter and a brief synopsis. Mr. Doeh noted that a white paper has been put together to share with

legislatures; however, the Resolution must be approved by the Board before the document itself is sent out. It was requested that in the cover letter we have an action which could be asking others to endorse the Resolution or send their own Resolutions to their legislatures. Mr. Doeh, Interim CEO noted that the Resolution would also be shared with the SUD Oversight Policy Board and that Mr. Perry would be contacted regarding his assistance once the Resolution had been approved. The Chair called for a motion to approve the Behavioral Health Resolution #1 FY 2021-2022. **Motion:** It was moved by Mr. Parker and supported by Mr. McNamara to approve the Behavioral Health Resolution #1 FY2021-2022. **Motion carried unanimously.**

INTERIM PRESIDENT AND CEO MONTHLY REPORT

Mr. Doeh, Interim CEO, reported. A written report was provided for the record. Mr. Doeh reported that the flagship HB4925 introduced by Representative Mary Whiteford is aimed at two things; eliminating all ten (10) of the PIHP's and replacing that with an Administrative Service Organization (ASO). There are two things that are important to Representative Whiteford; access to services and making sure there is consistency in the delivery of the services. She is scheduled to visit DWIHN in August as she begins her speaking engagement around this bill. We have expressed our disagreement in regards to the ASO structure and she was very transparent in terms of listening to our disagreements and is open to ideas. There are five things that are core to DWIHN; making sure behavioral health remains within the public space; making sure the financial side is held within the PIHP structure or the public mental health side; services remaining consistent and uninterrupted for the individuals we serve no matter where they reside; each entity retaining its own risk if there is a redesign; and shared savings being reinvested in services to improve the lives of the individuals we serve. It was noted that DWIHN can provide the Administrative services at a cost of 6% to 9%; the Health plans can provide administrative services at about 17%; and Representative Whiteford is putting forth 3% as administrative costs which would be difficult. The Republicans have set this timeline that a budget would be before the Governor by July 1st however, that is not going to happen and this will not be on the Governor's desk by that time. Additional good news is the fact that May's revenue topped forecast by \$1 billion—that is the revenues to the State's General and School Aid funds. This also means that Governor Whitmer and the Legislature now have \$4.5 billion more in General and School Aid fund revenues available to spend than expected at the start of the calendar year for the current 2020 – 2021 and upcoming 2021 – 2022 fiscal years. This news provides for a positive outlook regarding our general fund request.

Mr. Doeh provided a brief update on the crisis center. The next couple of months will be pivotal for DWIHN and a hearing is scheduled for June 29 before the Zoning Board in regard to the project. He stated that there are a few individuals in the community who don't want the facility in their neighborhood and they have talked to our stakeholders. The area has already been zoned for this type of purpose, so the only issue is expanding the parking lot to accommodate the number of persons who would be in the building. We are trying to augment the parking lot to accommodate an additional 50-80 spots. This is the main purpose of going before the Zoning Board, however, we want to approach the community as we're in this together, as opposed to being against them. It was also reported that we are pushing to have construction completed by the end of September of next year. The crisis center is a big deal for this region and for Detroit-Wayne and we have excellent partners who are in support of the project.

It was reported that May was Mental Health Awareness month and we had a good staff appreciation day. It was nice to see people in person. A brief report was provided on the return to the building; it was noted that one his primary concerns is to make sure staff is safe and that we are able to provide services to the people we are responsible for and serve; for the past 15 months we have been able to launch projects; work diligently and have been very productive. COVID has taught us that we have

to change the way that we do business and we have been able to recruit some folks who have propelled our organization; having a hybrid structure has offered folks the ability to have another option; working in the building is a good thing and that is something that he will be pushing for as there is value; however it has been proven in the past 15 months that folks can work and be productive remotely. He does not want people to abuse this and has been working with the Chiefs; Directors and leaders to make sure that does not occur. We definitely want to maintain and increase productivity, but at the same time recognize that the world is different. It was also reported that Mr. Manny Singla, Chief Information Officer has been elevated to the Interim Chief Network position. Mr. Singla is an amazing member of our executive team and has just truly come into this organization and put us in a much better position not only on the technology front, but also from an operational standpoint. He is a great colleague to work with and he believes he is going to do awesome things in this position as he has already begun to do and was doing prior to the appointment. He will keep the board abreast of what is going on with House bill 4925 and there have been a number of meetings that are taking place with legislators that are stakeholders; he has met with the Wayne County Executive and will be meeting with the Mayor's in the community.

Discussion ensued regarding MDHHS weighing in on the House bill. It was noted that the State has not at this time taken a position and that they have noted that they are being "cautiously aware as to what is happening." Director Hertel does not want to get ahead of her boss and within the PIHP system the anxiety has started to set in and this contributes to a sort of disconnect. At the PIHP meetings on Thursday he has been a voice in this matter and the other CEO's have been doing the same.

Discussion ensued regarding the most effective way of communicating with legislatures which is to go to Lansing and meet with them; board members; providers and staff; putting people on buses and seeing them in person and something of this nature should be organized; it would be helpful to have scheduled meetings, but if not we can knock on their doors. It was suggested that we do something very aggressive with both the Democratic and Republican legislatures. It was noted by Mr. Doeh that we have been working with our Lobbyists; making calls, and writing the letters. The bus structure may have to be researched with COVID environment. Discussion ensued regarding access to the members of the legislature. The Chair, Mr. Riley, III requested guidance on the bus trip; and it was noted that we should plan to have some in person meetings with the individuals in Lansing and showing up in numbers typically gets a response as the environment is opening up and we need to show our presence. Mr. Doeh suggested that hearings before certain committees are planned and we can work with our Lobbyist to get ahead of those meeting and have members of our board attend those meetings in the next couple of weeks before the legislatures go on break for the summer. We will have opportunities to speak with them during their coffee hours regarding the proposal; the talking points and white paper can be discussed and we will work with the lobbyist to get the dates and work with the people to have these trips planned. Ms. Jawad; Mr. Glenn and Ms. Brown noted they would be interested in going to Lansing. It was noted we have a group of providers that have relationships with the legislatures and we should have them exercise their voice and show their presence to help defeat this bill. It was noted that meetings have been held with the Providers; our CRSP providers and SUD providers and we have shared the White Papers and we have to be able to introduce some ideas. Mr. Doeh will research a large group trip which will include the people we serve and try to have the Governor visited as well. It was noted that we do not have to take a bus; but we can set up Zoom meetings with the key legislature; DWIHN can set up the meetings; involve the Conference of Western Wayne; Growth Works and the Governor. The Chair noted more work will have to be done on this plan.

The Chair noted the reports of the Board Chair; Executive Committee; Finance Committee; Program Compliance Committee; and Interim President and CEO have been received and filed.

UNFINISHED BUSINESS

Staff Recommendations:

- A. **BA #21-13 (Revised)** Wayne County Jail – Wayne County E. Reynolds, Clinical Officer reported, Staff requesting approval to increase funding for the Wayne County Jail from \$4,250,000 to \$5,250,000 to align with the number of consumers served and restore a portion of the general fund reduction passed through from MDHHS. **The Board Chair noted that all of the Board Actions under Unfinished Business; BA #21-23 (Revised); BA#21-32 (Revision 4); BA #21-33 (Revision 3) and BA #21-36 would be bundled with the required recusals being noted.**
- B. **BA #21-32 (Revision 4)** Supplemental Block Grant Funding – DWIHN Provider. Judy Davis, SUD Director reported. Staff requesting approval in the amount of \$1,847,534.00 of block grant funding for treatment and recovery providers for fiscal year 2021. The services will be utilized to respond to the COVID crisis and an also requesting an additional \$450,000 in block grant to provide brief screening and referral to treatment services; these services will be allocated to providers.
- C. **BA #21-33 (Revision 3)** Electronic Nicotine Delivery System Vendor Education – The Youth Connection, Inc. Judy. Davis, SUD Director reported. Staff requesting an increase of \$4,000.00. The increase will be allocated to The Youth Connection to educate the retailers and community on Electronic Nicotine Delivery System (ENDS) products. Also requesting an increase of \$852,000 to provide prevention services in an effort to respond to the COVID crisis.
- D. **BA#21-36 (Revised)** Independent Evaluator for Autism Spectrum Disorder (ADS) E. Reynolds, Clinical Officer reported. Staff requesting approval for a 6- month provisional approval to add Sprout LLC. as an additional ASD evaluator to meet the growing demand for Autism screening for children in Wayne County.

The Chair called for a motion on the Board actions under Unfinished Business. **Motion:** It was moved by Dr. Taueg and supported by Ms. Ruth to approve Board Actions #21-13 (Revised); BA #21-32 (Revision 4); BA#21-33 (Revision 3); and BA#21-36 (Revised) There was no further discussion. **Motion carried with Chief Riley, III abstaining from BA #21-32 (Revised 4) and BA #21-33 (Revision 3). Motion carried.**

NEW BUSINESS

Staff Recommendations:

- A. **BA #21-68** – Crisis Center Financing. The Chair called for a motion on BA#21-68. **It was moved by Dr. Taueg and supported by Mr. Glenn approval of BA#21-68.** S. Durant, CFO reported. Staff requesting board approval to enter into a financing agreement with Flagstar Bank in the amount not to exceed \$13,200,000 for 75% of construction cost and 80% of any equipment that would need to be purchased. There was no further discussion. **Motion carried.**
- B. **BA #21-69** DWIHN Proposed General Fund Program Allocation – Black Family Development. J. White Director of Contract Management reported. The Chair called for a motion on BA#21-69. **It was moved Mr. Glenn and supported by Ms. Brown approval of BA#21-69.** This Board action is requesting and pursuant to the CFO's review of the expenses incurred through December 31, 2021; DWIHN is projected to have excess State General Fund to allocate to non-Medicaid and/or other funding sources (i.e. grants) programs. The

programs and services that would be included would be laptops and tablets for consumers in residential settings to assist with telehealth services; jail diversion counseling and management case management; trauma informed care; speech and occupational therapy and its program to reunite children and families. There was no further discussion. **Motion carried with Chief Riley, III abstaining.**

- C. **BA #21-70 Crisis Center General Contractor** – The Chair called for a motion on BA#21-70. It was moved by Mr. Glenn and supported by Ms. Ruth approval of BA#21-70. B. Blackwell, Chief of Staff reported. This Board action is requesting approval of a construction contract in the amount of \$14,000,000 for the renovations of the Woodward Crisis Center. The Purchasing department solicited a Request for Proposals (RFP) and based on the evaluation committee, DeMaria building Company Inc. has been recommended. The contact is for 18 months; there were five proposals received and one was deemed non-responsive. Discussion ensued on the location of the company which is in Oakland County; vendors in Wayne County that responded to the RFP; DeMaria’s cultural competency; workforce representation and their commitment in their proposal to hire Wayne County residents especially African Americans. Mr. Parker requested that hopefully we will track this item. There was also a question regarding if DeMaria had a Collective Bargaining Agreement which was deferred to the Legal department. **Motion carried.**

PROVIDER PRESENTATION – New Oakland Family Centers

Mr. Greg Sendi; Lead Communications & Community Relations & Business Development and Mr. Kevin Sendi, JD; MBA President and CEO provided a PowerPoint for the record. An overview of their history, services, outcomes; service sites and the population served was provided. Mr. Sendi noted that New Oakland Family Centers had been a provider and serving Michigan since 1990; they have been CARF certified for the last 15 years; and they have a staff across Michigan that nearly totals 500 people. It was noted that it is important for them to provide the “Right Care” at the “Right Time” and an overview was provided of how New Oakland accomplishes this goal. New Oakland Family Centers is located in Flint; Clarkston; Farmington Hills, Livonia; Warren; Clinton Township; Centerline; Southgate; Grand Rapids; Okemos; Port Huron; Ann Arbor; Ypsilanti and Washtenaw. An overview was provided of who they serve and their services. It was stated that service is provided to adults; children; pre-teens; teens; and children and their services include but were not limited to outpatient; criminal justice collaboration; medication clinics; non-emergency transportation; in home and outpatient services; and Substance Abuse treatment. Mr. Sendi also reported on and provided an overview of how many persons were served in Wayne County and across Michigan and he highlighted the major types of services provided which included Partial Hospital Program (PHP); Outpatient Services; Mobile Intensive Stabilization; Eating Disorder Treatment; and Substance Abuse and Addiction Services. He also provided a high-level overview of the most daunting obstacles to care and their response to overcome those obstacles. Chief Riley, III thanked Mr. Sendi for the presentation and it was requested that contact information be provided on the Centers.

REVIEW OF ACTION ITEMS

Send to Board contact information on staff at New Oakland Family Centers. Obtain the signature of the Board Chair on the Resolution and update cover letter that will be sent to constituents with a request for endorsement or to send their own Resolution to the legislatures. Mr. Doeh to research and investigate the board, providers and staff scheduling Zoom meeting with key legislatures and taking a bus trip to Lansing to speak with key legislatures including the Governor on House bill 4925. Legal to research if DeMaria has a collective bargaining agreement and report back to the board.

GOOD AND WELFARE/PUBLIC COMMENT

The Board Chair, Mr. Riley, III read the Good and Welfare/Public Comment statement. There were no members of the public for Good and Welfare/Public Comment.

ADJOURNMENT

There being no further business, the Board Chair, Mr. Riley, III called for a motion to adjourn. **It was moved by Mr. McNamara and second by Mr. Glenn to adjourn. The motion carried unanimously and the meeting adjourned at 3:04 p.m.**

Submitted by:
Lillian M. Blackshire
Board Liaison

FINANCE COMMITTEE

MINUTES

JUNE 2, 2021

1:00 P.M.

**VIRTUAL CONFERENCE
(ZOOM)**

MEETING CALLED BY	I. Ms. Dora Brown, Chair called the meeting to order at 1:01 p.m.
TYPE OF MEETING	Finance Committee Meeting
FACILITATOR	Ms. Dora Brown, Chair – Finance Committee
NOTE TAKER	Nicole Smith, Management Assistant
ATTENDEES	<p>Finance Committee Members Present: Ms. Dora Brown, Chair Mr. Kevin McNamara, Vice Chair Commissioner Jonathan C. Kinloch Mr. Bernard Parker Kenya Ruth</p> <p>Committee Members Excused: Mr. Angelo Glenn</p> <p>Board Members Present: Chief William T. Riley, III, Chairperson</p> <p>Board Members Excused: None</p> <p>Staff: Eric Doeh, Interim CEO/COO; Dhannetta. Brown, Deputy CFO; Yolanda Turner, Deputy Chief Legal Counsel; Jean Mira, Procurement Administrator</p> <p>Guests: none</p>

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. Mr. Parker gave remarks on the State of Michigan reopening due to the pandemic. He confirmed MDHHS orders for continued virtual work until June 30, 2021.	
IV. Approval of Agenda	
The Chair, Ms. Brown called for any amendments to the agenda. There were no changes requested to the agenda. The Chair called for a motion. Motion: It was moved by Mr. Kinloch and supported by Mr. Riley approval of the agenda. Motion carried.	

V. Follow-up Items:

There were no follow up items noted on the agenda. The Chair requested status of previous follow up items. Ms. Blackshire gave an update that the Fund Balance Policy was still being reviewed by the Policy Committee.

VI. Approval of the Meeting Minutes

The Chair, Ms. Brown called for a motion on the Finance Committee minutes from the meeting of Wednesday, May 5, 2021. **Motion:** It was moved by Commissioner Kinloch and supported by Mr. Riley approval of the Finance Committee minutes from the meeting of Wednesday, May 5, 2021. There were no corrections to the minutes. **Motion carried.** Minutes accepted as presented.

VII. DWIHN Proposed General Fund Program Allocation

Eric Doeh, Interim CEO/COO presented the Proposed General Fund Program Allocation to the Committee. A written document was provided for the record.

Per Mr. Doeh the Proposed General Fund Program allocation was developed by the CFO, Interim CEO/COO, and the DWIHN Executive Staff Team. Discussion ensued regarding the programming; funding and lapse of funding.

It was noted that there is a clause in the Proposed General Fund Program Allocation that states “DWIHN will request that funds can be re-allocated between these specific programs in the event a program is under/over funded up to the total allocation of \$5 million. This flexibility will ensure the funding will be spent by September 30, 2021 and reduce the risk of lapsing funds to the MDHHS”.

The Committee has recommended that any reallocations be reviewed and or consultation takes place with the Committee Chair and Vice Chair before staff makes any decisions regarding the re-allocation of funds.

The Chair, Ms. Brown called for a recommendation to move the DWIHN Proposed General Fund Program Allocation to Full Board for approval. **Motion:** It was moved by Mr. Parker and supported by Mr. McNamara to move the DWIHN Proposed General Fund Program Allocation to Full Board for approval. There was no further discussion. **Motion carried.**

VIII. Presentation of the Monthly Finance Report

S. Durant, CFO presented the Monthly Finance report. A written report ending March 31, 2021 was provided for the record. Authority Finance accomplishments and noteworthy items were as follows:

Based on projections as of December 31, 2020, CFO determines DWIHN has a minimum of \$5 million in additional general fund to allocate to eligible programs. Management has presented a list of recommendations for immediate consideration; board actions will be presented at the June Program Compliance Committee meeting. CFO will review general fund spending in August to determine additional state general fund that will likely be available for allocation and spent by September 30, 2021. Contract initiation - **TIME IS OF THE ESSENCE.**

Finance has developed the attached schedule for the FY22 budget preparation, submission, review and approval. The dates identified in the schedule are consistent with the prior years. The joint Finance and PCC meeting is scheduled for Wednesday, August 4, 2021.

DWIHN submitted a financial stability letter to thirteen (13) skill building providers requiring certain data by May 31st in an effort to evaluate the amount of financial assistance

that DWIHN will provide immediately. Skill building providers have incurred over 75% loss in revenue post pandemic. This immediate assistance is necessary to ensure the providers remain in business to serve our consumers once the pandemic subsides.

Finance and Children's division are working on developing a payment incentive model for Children providers. We anticipate the framework will be developed, provider review, and MDHHS approval, in time for an October 1, 2021 implementation.

Cash flow is very stable and should continue to remain stable throughout the year as liquidity ratio = 2.44.

Cash and Investments – comprise of funds held by three (3) investment manager, First Independence CDARS, Comerica, and Flagstar accounts.

Due from other governments/ Accounts Receivable – comprise various local, state and federal amounts due to DWIHN. The account balance primarily related to \$9.6 million due from MDHHS for four months of HRA revenue.

IBNR Payable – represents incurred but not reported (IBNR) claims from the provider network; historical average claims incurred through April 2021, including COVID-19 impact, was approximately \$389.5 million however actual payments were approximately \$347.9 million. The difference represents claims incurred but not reported and paid of \$41.6 million.

Due to other governments – includes \$8 million due to MDHHS for death recoupment and \$4.6 million for DCW overpayment at 9/30/20. In addition, the amount includes \$2.3 million IPA tax payment due April 30th but did not clear the account until May 4th. In addition, the amount includes \$3.7 million due to MDHHS for FY20 general fund carryover in excess of 5%.

Federal revenue/grant program expenses – variance due to timing of incurred expenses related to SUD, PASSAR and HUD grants. In addition, SUD BG grant expenses are well underbudget due to the pandemic.

State revenue and contracts – The \$30.6 million budget verse actual variance is related to \$28.8 million reported in the Medicaid reserve account.

Autism, SUD, Adult, and Children services – \$38 million variance due to impact of COVID on certain lines of business and timing in services (i.e. summer programs).

The Chair, Ms. Brown noted the Monthly Finance Report would be received and filed.

IX. Budget Submission Timeline

Presented by D. Brown, Deputy CFO. A written document was provided for the record. The timeline was presented to the committee. Finance has developed the attached schedule for the FY22 budget preparation, submission, review and approval. The dates identified in the schedule are consistent with the prior years. The joint Finance and PCC meeting – Budget Hearing is scheduled for Wednesday, August 4, 2021.

X. 2nd Quarter FY21 Board Report for Contracts \$50,000 and Cooperative Purchasing

The 2nd Quarter Procurement Report was presented by staff J. Mira, Procurement Administrator. The report was provided to the Finance Committee and is included in the agenda packet for informational purposes. Noteworthy information includes purchasing

percentages: Contract Percentage for Wayne County is 43.2% and Out of County is 56.8%; Funding Percentage w/o IT for Wayne County is 58.1% and Out of County is 41.9%. The 2nd Quarter FY21 Board Report for Contracts \$50,00 and Cooperative Purchasing was Received and filed.

XI. Unfinished Business – Staff Recommendations: None

XII. New Business – Staff Recommendations: None

XIII. 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.

XIV. Adjournment – There being no further business; The Chair, Ms. Brown called for a motion to adjourn. **Motion:** It was moved by Mr. Kinloch and supported by Mr. Parker to adjourn the meeting. **Motion carried.**

The meeting adjourned at 1:54 p.m.

FOLLOW-UP ITEMS	A. Send the fund balance policy to the Policy Committee and Board for review.

PROGRAM COMPLIANCE COMMITTEE

MINUTES

JUNE 9, 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	Committee Members: Dr. Lynne Carter; Michelle Jawad; and Dr. Cynthia Taueg Board Members: Chief William T. Riley, III Staff: Miriam Bielski; Brooke Blackwell; Judy Davis; Eric Doeh; Bernard Hooper; Melissa Moody; Vicky Politowski; Ebony Reynolds; April Siebert; Yolanda Turner; Michele Vasconcellos and June White

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. There was a quorum.

IV. Approval of the Agenda

DISCUSSION/ CONCLUSIONS	The Chair called for approval of the agenda. Motion: It was moved by Dr. Carter and supported by Ms. Jawad 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

DISCUSSION/ CONCLUSIONS	<i>There was no Follow-Up Item(s) from Previous Meetings to review.</i>
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VI. Approval of Meeting Minutes

DISCUSSION/ CONCLUSIONS	The Chair called for approval of the May 12, 2021 meeting minutes. Motion: It was moved by Ms. Jawad and supported by Dr. Carter to approve the May 12, 2021 meeting minutes. Dr. Tauveg asked if there were any changes/modifications to the meeting minutes. There were no changes/modifications to the meeting minutes. Motion carried.
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VII. Reports

DISCUSSION/ CONCLUSIONS	<p>A. Chief Medical Officer – <i>The Chief Medical Officer’s Report has been deferred to the July 14, 2021 Program Compliance Committee meeting.</i></p> <p>B. Corporate Compliance Report - Bernard Hooper, Director of Corporate Compliance submitted and gave an update on the Corporate Compliance report:</p> <ol style="list-style-type: none"> 1. MDHHS CWP- HSW-SEDW – 1915(c) Home and Community Based Waiver’s Plan of Correction (POC) – All matters were adequately remediated with the exception of three matters addressed on June 4, 2021. Information has been reviewed by MDHHS and we have received full satisfaction of our POC and deemed to be compliant with the waiver programs. 2. Community Living Supports (CLS) and Skill Building Services Review – Corporate Compliance and Quality Improvement identified a practice of incorrectly billing services of exercise instruction and art instructions as Skill Building by CLS. Corporate Compliance and the Chief Clinical Officer are working to determine if these services are appropriately billable as CLS and under what condition these services must be rendered in order to satisfy the terms and provision of the Medicaid Manual. Staff are looking at approximately \$250,000.00 that may be recouped with the exercise services and about \$400,000.00 that has been extended to the art instruction. DWIHN has a very well-developed mechanism for recouping claims. The claims have been identified and tabulation identified is the result of the claims’ exercise. The Quality team have consulted with I.T. and they have identified the amounts that have been paid. Staff is working on developing a more specific plan for the use of those billable codes and a notice to the case/support coordinators to indicate to them that the services would have to be included in an IPOS in order for them to be billable. Mr. Hooper is working with the Chief Clinical Officer to decide how she would like to move forward. Dr. Tauveg opened the floor for discussion. Discussion ensued. The Chair noted that the Corporate Compliance’s report has been received and placed on file.
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VIII. Quarterly Reports -

<p>DISCUSSION/ CONCLUSIONS</p>	<p>A. Access Call Center – Miriam Bielski, Director of Access Call Center submitted and gave highlights of the Access Call Center’s quarterly report. Ms. Bielski reported there were 2,399 welcome letters and follow-up letters sent to members in February 2021; 2,597 for March 2021; and 4,222 for April 2021. There are 2000 paper enrollment registrations to be manually loaded into MH-WIN. Staff implemented performance metrics for each call center unit (Call Center Representatives, SUD and Mental Health). Working with staff on processing techniques for “First Call Resolution” and managing staff’s schedules to leverage ultimate coverage. Staff has implemented a quality program; created standardized quality rating standard; began silent monitoring with real-time feedback; and began an all staff/training meetings bi-weekly. Dr. Taueg opened the floor for discussion. There was no discussion.</p> <p>B. Children’s Initiatives – Ebony Reynolds, Clinical Officer of Clinical Practice Improvement submitted and gave highlights of the Children’s Initiatives’ quarterly report. Ms. Reynolds reported:</p> <ol style="list-style-type: none"> 1. School Success Initiative Q2 – Funding allocations has been awarded to 11 CMH School Success Initiatives’ providers. Phase 1 (School Based Re-Design) has been completed. The Michigan Model for Health (MMH) was purchased and providers have completed training to utilize the curriculum. Staff are in the process of completing Phase II, the ability to capture data in one electronic medical record through MH-WIN enhancement. Continued partnership with DWIHN’s SUD Prevention services to capture data and number of children served. DWIHN’s Workforce Development will provide QPR training to schools currently in development. 2. Children System of Care Block Grant – Staff provided several trainings to anyone who interact with children, adolescents and their families who are a part of the CMH system including hospitals, law enforcement, school personnel, DPS, and social services organizations on “Bridging the Gap- Navigating Child Welfare Services and Community Mental Health”, Trauma Prevention, “Childhood Responses to Adverse Situations Happens”, and “Accessing Community Mental Health Services”. 3. Home-Based Wraparound – Home-based services was provided to 686 children for Q2, a 1.2% decrease from Q1. The average length of stay of children completing home-based services was 13.5 months across all DWIHN’s children providers for Q2. A119 (22%) youths receiving home-based services had a meaningful and reliable improvement which is a 3.8% increase from Q1. There were 82 youths in the Child Welfare system; 58 in the Juvenile Justice system; and 271 youths connected to Special Education services received home-based services. 76.92% of facilitators met competency areas “almost all of the time” in “Future orientation in building, coordinating and managing teams” and “Mobilize a group for collective action”. 4. Autism – There are currently 1,847 open cases receiving services with the largest concentration of enrollees between the ages of two and eight years old. An RFP was issued to expand services on specific geographic locations for FY 21/22. DWIHN has a 66% approval rate for meeting ASD benefit enrollment criteria and Medical Necessity criteria. Thirty-seven cases have been successfully discharged from the ASD benefit for Q2. Staff will continue to work with the Quality Improvement department on performance improvement plans to increase outcomes. <p>Dr. Taueg opened the floor for discussion. Discussion ensued.</p>
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- C. **Clinical Practice Improvement** – Ebony Reynolds, Clinical Officer of Clinical Practice Improvement submitted and gave highlights of the Clinical Practice Improvement’s quarterly report. Ms. Reynolds reported:
1. **Evidence-Based Supported Employment (EBSE)/Individual Placement Support (IPS) Services** – General oversight and technical support were provided to nine providers delivering Evidence-Based Services. Providers continue to provide services despite the public health crisis imposed by the pandemic by using virtual platforms and in-person services based on member choice. Some providers continue to face staffing challenges. There were 103 cases opened, 58 employed at \$11.96 average wage, and 10 successful closures for Q2. Staff will continue to monitor the progress of EBSE service-delivery and provide technical support.
 2. **Project – WC Jail – IST** – The workgroup is focused on creating alternate pathways for persons with low level offenses. During this past quarter, 643 persons were screened and 336 were admitted into mental health services. The Returning Citizens Workgroup continues to work collaboratively with the transition of the Access Center to DWIHN. Central City Integrated Health’s Homeless Outreach Team has completed the necessary training, developed the workflow for outreach services and awaiting approval from the City of Detroit to begin the program. Downriver Veterans continues to work under difficult circumstances with the court remaining closed.
 3. **Assertive Community Treatment (ACT)** – Staff monitored the ACT program admissions/discharges and the appropriateness of level of care determinations for Lincoln Behavioral Services, Community Care Services and Northeast Integrated Health. Technical assistance was provided to Hegira, Team Wellness Center and Northeast Integrated Health to ensure program eligibility requirements were met. A fidelity review was conducted on Lincoln Behavioral Services’ ACT program.
 4. **Med Drop** – The Overall Medication Adherence Rate was 91.2%. There was an 84% reduction in psychiatric hospital admissions and an 89% reduction in psychiatric hospital days for individuals that had an admission 12 months prior to entering the program. DWIHN had a cost-savings of \$181,009 for individuals that had a psychiatric hospital admission 12 months prior to entering the program as compare to while in the program. DWIHN has a cost-savings of \$13,420 for individuals that had a crisis home/crisis services admission 12 months prior to entering the program as compared to while in the program.
- Dr. Taueg opened the floor for discussion. There was no discussion.
- D. **Customer Service** – Michele Vasconcellos, Director of Customer Service submitted and gave highlights of Customer Service’s quarterly report. Ms. Vasconcellos reported that the Strategic Plan Customer Pillar is at 87% completion. The Reception/Welcome Center/Switchboard activity for this quarter was 4,453 with an abandonment rate of 3.2% and the Customer Center Call Center received 3,350 calls with an abandonment rate of 16.6%. Family Support Subsidy received 1,572 calls and 328 applications were submitted to the State. Customer Service assisted in the final NCQA preparation audit by responding to the ICOs’ audits and plan of corrections. The Provider Directory and Member Handbook have been updated. Staff conducted a series of meetings to address Clubhouse and Drop-In Center re-accreditation concerns. Staff also worked on various survey activities. Dr. Taueg opened the floor for discussion. There was no discussion.

	<p>E. Integrated Health Care – Vicky Politowski, Director of Integrated Health Care submitted and gave highlights of the Integrated Health Care’s quarterly report. Ms. Politowski reported:</p> <ol style="list-style-type: none"> 1. Collaboration with Health Department – State of Michigan and the Health Department has met its’ goal of 80% vaccination rate and has discontinued the Hepatitis A clinics. 2. Health Plan Pilots (3) – <i>Health Plan 1</i> – The Care Coordination Module offered by Vital Data Technology, LLC (VDT) will be utilized as a shared electronic platform between DWIHN and the Health Plan 1 Care Coordination provider. The go live date is June 1, 2021. <i>Health Plan 2</i> – Staff and the Health Plan 2 Care Coordinators hold monthly meetings to review a sample of shared members who experienced a psychiatric admission during the previous month. <i>Health Plan 3</i> – Health Plan 3 Care Coordinators are currently reviewing the proposal for a joint pilot project internally. At this time, the Health Pan 3 has not decided to go forward with any projects. 3. Medicaid Health Plans – Staff continue to perform Care Coordination Data Sharing on a monthly basis with each of the eight Medicaid Health Plans serving Wayne County who met risk stratification criteria. There were 149 cases reviewed. 4. MI-Health Link Demonstration – There was a decrease in DWIHN’s members who are enrolled in MI-Health Link from Q1 FY 21 to Q2 FY 21. 242 Behavioral Health Care referrals were completed and submitted to the ICOs, Care Coordination was provided to 47 MI-Health Link members and Transition of Care Coordination was provided to 149 MI-Health Link members during this quarter. Staff completed 45 LOCUS assessments for 45 MI-Health Link members. 5. Complex Case Management – Staff continues to offer and provide Complex Case Management services to DWIHN’s members as a part of DWIHN’s NCQA Accreditation. Complex Case Management information was sent to 37 provider organizations, including hospitals, clinically responsible service providers (CRSP) and residential providers. 6. OBRA/PASRR – Staff continue to monitor and give oversight of DWIHN’s provider of OBRA/PASRR services. The provider completed 444 PASRR screenings and reviews for members this quarter which is an increase from last quarter of 242 members. <p>Dr. Taueg opened the floor for discussion. There was no discussion. The Chair noted that the Access Call Center; Children Initiatives; Clinical Practice Improvement; Customer Service; and Integrated Health Care quarterly reports have been received and placed on file.</p>
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IX. Strategic Plan Pillar - Quality

<p>DISCUSSION/ CONCLUSIONS</p>	<p>April Siebert, Director of Quality Improvement submitted and gave a report on the Strategic Plan – Quality Pillar. The Quality Pillar is at 71% completion. There are four organizational goals under this pillar that range from 55% to 95% completion:</p> <ol style="list-style-type: none"> 1. Ensure consistent Quality by September 30, 2022 – 61% completion and on target 2. Ensure the ability to share/access health information across systems to coordinate care by December 31, 2021 – 95% completion and on target 3. Implement Holistic Care Model: 1 unit by December 31, 2021 – 55% completion and on target
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	<p>4. Improve population health outcomes by September 30, 2022 – 74% completion and on target</p> <p>The Chair opened the floor for discussion. There was no discussion. The Chair noted that the Strategic Plan Quality Pillar report has been received and placed on file.</p>
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X. Quality Review(s) – None

<p>DISCUSSION/ CONCLUSIONS</p>	<p><i>There was no Quality Review(s) to report this month.</i></p>
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XI. Chief Clinical Officer’s (CCO) Report

<p>DISCUSSION/ CONCLUSIONS</p>	<p>Melissa Moody, Chief Clinical Officer submitted a full report and gave highlights on the Chief Clinical Officer’s report. Mrs. Moody reported:</p> <ol style="list-style-type: none"> 1. COVID-19 & Inpatient Psychiatric Hospitalization – Hospitalizations data showed 11% decrease in admissions for the month of May. There were 11 reported cases of COVID-19 inpatient in May 2021 (April 2021 – 6 cases). 2. COVID-19 Intensive Crisis Stabilization Services – There was a 15% increase in crisis stabilization services provided in May 2021 compared to April 2021- 329 served. 3. COVID-19 Pre-Placement Housing – There were 22 people serviced in pre-placement housing for the month of May 2021 (April 2021 – 33) – 30% decrease in utilization of pre-placement housing. 4. COVID-19 Recovery Housing/Recovery Support Services – There was a significant change in the utilization of COVID-19 recovery homes in the month of May 2021(29) compared to April 2021 (41). 5. COVID-19 Urgent Behavioral Health Urgent Care Sites – There was a 20% decrease in utilization of Urgent Behavioral Health Urgent Care Services in May 2021 (33) compared to March 2021 (30). 6. Residential Department Report of COVID-19 Impact – There was 21 new COVID-19 positive members in May 2021 and one (1) reported new death. There was 20 new COVID-19 positive cases and no reported deaths (the three reported deaths were from April 2020). 7. Vaccinations – Licensed Residential Homes – A combined total of 86% of members in licensed settings have been fully vaccinated (88% received at least one dose). 8. Vaccinations – Unlicensed Homes - A combined total of 49% of members have been fully vaccinated in unlicensed settings (35% received at least one dose). 40% were fully vaccinated last month. A combined total in congregate settings – 73% fully vaccinated and 75% received at least one dose. <p>Dr. Tauog 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.</p>
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XII. Unfinished Business

<p>DISCUSSION/ CONCLUSIONS</p>	<p>A. BA #21-13 (Revised) – Wayne County Jail – Wayne County – The Chair called for a motion on BA #21-13 (Revised) - Staff requesting board to increase funding for the Wayne County Jail from \$4,250,000.00 to 5,250,000.00 to align with the number of consumers served and restore a portion of the General Fund</p>
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	<p>reduction passed through from MDHHS. Dr. Tauzeg opened the floor for discussion. There was no discussion.</p> <p>B. BA #21-32 (Revised 4) – Supplemental Block Grant Funding – DWIHN’s Providers Network – Staff requesting board approval for the amount of \$1,847,534.00 of Block Grant funding for treatment and recovery providers for FY 2021, the original award amount \$4,443,575.00 for a total not to exceed \$6,291,109.00. Dr. Tauzeg opened the floor for discussion. There was no discussion.</p> <p>C. BA #21-33 (Revised 3) – Electronic Nicotine Delivery System Vendor Education – The Youth Connection, Inc. – Staff requesting board approval for an increase of \$4,000.00 to allocate to the Youth Connection, Inc. to educate the retailers and community on Electronic Nicotine Delivery System (ENDS) products. Additionally, staff is requesting board approval in the amount of \$852,079.00 in supplemental Prevention Block grant for a combined total not to exceed \$5,628.133.00. Dr. Tauzeg opened the floor for discussion. There was no discussion.</p> <p>D. BA #21-36 (Revised) – Independent Evaluator for Autism Spectrum Disorder (ASD) – The Children’s Center of Wayne County, Inc. – Staff requesting board approval for a six-month provisional approval to add Sprout, Inc., as an additional ASD Evaluator to meet the growing demand for Autism screening for children in Wayne County. Dr. Tauzeg opened the floor for discussion. There was no discussion.</p> <p>The Chair bundled the board actions and called for a motion on BA #21-13 (Revised); BA #21-32 (Revised 4); BA #21-33 (Revised 3); and BA #21-36 (Revised). Chief Riley abstained from voting on BA #21-32 (Revised 4). Motion: It was moved by Dr. Carter and supported by Ms. Jawad to move BA #21-13 (Revised); BA #21-32 (Revised 4); BA #21-33 (Revised 3); and BA #21-36 (Revised) to Full Board for approval. Dr. Tauzeg opened the floor for further discussion. There was no further discussion. Motion carried.</p>
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XIII. New Business: Staff Recommendation(s)

DISCUSSION/ CONCLUSIONS	<p>A. BA# 21-69 – DWIHN Proposed General Fund Program Allocation – Black Family Development – The Chair called for a motion on BA #21-69. Motion: It was moved by Ms. Jawad and supported by Dr. Carter to move BA #21-69 to Full Board for approval. Staff requesting board approval to re-allocate \$3.8 million of General Fund Dollars. Pursuant to the CFO’s review of the expenses incurred through December 31, 2020, DWIHN is projected to have excess State General Fund to allocate to non-Medicaid and/or other funding sources (i.e., grants) programs. Dr. Tauzeg opened the floor for discussion. There was no discussion. Motion carried.</p>
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XIV. Good and Welfare/Public Comment

DISCUSSION/ CONCLUSIONS	<p><i>There was no Good and Welfare/Public Comment to review.</i></p>
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ACTION ITEMS	Responsible Person	Due Date

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

ADJOURNED: 2:30 p.m.

NEXT MEETING: Wednesday, July 14, 2021 at 1:00 p.m. (*Virtual Meeting*)



SAVE THE DATE

Budget Hearing

Joint Finance Committee

&

Program Compliance Committee Meeting

Wednesday, August 4, 2021

1:00 p.m. - 4:00 P.M.



Good afternoon, this executive summary is provided to this Honorable Board based on the RRAC meeting held on July 12, 2021.

Staffing update: We hired one new Investigator Brian Harris replacing one staff that retired.

Committee member updates: Hassan Abdallah has resigned.

Complaint updates: For January and February 2021

ORR-Overall Allegations for May and June 2021.

The numbers for May ORR office received: 85 allegations, 13 were Outside of Provider Jurisdiction, 2 were No Rights involved, 70 were actual investigations, we closed 5 and 65 remain open.

For the June numbers (to date), our office received: 57 allegations, 14 are Outside Provider Jurisdiction, 2 are no rights involved, we opened 41 investigations, we closed 1 and 40 remain open.

Recipient Rights Training:

For the month of May, we registered 356 participants, 213 attended the virtual class, 184 passed and there were 173 No Shows.

For the month of June, we registered 404 participants, 277 attended the virtual class, 225 passed and there were 178 No Shows.

We are requesting all providers ensure their employees are trained within 30 days of their hire to remain in compliance of the Mental Health Code Citation **MHC 1755(5)(f), Standard 3.3.1.** Moving forward we will impose the \$50.00 fee for failing to train their staff within 30 days of hire.

For our Site Reviews

Under the direction of Shakerra Pride, the monitoring team conducted 47 Site Reviews for May and June, 2021 and only one site was non-complaint.

We are requesting all providers ensure their employees are trained within 30 days of their hire to remain in compliance of the Mental Health Code Citation MHC 1755(5)(f), Standard 3.3.1.

Under new business

We have completed our Semi-Annual report and as of June 30, 2021, it was submitted to the State of Michigan. I have included the report in the packet for this Board to review however, I

will give you a quick overview, the report data was acquired from 10/1/2020 -3/31/2021. The report noted we received 520 allegations, 418 were investigations and 119 were substantiated investigations. We received 161 complaints from recipients, 157 from staff, 66 from the ORR, 81 from guardians and families, 25 were anonymous and 30 were from the general public.

Chair, ask them to review and if they have any questions we can address them at the next board meeting.

For the educational piece: Schakerra Pride discussed the Recipient Rights training and Site Review monitoring process, which was very informative.

Complaint Data for: Detroit Wayne Integrated Health Network

Rights Office Director: **Polly A. McCalister, PhD**

Reporting Period: **10/1/2020** to **3/31/2021**

CMH **53378** # of Consumers Served (unduplicated count) **CMH** **37** Rights Office FTEs

LPH Number of Admissions **LPH** Hours/40

Section I: Complaint Data Summary

Part A: Agency Totals

Allegations	520	DO NOT TYPE HERE - IT WILL AUTO FILL
Interventions	0	DO NOT TYPE HERE - IT WILL AUTO FILL
Investigations	418	DO NOT TYPE HERE - IT WILL AUTO FILL
Interventions Substantiated	0	DO NOT TYPE HERE - IT WILL AUTO FILL
Investigations Substantiated	119	DO NOT TYPE HERE - IT WILL AUTO FILL

COMPLAINT SOURCE

Recipient	161	DO NOT TYPE HERE - IT WILL AUTO FILL
Staff	157	
ORR	66	
Guardian/Family	81	
Anonymous	25	
Community/General Public	30	
Total Complaints Received	520	DO NOT TYPE HERE - IT WILL AUTO FILL

TIMEFRAMES OF COMPLETED INVESTIGATIONS

Category	Total	≤30	≤60	≤90	>90
Abuse I, II, III & Neglect I, II, III	153	15	42	88	8
All others	265	34	85	140	6

Part B: Detailed Summary

1. Freedom from Abuse

Code	Category	Received	Investigations	Investigations Substantiated	Recipient Population		
					MI	DD	SED
7221	Abuse class I	3	3	0	1	2	0
72221	Abuse class II - nonaccidental act	20	20	4	4	17	0
72222	Abuse class II - unreasonable force	15	15	5	6	9	0
72223	Abuse class II - emotional harm	4	4	0	2	2	0
72224	Abuse class II - treating as incompetent	0	0	0	0	0	0
72225	Abuse class II - exploitation	11	11	3	4	9	0
7223	Abuse - class III	35	35	8	20	19	0
7224	Abuse class I - sexual abuse	5	5	1	4	1	0

2. Freedom from Neglect

Code	Category	Received	Investigations	Investigations Substantiated	Recipient Population		
					MI	DD	SED
72251	Neglect class I	7	7	2	0	8	0
72252	Neglect class I - failure to report	1	1	0	0	1	0
72261	Neglect class II	11	11	3	1	10	0
72262	Neglect class II - failure to report	4	4		2	5	0
72271	Neglect class III	34	34	23	4	51	0
72272	Neglect class III - failure to report	3	3	1	0	4	0

3. Rights Protection System

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7060	Notice/explanation of rights	0	0	0	0	0	0	0	0
7520	Failure to report	3	0	0	3	1	1	2	0
7545	Retaliation/harassment	4			4	2	0	4	0
7760	Access to rights system	2	0	0	2	1	1	1	0
7780	Complaint investigation process	0	0	0	0	0	0	0	0
7840	Appeal process/mediation	0	0	0	0	0	0	0	0

4. Admission/Discharge/Second Opinion

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	Recipient Population		
							MI	DD	SED
4090	Second opinion - denial of hospitalization	0	0	0	0	0	0	0	0
4190	Termination of voluntary hospitalization (adult)	0	0	0	0	0	0	0	0
4510	admission process	0	0	0	0	0	0	0	0
4630	Independent clinical examination	0	0	0	0	0	0	0	0
4980	Objection to hospitalization (minor)	0	0	0	0	0	0	0	0
7050	Second opinion - denial of services	0	0	0	0	0	0	0	0

5. Civil Rights

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7041	Civil rights: discrimination, accessibility, accommodation, etc	5	0	0	5	0	5	0	0
7044	Religious practice	0	0	0	0	0	0	0	0
7045	Voting	1	0	0	1	1	5	0	0
7047	Presumption of competency	0	0	0	0	0	0	0	0
7284	Search/seizure	0	0	0	0	0	0	0	0

6. Family Rights

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7111	Family dignity & respect	12	0	0	12	4	7	5	0
7112	Receipt of general education information	0	0	0	0	0	0	0	0
7113	Opportunity to provide information	1	0	0	1	0	1	0	0

7. Communication & Visits

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7261	Visits	0	0	0	0	0	0	0	0
7262	Contact with attorneys or others regarding legal matters	0	0	0	0	0	0	0	0
7263	Access to telephone, mail	6	0	0	6	1	1	5	0
7264	Funds for postage, stationery, telephone usage	0	0	0	0	0	0	0	0
7265	Written and posted limitations, if established	0	0	0	0	0	0	0	0
7266	Uncensored mail	0	0	0	0	0	0	0	0

8. Confidentiality/Privileged Communications/Disclosure

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7481	Disclosure of confidential information	5	0	0	5	2	4	1	0
7485	Withholding of information (includes recipient access to records)	2	0	0	2	1	2	0	0
7486	Correction of record	1	0	0	1	0	1	0	0
7487	Access by p & a to records	0	0	0	0	0	0	0	0
7501	Privileged communication	0	0	0	0	0	0	0	0

9. Treatment Environment

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7081	Safe environment	33	0	0	33	6	31	29	0
7082	Sanitary/humane environment	7	0	0	7	1	15	4	0
7086	Least restrictive setting	0	0	0	0	0	0	0	0

10. Freedom of Movement

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7441	Restrictions/limitations	2	0	0	2	1	1	2	0
7400	Restraint	0	0	0	0	0	0	0	0
7420	Seclusion	1	0	0	1	0	1	0	0

11. Financial Rights

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7301	Safeguarding money	0	0	0	0	0	0	0	0
7302	Facility account	0	0	0	0	0	0	0	0
7303	Easy access to money in account	0	0	0	0	0	0	0	0
7304	Ability to spend or use as desired	0	0	0	0	0	0	0	0
7305	Delivery of money upon release	0	0	0	0	0	0	0	0
7360	Labor & Compensation	0	0	0	0	0	0	0	0

12. Personal Property

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7267	Access to entertainment materials, information, news	1	0	0	1	0	1	0	0
7281	Possession and use	5	0	0	5	1	3	2	0
7282	Storage space	0	0	0	0	0	0	0	0
7283	Inspection at reasonable times	0	0	0	0	0	0	0	0
7285	Exclusions	0	0	0	0	0	0	0	0
7286	Limitations	1	0	0	1	0	1	0	0
7287	Receipts to recipient and to designated individual	1	0	0	1	0	1	0	0
7288	Waiver	0	0	0	0	0	0	0	0
7289	Protection	0	0	0	0	0	0	0	0

13. Suitable Services

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	Recipient Population		
							MI	DD	SED
1708	Dignity and Respect	53	0	0	53	13	27	27	0
7003	Informed consent	1	0	0	1	0	1	0	0
7029	Information on family planning	0	0	0	0	0	0	0	0
7049	Treatment by spiritual means	0	0	0	0	0	0	0	0
7080	Mental health services suited to condition	114	0	0	114	33	35	78	1
7100	Physical and mental exams	0	0	0	0	0	0	0	0
7130	Choice of physician/mental health professional	2	0	0	2	1	1	15	0
7140	Notice of clinical status/progress	0	0	0	0	0	0	0	0
7150	Services of mental health professional	0	0	0	0	0	0	0	0
7160	Surgery	0	0	0	0	0	0	0	0
7170	Electro convulsive therapy (ect)	0	0	0	0	0	0	0	0
7180	Psychotropic drugs	0	0	0	0	0	0	0	0
7190	Notice of medication side effects	0	0	0	0	0	0	0	0

14. Treatment Planning

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7121	Person-centered process	0	0	0	0	0	0	0	0
7122	Timely development	0	0	0	0	0	0	0	0
7123	Requests for review	0	0	0	0	0	0	0	0
7124	Participation by individual(s) of choice	0	0	0	0	0	0	0	0
7125	Assessment of needs	0	0	0	0	0	0	0	0

15. Photographs, Fingerprints, Audiotapes, One-way Glass

Code	Category	Received	Interventions	Interventions Substantiated	Investigations	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7241	Prior consent	2	0	0	2	0	0	2	0
7242	Identification	0	0	0	0	0	0	0	0
7243	Objection	0	0	0	0	0	0	0	0
7244	Release to others/return	0	0	0	0	0	0	0	0
7245	Storage/destruction	0	0	0	0	0	0	0	0

TOTALS	418	0	0	418	119	194	315	1
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17. No Right Involved

Code	Category	Received
0000	No right involved	25

18. Outside Provider Jurisdiction

Code	Category	Received
0001	Outside provider jurisdiction	77

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	MI	DD	SED	DD-CWP	HSW
Abuse Class I - Sexual Abuse	Residential MI	Employment Termination												
Abuse class II - exploitation	Residential DD	Employment Termination	Other											
Abuse class II - exploitation	Residential MI	Other	Contract Action	Training										
Abuse class II - exploitation	Residential MI	Recipient Transfer to Another Provider/Site	Contract Action											
Abuse Class II - nonaccidental agt	Out Patient	Suspension	Written Reprimand	Employment Termination										
Abuse Class II - nonaccidental agt	Residential DD	Employee left the agency, but substantiated												
Abuse Class II - nonaccidental agt	Residential DD	Employment Termination												
Abuse Class II - nonaccidental agt	Residential DD	Suspension	Written Reprimand											
Abuse class II - unreasonable force	Other	Employment Termination												
Abuse class II - unreasonable force	Out Patient	Written Counseling	Training											
Abuse class II - unreasonable force	Residential DD	Employment Termination	Suspension	Staff Transfer										
Abuse class II - unreasonable force	Residential DD	Employment Termination												
Abuse class II - unreasonable force	Residential MI	Verbal Counseling	Written Counseling	Staff Transfer										
Abuse - Class III	Other	Staff Transfer	Written Reprimand	Training										
Abuse - Class III	Out Patient	Employment Termination												
Abuse - Class III	Out Patient	Written Counseling	Training											
Abuse - Class III	Residential DD	Employee left the agency, but substantiated												

REMIEDIATION TOTALS	
Verbal Counseling	12
Written Counseling	12
Verbal Reprimand	0
Written Reprimand	30
Suspension	24
Demotion	2
Staff Transfer	8
Training	43
Employment Termination	24
Employee left the agency, but substantiated	16
Contract Action	12
Policy Revision/Development	10
Environmental Repair/Enhancement	3
Plan of Service Revision	3
Recipient Transfer to Another Provider/Site	2
Other	10
Pending	0

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	MI	DD	SED	SED-W	DD-CWP	HSW
Abuse - Class II	Residential DD	Employment Termination														
Abuse - Class II	Residential DD	Suspension	Employment Termination													
Abuse - Class II	Residential DD	Suspension														
Abuse - Class II	Residential DD	Written Reprimand														
Access to rights system	Other	Contract Action														
Access to telephone, mail	Residential DD	Contract Action														
Choice of physician/mental health services/medication	Out Patient	Employee left the agency, but substantiated	Employee left the agency, but	Other	Other											
Dignity and respect	Other	Employment Termination														
Dignity and respect	Other	Verbal Counseling														
Dignity and respect	Out Patient	Employee left the agency, but substantiated														
Dignity and respect	Out Patient	Training	Other													
Dignity and respect	Out Patient	Verbal Counseling														
Dignity and respect	Out Patient	Verbal Counseling														
Dignity and respect	Residential DD	Suspension														
Dignity and respect	Residential DD	Verbal Counseling	Contract Action													
Dignity and respect	Residential DD	Verbal Counseling	Training													
Dignity and respect	Residential MI	Written Reprimand	Training													
Dignity and respect	Residential MI	Written Reprimand	Training													
Dignity and respect	Residential MI	Written Reprimand	Training													
Dignity and respect	Supported Employment	Written Reprimand														
Disclosure of confidential information	Other	Written Reprimand														
Disclosure of confidential information	Residential MI	Written Reprimand	Demotion													
Failure to report (other than Abuse/Neglect)	Out Patient	Training														
Family dignity & respect	Other	Employment Termination														
Family dignity & respect	Other	Written Counseling	Staff Transfer													
Family dignity & respect	Other	Written Reprimand	Staff Transfer													
Family dignity & respect	Residential DD	Verbal Counseling	Contract Action													
Mental health services suited to condition	Day Program DD	Training														
Mental health services suited to condition	Other	Employment Termination														
Mental health services suited to condition	Other	Employment Termination														
Mental health services suited to condition	Other	Verbal Counseling														
Mental health services suited to condition	Other	Written Reprimand	Other													
Mental health services suited to condition	Out Patient	Employee left the agency, but substantiated														
Mental health services suited to condition	Out Patient	Employee left the agency, but substantiated														
Mental health services suited to condition	Out Patient	Employment Termination														
Mental health services suited to condition	Out Patient	Policy Revision/Development	Employee left the agency, but													
Mental health services suited to condition	Out Patient	Policy Revision/Development														
Mental health services suited to condition	Out Patient	Training														
Mental health services suited to condition	Out Patient	Verbal Counseling														
Mental health services suited to condition	Out Patient	Written Counseling														
Mental health services suited to condition	Out Patient	Written Reprimand	Training													
Mental health services suited to condition	Residential DD	Employee left the agency, but substantiated														
Mental health services suited to condition	Residential DD	Employment Termination														
Mental health services suited to condition	Residential DD	Plan of Service Revision	Written Counseling	Training												
Mental health services suited to condition	Residential DD	Suspension	Written Counseling	Training												
Mental health services suited to condition	Residential DD	Training	Policy Revision/Development	Verbal Counseling												
Mental health services suited to condition	Residential DD	Training	Suspension	Written Reprimand												
Mental health services suited to condition	Residential DD	Training	Training	Employee left the agency, but												
Mental health services suited to condition	Residential DD	Training	Training													
Mental health services suited to condition	Residential DD	Training	Written Reprimand													
Mental health services suited to condition	Residential DD	Training	Policy Revision/Development													
Mental health services suited to condition	Residential DD	Written Counseling	Training													
Mental health services suited to condition	Residential DD	Written Counseling	Training													
Mental health services suited to condition	Residential DD	Written Reprimand	Training	Contract Action												
Mental health services suited to condition	Residential DD	Written Reprimand	Training													
Mental health services suited to condition	Residential DD	Written Reprimand														
Mental health services suited to condition	Residential MI	Suspension	Training													
Mental health services suited to condition	Residential MI	Training														
Mental health services suited to condition	Residential MI	Written Counseling	Training	Written Counseling	Training	Policy Revision/Development	Other									
Mental health services suited to condition	Residential MI	Written Reprimand	Policy Revision/Development													
Mental health services suited to condition	Residential DD	Written Reprimand	Plan of Service Revision													
Neglect - Class I	Out Patient	Written Reprimand	Policy Revision/Development													
Neglect - Class I	Residential DD	Written Reprimand	Plan of Service Revision													
Neglect - Class II	Residential DD	Suspension	Training	Staff Transfer												
Neglect - Class II	Residential DD	Suspension	Training													
Neglect - Class II	Residential MI	Policy Revision/Development	Employee left the agency, but													
Neglect - Class II	Other	Employment Termination														
Neglect - Class II	Other	Employment Termination														
Neglect - Class II	Other	Suspension														
Neglect - Class II	Residential DD	Employee left the agency, but substantiated	Training													
Neglect - Class II	Residential DD	Employee left the agency, but substantiated														
Neglect - Class II	Residential DD	Employee left the agency, but substantiated														
Neglect - Class II	Residential DD	Employment Termination														
Neglect - Class II	Residential DD	Employment Termination														
Neglect - Class II	Residential DD	Suspension	Employment Termination													
Neglect - Class II	Residential DD	Suspension	Employment Termination													
Neglect - Class II	Residential DD	Suspension	Staff Transfer													
Neglect - Class II	Residential DD	Suspension	Training													
Neglect - Class II	Residential DD	Suspension	Training													
Neglect - Class II	Residential DD	Suspension	Written Reprimand	Training	Verbal Counseling											
Neglect - Class II	Residential DD	Suspension	Written Reprimand	Training	Other											
Neglect - Class II	Residential DD	Suspension														
Neglect - Class II	Residential DD	Written Reprimand	Suspension	Employment Termination												
Neglect - Class II	Residential DD	Written Reprimand	Suspension													
Neglect - Class II	Residential MI	Contract Action	Other													
Neglect - Class II	Residential MI	Employee left the agency, but substantiated														
Neglect - Class II	Residential MI	Written Reprimand	Suspension	Training												
Neglect - Class II	Residential MI	Written Reprimand	Training	Demotion												
Neglect - Class II - failure to report	Other	Written Reprimand														
Property - possession and use	Other	Employment Termination	Staff Transfer													
Restrictions/limitations	Residential MI	Plan of Service Revision														
Retaliation/harassment	Residential DD	Contract Action	Contract Action	Contract Action	Suspension											

REMIEDIATION TOTALS	
None	0
POPULATION TOTALS	
MI	0
DD	0
SED	0
SED-W	0
DD-CWP	0
HSW	0
PROVIDER TOTALS	
Out Patient	20
Residential MI	22
Residential DD	56
Residential MI & DD	0
Inpatient	0
Day Program MI	0
Day Program DD	1
Workshop (prevocational)	0
Supported Employment	1
ACT	0
Case Management	0
Psychosocial Rehabilitation	0
Partial Hospitalization	0
SIP	0
Crisis Center	0
Children's Foster Care	0
Clubhouse/Drop-in Center	0
Respite Homes	0
Other	19

Population	
MI	Adult Mentally Ill
DD	Developmentally Disabled
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
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
7224	Abuse Class I - Sexual Abuse
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	Ability to spend or use as desired
7487	Access by P & A to records
7760	Access to rights system
7263	Access to telephone, mail
4510	Admission process
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
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
7123	Person-Centered - requests for review
7122	Person-Centered - timely development
7124	Person-Centered- participation by individual(s) of choice
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
Ascension Providence Rochester
Ascension St John Hospital
AuSable Vally CMHA
Barry County CMHA
Bay-Arenac Behavioral Health
Beaumont Hospital - Farmington Hills
Beaumont Hospital - Royal Oak
Beaumont Hospital - Taylor
Behavioral Center of Michigan
Berrien MHA/Riverwood
Bronson Battle Creek - Fieldstone Center
Bronson Lakeview Community Hospital
Caro Center
Cedar Creek Hospital

Center for Forensic Psychiatry
Centra Wellness Network
CMH & SA Services of St Joseph County
CMH for Central Michigan
CMH of Ottawa County
CMHA of Clinton Eaton Ingham Counties
Copper Country CMH Services
Detroit Wayne Integrated Health Network
DMC - Detroit Receiving Hospital
DMC - Sinai-Grace Hospital
ForestView Psychiatric Hospital
Genesee Health System
Gogebic Community Mental Health Authority
Gratiot Integrated Health Network
Harbor Oaks Hospital
Havenwyck Hospital
Hawthorn Center
HealthSource Saginaw
HealthWest
Henry Ford Allegiance Hospital
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 Services
Integrated Services of Kalamazoo
Kalamazoo Psychiatric Hospital
Lapeer County CMH Services
Lenawee CMH Authority
LifeWays
Livingston County CMH Authority
Macomb County CMH Services
McLaren - Bay Region
McLaren – Flint
McLaren - Greater Lansing
McLaren - Lapeer Region
McLaren – Oakland
McLaren - Port Huron
Memorial Healthcare - Owosso
Mercy Health St Marys
Mercy Health Partners - Hackley Campus
Michigan Medicine
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 Center
North Country CMH
Northeast Michigan CMH Authority
Northern Lakes CMH
Northpointe Behavioral Healthcare Systems
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 CMH Authority
Samaritan Behavioral Center
Sanilac County CMH Authority
Shiawassee Health and Wellness
Sparrow - St. Lawrence Hospital
Spectrum Health Lakeland Hospital
St Clair County CMH Authority
St Joseph Mercy Hospital
St Joseph Mercy Hospital - Chelsea
St Joseph Mercy Hospital - Oakland
St Mary Mercy 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



Detroit Wayne Integrated Health Network

707 W. Milwaukee St.
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www.dwihn.org

FAX: (313) 833-2156
TDD: (800) 630-1044 RR/TDD: (888) 339-5588

Substance Use Disorder (SUD) Oversight Policy Board Report July 19, 2021 (10:00 am)

Presentation from the Director of Communication, Tiffany Devon
Presentation from the Director of the Call Center, Miriam Bielski
Presentation from Dr. Cynthia Arfkin

New Business:

Board Action 21-70

Tobacco and ENDS products

The SUD Dept requested \$4,000 in Block Grant funding from Treatment Block Grant Fund for LAHC prevention provider to educate the retailers and community on Electronic Nicotine Delivery System (ENDS) products. The Tobacco Section is providing funding for the period May 1, 2021-September 30, 2021. The SUD prevention provider's goal is to raise awareness of ENDS and research agencies for disposal of ENDS waste products. The allowable activities will be as follows: ENDS education, the development of material regarding ENDS, in addition, resources will include information in Arabic language. **This board action was approved**

Board Action 21-71

Treatment Providers Reimbursement Fee for ASAM Continuum Training

The SUD Dept requested approval to fund \$72,000.00 in Block Grant funding for clinicians to complete the mandatory 8- hour ASAM CONTIUUM training and meet the criteria of the SUD 1115 Medicaid Waiver. The ASAM CONTINUUM® provides counselors, clinicians and other treatment team members with a computer-guided, structured interview for assessing patients with addictive, substance-related conditions and to inform treatment planning. The decision engine is

Board of Directors

William T. Riley III, Chairperson
Dorothy Burrell
Jonathan C. Kinloch

Dora Brown, Treasurer
Lynne F. Carter, MD
Kevin McNamara

Dr. Cynthia Tauog, Secretary
Angelo Glenn
Bernard Parker

Michelle Jawad
Kenya Ruth

Eric W. Doeh, Interim President and CEO



based on The ASAM Criteria® and uses research-quality to generate a comprehensive patient report, that details DSM substance use disorder diagnoses, severity and imminent risks as well as a recommended treatment level of care determination. Each qualified clinician shall receive a reimbursement rate of \$400.00 for the cost to cover the training and participation. Along with this, there are several actions that need to be take for reimbursement cost of this training and the SUD Dept has communicated those efforts to the providers. The implementation deadline remains the same, October 1, 2021. This is the deadline that the Centers for Medicare and Medicaid Services approved for the state in the standard terms and conditions. **This board action was approved**

Board Action 21-72

Purchase Naloxone Kits

The SUD Dept requested board approval to purchase 2,500 Naloxone Kits at \$115.00 from Mountainside Medical Equipment, using Block Grant funds. This is due to the demand of drug overdose deaths that has increased significantly in Wayne County. Naloxone blocks or reverses the effects of opioid medication, including extreme drowsiness, slowed breathing, or loss of consciousness. An opioid is sometimes called a narcotic. Naloxone is used to treat a narcotic overdose in an emergency situation. This medicine should not be used in place of emergency medical care for an overdose. Naloxone is also used to help diagnose whether a person has used an overdose of an opioid. The intent of its use is to save lives in the Detroit Wayne County area. DWMHA has a plan to train and disseminate the medication to first responders interested in having the lifesaving medication for our Detroit Wayne County residents. The training will also educate law enforcement on how to access SUD prevention, treatment and recovery services in Wayne County. DWMHA would purchase the Naloxone kits, train and disseminate the medication for all first responders, providers and the community at large in Wayne County per request

Board Action 21-73

Eastside Family Against Narcotics (Abundant Community Recovery Services)

The SUD Department requested \$6,000.00 in Block Grant funding for the Eastside Family Against Narcotics (FAN) program for Abundant Community Recovery Services(ACRS) to host a FAN chapter on the eastside of Detroit. The program has gained the support of the 11th precinct and will be collaborating with Pleasant Grove Missionary Church, located at ??? to house and facilitate this FAN chapter for this project. To be consistent with the goals of FAN to develop, ACRS will create an atmosphere of culture, compassion and hope while addressing stigma and hopelessness. The funding will be for the following: to create a culture of compassion and hope while addressing stigma and distress and provide adequate manpower and a solid volunteer base to deliver the best possible community services and foster a pure message of hope. **This board action was approved.**

Board Action 21-74

SUD Sleeping Bag/Coats Initiative

The SUD Department requested \$40,800.00 in Block Grant funding for 400 Sleeping Bag/Coats for our Co-Occurring Homeless consumers. The Empowerment Plan's durable and weather-

resistant coat can be converted into a sleeping bag or an over-the-shoulder bag when not in use. The coats are intended to last for multiple seasons and materials used include upcycled fabric from companies such as General Motors and Patagonia. The Empowerment Plan will include 400 socks, hats and gloves. **This board action was approved.**

Board Action 21-75

Michigan Celebrate Recovery Walk

The SUD Department requested \$10,000.00 in Block Grant funds for the annual statewide Celebrate Recovery Walk and Rally. The event will be held at Belle Isle Park, Saturday, September 11, 2021. DWIHN will have a table with our ATOD educational materials. Celebrate Recovery Walk and Rally celebrates and honors the successes of the millions of Americans in recovery from alcoholism and drug addiction. This event is where people in recovery, their family and friends, addiction professionals and others can fellowship and speak out about the reality of recovery. There will be guest speakers and the message is always prevention and treatment work and recovery are possible. See attached documentation. **This board action was approved.**

Informational

SUD Director's Report

SUD Treatment Services Administrator

Prevention Services Manager's Report

State Opioid Response (SOR) Coordinator's Report

Report Submitted by Chairperson: Angelo Glenn



Interim President and CEO Report

Eric Doeh

July 2021

The month of July has been significant and busy here at DWIHN. We continue our advocacy and meeting with legislators regarding the system redesign. We launched some major initiatives including our Mobile Health Services and our Integrated Health Services platform. Moreover, we have expanded our jail diversion pilot with five additional cities/municipalities and police departments, and will be expanding to the 12th Precinct in Detroit Police Department. We have begun meeting with our providers that are Certified Community Behavioral Health Clinic (CCBHC) designated to begin that delivery of clinical services beginning in October. We are establishing all of the final and significant pieces including design, budget, communications and outreach regarding our efforts to be a Behavioral Health Home. We are optimistic as a result of recent news at the State level regarding the budget, that DWIHN will be one of the two sites added to the BHH demonstration.

We continue to review and adjust our workforce with respect to a safe return to work structure. We implemented a hybrid work schedule and made use of hoteling spaces to allow for social distancing and other guidelines established by the CDC. As for our crisis continuum and building on Woodward, we met with the Zoning Board for the City of Detroit and have continued to have additional community engagement to ensure that we are building not only an edifice but a partnership with neighbors and community. Our next meeting before the Zoning Board will be on August 16, 2021.

ADVOCACY/LEGISLATIVE EFFORTS

On June 23, we presented before the Wayne County Commission on Integrated Healthcare proposals and introduced House Bills by Sen. Mike Shirkey and Rep. Mary Whiteford. I, along with Robert Sheehan, discussed the proposals. Weeks later a resolution from the Wayne County Commission was passed stating its commitment to DWIHN and the need for Wayne County's most vulnerable residents to be offered high quality services to address serious mental illness, intellectual and developmental disabilities and substance use disorders in the behavioral healthcare community. Indicating that the proposed legislation could disrupt and destroy the community-based behavioral health system.

We continue to work with our lobbyists, Public Affairs Associates (PAA), to meet with legislators on their ideas on reshaping our behavioral healthcare system. We continue ongoing conversations with various legislators to discuss our position and help to inform them on the harm that could come from the various proposed house bills and integrated healthcare proposals. This group includes: Rep. Thanedar, Rep. Aiyash, Rep. Cavanagh, Sen. Chang, Rep. Yancey, Rep. Liberati, Rep. Whitsett, Rep. Bullock (tba) and Rep. Hammoud (tba). We shared with legislators DWIHN's white paper on the proposals and House Bills. The

document is also located on our website at <https://dwihn.org/carousel-IHC-Prioritizes-People-Public-Health-System.pdf>

DWIHN launched our mobile outreach partnership with Wayne Health and FordX providing COVID-19 vaccinations, physical health and behavioral health screenings. Our integrated health prevention program combines health services and brings them to residents throughout Wayne County. Mobile crisis intervention teams offer community-based services. Staff aboard the mobile units will be able to provide many services including flu shots, blood pressure and HIV screenings, telehealth services, resource assistance, primary care physician referrals and much more. No appointment is needed, ID and insurance are not required.

FINANCE

In response to a request made by DWIHN to the thirteen skill building providers within our Network, seven of them submitted a request for financial assistance. On June 18, 2021, DWIHN issued \$1 million in stability payments to those seven providers.

In 2019, the Michigan Department of Health and Human Services (MDHHS) established a workgroup that focused on the development of standardized costs allocation methodologies across all services and administrative costs. The new methodologies will impact DWIHN in how we account for departmental budgets of our Workforce Development and Residential Units. The change will require certain employee costs to be reported as administrative as opposed to a service cost. DWIHN has reflected this change in the FY22 proposed budget submission.

In January 2020, DWIHN withdrew \$13 million from Independence Bank to assist with cash flow. DWIHN's CFO will replenish a portion of the cash based on DWIHN's future cash flow needs.

ACCESS CENTER

Staffing	Provider Projects
<ul style="list-style-type: none"> ○ Implemented performance Metrics for each call center unit. ○ Created standard reporting for evaluation. ○ Focused processes towards "First Call Resolution" ○ Began silent monitoring with real-time feedback ○ Creating a robust Training program for all Access Call Center units 	<ul style="list-style-type: none"> ○ Partnering with Corporate areas on Program implementation ○ Reviewing MHWIN to streamline manual processes. ○ Established a Provider Monthly meeting specific to Access Call Center ○ Developing Policies and Procedures that support Regulatory Standards

CUSTOMER SERVICE

On June 9, DWIHN collaborated with the City of Detroit to host the Vaccine Town Hall Discussion for People with Disabilities with our very own Dr. Shama Faheem and Chief Public

Health Officer Denise Fair. This conversation highlights the partnership of one of our very own peer mentor Jaime Junior who is a member of the City of Detroit's Office of Disability Rights. This town hall is meant to educate and offer resources to the people we serve about the COVID-19 vaccination. The Detroit Office for Disabilities Affairs is designed to increase independence, opportunities, community participation, safety, and wellness of persons with disabilities in the City of Detroit. Our peers work to advocate and ensure inclusion, representation, and equity of persons with disabilities as it relates to the City's programs and services, including housing, transportation, communications and employment opportunities.

We received a MDHHS award notification for drop-in center health and wellness (\$7,500) and clubhouse spend down (\$340,019).

Staff engaged, trained and coordinated a train-the trainer session for a diverse group of peers for the DWIHN Oral Health initiative. Training was on June 14 and a practice run was organized for June 28. Additionally, worked with the Coding and Procedure Workshop to develop a Bulletin for tracking use of the service, and facilitates practice session with the peers. DWIHN's four peers in the Integrated Health unit were also trained. The program launched on July 1, 2021. We joined with the University of Michigan to evaluate administration of the program with the six peers employed by Central City Integrated Health Dental Clinic.

FACILITIES

Crisis Assessment Center - Community Engagement & Outreach

- June 29 - City of Detroit Building Zoning Appeals Dept Hearing
- July 2 - Emailed "Community Conversation" invitation flyers to North End Residents, Block Club Members and previous attendees at public hearings
- July 7 - Email from Eric Doeh to appellants
- July 8 - Distributing "Community Conversation" invitation flyers on the blocks surrounding 8726 Woodward
- July 9 - DWIHN staff and our Mobile Health Van participated in Friday's on King Community Outreach Event
- July 13 - Emailed "Community Conversation" invitation flyers to North End Residents, Block Club Members and previous attendees at public hearings
- July 13 - Meeting with Rev. Yvette Griffin, Council of Baptist Pastors
- July 15 - Community Engagement at Proposed Site
- August 16 - City of Detroit Building Zoning Appeals Department Hearing

Milwaukee Building

- ✓ Social Distancing/Glass Installation completed the week of March 22
- ✓ Board Room Renovation
 - relocation/renovation of the board table – waiting on two pieces to arrive for max social distancing
 - installation of carpet ordered, to be installed after table moved
 - moving electrical
 - paint/touch-up to be done after table moved

INTEGRATED HEALTHCARE

DWIHN's efforts in becoming a Lead Entity of a Behavioral Health Home (BHH) for Region 7 is progressing. This BHH model is an integrated care approach to services that treats the whole person in regard to both behavioral and physical health. DWIHN submitted a start-up fund request that is currently being reviewed for approval by MDHHS. The Behavioral Health Home is being expanded to two additional regions across the State and is tentatively slated to begin 10/1/2021. DWIHN is currently working through the Health Home Partner certification process with MDHHS that DWIHN can roll out to our potential Health Home Partners.

DWIHN began its partnership with Wayne Health and Ford X to provide mobile physical and behavioral health outreach and engagement for members of our community. This partnership began in July 2021. DWIHN is providing mental health screening, referral and treatment services in mobile site locations to increase outreach and access to the community. This utilizes a "no 4-wall approach" which improves timely access into services.

RESIDENTIAL SERVICES

Residential staff continues to closely monitor COVID-19 related issues, including tracking the number of COVID positive adult foster care staff members, and the number of persons receiving vaccinations. Each month we are seeing an improvement in overall vaccination numbers. **Over eighty-eight percent (88%) of persons living in licensed residential settings have been fully vaccinated.** DWIHN has seen a significant drop in COVID positive cases in June, with only one case being reported. There was no utilization of COVID transitional homes in June.

CHILDREN'S INITIATIVES

Autism - There continues to be an increase in referrals for autism services. DWIHN is currently reviewing all RFP applications to add additional locations in identified gap areas within the county. DWIHN also has an increased need for autism evaluation services and is working with an identified provider to provide temporary assistance in this area until a new RFP is provided.

Children's Outpatient Services - DWIHN has seen a reduction in children receiving outpatient services over this last year during the pandemic. This is likely related to schools and primary health care offices being closed, which was a significant referral source. DWIHN is working with our children's providers to address barriers to service. DWIHN has increased our outreach efforts by attending community events, schools, and working with our children service providers to increase mental health awareness, information, and access to services. DWIHN has also been holding case consultation meetings between our Crisis Service, UM, Children's Initiatives and Chief Medical Officer to review youth waiting in the ED due to lack of hospital resources or safe discharge plans. This is a proactive collaborative effort to address barriers and develop timely resolution.

POLICE DEPARTMENT CIT AND CO-RESPONSE INITIATIVES

DWIHN continues its collaboration with the Detroit Police Department in providing Crisis Intervention, training and co-response. This assists by connecting persons to crisis

stabilization services and other needed behavioral health services. DWIHN has had other Wayne County police departments outreach to us to request this collaboration. As a result, DWIHN will be expanding these programs to other police departments as well.

SUBSTANCE USE SERVICES

The Opioid Health Home (OHH) pilot currently has 85 individuals enrolled. DWIHN is the Lead Entity for our region and has nine Health Partners providing the direct services. The official start date for the OHH Medicaid carve out program is October 1, 2021 (it is currently being funded with SOR funds). The team meets weekly on its implementation plan to ensure DWIHN is capturing all needed information in our electronic health record and to be prepared for the roll out on 10/1/2021.

DWIHN continues is Naloxone Training and providing kits for providers. DWIHN is increasing the number of providers that can train and provide Naloxone in the community. MDHHS is implementing use of the SAM to replace the GAINs assessment starting October 1, 2021. DWIHN has assisting with providing this training in preparation for this implementation. **DWIHN is also receiving additional COVID-19 Relief funding (\$3 Million) through the State of Michigan.**

QUALITY IMPROVEMENT

DWIHN has been accredited for three years through the National Committee for Quality Assurance (NCQA). DWIHN received high marks and perfect scores in several critical areas including Member Experience, Self-Management Tools, Clinical Practice Guidelines, Clinical Measurement Activities, Coordination of Behavioral Healthcare and Collaboration between Behavioral Health and Medical Care. DWIHN scored 92.49 out of a possible 100 points.

Performance Measurement Validation - The validation of performance measures is one of the mandatory external quality review activities that the Balanced Budget Act requires state Medicaid agencies to perform. The purpose of the PMV is to validate the data collection and reporting processes used to calculate the performance measure rates. The 2021 PMV review was held on June 16, 2021. Outcomes from the review will be reported to Program Compliance and other appropriate committees as required.

COMMUNICATIONS

DWIHN staff jumped in to assist some of our members and providers that were devastated by the recent floods, we provided supplies and resources in the Dearborn area. Additional resources were provided to our members and providers through statewide and federal agencies who were offering assistance to flood victims.

I sat down with Fox 2 to discuss how everyone is adjusting due to the pandemic and that people change at a different pace. I also discussed our free Mental Health Checkup screening that's available at www.dwihn.org.

<https://www.fox2detroit.com/video/952679>

On June 9, DWIHN Chief Medical Officer Dr. Faheem and Children's Initiatives Director Cassandra Phipps were invited by the City of Detroit's Office of Disability Affairs to

participate in a roundtable discussion about the benefits of the vaccine for adults and children, and also the stigma associated with it.

On June 22, DWIHN Chief Medical Officer Dr. Shama Faheem provided a mental health presentation to staff at WSU Office of Community Engagement Research which is a part of the Wayne State Clinical Research Service Center. Dr. Faheem spoke about the importance of the vaccine.

Also, on June 22, Clinical Officer Ebony Reynolds provided a Mental Health presentation to Wayne County District 7 constituents in Commissioner Gabe Leland's district. This was a well-attended event and the group was appreciative of the mental health information and resources DWIHN offered.

Our "Ask the Doc" 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

MDHHS 'Stay Well Campaign' - DWIHN shares social media posts provided by MDHHS which focuses on share workshops and webinars geared toward different audiences including immigrants, the unemployed, teens, healthcare workers, grief support & family webinars.

In the Media

Andrea Smith was interviewed on Rev. Horace Sheffield's show, Real Talk. She discussed DWIHN's CIT program and partnership with the Detroit Police Department.

<https://furman.wetransfer.com/downloads/3fd9fbaae0edb62de064af0b95be2c1620210625010740/32300d16f0bfc6bdfe414ca6f14193f620210625010740/23fd12>

DWIHN was invited to partner with the Michigan Chronicle for their special Mental Health issue in which DWIHN was featured on the back page and shared resources like the Mindwise assessment and the MyStrength app.

https://issuu.com/michronicle/docs/mind_yourself_-_maintaining_mental_health_admist_a

Scripps - Mental Health messaging continues on Channel 7, TV 20 & Bounce which focuses on promoting the resources that are available to anyone with mental health concerns as well as sharing the 24/7 Access Helpline 24/7.

Comcast - DWIHN's SUD department has a partnership with Comcast. The 6-month agreement allows Comcast to air SUD messages on various platforms. So far, it's been a successful program with:

- 198,831 impressions
- 1,347 total hours of the audience interacting with DWIHN messages
- 78% of the commercials were seen in full completion

Social Media

MDHHS Stay Well Campaign - DWIHN shares social media posts provided by MDHHS which focus on share workshops and webinars geared toward different audiences including immigrants, the unemployed, teens, healthcare workers, grief support & family webinars.

Outfront Media

New billboards are up in all locations, most focus on mental health and wellness and are geared toward young people and men.



**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 19-45R Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 7/21/2021

Name of Provider: Pettus, Thomas

Contract Title: Flinn Jail Navigator

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 7/14/2021

Proposed Contract Term: 1/1/2019 to 12/31/2021

Amount of Contract: \$ 49,896.89 Previous Fiscal Year: \$ 200,000.00

Program Type: Modification

Projected Number Served- Year 1: 100 Persons Served (previous fiscal year): 80

Date Contract First Initiated: 1/1/2019

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).

DWIHN is requesting a TIME ONLY extension of a contract to utilize carryover funds from a two-year Mental Health Navigator Pilot Program that utilized evidence based programs and best practice principles to provide post-booking diversion for persons with mental health disorders who have misdemeanor offenses. The program builds upon the best practices of the patient navigator model, utilizing a person-centered, time-sensitive approach to help individuals with SMI leave jail and obtain mental health treatment in the community. It also incorporates evidence-based practices (EBP) of Motivational Interviewing (MI) and Trauma-Informed Care.

The original amount of the grant was \$200,000 and commenced on January 1, 2019 and ended on December 31, 2020. Approximately \$50,000 remain on the contract and DWIHN is requesting the funds extend through December 31, 2021.

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

Source of Funds: Other

Fee for Service (Y/N): Y

Revenue	FY 20/21	Annualized
Local Grant	\$ 49,896.89	\$ 49,896.89
	\$ 0.00	\$ 0.00
Total Revenue	\$ 49,896.89	\$ 49,896.89

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64933.822608.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Interim CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Eric Doeh

Stacie Durant

Signed: Monday, July 12, 2021

Signed: Monday, July 12, 2021

Board Action Taken

The following Action was taken by the Full Board on the 21st day of July, 2021.

X Approved

Rejected

Modified as follows:

Executive Director -initial here: _____

Tabled as follows:

Signature:


Board Liaison

Date:

July 21st 2021

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: BA#21-23R3 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 7/21/2021

Name of Provider: DWIHN Provider Network - see attached list

Contract Title: Provider Network System

Address where services are provided: Provider List Attached

Presented to Program Compliance Committee at its meeting on: 7/14/2021

Proposed Contract Term: 7/1/2021 to 9/30/2021

Amount of Contract: \$ 614,412,102.00 Previous Fiscal Year: \$ 579,139,150.00

Program Type: Continuation

Projected Number Served- Year 1: 68,932 Persons Served (previous fiscal year): 73,446

Date Contract First Initiated: 7/1/2021

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).

Detroit Wayne Integrated Health Network (DWIHN) is requesting approval for this revised board action to expand the scope of services for Genoa Healthcare, LLC, formerly known as Advance Care to include an indigent pharmacy program for uninsured consumers. Currently, Genoa Pharmacy is located throughout Wayne County including on-site at several of our network providers. The program is a requirement in accordance with the Mental Health Code and is included in the General Fund Priority allocation.

The contract is estimated at approximately \$45,000 per year based on utilization with the former MCPNs prior to system transformation.

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

Source of Funds: Multiple

Fee for Service (Y/N): Y

Revenue	FY 20/21	Annualized
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Multiple	\$ 614,412,102.00	\$ 614,367,102.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 614,367,102.00	\$ 614,367,102.00

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: VARIOUS

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Interim CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Eric Doeh

Signed: Friday, July 9, 2021

Stacie Durant

Signed: Friday, July 9, 2021

Board Action Taken

The following Action was taken by the Full Board on the 21st day of July, 2021.

X Approved

Rejected

Modified as follows:

Executive Director -initial here: _____

Tabled as follows:

Signature: 
Board Liaison

Date: July 21st 2021

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: BA21-60R Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 7/21/2021

Name of Provider: Michigan Peer Review Organization

Contract Title: Michigan Peer Review Organization

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 7/14/2021

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

Amount of Contract: \$ 100,000.00 Previous Fiscal Year: \$ 45,000.00

Program Type: Modification

Projected Number Served- Year 1: 18 Persons Served (previous fiscal year): 45

Date Contract First Initiated: 3/8/2021

Provider Impacted (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).

In March 2021, DWIHN board approved a \$20,000 increase in the initial \$45,000 contract due to DWIHN not having the availability of a psychiatrist for appeals & denials, the UM Team has utilized MPRO for peer-to-peer reviews.

DWIHN is requesting an additional increase of \$30,000 to the contract for the remaining of the fiscal year September 30, 2021 for a total contract amount of \$100,000.

This service contract will allow the Utilization Management (UM) Department the ability to collaborate on utilization reviews and authorization decisions related to the provision of behavioral health services as well as assist with decision-making process for clinical claims adjudication.

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

Source of Funds: Multiple

Fee for Service (Y/N): N

Revenue	FY 20/21	Annualized
Multiple	\$ 100,000.00	\$ 100,000.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 100,000.00	\$ 100,000.00

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64917.815000.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Interim CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Eric Doeh

Stacie Durant

Signed: Tuesday, July 13, 2021

Signed: Tuesday, July 13, 2021

Board Action Taken

The following Action was taken by the Full Board on the 21st day of July, 2021.

X Approved

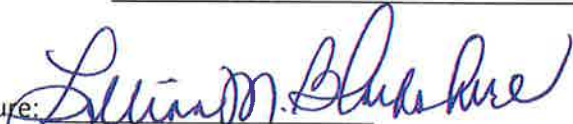
Rejected

Modified as follows:

Executive Director -initial here: _____

Tabled as follows:

Signature:


Board Liaison

Date:

July 21st 2021

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-64 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 7/21/2021

Name of Provider: See attached list

Contract Title: COVID-19 Mental Health Block Grant Supplemental Funding

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 7/14/2021

Proposed Contract Term: 6/1/2021 to 3/14/2023

Amount of Contract: \$ 1,545,000.00 Previous Fiscal Year: \$ 0.00

Program Type: New

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

Date Contract First Initiated: 6/1/2021

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).

DWIHN is requesting the approval of \$1,545,000 for twenty two (22) month contract for COVID-19 Mental Health Block Grant Supplemental Funding for Mental Health Connections, Training, Technology & Outreach. DWIHN will implement projects focusing on connecting individuals to care through services and education. Strong emphasis will be placed on the use of systems navigators, data and technology.

DWIHN will enter into several comp source agreements with vendors (see attached allocation grid) to carry out the approved projects. It should be noted that \$431,000 of funds are unallocated and providers are TBD. Once the providers have been selected, a revised board action will be presented to the board.

The grant award and contract period is June 1, 2021 through March 14, 2023. Providers will not begin work until the board has approved the board action.

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

Source of Funds: Block Grant

Fee for Service (Y/N): Y

Revenue	FY 20/23	Annualized
Block Grant	\$ 1,545,000.00	\$ 1,545,000.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 1,545,000.00	\$ 1,545,000.00

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64933.822608.07100

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Interim CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Eric Doeh

Stacie Durant

Signed: Friday, July 9, 2021

Signed: Friday, July 9, 2021

Board Action Taken

The following Action was taken by the Full Board on the 21st day of July, 2021.

X Approved

Rejected

Modified as follows:

Executive Director -initial here: _____

Tabled as follows:

Signature:


Board Liaison

Date:

July 21st 2021

DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 21-67 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 7/21/2021

Name of Provider: WIT, Inc

Contract Title: Hudson-Webber Dashboard Project

Address where services are provided: 'None'

Presented to Finance Committee at its meeting on: 7/7/2021

Proposed Contract Term: 3/1/2021 to 3/31/2023

Amount of Contract: \$ 137,500.00 Previous Fiscal Year: \$ 0.00

Program Type: New

Projected Number Served- Year 1: 800 Persons Served (previous fiscal year): 0

Date Contract First Initiated: 3/1/2021

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).

DWIHN is requesting board approval a two year contract for an amount not to exceed \$137,500 in a local grant from Hudson-Webber foundation. DWIHN will allocate the funds to WIT, Inc. The project will provide a public facing Dashboard as it relates to data specific to the Wayne County Jail and non-public Dashboards and analysis the data as it relates to DWIHN and Wayne County Sheriff's Office for ad hoc analysis to increase jail diversion, reduce jail recidivism, and enhance provider notification of consumers released from incarceration.

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

Source of Funds: Local Funds

Fee for Service (Y/N): Y

Revenue	FY 20/21	Annualized
Local Grant	\$ 137,500.00	\$ 137,500.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 137,500.00	\$ 137,500.00

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: TBD

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Interim CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Eric Doeh

Stacie Durant

Signed: Wednesday, June 23, 2021

Signed: Wednesday, June 23, 2021

Board Action Taken

The following Action was taken by the Full Board on the 21st day of July, 2021.

X Approved

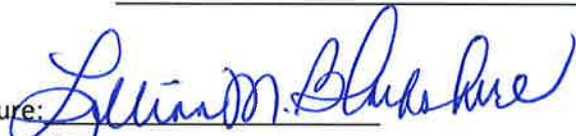
Rejected

Modified as follows:

Executive Director -initial here: _____

Tabled as follows:

Signature:


Board Liaison

Date:

July 21st 2021

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-71 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 7/21/2021

Name of Provider: American Society of Employees, Inc.

Contract Title: Leadership Training Services

Address where services are provided: 707 W. Milwaukee

Presented to Finance Committee at its meeting on: 7/7/2021

Proposed Contract Term: 3/1/2021 to 9/30/2022

Amount of Contract: \$ 106,000.00 Previous Fiscal Year: \$

Program Type: Modification

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

Date Contract First Initiated: 10/1/2017

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).

The Detroit Wayne Integrated Health Network is requesting approval of a modification to our Agreement with the American Society of Employers (ASE) for training services.

The modification is needed to increase funding by \$66,000.00 to retain ASE to provide leadership and supervision training for executive leadership, directors and managers at DWIHN. In addition, DWIHN would like to extend the contract through 9/30/22.

The total amount of the Agreement will be \$106,000.00, which was initially \$40,000 and ended on 9/30/21.

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	\$ 106,000.00	\$ 106,000.00
	\$	\$ 0.00

Total Revenue	\$ 106,000.00	\$ 106,000.00
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Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64910.817000.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Interim CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Eric Doeh

Stacie Durant

Signed: Monday, June 28, 2021

Signed: Monday, June 28, 2021

Board Action Taken

The following Action was taken by the Full Board on the 21st day of July, 2021.

X Approved

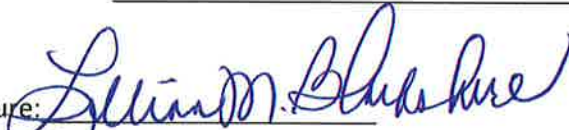
Rejected

Modified as follows:

Executive Director -initial here: _____

Tabled as follows:

Signature:


Board Liaison

Date:



**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-72 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 7/21/2021

Name of Provider: Plante & Moran, PLLC

Contract Title: Annual Financial Statement Audits

Address where services are provided: None'

Presented to Finance Committee at its meeting on: 7/7/2021

Proposed Contract Term: 9/1/2021 to 6/30/2024

Amount of Contract: \$ 461,535.00 Previous Fiscal Year: \$ 453,063.00

Program Type: New

Projected Number Served- Year 1: 70,000 Persons Served (previous fiscal year): Not applicable

Date Contract First Initiated: 8/1/2021

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).

DWIHN is requesting the approval of a three (3) contract with a two year option for renewal for the annual financial statement audit, Single Audit, and Compliance Examination for the fiscal years ended September 30, 2021, 2022, and 2023.

In response to RFP Control #2021-004 issued on 4/27/2021 whereby three proposals were received, Plante Moran PLLC. was recommended as the most responsive bidder for an amount not to exceed \$461,535 for the three year period.

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

Source of Funds: Multiple

Fee for Service (Y/N): Y

Revenue	FY 20/21	Annualized
Multiple	\$ 461,535.00	\$ 461,535.00

	\$ 0.00	\$ 0.00
Total Revenue	\$ 461,535.00	\$ 461,535.00

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64923.813000.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Interim CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Eric Doeh

Stacie Durant

Signed: Monday, June 28, 2021

Signed: Monday, June 28, 2021

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 21st day of July, 2021.

Approved

Rejected

Modified as follows:

Contract modified from a 3 year contract
to a one (1) year by the DWHN Board

Executive Director - Initial here: _____

Tabled as follows: _____

Signature

William M. Clarke
Board Liaison

Date

7/21/2021