



**Detroit Wayne
Integrated Health Network**

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**FULL BOARD MEETING
Wednesday, April 21, 2021
707 W. Milwaukee
(Virtual)
1:00 P.M. – 3:00 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 – March 17, 2021
Special Full Board Meeting – February 24, 2021
- VI. RECEIVE AND FILE** – Approved Finance Committee Minutes – March 3, 2021
Approved Program Compliance Committee Minutes – March 10, 2021
- VII. ANNOUNCEMENTS**
 - A) Network Announcements
 - B) Board Member Announcements
- VIII. SWEARING IN CEREMONY** – New Board Member - Commissioner - Jonathan C. Kinloch (Judge F. Burton)
- IX. NOMINATING COMMITTEE – OFFICER VACANCY – VICE CHAIR**
- X. BOARD COMMITTEE REPORTS**
 - A) Board Chair Report
 - 1) Annual Meeting
 - 2) Committee Appointments
 - 3) NatCon Annual Behavioral Health Virtual Conference – May 3rd – 5th
 - 4) Community Mental Health Association of Michigan Virtual Conference June 14th-17th

Board of Directors

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

Dora Brown, Treasurer,
Lynne F. Carter, M.D.
Kevin McNamara

Dr. Cynthia Taueg, Secretary
Angelo Glenn
Bernard Parker

Michelle Jawad
Kenya Ruth



- B) Executive Committee
 - 1) Board Self-Assessment
 - 2) New Board Member Orientation
 - 3) Board Study Session
- C) Finance Committee
- D) Program Compliance Committee
 - a. United Horizons FY 2020/2021 Contract
- E) Recipient Rights Advisory Committee

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

XII. AD HOC COMMITTEE REPORTS

- A) Policy/Bylaw Committee
- B) CEO Search Committee
 - BA #21-62 The Hunter Group – Search Firm

XIII. INTERIM PRESIDENT AND CEO MONTHLY REPORT

XIV. UNFINISHED BUSINESS

Staff Recommendations:

- A. BA #20-32 (Revised) Scripps Media (*Finance*)
- B. BA#21-25 (Revision 2) DWIHN FY 2020/2021 Operating Budget (*referred from Finance Committee*)

XV. NEW BUSINESS

Staff Recommendations:

- A. BA#21-59 – Public Affairs Associates (*Finance*)
- B. BA #21-60 – Michigan Peer Review Organization (*Program Compliance*)
- C. BA #21-61- National Council for Behavioral Health (*Program Compliance*)
- D. BA #21-62 - The Hunter Group – Search Firm (*Executive Committee*)

XVI. PROVIDER PRESENTATION – Team Wellness

XVII. REVIEW OF ACTION ITEMS

XVIII. 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).

XIX. ADJOURNMENT



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

BOARD MEMBERS PRESENT

Bernard Parker, Chair	Angelo Glenn
Commissioner Tim Killeen, Treasurer	Michelle Jawad
Dora Brown, Secretary	William T. Riley, III
Dorothy Burrell	Kenya Ruth
Lynne F. Carter, M.D.	Dr. Cynthia Taueg

BOARD MEMBERS EXCUSED: Kevin McNamara

GUEST(S): Ms. Susan Gannon, Chief Operating Officer, Futures Health

CALL TO ORDER

The meeting was called to order at 1:02 p.m. by Bernard Parker, Board Chair.

ROLL CALL

Roll call was taken by Ms. Dora Brown, Board Secretary and a quorum was present.

APPROVAL OF THE AGENDA

Mr. Parker, Board Chair, welcomed everyone to the meeting. The Chair noted that there were three items that needed to be added to the agenda under item IX. Board Committee Reports – Item 7 Continuation of CEO Search Committee and Item 8 Committee Appointments were added under the Board Chair Report and Item 2b – Completion of Former CEO Contract was added under the Executive Committee Report. The Chair called for a motion on the amended Agenda.

It was moved by Mr. Riley, III and supported by Ms. Brown to accept the Agenda as amended. Motion carried unanimously.

MOMENT OF SILENCE

Mr. Parker 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 February 17, 2021. **It was moved by Mr. Glenn and supported by Ms. Brown to approve the Full Board minutes of February 17, 2021. Motion carried unanimously.**

RECEIVE AND FILE

The Chair called for a motion to Receive and File the approved Finance Committee minutes from the February 3, 2021 meeting and the approved Program Compliance Committee minutes from the February 10, 2021 meeting. **It was moved by Commissioner Killeen and supported by Mr. Riley, III to “Receive and File” the approved minutes from the Finance Committee meeting of February 3, 2021 and the approved Program Compliance Committee minutes of February 10, 2021. The motion carried unanimously.**

ANNOUNCEMENTS

Network Announcements

Tiffany Devon, Director of Communications, provided an update on the vaccination clinic at Wayne County Community College located at the Outer Drive Campus. DWIHN has been on site for three weeks and has vaccinated over 4,000 people, which includes the people we serve, their caregivers, individuals who work in Detroit and essential workers. Today, they have vaccinated 140 people and are expecting 250 people, and will be there until the end of the week and will return in April to provide the second dose.

Mr. Parker applauded the efforts of DWHIN in providing the service and noted the need exists for the vaccination. He inquired if DWIHN will be visiting the residential homes. Interim CEO Doeh noted that we have started providing vaccinations for those in residential settings. We are working on partnerships with the pharmacies. Discussion ensued regarding a mobile unit to provide services.

Board Announcements

There were no Board announcements.

PROVIDER PRESENTATION – FUTURES HEALTH

Ms. Susan Gannon, Chief Operating Officer of Futures Health, provided a written PowerPoint for the record. An overview on their history, services, and the population served was provided. Ms. Gannon provided information on their Therapy Center, which serves 350 children with physical therapy, occupational therapy, speech psychology and social work. Information was provided on the Dearborn Therapy Center and their community-based services which provide psychological testing for guardianship, counseling and speech services. She also shared their COVID-19 protocols and information on the Professional Learning Community Groups (PLC) which provides speech therapy, special education, psychological social work, occupational and physical therapy and Nursing services. There was discussion on their services. Mr. Parker thanked them for the presentation and their patience as they had been on the agenda since February.

BOARD COMMITTEE REPORTS

Board Chair Report

Mr. Parker gave a verbal report. He stated the meeting with the Michigan Department of Health and Human Services (MDHHS) took place on February 26, 2021 and was attended by himself, Chief Riley, III; Eric Doeh and Brooke Blackwell from DWIHN and Dr. Khalidun; Mr. Jansen and Mr. Wieferrich from MDHHS. Discussion included DWIHN having an interim CEO in place; with our services and programs continuing with no changes and funding.

Mr. Parker also reported that DWIHN hosted the Metro Region Virtual Meeting on February 18, 2021. There were a number of board members in attendance. Mr. Alan Bolter of the Community Mental Health Association of Michigan (CMHAM) attended the meeting and provided a presentation and gave an update on the activities in Lansing. Each region Detroit/Wayne, Macomb and Oakland highlighted several projects in their respective areas and discussed the possibility of the CEO's need to meet and discuss areas for collaboration.

Mr. Parker reported that the Building Committee had been formed to handle the new building; however, at this time there is not an immediate need to continue with the Building Committee. He requested the committee be dissolved with the understanding that should a need arise, a new Building Committee could be formed under the incoming Chair. The Chair called for a motion.

It was moved by Ms. Ruth and supported by Dr. Taueg that the Ad Hoc Building Committee be dissolved. There was no further discussion. **Motion carried unanimously.**

The Chair reported that a request had been made by Deputy Legal Counsel Turner regarding the Allen Law Group, BA#20-36 (Revision 2). It was noted that the Legal Department was short of staff and an extension of the services of the Allen Law Group was requested. The Board Chair had given the Board Action exigent approval and is on the agenda today for consideration by the Board. There was no additional discussion.

It was reported by the Board Chair that the NatCon Annual Behavioral Health Conference was scheduled for May 3-5, 2021 and had been moved to a virtual platform. Any board member interested in attending should contact the Board Liaison as registration is required. There should be a lot of good information shared during the virtual conference.

The Mackinac Policy Conference is scheduled for September 20-23, 2021 on Mackinac Island and there are three board members that have expressed interest and are registered to attend.

The Board Chair reported that there was a discussion during the CEO Search Committee meeting regarding the continuation of the Committee while the new committees are being formed. It was stated that the CEO Search Committee is an Ad Hoc committee and is only established by the board and is not formed like their standing committees; the new chair, Chief Riley III, will be appointing new members but will have to be approved by the full board which would occur in April. Because the committee was moving at an accelerated pace they did not want to wait until the appointments were made in April and approved to function. It was recommended by the Committee that the current members of the CEO Search Committee be extended to April when the new members are appointed and approved by the full board. The Chair called for a motion.

Deputy Legal Counsel Turner noted that the motion would have to include that he, Mr. Parker, remain on the committee as a member because at present his membership on the committee was ex-officio and effective April 1 he would no longer be on the committee. It was noted the ad hoc committee would continue as it has been established by the board. The committee as of April 1 will consist of board members Ruth, Glenn, and Dr. Carter and should the reappointments of Mr. Riley and Dr. Taueg be approved by the Commission before April 1, they would remain on the committee. It was recommended that the motion be stated "that the CEO Search Committee continue with the present membership of the committee with Mr. Parker remaining on the CEO Search Committee as member of the committee until the new Chair appoints members to the ad hoc committee."

It was moved by Dr. Taueg and supported by Mr. Glenn that the CEO Search Committee continue with the present membership of the committee with Mr. Parker remaining on the CEO Search Committee as member of the committee until the new Chair appoints members to the Ad hoc committee. There was no further discussion. **Motion carried unanimously.**

The Board Chair reported that Wayne County has submitted that Mr. William Riley III be reappointed and Commissioner Kinloch be appointed to the DWIHN Board of Directors. The City of Detroit has submitted Dr. Cynthia Taueg be reappointed for a three-year term. This will go to the Wayne County Commission and after their meeting tomorrow they will be official members for the next three years. The Board Chair noted that we are losing Commissioner Killeen as he is not being reappointed and his term will expire March 31, 2021, which is a loss for the DWIHN Board. He stated that Commissioner Killeen was responsible for the Enabling Resolution that set up the Authority, he has

sat on the Finance Committee and served as Treasurer; we will be losing his leadership. He noted that Commissioner Killeen will still be involved in behavioral health work through the Commission.

Commissioner Killeen gave remarks regarding the ending of his term and stated that he has had many great relationships over the last seven years. He gave a brief history of the Authority and reminded all of the staff and consumers that were there during the establishment of the Authority of all of the meetings that were held. He noted his relationships have been outstanding and he appreciated all of the phone calls he has received and stated that the Authority has to continue to move forward. He also reported that he is the Chairperson of a new committee on behavioral health at the Commission and he will miss everyone at the monthly meetings.

Mr. Parker noted that we would normally have an annual meeting where outgoing members and officers would be recognized but since we did not have an annual meeting last year and he was unsure if we are having one this year he opened the floor for board members to give well wishes to Commissioner Killeen.

Mr. Glenn thanked Commissioner Killeen for his mentorship. Dr. Tauog thanked him for his legacy of service not only to the board, but also to the people we serve and applauded his great works. Ms. Brown thanked him for his service and noted that he has been a beacon on the Finance Committee and she was looking forward to him doing great things in the future. Chief Riley thanked him for his guidance, his help and his work on the Recipient Rights Advisory Committee. Ms. Ruth thanked him for extending himself to her by explaining policies and for his teachings. Dr. Carter noted that his experience and knowledge of the organization cannot be replaced and he put the importance of the organization first and he be extremely missed. Mr. Doeh thanked him on behalf of the staff for his work on Recipient Rights and Finance and noted that he has done so many great things for this organization. The Chair noted that he will continue to call on his service and he will greatly miss him.

Executive Committee

The Board Chair noted that the CEO Evaluation would not be completed for the CEO. It was recommended that it would not have great value and the purpose of the evaluation was to recommend areas for development. The Nominating Committee recommended that the evaluation not be completed this year. The Chair called for a motion. **It was moved by Commissioner Killeen and supported by Mr. Riley III that the CEO Evaluation not be completed for the past year.** There was no further discussion. **Motion carried unanimously.**

Deputy Legal Counsel Ms. Turner notified the Board Chair that in regards to the CEO Search Committee the motion that was made earlier would place six members of the Board on the Committee and would create a quorum of the Board. She recommended the motion be amended should Dr. Tauog's and Chief Riley's appointments not be approved prior to April 1. Discussion ensued regarding the Chair of the Board being the Chair of a committee and the current Chair becoming a regular member of the committee. The recommended amended motion from Ms. Turner was "the membership of the CEO Search Committee continue as of April 1st until the new Chair appoints the members of the committee". It was noted that the original motion needed to be amended to remove the statement that "Mr. Parker was being appointed to the committee." It was noted by Ms. Turner that a 2/3 vote was required on the motion. There was no objection to the amendment. The Chair called for a motion. **It was moved by Ms. Jawad and supported by Ms. Ruth that the CEO Search Committee continue as of April 1 with the present membership of the committee until the new Chair appoints new members to the ad hoc committee. A roll call vote was taken with Commissioner Killeen, Dr. Carter, Mr. Riley III, Mr. Glenn, Ms. Ruth, Ms. Jawad, Dr. Tauog, Ms. Brown and Mr. Parker voting Yea.** There was no further discussion. **The motion carried.**

The Board Chair reported that the former President and CEO contract had been finalized and staff had been directed to close out the contract. The Chair called for a motion. **It was moved by Commissioner Killeen and supported by Mr. Riley III to direct Interim CEO Mr. Doeh to close out the employment contract of Mr. Willie Brooks in accordance with the terms therein and consistent with policies, practices and procedures of the Detroit Wayne Integrated Health Network.** There was no further discussion. **The motion carried.**

Finance Committee

Commissioner Killeen, Chair of the Finance Committee, gave a verbal report. It was reported that the committee met virtually on Wednesday, March 3, 2021. The Network is still in the middle of the audit; at the April 21 meeting the CFO will have an audit report for the Full Board and the audit reports will be provided to the Finance Committee at the meeting held on May 7th. It was reported the Governor was to sign off on hazard pay for the Direct Care Workers. The committee received the monthly finance report and the financial statements. It was reported that cash flow looked strong; DWIHN has an agreement with five Providers to help with stability payment.

The committee considered and moved to Full Board for approval two board actions – BA#21-25 (Revised) DWIHN FY 2020-2021 Operating Budget and BA#21-58 – Wayne State University ECHO Survey Adults and Children, which are both on the agenda.

The Board Chair stated that the reports of the Executive Committee; Finance Committee; the Program Compliance Committee and Recipient Rights Advisory Committee would be accepted after the Recipient Rights Advisory Committee report.

Program Compliance Committee

Dr. Taueg, Chair of the Program Compliance Committee, gave a verbal report. The Program Compliance Committee met virtually on Wednesday, March 10, 2021. The committee received a follow-up item on the MI-Health Link and there was some concern regarding the high number of individuals that were referred and had declined services. A work group has been formed to review the process and a report will be received in the next several months. A report was received from the Corporate Compliance Officer, Mr. Hooper, reported that additional documents had been submitted and a report will be received at a future date. Reports were received from Children's Initiatives, Clinical Practice Improvement, Customer Service and Integrated Health. The Quality Pillar update was also received and it was reported that two of the four goals are on track and the remaining two goals are not on track because of COVID-19 interruptions. Five Board actions were recommended for approval by the full board: BA#20-57(Revised); BA##21-23(Revision 2); BA#21-33(Revised); BA#21-53(Revised) and BA#21-56. It was also reported that as of February 1, 2021, the Call Center was fully under the auspices of the Detroit Wayne Integrated Health Network.

Recipient Rights Advisory Committee

Mr. Riley, III, Chair of the Recipient Rights Advisory Committee (RRAC), reported. A written report was also provided for the record. It was reported the Recipient Rights Advisory Committee met on March 1, 2021. There was one staff member who resigned. The Office of Recipient Rights received for the month of January 97 allegations, 12 were found to be Outside of Provider Jurisdiction, four (4) were No Rights involved, 81 were actual investigations; 22 were closed and 59 remain open.

For the month of February, the Office of Recipient Rights received 109 allegations, with 16 found to be Outside Provider Jurisdiction, five (5) were no rights involved. There were 88 investigations opened; one case was closed and 87 remain open.

It was reported that Recipient Rights registered 862 individuals for the months of January and February; 544 individuals attended the virtual class; nine (9) were contractual staff, with 434 individuals passing the training and 437 no shows. It was noted that RRAC is continuing to request 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.

It was reported that the monitoring team conducted a total of 107 site reviews for the months of January and February; 64 site reviews were conducted in January and for the month of February, 43 site reviews were conducted.

The ORR State assessment has been completed and the Plan of Correction regarding our deficiencies has been submitted. On February 10, 2021, the State of Michigan emailed a letter to DWIHN Executive leadership stating our 100-page Plan of Correction was accepted and no further action is required.

Mr. Robert Gilreath, presented a discussion on his role and responsibilities as a Recipient Rights Unit leader, which was very informative. Commissioner Killeen congratulated the Recipient Rights Department on the submission and acceptance of the Plan of Correction.

The Chair called for a motion on the Recipient Rights Advisory Committee Report, the Finance Committee Report, the Program Compliance Committee report and the Executive Committee Report. **It was moved by Ms. Brown and supported by Dr. Taueg to accept the Recipient Rights Advisory Committee Report, the Finance Committee Report, the Program Compliance Committee report and the Executive Committee Report.** There was no further discussion. **Motion carried unanimously.**

SUBSTANCE USE DISORDER OVERSIGHT (SUD) POLICY BOARD REPORT

Mr. Glenn, Chair of the Substance Use Disorder (SUD) Oversight Policy Board, reported. He stated that the SUD Oversight Policy Board met on Monday, March 15, 2021. A SUD Data Presentation was provided by Dr. C. Arfken, SUD Oversight Policy Board member, Wayne State University. Ms. M. Bielski, Call Center Director, provided a Call Center presentation. Mr. D. Dewberry, CEO of Abundant Community Recovery Services, provided a report on the services they offer. Mr. E. Doeh provided remarks and introduced Dr. Shama Faheem, the new Medical Director for Detroit Wayne Integrated Health Network.

Board Action #20-32 (Revised) was presented by SUD Department staff. The Board action requested an approval in the amount of \$17,965.00 for fiscal year 2021 in Block Grant funding for SCRIPPS media campaign that was developed to bring awareness to the public regarding SUD issues. The SUD Interim Director was informed by the Finance Department, that invoices for SCRIPPS was not paid for the fiscal year that ended in September 2020. After the Finance Department reviewed all outstanding amounts, it was determined that there was an amount of \$17,965.00 dollars that was not paid and submitted to the Finance Department in a timely manner. In order to resolve this issue and to prevent any legal sanctions it is required DWIHN satisfy the above amount. It was recommended by the CFO to adjust the previous fiscal year purchase order and the remaining balance owed of \$17, 965.00 from the current Block Grant fiscal year budget. **This board action was approved.**

Board Action 20-55 – COVID Emergency Grant Funding) The SUD Department requested approval to allocate funding in the amount of \$144,000.00 of the COVID Emergency Grant for FY 21 to Quality Behavioral Health for \$72,000.00 and Abundant Community Recovery Services for \$72,000.00 to provide withdrawal management (detox), residential, recovery homes and mobile unit services. **This board action was approved.**

Reports were received from the SUD Interim Director, J. Davis; the Prevention Services Manager, K. Thomas and the State Opioid Response (SOR) Coordinator, M. Yascolt.

It was moved by Ms. Ruth and supported by Ms. Jawad to accept the SUD Oversight Policy Board report. There was no further discussion. **Motion carried unanimously.**

AD HOC COMMITTEE REPORTS

Policy/Bylaws Committee

Dr. Taueg, Chair Policy/Bylaws Committee, noted there was no report as the committee had not met however there would be a meeting scheduled to cover several outstanding matters.

CEO Search Committee

Mr. Riley, III gave a verbal report. It was reported the committee met on March 2 and a second meeting was held on March 16. The committee reviewed the CEO job description and search firms and the goal is to have interviews with the search firms before a selection is made. The committee wants to get the best possible candidate, which would be someone that is a visionary, understands that we want to be a leader in the field and “thinks outside of the box.” The committee understands that this is a big responsibility to the people of Wayne County and the people we serve. He thanked the board members that are not a part of the committee and have attended the meetings. It was noted that the CEO and President revised job description was being presented today with recommended changes from the committee and legal department. Deputy Legal Counsel Turner gave an overview of the changes that were made to the job description. **The Chair called for a motion on the revised CEO and President job description. It was moved by Mr. Riley, III and supported by Mr. Glenn that the revised President and CEO job description be approved.** There was no further discussion. **The motion carried unanimously.**

The Board Chair Mr. Parker noted that the Nominating Committee would need to reconvene to present a recommendation for the position of Vice Chair given that the elected Vice Chair Board Member Commissioner Killeen’s appointment expires on March 31, 2021.

Nominating Committee

Mr. Glenn, Chair of the Nominating Committee, gave a verbal report. It was reported the committee will be polled by the Board Liaison to determine if committee members have availability to meet on March 23. The Committee would need to present a recommendation to the Full Board for the Vice Chair position. The recommendation would be presented at the April 21 Full Board meeting.

The Chair called for a motion on the reports of the CEO Search Committee and the Nominating Committee. **It was moved by Commissioner Killeen and supported by Ms. Brown acceptance of the CEO Search Committee report and the Nominating Committee report.** There was no further discussion. **Motion carried unanimously.**

INTERIM PRESIDENT AND CEO MONTHLY REPORT

Mr. Doeh, Interim CEO, reported. A written report was provided for the record. Mr. Doeh introduced the new Medical Director, Dr. Shama Faheem. She gave a brief overview of her experience and noted that she is excited to be a part of DWIHN. It was noted that Mr. Doeh, Bernard Parker, Chief William Riley and Brooke Blackwell met virtually with Dr. Joneigh Khaldun, Jeff Wieferich and Al Jansen of MDHHS to discuss CEO transition items and items that we wish to focus on moving forward, including CCBHC and Behavioral Health Homes, the stability of DWIHN, COVID-19 initiatives and Integrated Healthcare transitions. A meeting is scheduled with MDHHS Director Hertel on February 19, 2021

and they are in the process of scheduling a meeting with Rep. Mary Whiteford to discuss the direct care wage among other shared initiatives. The Governor signed HB 404 and HB 4048 which includes \$150 million to support the \$2.25 per hour direct care worker increase; \$17.4 million for SUD services; \$16 million for mental health services and \$110 million for vaccine distribution.

It was reported that Mr. Doeh has had an opportunity to meet and become a member of the executive committee of the Wayne County Jail Mental Health Initiative Council. The Council focus is on addressing mental health in our jails and hospital systems. There is a meeting scheduled between the six CCBHCs in the network, DWIHN, the Council and the hospitals to address several issues and the benefits of having CCBHCs in our region.

It was reported that there are now clinicians working at the Detroit Police 911 Call Center: This new initiative diverts mental health (non-violent) emergency telephone callers away from a police response to a mental health professional. Mental Health responders are also following-up on mental health calls received from other operators on different shifts. DWIHN continues to provide Crisis Intervention training to law enforcement. A new co-responder diversion program is being delivered by Northeast Integrated Health (NIH) and Team Wellness. This proactive approach allows persons having a mental health crisis to be linked with needed services in lieu of the traditional approach of transport to jail. A total of 50 Detroit Police Department officers have been trained in CIT; there were 90 Dispatchers trained as well. There have been 30 referrals of those calling the Call Center and the Flinn Foundation has provided private donations.

It was reported that the Access Center (Wellplace Services) were successfully brought into DWIHN on February 1, 2021. The DWIHN Access Center is streamlining inherited workload to make more efficient for the people served. We are currently working on Call Center redesign by leveraging phone equipment to enhance call flow. This includes reducing work time for Call Center phone staff to 30 seconds from 2 minutes. We are also creating an auto answer, which would go directly to an available agent instead of allowing a phone to ring. An overview was provided of the monies saved and the number of staff members that were hired to perform the services as well as the standards that had been achieved.

A brief overview of the IT updates was provided and Interim CEO Doeh gave kudos to the DWIHN staff for continuing to do outstanding work throughout the pandemic.

An overview of the budget was provided and it was noted that DWIHN is currently in a better position than last year; we have been able to provide over \$5 million to our providers in stability payments.

Discussion ensued regarding the Stability Plan for the Substance Use Disorder (SUD) providers. CFO Durant gave an overview and stated the plan was brought before the SUD Board in February. It was noted that five SUD providers had been disproportionately impacted by the pandemic and received stability payments, and other SUD providers received monies under the CARES Act.

Discussion ensued regarding DWIHN requesting the allocation of monies from the State for Behavioral Health. It was noted that DWIHN had responded and were proceeding accordingly. Ms. Ruth and Board Chair Parker complimented Interim CEO Doeh and his staff for a smooth transition and noted that DWIHN had not "missed a beat."

The Chair for a motion to accept the Interim CEO and President Report. It was moved by Ms. Ruth and supported by Ms. Brown to accept the Interim CEO and President Report. There was no further discussion. Motion carried unanimously.

UNFINISHED BUSINESS

Staff Recommendations:

- A. **BA #20-36 (Revised 2)**, Allen Law Group. The Chair called for a motion on BA#20-36 (Revised). **It was moved by Dr. Tauieg and supported by Ms. Brown to approve of BA#20-36 (Revised).** Y. Turner, Deputy Legal Counsel, reported. Staff requesting an extension of the contract with the Allen Law Group as the legal department is short of staff and the services of the Allen Law Group has been requested. The legal department has negotiated a contract to continue the services and increase savings to the Network. The Board Chair had given the Board Action exigent approval. **The Chair called for a vote on BA#20-36 (Revision 2).** There was no further discussion. **Motion carried unanimously.**

- B. **BA #20-57 (Revised)**, COVID -19 Virtual Therapy Collaborative. The Chair called for a motion on BA#20-57 (Revised). **It was moved by Mr. Glenn and supported by Ms. Ruth to approve BA#20-57.** Ms. Andrea Smith reported. Staff requesting approval to add new funds awarded totaling \$150,000.00 for a COVID-19 related to virtual therapy via a chat line for Wayne County residents. The funding will come from the Flinn Foundation (\$75,000.00) and Community Foundation for Southeast Michigan (\$75,000.00) and extend through March 31, 2022. DWIHN is not required to provide any match funds. There was no further discussion. **Motion carried unanimously.**

- C. **BA#21-23 (Revision 2)**, Certified Community Behavioral Health Clinic – Detroit Recovery Project and Hegira Health, Inc. The Chair called for a motion on BA#21-23 (Revised). **It was moved by Mr. Riley III and supported by Ms. Jawad to approve of BA#21-23(Revision 2).** J. White reported. Staff requesting approval for the revised board action to include additional funding to Detroit Recovery Project (DRP)/Certified Community Behavioral Health Clinic (CCBHC) program in the amount of \$197,450.00 to provide mental health services. There was no further discussion. **Motion carried unanimously.**

- D. **BA#21-25 (Revision 2)**, DWIHN FY 2020-2021 Operating Budget. The Chair called for a motion on BA#21-25 (Revision 2). **It was moved by Mr. Glenn and supported by Mr. Riley III to approve BA#21-25 (Revision 2).** S. Durant, CFO reported. This board action is requesting board approval to amend BA 21-25 R2 per budget adjustment #21-35-01 1 -- certification of additional Medicaid revenue of \$43,989,268 per the projection of 1st quarter Medicaid revenue received. Discussion ensued. **Motion carried unanimously.**

- E. **BA #21-33 (Revised)**, SUD Prevention, Treatment and Recovery Block Grant Funding. The Chair called for a motion on BA#21-33 (Revised). **It was moved by Mr. Glenn and supported by Dr. Tauieg to approve BA#21-33 (Revised).** Ms. Judy Davis reported. Staff requesting approval to increase prevention block grant funding for \$280,000.00 for the fiscal year ended September 30, 2021 from \$4,492,054.00, for a revised total of \$4,772,054.00 for services to be rendered. The providers are Care of SE MI, Chance for Life Organization, Detroit Association of Black Organization (DABO), Leaders Advancing and Helping Communities (LAHC) and The Youth Connection. There was no further discussion. **Motion carried with Ms. Jawad abstaining from Leaders Advancing and Helping Communities (LAHC) and Mr. Riley III abstaining from Chance for Life Organization.**

- F. **BA #21-53 (Revised)**, HUD Permanent Supportive Housing. The Chair called for a motion on BA#21-53 (Revised). **It was moved by Dr. Tauieg and supported by Mr. Glenn to approve BA#21-53 (Revised).** Staff requesting approval for renewal, acceptance and disbursement of FY 2021 grant

amounts for the HUD Continuum of Care (CoC) permanent supportive housing grant funds in the amount of \$2,106,195.00 and DWIHN's State general fund match of \$104,785.00, for an amount not to exceed \$2,210,980.00. There was no further discussion. **Motion carried unanimously.**

NEW BUSINESS

Staff Recommendations:

- A. **BA #21-56**, Mental Health First Aid. The Chair called for a motion on BA#21-56 **It was moved by Mr. Glenn and supported by Mr. Riley III to approve BA#21-56.** Ms. Andrea Smith reported. Staff requesting approval of a one-year contract from March 1, 2021 through September 30, 2021 for \$500,000.00. The services to be delivered will be training in the evidence-based practice models - Mental Health First Aid (MHFA) and Question, Persuade, Refer (QPR). There was no further discussion. **Motion carried unanimously.**
- B. **BA #21-58**, Wayne State University ECHO Survey Adults and Children. The Chair called for a motion on BA#21-58. **It was moved by Mr. Glenn and supported by Mr. Riley III to approve BA #21-58.** M. Vasconcellos, Director of Customer Service, reported. This board action is requesting approval of a one-year contract with Wayne State University (WSU) Center for Urban Studies to administer two surveys, the ECHO survey for adults and the ECHO survey for children, for a total of \$104,633. **Motion carried unanimously.**

REVIEW OF ACTION ITEMS

Board Chair Parker noted that incoming Board Chair Riley had requested that the committee preferences would be sent to Board members with a return date of March 31. The committee preferences allow Board members to request the committees that they are interested in serving on and assists the Board Chair in making committee assignments. The committee preferences should be available to the Board Chair by April 1.

Mr. Parker, Board Chair noted that this would be his last meeting as Chair and he is looking forward to working with everyone as a member. It has been his pleasure to work with everyone even through the challenges of the pandemic and he is proud to support the leadership and he fully supports that Board Chairs should serve for two years. He is looking forward to and will be available to Chief Riley, III for assistance and there should be no loss of momentum with our new incoming officers.

GOOD AND WELFARE/PUBLIC COMMENT

The Board Chair, Mr. Parker read the Good and Welfare/Public Comment statement. There was no Good and Welfare or Public Comment.

ADJOURNMENT

There being no further business, the Chair, Mr. Parker called for a motion to adjourn. **It was moved by Mr. Riley, III and seconded by Mr. Glenn to adjourn. The motion carried unanimously and the meeting was adjourned at 2:59 p.m.**

Submitted by:
Lillian M. Blackshire
Board Liaison



DETROIT WAYNE INTEGRATED HEALTH NETWORK
SPECIAL FULL BOARD MEETING
Meeting Minutes
Virtual Meeting
Wednesday, February 24, 2021
1:00 p.m.

BOARD MEMBERS PRESENT

Bernard Parker, Chair

Commissioner Tim Killeen, Treasurer

Dora Brown, Secretary

Lynne F. Carter, M.D.

Angelo Glenn

Michelle Jawad

Kevin McNamara

William T. Riley, III

Kenya Ruth

Dr. Cynthia Taueg

BOARD MEMBERS EXCUSED: Dorothy Burrell

GUESTS: None

CALL TO ORDER

The meeting was called to order at 1:03 p.m. by Mr. Bernard Parker, Board Chair.

ROLL CALL

Roll call was taken by Ms. Dora Brown, Board Secretary and a quorum was present.

APPROVAL OF THE AGENDA

Board Chair, Mr. Parker welcomed everyone to the meeting and noted the agenda was a brief one and there three items that were on the agenda and noted in the call. The Chair called for a motion on the agenda.

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

MOMENT OF SILENCE

The Board Chair, Mr. Parker called for a moment of silence and asked that everyone remember those that have passed away due to COVID-19 and those that may be dealing with COVID-19. Moment of Silence taken.

Executive Committee

The Board Chair, Mr. Parker noted the first item on the agenda was the recommendation of an interim CEO and President. It was noted the Executive Committee had nominated Mr. Eric Doeh who was currently Deputy CEO and COO for the interim CEO/President position and he would hold the position until a permanent CEO/President is identified and hired. Discussion ensued regarding the position and whether or not Mr. Doeh was interested in the position. Mr. Doeh indicated that he would be honored and thanked the board for their consideration. The Chair called for a motion.

It was moved by Dr. Taueg and supported by Ms. Ruth that Mr. Eric Doeh, currently Deputy CEO/COO be moved into the position of Interim CEO/President until a CEO/President is identified and hired. Motion carried unanimously.

The Chair reported that a meeting has been scheduled with the Michigan Department of Health and Human Services on Friday, February 26th to discuss our transition; he, Mr. Riley and Mr. Doeh will be on the call for the Network along with Mr. Alan Jansen; Dr. Joneigh Khaldun and Mr. Wieferrich from the State of Michigan.

CEO Search Committee

The Chair, Mr. Parker reported that a CEO Search Committee would need to be appointed to conduct the search for the CEO/President. The charge of the committee would be to make a recommendation to the Board on a candidate to fill the position. The Committee would have the discretion to determine if they would conduct a statewide or national search. The Chair recommended the following board members for the CEO Search Committee: Mr. William Riley, Chair; Dr. Cynthia Taueg, Vice Chair; Dr. Carter; Mr. Glenn and Ms. Ruth. The Chair called for a motion on the CEO Search Committee.

It was moved by Commissioner Killeen and supported by Ms. Jawad approval of the CEO Search Committee. The motion carried unanimously.

Mr. Doeh thanked the Board for their confidence in him to run the organization and noted that he along with staff and the direction of the board will continue to put the needs of the people we serve first along with staff and stakeholders.

Interim CEO Contract

The Chair noted the last item was the Interim CEO Contract. A written document was provided for the record. The Chair noted that there were a few changes made to the contract that was used with the last interim CEO/President; the salary was noted as a bi-weekly salary versus an annual salary because the position may not last a year; the benefits remain the same and the contract states that if Mr. Doeh applies and is not selected for the position of CEO/President that he has the rights to return to his former position as Deputy CEO/COO.

Discussion ensued regarding the Chief Operating Officer position and if that position would be filled. It was noted there have been some movement with staff to determine if there will be a change in the organization. Mr. Doeh's move to the role of Interim CEO/President will take effect on March 1st 2021. The Board members expressed their gratitude to Mr. Doeh for continuing to serve and thanked him for his dedication. The Board inquired if he would be applying for the position of CEO/President to which Mr. Doeh responded in the affirmative.

GOOD AND WELFARE/PUBLIC COMMENT

The Board Treasurer read the Good and Welfare/Public Comment statement. There was no public comment or Good and Welfare. Commissioner Killeen noted that he had been in contact with the County Executive's and Mayor's office and had spoken to (Ms. Trish Stein) regarding the appointments and reappointments of the DWIHN Board of Directors and of the need to get the appointments on the Commission's calendar.

Mr. Parker thanked Eric for taking on the role and agreeing to be the Interim CEO and noted that he has the full support of the Board in continuing to move the organization forward.

ADJOURNMENT

There being no further business, the Chair, Mr. Parker called for a motion to adjourn. **Motion:** It was moved by Ms. Brown and second by Ms. Ruth to adjourn. **The motion carried unanimously and the meeting was adjourned at 1:22 p.m.**

Submitted by:
Lillian M. Blackshire
Board Liaison

FINANCE COMMITTEE

MINUTES

MARCH 3, 2021

1:00 P.M.

**VIRTUAL
CONFERENCE(BLUEJEANS)**

MEETING CALLED BY	I. Commissioner Tim Killeen, Chair called the meeting to order at 1:00 p.m.
TYPE OF MEETING	Finance Committee Meeting
FACILITATOR	Commissioner Tim Killeen, Chair – Finance Committee
NOTE TAKER	Nicole Smith, Management Assistant
ATTENDEES	<p>Finance Committee Members Present: Commissioner Tim Killeen, Chair Ms. Dora Brown Mr. Angelo Glenn Ms. Dorothy Burrell</p> <p>Committee Members Excused: Mr. McNamara, Vice Chair</p> <p>Board Members Present: Bernard Parker, Chairperson Chief William T. Riley, III</p> <p>Board Members Excused: None</p> <p>Staff: E. Doeh, CEO/COO; S. Durant, CFO; B. Blackwell, Chief of Staff; M. Vasconcellos, Director of Customer Service</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, Commissioner Killeen called for any Committee remarks. There were no remarks from committee members.
IV. Approval of Agenda	The Chair, Commissioner Killeen 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 Ms. Brown and supported by Mr. Glenn approval of the agenda. Motion carried.
V. Follow-up Items:	There were no follow up items listed on the agenda.

VI. Approval of the Meeting Minutes

The Chair called for a motion on the Finance Committee minutes from the meeting of Wednesday, February 3, 2021. **Motion:** It was moved by Mr. Glenn and supported by Ms. Brown approval of the Finance Committee minutes from the meeting of Wednesday, February 3, 2021. There were no corrections to the minutes. **Motion carried.** Minutes accepted as presented.

VII. Presentation of the Monthly Finance Report

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

1. DWIHN initiated a request from certain SUD providers for consideration of financial stability payments for the fiscal year ended September 30, 2020. Five (5) providers qualified for stability payment totaling \$1.2 million. Providers were paid and claims were adjusted on February 16, 2021. These were providers that could not utilize Telehealth to perform services.

2. Legislation has proposed extending the \$2.00/hr. hazard pay through June 30, 2021; awaiting the Governor's signature.

3. FY20 report deadlines extended until March 31, 2021; DWIHN will have final financial position at the April 2021 finance committee meeting. Plante Moran will present audit reports at May 2021 finance committee meeting.

Mr. Parker requested early audit projections for the DWIHN reserve account. S. Durant, CFO reported preliminary estimates as \$20 million dollars in Medicaid savings, and a \$10 million dollar increase in Local Unrestricted reserves.

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

Due from other governments/ Accounts Receivable – comprise various local, state and federal amounts due to DWIHN primarily related to PBIC for \$4.7 million, and \$8.4 million and \$11 million due from MDHHS for 1st quarter DCW hazard pay and HRA, respectively.

IBNR Payable – represents incurred but not reported (IBNR) claims from the provider network; historical average claims paid through January 2021, including COVID-19 impact, was approximately \$217 million however actual payments were approximately \$177.4 million. The difference represents claims incurred but not reported of \$39.7 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.

Federal revenue/grant program expenses – variance due to timing of incurred expenses related to SUD, PASSAR and HUD grants.

State revenue and contracts - \$34 million budget verse actual variance due to pending budget adjustment to certify additional revenue of \$43 million.

Local grants and contracts – variance due to PA2 revenue. DWIHN does not receive 1st quarter PA2 however budget is based on 25% of total budgeted amounts.

Autism, SUD, Adult, and Children services – variance due to impact of COVID on certain lines of business and timing in services.

The Chair, Commissioner Killeen called for a motion on the Monthly Finance Report.

Motion: It was moved by Mr. Glenn and supported by Ms. Brown to accept the Monthly Finance Report. There was no further discussion. **Motion carried.**

X. Unfinished Business – Staff Recommendations:

a. **Board Action #21-25 (Revised 2): DWIHN FY 2020-2021 Operating Budget.** CFO Durant reporting. Staff request board approval to amend BA 21-25 RI per budget adjustment #21-35-011 -- certification of additional Medicaid revenue of \$43,989,268 per the projection of 1st quarter Medicaid revenue received. **Motion.** It was moved by Ms. Brown and supported by Mr. Glenn approval of Board Action #21-25 (Revised 2). Commissioner Killeen called for a roll call vote on Board Action #21-25 (Revised 2). **Motion carried with Commissioner Killeen; Ms. Burrell; Ms. Brown; and Mr. Glenn voting yea.**

XI. New Business – Staff Recommendations:

a. **Board Action #21-58: Wayne State University: ECHO Survey – Adult & Children** – M. Vasconcellos, Director of Customer Service reporting. This board action is requesting approval of a one-year contract with Wayne State University (WSU) Center for Urban Studies to administer two surveys, the ECHO survey for adults and the ECHO survey for children for a total of \$104,633. **Motion:** It was moved by Mr. Glenn and supported by Ms. Brown approval of Board Action #21-58. Commissioner Killeen called for a roll call vote on Board Action #21-58. **Motion carried with Commissioner Killeen; Ms. Burrell; Ms. Brown and Mr. Glenn voting yea.**

XII. 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.

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

The meeting adjourned at 1:53 p.m.

FOLLOW-UP ITEMS	<p>A. Provide a report that shows financial impact of transitioning to code 2015. Report should have its own section on financial report. CFO noted the report will only cover 30 days of billings. It was also noted the report should be given on a monthly basis. April 7, 2021 meeting (S. Durant)</p> <p>B. Quarterly Procurement Report- Provide on a quarterly basis the percentage of total purchases that come to the Board for approval compared to those that do not need Board approval. April 7, 2021 meeting (J. Mira)</p> <p>C. Provide a written summary that clarifies where monies will be going in the budget from BA #21-25 (Revision 2).</p>
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PROGRAM COMPLIANCE COMMITTEE

MINUTES

MARCH 10, 2021

1:00 P.M.

VIRTUAL MEETING

MEETING CALLED BY	I. Dr. Cynthia Taueg, Program Compliance Chair at 1:00 p.m.
TYPE OF MEETING	Program Compliance Committee
FACILITATOR	Dr. Cynthia Taueg, Chair
NOTE TAKER	Sonya Davis
TIMEKEEPER	
ATTENDEES	<p>Committee Members: Dr. Lynne Carter; Michelle Jawad; Chief William Riley, III; Kenya Ruth; and Dr. Cynthia Taueg</p> <p>Board Members: Bernard Parker, Board Chair</p> <p>Staff: Jacquelyn Davis; Eric Doeh; Kimberly Flowers; Bernard Hooper; Melissa Moody; Crystal Palmer; John Pascaretti; Ebony Reynolds; April Siebert; Manny Singla; Andrea Smith; Michele Vasconcellos; and June White</p>

AGENDA TOPICS

II. Moment of Silence

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

III. Roll Call

DISCUSSION	The Chair called for a roll call.
CONCLUSIONS	Roll call was taken by Board Liaison, Lillian Blackshire. There was a quorum.

IV. Approval of the Agenda

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

<p>DISCUSSION/ CONCLUSIONS</p>	<p>A. MI Health Link Referrals – Provide information on how to eliminate duplicative referrals in the Integrated Health Quarterly Report next month – Kimberly Flowers, Provider Network Clinical Officer submitted and provided information on how to eliminate duplicative referrals. Ms. Flowers reported that they have spoken with Molina and they are working to decrease the number of duplicates and going forward duplicates will not be included in the report. Integrated Health Care and ACCESS divisions will create a workgroup to review current practices/procedures when completing MI Health Link requests. Training and education (components of documentation, available services, presentation and timeframes) will be provided to staff regarding the MI Health Link Demonstration. The goal is to identify opportunities for process improvement, referral coordination and ensuring DWIHN staff are equipped to explain benefits of the MI Health Link Demonstration and Behavioral Health services. Staff will provide an update in 90 days (June) on best practices, ICOs, effectiveness of the script and an explanation of the refusals. (Action)</p>
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VI. Approval of Meeting Minutes

<p>DISCUSSION/ CONCLUSIONS</p>	<p>The Chair called for approval of the February 10, 2021 meeting minutes. Motion: It was moved by Chief Riley and supported by Mrs. Jawad to approve the February 10, 2021 meeting minutes. Dr. Taueg asked if there were any changes/modifications to the meeting minutes. There were no changes/modifications to the meeting minutes. Motion carried.</p>
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VII. Reports

<p>DISCUSSION/ CONCLUSIONS</p>	<p>A. 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. National Committee on Quality Assurance (NCQA) – DWIHN submitted documents or evidence of compliance with the 2020 Managed Behavioral Healthcare Organization (MBHO) Standards on February 17, 2021. DWIHN will receive a list of issues identified by the NCQA Survey Team on March 10, 2021. The next step will be a conference call with the NCQA Survey Team on March 16, 2021 to clarify and respond to issues identified. A file review will be conducted electronically due to the pandemic on April 5-6, 2021. NCQA will send a letter to DWIHN indicating that the survey tool is final and include the Accreditation decision and effective date of Accreditation approximately 30 days after the File Review. 2. MDHHS 1915 (c) HSW Plan of Correction (POC) – DWIHN was required to have a Behavior Treatment Plan Review Committee (BTPRC) in place or require all contracted Mental Health Clinically Responsible Service Providers (CRSP) to have a BTPRC in place as part of the 2019-20 HSW Plan of Correction. To date, all 26 CRSPs have identified a process for BTPRC reviews and are included in the Mental Health CRSP written contract for FY 2020-21. As an option, providers and CRSPs may collaborate on developing and operating a joint BTPRC. Three CRSP providers have chosen this option. <p>The Chair called for a motion to accept the Corporate Compliance report. Motion: It was moved by Chief Riley and supported by Mrs. Ruth to accept the</p>
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Corporate Compliance report. Dr. Taueg opened the floor for discussion. There was no discussion. **Motion carried.**

VIII. Quarterly Reports -

**DISCUSSION/
CONCLUSIONS**

- A. **Children’s Initiatives** – Crystal Palmer, Director of Children’s Initiatives submitted and gave highlights of her quarterly report. Mrs. Palmer reported:
1. **Autism Spectrum Disorder ABA** - DWIHN’s ABA Benefit continues to grow each quarter. There are currently 1,748 open cases receiving services with the largest concentration of enrollees between the ages of two and seven.
 2. **Wraparound Services** – From October to December 2020, there were 81 new families that began receiving these services. 95% of the youths receiving these services are connected to other clinical services as well as other community mental health services (Youth Peer Support, Respite, Community Living Supports and Parent Support Partner. There were 377 youths and families that received these services during the first quarter with 61.8% having 1-3 natural supports (an individual who is not paid to be part of the Child’s team) on their Child and Family Teams.
 3. **Home-Based Services** – There were 696 families served in home-based services from October through December 2020 and 694 (51.2%) were between the ages of 7-13 years old and 5.2% were placed out of the community and into a psychiatric hospital and 4% were placed in a partial hospitalization setting. The average length of stay for families in home-based services is approximately 13.2 months.
 4. **Michigan Child Care Collaborative (MC3)** – There are 173 providers enrolled. During the first quarter, the behavioral health consultant facilitated 27 consultations between the Child/Adolescent/Perinatal Psychiatrist (CAPP) and the primary care physicians. The primary care physicians referred 38 patients to the behavioral health consultant for brief intervention and resources.
 5. **School Success Initiative** – There are 329 unique schools who are providing Community Mental Health services. Individual therapy, family therapy and home-based therapy were the main services being provided. The funding source is broken down as 66% being Medicaid, 19% being Grant/Private Pay and 14% being General Fund.
 6. **Patient Health Questionnaire-Modified for Adolescents (PHQ-A)** - A self-administered tool implemented by DWIHN for screening, diagnosing, monitoring and measuring the severity of depression. During the first quarter, there were 1,159 intake assessments completed and of those, 1,090 (94%) had a PHQ-A screening. The compliance rate was 68.1% of all youths between the ages of 11-17 years old who met the criteria for a follow-up PHQ-A screening and scored a 10 or higher on the screening.
- The committee requested information for the following:
- The workgroup that is being created to address the issue of staff retention;
 - The number of unduplicated individuals served in the Service Delivery and involvement in the School Survey; and
 - Specific numbers regarding how much each funding source is being utilized.
- (Action)**
- B. **Clinical Practice Improvement** – Ebony Reynolds, Clinical Officer of Clinical Practice Improvement submitted and gave highlights of her quarterly report. Ms. Reynolds reported:

1. **Evidence-Based Supported Employment (EBSE)/Individual Placement Support (IPS) Services** - Staff continue to provide support to providers delivering EBSE services through routine weekly telephonic check-ins. Technical assistance was provided to Central City Integrated health and Team Wellness' administrators on DWIHN's authorization process for EBSE services.
 2. **Project – WC Jail – Incompetent to Stand Trial (IST) – Probate Court** – The Wayne County Jail Board Action is proceeding with a reduction in current funding of \$6,000,000 to \$4,250,000. Community Care Services reported success with its' Med-Drop program. The Jail received an increase in its' per diem rate to \$135.00 due to COVID-19. The Jail Bulletin was revised to reflect the increase, updated language and change of the actual code to H2016.
 3. **Project – Jail Diversion** – Team Wellness is now a partner and will work collaboratively with Northeast Integrated Health (NEIH) and Central City Integrated Health (CCIH) on the Detroit Outreach Project Pilot Program for FY 20/21. For FY 19/20, the Mental Health Court saw 47 participants with 10 successful completions through CCIH.
 4. **PHQ-9** – Staff met internally for shared problem-solving on increasing outcomes on completion of the PHQ-9 during the initial assessment. Staff will contact providers directly to problem-solve and increase the completion rate.
 5. **Assertive Community Treatment (ACT)** – Staff monitors the ACT program Providers' admissions/discharges, the appropriateness of the level of care determinations and technical assistance to ensure program eligibility requirements were met. Fidelity reviews were also conducted of the ACT Program Providers. Staff participated in a meeting on November 13, 2020 hosted by MDHHS regarding ACT providers, completion of ACT fidelity reviews, ACT providers' current staff and member roster. Staff sent all information requested by MDHHS on Friday, November 20, 2020.
- C. **Customer Service** – Michele Vasconcellos, Director of Customer Service submitted and gave highlights of her quarterly report. Ms. Vasconcellos reported:
1. **DWVHN Customer Service Unit Call Center Activity** – There were less calls (53,951) in the first quarter of FY 20/21 compared to the first quarter of FY 19/20 (83,560) Pre-COVID.
 2. **DWVHN Welcome Center (Reception Area) Walk-Ins** – Due COVID, the reception area remains closed to outside visitors. For FY 19/20 first quarter, there were 1,057 walk-ins.
 3. **Medical Record Request** – \$195.37 were paid out for medical records' requests for FY 20/21 first quarter. \$430.80 was paid out for medical records' requests in FY 19/20 first quarter.
 4. **Family Support Subsidy Activity** – Staff is working remotely. There was an increase in calls but a drop in applications during the first quarter of FY 20/21.
 5. **Grievances Activity** - There were eight grievances for the first quarter of FY 20/21 and 18 grievances in the first quarter of FY 19/20.
 6. **Grievances by Category** – There were 12 grievances reported for the first quarter of FY 20/21. There were 27 grievances reported for the first quarter of FY 19/20.
 7. **MI Health Link Grievances** – There were no MI Health Link grievances reported for the first quarter of FY 20/21.

8. **Appeals Advance and Adequate Notices** – There were 4,356 notices reported for the first quarter of FY 20/21. There were 14,530 notices reported for the first quarter of FY 19/20.
 9. **Local Appeals Activity (Appeals Phone Inquiries)** – There were 163 calls received for the first quarter of FY 20/21 and 61 calls received during the first quarter of FY 19/20.
Appeals Filed – There were four appeals received and resolved during the first quarter of FY 20/21. There were six appeals received and four resolved for the first quarter of FY 19/20.
 10. **MI Health Link Appeals and State Fair Hearings** – There were no appeals/hearings for the first quarter of FY 20/21.
 11. **State Fair Hearings** – There was one hearing for the first quarter of FY 20/21. There were two hearings for the first quarter of FY 19/20.
 12. **Member Experience Activity** – The goal of 253 consents was needed in preparation to administer the National Core Indicator survey, 311 consents were collected, as well as 67% of the necessary Pre-Survey Background Package from the respective CRSP for those members were retrieved. Staff coordinated and launched the DWIHN Provider and Practitioner Surveys. Finalized reports for the adult and child ECHO surveys were presented to various DWIHN’s workgroups and stakeholders.
 13. **Member Engagement** – Three virtual workshops on social determinants of health was hosted for peer support. Staff continue to host virtual outreach meetings. Two virtual meetings on the census and voting were held and staff hand-delivered voting packets to more than 25% of the AFC homes in Detroit and surrounding areas of Wayne County. The MDHHS’ grant award for clubhouse engagement (spenddown) went grossly underutilized due to COVID. Staff crafted and submitted a proposal to MDHSS to expand the scope of the program and allow for the purchase of technological equipment and services for virtual clubhouse engagement and is waiting for a response.
 14. **Performance Monitoring and Quality** – Staff has responded to HAP and Molina’s Plan of Corrections (POCs). Staff has also participated in the Annual ICO audits of AmeriHealth and Michigan Complete. Staff continue to monitor the CRSPs POCs performance.
- D. **Integrated Health Care** – Kimberly Flowers, Provider Network Clinical Officer submitted and gave highlights of her quarterly report. Ms. Flowers reported:
1. **Collaboration with Health Department** – A Hepatitis-A vaccination clinic was held at the Salvation Army during the first quarter where 42 individuals received education on Hepatitis-A and 18 individuals received the Hepatitis A vaccination.
 2. **Health Plan Pilots (3)** – DWIHN and Health Plan 1 Care Coordination provider agreed to utilize the Care Coordination module offered by Vital Data Technology, LLC (VDT) as a shared electronic platform and the contract between DWIHN and VDT was fully executive in late October. Late March is the tentative go live date for the shared platform. DWIHN, Health Plan 2 Care Coordination providers and Manager staff hold monthly meetings to exchange information and address any identified gaps in care. Staff was in communication with Health Plan 3 Care Coordination providers and they are reviewing the proposal for a joint pilot project internally.
 3. **Medicaid Health Plans** – Staff continues to perform Care Coordination Data Sharing on a monthly basis with the eight Medicaid Health Plans (MHPs) serving Wayne County for mutually served individuals who met the risk stratification criteria (Multiple hospitalizations, ER visits for both physical

	<p>and behavioral health and multiple chronic physical health conditions. DWIHN is inline to receive bonus monies.</p> <ol style="list-style-type: none"> 4. MI Health Link Demonstration – 235 behavioral health care referrals were completed and submitted to the ICO during this quarter. Care Coordination was provided to 39 MI Health Link members to support engagement in Behavioral Health services and Transitions of Care Coordination was provided for 140 MI Health Link members who were discharged from a psychiatric hospitalization. 5. Complex Case Management (CCM) – Staff continues to offer/provide CCM services to DWIHN’s members as part of the NCQA’s Accreditation. There were 17 active cases, 11 new cases and 11 cases were closed during this quarter. Information on CCM was sent to six provider organizations, including hospitals, clinically responsible service providers and a residential provider. Services were also provided to 60 additional members during this quarter who either declined or did not meet eligibility. 6. OBRA/PASRR – Staff continued monitoring and the oversight of the OBRA/PASRR services. The provider completed PASRR screenings and reviews for 292 members during the first quarter. <p>The Chair bundled all quarterly reports. The Chair called for a motion to accept Children’s Initiatives; Clinical Practice Improvement; Customer Service; and Integrated Health Care’s quarterly reports. Motion: It was moved by Chief Riley and supported by Mrs. Ruth to accept the Children’s Initiatives; Clinical Practice Improvement; Customer Service; and Integrated Health Care’s quarterly reports. Dr. Tauzeg opened the floor for further discussion. There was no further discussion. Motion carried.</p>

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. Ms. Siebert reported that the Quality Pillar is at 70% completion. There are four organizational goals under this pillar and they range from 55% to 95% completion for the high-level goals.</p> <ol style="list-style-type: none"> 1. Ensure consistent Quality by September 30, 2022 – 55% completion; 2. Ensure the ability to share/access health information across systems to coordinate care by December 31, 2021 – 95% completion; 3. Implement Holistic Care Model: 1 unit by December 31, 2021 – 55% completion; and 4. Improve population health outcomes by September 30, 2022 – 74% completion. <p>The first and third goals are behind due to the COVID-19 pandemic which should improve as more people get vaccinated. The Chair called for a motion to accept the Strategic Plan - Quality Pillar report. Motion: It was moved by Chief Riley and supported by Ms. Jawad to accept the Strategic Plan - Quality Pillar report. Dr. Tauzeg opened the floor for further discussion. There was no further discussion. Motion carried.</p>
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X. Quality Review(s) -

DISCUSSION/ CONCLUSIONS	<i>There was no Quality Review(s) for review and approval.</i>
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XI. Chief Clinical Officer's (CCO) Report

DISCUSSION/ CONCLUSIONS	<p>Melissa Moody, Chief Clinical Officer submitted a full report and gave highlights on the Chief Clinical Officer's report. Mrs. Moody reported that:</p> <ol style="list-style-type: none"> 1. COVID-19 and Inpatient Psychiatric Hospitalization – Hospitalizations data showed a decrease in admissions for the month of February by approximately 11%. There were four reported cases of COVID-19 inpatient in February 2021 (January 2021 – 14 cases). 2. COVID-19 Intensive Crisis Stabilization Services – There was a 7% decrease in crisis stabilization services provided in February 2021 compared to January 2021. 3. Residential Department Report of COVID-19 Impact – From 3/30/20 to 2/28/21, 266 positive cases were reported and 35 reported deaths. There was a 10% increase in staff positive rates in February 2021. No new reported deaths. Last month there was an error in reported deaths. The report stated 40 but it should have been 35. 4. Total Number of COVID-19 Vaccinations (Wayne Co., City of Detroit and Out-County): <ul style="list-style-type: none"> - # of AFC Staff – 392 - # of Residential Members – 1533 - # of Pending appointments - 237 - 326 Refused Vaccine <p>Staff continue to do outreach and education on the COVID-19 Vaccine to those that are undecided about receiving the vaccine. The committee requested the percentage of the people that are vaccinated. The percentage will be provided at next month's meeting. (Action)</p> 5. COVID-19 Recovery Housing/Recovery Support Services – There was a 78% decrease in the utilization of COVID-19 recovery homes in the month of February 2021 compared to January 2021. 6. COVID-19 Urgent Behavioral Health Urgent Care Sites – There was a 20% increase in utilization of Urgent Behavioral Health Urgent Care Services in February 2021. <p>The City of Detroit has partnered with DWIHN to distribute vaccinations to the following groups: Adult Foster Care and Substance Use staff and residents and our CRSP Provider network. The first dose was administered the week of 2/8/21 and the following week at identified locations throughout the City of Detroit. This included select provider locations and the use of mobile units to go out to residential settings. This resulted in over 1,100 vaccinations being provided. On March 3rd, DWIHN started a partnership with the City of Detroit Health Department holding vaccination clinics for members we support who reside within the City of Detroit. This provides vaccination availability to over 37,000 of our members. Discussion ensued. The Chair called for a motion to accept the Chief Clinical Officer's report. Motion: It was moved by Mrs. Ruth and supported by Chief Riley to accept the Chief Clinical Officer's Report. Dr. Taueg opened the floor for discussion. Discussion ensued. Motion carried.</p>
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XII. Unfinished Business

<p>DISCUSSION/ CONCLUSIONS</p>	<p>A. BA #20-57 (Revised) – COVID-19 Virtual Therapy Collaborative – Staff requesting approval to add new funds awarded totaling \$150,000.00 for a COVID-19 related to virtual therapy via a chat line for Wayne County residents. The funding will come from the Flinn Foundation (\$75,000.00) and Community Foundation for Southeast Michigan (\$75,000.00) and extend through March 31, 2022. DWIHN is not required to provide any match funds. Dr. Tauег opened the floor for discussion. Discussion ensued.</p> <p>B. BA #21-23 (Revised2) – Crisis Intervention Services – Hegira Health, Inc. – Staff requesting approval for the revised board action to include additional funding to Detroit Recovery Project (DRP)/Certified Community Behavioral Health Clinic (CCBHC) program in the amount of \$197,450.00 to provide mental health services. Dr. Tauег opened the floor for discussion. There was no discussion.</p> <p>C. BA #21-33 (Revised2) – SUD Prevention, Treatment and Recovery Block Grant Funding – Staff requesting approval to increase prevention block grant funding for \$280,000.00 for the fiscal year ended September 30, 2021 from \$4,492,054.00 for a revised total of \$4,772,054.00 for services to be rendered Care of SE MI; Chance for Life Organization; Detroit Association of Black Organization (DABO); Leaders Advancing and Helping Communities (LAHC); and The Youth Connection. Dr. Tauег opened the floor for discussion. There was no discussion.</p> <p>D. BA #21-53 (Revised) – HUD Permanent Supportive Housing – Staff requesting approval for renewal, acceptance and disbursement of FY 2021 grant amounts for the HUD Continuum of Care (CoC) permanent supportive housing grant funds in the amount of \$2,106,195.00 and DWIHN’s State general fund match of \$104,785.00 for an amount not to exceed \$2,210,980.00. Dr. Tauег opened the floor for discussion. There was no discussion.</p> <p>The Chair bundled all “Unfinished Business” board actions. The Chair called for a motion on BA #20-57 (Revised); BA #21-23 (Revised2); BA #21-33 (Revised); and BA #21-53. Motion: Chief Riley abstained from voting on BA #21-33 – Chance for Life portion and Michelle Jawad abstained from voting on BA #21-33 – LAHC portion. It was moved by Dr. Carter and supported by Mrs. Ruth to move BA #20-57 (Revised); BA #21-23 (Revised2); BA #21-33 (Revised); and BA #21-53 to Full Board for approval. Dr. Tauег opened the floor for further discussion. There was no further discussion. Motion carried.</p>
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XIII. New Business: Staff Recommendation(s) -

<p>DISCUSSION/ CONCLUSIONS</p>	<p>A. BA# 21-56 – Mental Health First Aid – The Chair called for a motion on BA #21-56. Motion: It was moved by Chief Riley and supported by Mrs. Ruth to move BA #21-56 to Full Board for approval. Staff requesting approval of a one-year contract from March 1, 2021 through September 30, 2021 for \$500,000.00. The services to be delivered will be training in the evidence-based practice models - Mental Health First Aid (MHFA) and Question, Persuade, Refer (QPR). Dr. Tauег opened the floor for discussion. There was no discussion. Motion carried.</p>
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XIV. Good and Welfare/Public Comment

DISCUSSION/ CONCLUSIONS	The Chair asked if there were any Good and Welfare/Public Comment. There was no Good and Welfare/Public Comment.
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ACTION ITEMS	Responsible Person	Due Date
1. Follow-Up from Previous Meeting: A. MI Health Link Referrals - Staff will provide an update in 90 days (June) on best practices, ICOs, effectiveness of the script and an explanation of the refusals.	Kim Flowers	June 9, 2021
2. Children’s Initiatives’ Quarterly Report – Please provide the following information: A. The workgroup that is being created to address the issue of staff retention; B. The number of unduplicated individuals served in the Service Delivery and involvement in the School Survey; and C. Specific numbers regarding how much each funding source is being utilized for the School Success Initiative.	Crystal Palmer	April 14, 2021
3. Chief Clinical Officer’s Report – Please provide the percentage of people that are vaccinated.	Melissa Moody	April 14, 2021

The Chair called for a motion to adjourn the meeting. **Motion:** It was moved by Chief Riley and supported by Mrs. Ruth to adjourn the meeting. **Motion carried.**

ADJOURNED: 2:52 p.m.

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

JONATHAN CLEVELAND KINLOCH

Executive Profile

Accomplished Executive with demonstrated ability to deliver mission-critical results.

Skill Highlights

- Leadership
- Project Management
- Community Outreach
- Communication Skills

Core Accomplishments

- Has over 30 years of experience in community and grass roots engagement.
- Authored and introduced key policies within the Detroit Public Schools which remain today.
- Produced and own more than 300 recordings on major recording artists.

Professional Experience

Political Director

April 2020 to Current

Service Employees International Union (SEIU) Healthcare MI

- Create and drive HCMI's political endorsement process. Responsible for building and executing HCMI's policy platform and lobbying priorities at municipal, county, and state levels.
- Create and drive HCMI's Member Political Organizers program including: Running briefings, debriefings, reporting, civic engagement projects, board/commission service recruitment and troubleshooting for organizers in real time.

Southeast Michigan Community Liaison

Oct 2019 to March 2020

State of Michigan, Office of the Governor

- Served as a member of the Governor's Community Affairs Team (C.A.T.). The primary liaison between the Governor's Office and local communities in Southeast Michigan. Developed strategic relationships with and provide assistance to community organizations, business groups, elected officials and citizens on regional and statewide issues.

**President
The Kinloch Group, Inc**

Aug 1991 to Current

- Manages the holding company which produces recorded music for major record labels and media programming.
- Co-own and direct the music publishing for songs with Warner Music Group and Kobalt Music Group.
- Formerly consulted labor unions, business and government entities on media and strategic planning.

**Director
Trend Industries, Inc**

May 1989 to Jun 1992

- Government and Community Relations - handled community and non-profit organizations request for donations and addressed matters from government agencies and officials.
- Served on various boards and maintained professional organization memberships within the auto industry on behalf of the company.

Sep 1987 to May 1989

State of Michigan

- Legislative Aide to former Senator Jack Faxon - handled constituent concerns, State Police and Corrections department issues.

Research Assistant- Intern

Jun 1986 to Sep 1987

- gathered information for former Ombudsman Marie Farrell Donaldson for investigative reports.

**Youth Representative - Intern
Detroit City Council**

Jun 1984 to Jun 1986

- to Former City Council President Erma L. Henderson assisted with constituent complaints and represented the Council President at events.

Skills

Community Relations, Media Content Development, Government Relations, Strategic Planning

Professional Affiliations

2019- Present Michigan Democratic Party- 3rd Vice Chair, 2018 - Present, Detroit Board of Water Commissioner's- Commissioner, 2016- Present Wayne County Economic Development Corporation- Board Member 2016 - Present Wayne County Brownfield Redevelopment Authority- Board Member, 2016- Present Wayne County Board of Canvassers- Chairman, 2014 - Present Detroit - Wayne County Port Authority, Board of Directors- Board Member- Vice Chairman, 2009- Present: National Association of Parliamentarians, 2003-Present: National Notary Association- Member, 2014 -2015 : Michigan

Association of School Boards - Board Member, 2013- 2015: Detroit Board of Education - Board Member - At Large, 2008-2013: Detroit Library Commission - Commissioner, 2012 - 13: Detroit Library Commission - President, 2009- 12: Association for Library Trustees, Advocates, Friends and Foundations, Legislative Committee - Member 2009-11: American Library Association, Awards Committee - Member 2008-11 Detroit Library Commission, Committee on Books and Literacy- Chairperson 2008-11: Detroit Library Commission, Committee on Audit - Member 2009-10: American Library Association, Marshall Cavendish Library Programming Award - Jury Chair 2008-10: Detroit Library Commission, Committee on Buildings - Member 2006- 08: Detroit Board of Education- Board Member - District 2 2006-08: Detroit Board of Education, Committee on Human Resources, Policy and Legislative Affairs - Chairperson 2006-08: Detroit Board of Education, Committee on Safety, Expulsions and Student Code of Conduct - Member 2006-08: Michigan Association of School Boards,

Legislative Action Network - Detroit Representative 2006- 08: Michigan Association of School Boards, Government Relations Committee- Member, 1998-2007: City of Detroit, Board of Zoning Appeals- Board Member 1989-1991: The County of Wayne Michigan, Planning and Development Commission- Member and Treasurer

Community Involvement: Member - Triumph Church, M.W. Prince Hall Grand Lodge, F.&A.M., - Abiff Lodge No. 21- Master Mason M.W. Prince Hall Grand Lodge, F. &A.M. - Wolverine Consistory #6, Lifetime Member - Detroit Chapter NAACP, Democratic Precinct Delegate, 13th Congressional District Democratic Party Organization - Chair, Michigan Democratic Party Rules and Political Reform Committee, Fmr President -United Nations Association of the United States of America (Greater Detroit Chapter), Fmr. Chairman - Children Center of Wayne County - General Outpatient Advisory Committee, Fmr. Bd. Mem.,Treas.;Chair Core City Neighborhoods, Inc., Fmr. Board Member - Alternative For Girls, Inc., Fmr. Board Member - Michigan Avenue Community Org. (MACO), Fmr. Secretary - Michigan Young Democrats -Partial Listing-



**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD COMMITTEES
2021-2022
(Effective May 1, 2021)**

Standing Committees

EXECUTIVE COMMITTEE

William T. Riley III, Chair
Dora Brown, Treasurer
Dr. Cynthia Taueg, Secretary
Bernard Parker, Immediate Past Chair

FINANCE

Dora Brown, Chair
Kevin McNamara, Vice Chair
Angelo Glenn
Jonathan C. Kinloch
Bernard Parker
Kenya Ruth

PROGRAM COMPLIANCE

Dr. Cynthia Taueg, Chair
Lynne F. Carter, M.D. Vice Chair
Dorothy Burrell
Michelle Jawad

RECIPIENT RIGHTS ADVISORY

Kenya Ruth, Chair
Commissioner Jonathan C. Kinloch, Vice Chair
Dorothy Burrell

Substance Use Disorder Oversight Policy Board

Angelo Glenn, Chair
Thomas Adams
Cynthia Arfken, PhD.
Maria Avila
Thomas Fielder
Jonathan C. Kinloch

Margo L. Martin
Kevin McNamara
James Perry
William T. Riley III
Ronald Taylor
William Ventola

Ad-Hoc Committees (Meet as Required)

POLICY

Cynthia Taueg, Chair
Angelo Glenn, Vice Chair
Dora Brown
Kevin McNamara

STRATEGIC PLANNING

Lynne F. Carter, Chair
Michelle Jawad, Vice Chair
Kenya Ruth
Bernard Parker

CEO SEARCH COMMITTEE

William Riley, III, Chair
Dr. Cynthia Taueg, Vice Chair
Lynne F. Carter, M.D.
Angelo Glenn
Kenya Ruth

NOMINATING

Appointments to this Committee will be made in January 2021, in accordance with the Board By-Laws

MEETING DATES:

Board Executive Committee	Meets Third Monday at 12:00 p.m.
Recipient Rights Advisory Committee	Meets First Monday Bi-Monthly at 1:00 p.m.
Substance Use Disorder Oversight Policy Board	Meets Third Monday at 10:00 a.m.
Finance Committee	Meets First Wednesday at 1:00 p.m.
Program Compliance Committee	Meets Second Wednesday at 1:00 p.m.
Nominating Committee	Meets annually or as necessary
CEO Search Committee	Meets as necessary
Policy and Strategic Planning Committee	Meets as necessary

NATIONAL COUNCIL FOR BEHAVIORAL HEALTH



Registration for [NatCon21](#) – the most anticipated conference in mental health and addiction treatment – **opens next week!** Join us from May 3-5 for the learning event of 2021.

The health care landscape is changing – we can help you change with it. Personalize your learning journey at NatCon21 by taking advantage of our can't-be-matched curriculum.

Get solutions to pressing issues, discover how to supercharge your service delivery and contribute to forward-looking conversations on topics that matter to you, including:

- The role of the new administration in the future of health care.
- The ripple effects of the COVID-19 pandemic on community health and wellness.
- The latest innovations and technologies to accelerate your impact.
- The importance of caring for caregivers post-pandemic.
- The fight to end social injustices in health care.

Get your calendar ready, have a marker within reach and watch for our email next week! We look forward to seeing you and 6,000+ of your colleagues at [NatCon21](#).

Community Mental Health Association of Michigan

VIRTUAL ANNUAL SUMMER CONFERENCE

BE the CHANGE

Shaping our Future
Together

June 14-17, 2021

Virtual education & networking each day
from 9:00am-12:30pm EST



The Full Board self-assessment was email to all twelve members on Thursday, February 13, 2020. There were ten completed assessments (83% Participation Rate). The questions, responses and comments are listed below.

Board Activity: Section 1

Board Activity: Section 1 Questions & Responses	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Average
1. The board operates under a set of policies, procedures, and guidelines with which all members are familiar.	10%	0%	10%	40%	40%	4.00
2. The Executive Committee reports to the board on all actions taken and topics discussed.	0%	10%	0%	60%	30%	4.10
3. There are standing committees of the board that meet regularly and report to the board.	0%	0%	0%	10%	90%	4.90
4. Board meetings are well attended, with near full turnout at each meeting.	0%	0%	0%	40%	60%	4.60
5. Each board member has at least one committee assignment	0%	0%	0%	30%	70%	4.70
Average for Board Activity Section 1						4.46

Board Activity: Section 1 Comments
1. There are a few members of the board who seem to have in depth conversations and make decisions amongst themselves. Without having been part of these conversations it is hard to understand what is the true issue and what the reasoning behind some decisions are.
2. Each and every Board Member is serious and well prepared. A great group of dedicated professionals.

Board Activity: Section 2

Board Activity: Section 2 Questions & Responses	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Average
6. Nomination and appointment of board members follow clearly established procedures using known criteria.	0%	0%	0%	50%	50%	4.50
7. Newly appointed board members receive adequate orientation to their role and what is expected of them.	0%	10%	40%	20%	30%	3.70
8. Each board meeting includes an opportunity for learning about the organization's activities.	0%	0%	20%	30%	50%	4.30
9. The board fully understands and is supportive of the strategic planning process of the Network.	0%	0%	10%	50%	40%	4.30
10. Board members receive meeting agendas and supporting materials in time for adequate advance review.	0%	0%	0%	40%	60%	4.60
Average for Board Activity: Section 2						4.28

Board Activity: Section 2 Comments

1. I believe it takes years to get the hang of the system. More training and one on one at start should be made available.

Board Activity: Section 3

Board Activity: Section 3 - Questions & Responses	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Average
11. The board adequately oversees the financial performance and fiduciary accountability of the organization.	0%	0%	20%	40%	40%	4.20
12. The board receives regular financial updates and takes necessary steps to ensure operations of the organization are sound.	0%	0%	20%	40%	40%	4.20
13. The board regularly reviews and evaluates the performance of the CEO.	0%	10%	0%	40%	50%	4.30
14. The board actively engages in discussion around significant issues.	0%	0%	20%	20%	60%	4.40
15. The board chair effectively and appropriately leads and facilitates the board meetings and the policy and governance work of the board.	0%	0%	20%	10%	70%	4.50
Average for Board Activity: Section 3						4.32

Board Activity: Section 3 Comments

1. Excellent Board Chair, pragmatic and consensus builder. The budget projections are becoming maddening. Like hitting a moving dart board.

Mission & Purpose

Mission & Purpose - Questions & Responses	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Average
1. Statements of the organization's mission are well understood and supported by the board.	0%	0%	0%	50%	50%	4.50
2. Board meeting presentations and discussions consistently reference the organization's mission statement.	0%	10%	20%	50%	20%	3.80
3. The board reviews the organization's performance in carrying out the stated mission on a regular basis.	0%	20%	10%	40%	30%	3.80
Average for Mission & Purpose						4.03

Mission & Purpose Comments

1. I don't think that Board decisions regularly reference the Mission and Purpose in the discussion.

Governance/Partnership Alignment

Governance/Partnership Alignment Questions & Responses	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Average
1. The board exercise its governance role: Ensuring that the organization supports and upholds the mission statement, core values, vision statement, and partnership policies.	0%	0%	10%	60%	30%	4.20
2. The board periodically reviews, and is familiar with, the organization's core documents.	0%	10%	20%	40%	30%	3.90
3. The board reviews its own performance and measures its own effectiveness in governance work.	0%	20%	20%	40%	20%	3.60
4. The board is actively engaged in the board development processes.	10%	10%	20%	20%	40%	3.70
5. Each board member adequately performs their duties and responsibilities as outlined in the Bylaws and Board policies.	0%	10%	10%	30%	50%	4.20
Average for Governance/Partnership						3.92

Governance/Partnership Alignment Comments
1. New board members should have more opportunities to lead the board. It is not a good idea to keep the same people in the same leadership roles year after year.

Board Organization

Board Organization - Questions & Responses	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Average
1. Information provided by staff is adequate to ensure effective board governance and decision-making.	0%	10%	0%	60%	30%	4.10
2. The committee structure logically addresses the organization's areas of operation.	0%	0%	0%	60%	40%	4.40
3. All committees have adequate agendas and minutes for each meeting.	0%	0%	0%	40%	60%	4.60
4. All committees address issues of substance.	0%	0%	0%	40%	60%	4.60
Average for Board Organization						4.43

Board Organization Comments
1. Lillian does an incredible job getting this information to the board effectively.

Board Meetings

Board Meetings Questions & Responses	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Average
1. Board meetings are frequent enough to ensure effective governance.	0%	0%	0%	40%	60%	4.60
2. Board meetings are long enough to accomplish the board's work.	0%	0%	10%	30%	60%	4.50
3. Board members fully and positively participate in discussions.	0%	0%	40%	20%	40%	4.00
Average for Board Meetings						4.37

Board Meetings Comments	
1. Some board members don't contribute to board meetings.	

Board Membership

Board Membership Questions & Responses	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Average
1. The board has a range of talents, experience, and knowledge to accomplish its role.	0%	0%	10%	30%	60%	4.50
2. The board uses its members' talents and skills effectively.	0%	10%	20%	20%	50%	4.10
3. The board makeup is diverse with experience, skills, ethnicity, gender, denomination, and age group.	0%	10%	10%	10%	70%	4.40
4. The board makeup is diverse with experience, skills, ethnicity, gender, denomination, and age group.	0%	10%	20%	0%	70%	4.40
5. Fellow board members review each Officers performance annually.	10%	30%	20%	20%	20%	3.10
6. Board Officers perform their duties as outlined in the By-laws.	0%	10%	10%	20%	60%	4.30
Average for Board Membership						4.13

Board Membership Comments	
1. Board could be more diverse. Board chair could take the time to understand the strengths of board members and utilize their skills appropriately.	

Administration & Staff Support

Administration & Staff Support Questions & Responses	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Average
1. The committee structure provides adequate contact with administration and staff.	0%	0%	10%	20%	70%	4.60
2. Communication is strong and clear between the board and staff.	0%	0%	10%	60%	30%	4.20
3. Staff support before, during, and after-board meetings is effective.	0%	0%	10%	40%	50%	4.40
Average for Administration & Staff Support						4.40

Administration & Staff Support Comments
1. Communication between Sud staff and SUD board could be better.
2. Lillian Blackshire is the greatest Board assistant I have ever known. And I have had a lot of them from SEMCOG to the Water Boards to the Airport

Board Development Comments

Board Development Comments
1. Need to identify additional trainings for board members.
2. We have had a fair amount of turnover lately and there are too many BOD members that do not participate enough in the discussions
3. There are reports that board members who went to Mackinaw 2019 attended meetings that were not related to DWIHN.

Board Activities & Recommendation

Board Activities & Recommendation
1. Additional trainings are always good for improving board members effectiveness.
2. I would like to see a skills inventory of BOD members so that we can communicate with appointing authorizes the skills that may be lacking on the Board.
3. Term limits should be considered by the appointing bodies.
4. I would like to see the Committee Chair of Recipient Rights added to the Executive Committee



**Detroit Wayne
Integrated Health Network**

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Detroit, MI 48202-2943
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www.dwihn.org

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

**CORPORATE COMPLIANCE
MEMORANDUM**

TO: Dr. Cynthia Taueg, Chairperson
Program Compliance Committee

FROM: Bernard K. Hooper
Corporate Compliance Officer

DATE: April 14, 2021

RE: REPORT TO PROGRAM COMPLIANCE COMMITTEE

1. National Committee on Quality Assurance (“NCQA”) – DWIHN has received preliminary notification from NCQA regarding DWIHN's scoring on the data submission standards. DWIHN has received 100% of the points available for all standards with the exception of the eight (8). Based on a rough calculation of the points associated with the eight (8) standards, DWIHN has secured at least 85% of the points attributable to the data submission standards. DWIHN has confirmed that the scores for the eight (8) standards range from 0% and 80%. DWIHN will have the opportunity to submit additional evidence or descriptions with respect to those standards during the ten (10) day period after the receipt of the preliminary results of the virtual file review which concluded on Tuesday, April 6, 2021. All must pass elements for the data submission standards and the file review standards have been passed at the 100% level. In addition, DWIHN received a score of 100% for three of four file review subjects including Credentialing, Appeals, and Denials.
2. United Horizons Contract Termination – Corporate Compliance and Managed Care Operation have initiated the contract termination process regarding United Horizons, a provider of CLS and Respite services and SIL housing provider. United Horizons has been the subject of various substantiated investigations. The Corporate Compliance Officer convened a meeting of the Compliance Committee to present with specificity the substantiated matters supporting the termination of the United Horizons contract. The Compliance Committee concluded that a recommendation of contract termination be present to the Board of Directors of DWIHN. Accordingly, the Corporate Compliance Officer is soliciting the support of the Program Compliance Committee to bring the matter of terminating the contract of United Horizons before the full Board of Directors.

Board of Directors

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

Dora Brown, Treasurer
Lynne F. Carter, M.D.
Kevin McNamara

Dr. Cynthia Taueg, Secretary
Angelo Glenn
Bernard Parker

Michelle Jawad
Kenya Ruth

Good afternoon, this executive summary is provided to this Honorable Board based on the RRAC meeting held on March 1, 2021.

Staffing update: We had one staff resign.

Committee member updates:

Complaint updates: For January and February 2021

For January's the Recipient Rights office received 97 allegations, 12 were Outside of Provider Jurisdiction, 4 were No Rights involved, 81 were actual investigations, we closed 22 and 59 remain open.

For February, our office received 109 allegations, 16 were found to be Outside Provider Jurisdiction, 5 were no rights involved, we opened 88 investigations, we closed 1 and 87 remain open.

Recipient Rights Training:

For January and February, our trainers Registered-862 individuals, 544 attended the virtual class, 9 contractual staff, with 434 passed the training and 437 were 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.

For our Site Reviews

The monitoring team conducted 64 Site Reviews January 1-31, 2021.
For February 1-26, 43-site reviews were conducted totaling 107

Under new business

We have completed the ORR State assessment and we submitted out Plan of Correction regarding our deficiencies. On February 10, 2021, the State of Michigan emailed a letter to DWIHN Executive leadership stating our 100-page Plan of Correction was accepted and no further action is required.

For the educational piece: Robert Gilreath, presented a discussion on his role and responsibilities as a RR Unit leader which was very informative.



Interim President and CEO Report

Eric Doeh

April 2021

This has been a significant month for DWIHN on so many levels. Our pilot project with DPD and the City of Detroit continues to be hallmark for others to follow. We have been invited to present at the Community Mental Health Association of Michigan (CMHA) Virtual Summer Conference in June. In addition, we continue to make tremendous progress with our collaboration with Third Circuit Court, the Wayne County Jail and other stakeholders with our Wayne County Jail/Mental Health Initiative. Several sub-committees have been developed to draft policies and define processes and procedures that effect linking our more frequent members/familiar faces to services. Some of those sub-committees include: a committee responsible for establishing automated communication/notification to the Clinically Responsible Service Provider (CRSP) within 24 hours of provision of crisis services; and a sub-committee that is tasked with developing processes to improve management and attendance of hospital discharge appointments, that is connecting members to a CRSP within no more than 48 hours after discharge.

MDHHS/LEGISLATIVE UPDATES

I had the opportunity to meet with Michigan Health and Human Services Director Elizabeth Hertel to discuss how DWIHN is prepared to play a significant role in the Department's agenda that benefits the people we serve. Director Hertel communicated her support for DWIHN's leadership and is looking forward to working with us. The Director is especially interested in mobile services, and DWIHN has already taken steps to ensuring that this is part of its array of services.

I also had a very productive meeting with Representative Mary Whiteford who is on the Health Policy Committee and the House Appropriations Committee. DWIHN made our commitment to the people we serve apparent in these conversations and presented a willingness to continue to work collaboratively to ensure access to services and a commitment to keeping behavioral health and mental health services in the public domain. I have several meetings scheduled for the week of April 19 in Lansing with legislators.

I have enclosed a document titled, "Gearing Towards Integration," as part of the CEO's Report. This document does not appear to have an author, but there is ample speculation that it was penned by the health plans. It is another 298 all over again. I have significant concerns with this document for several reasons: 1) It will eliminate the PIHP/CHMSP; 2) It would require the use of managed care entities to administer a Medicaid health care benefit package; 3) It would have a bid/procurement process that would require the applicants to have managed care experience; 4) It would be a statewide implementation contingent upon number of qualified applicants; 5) Under this proposal, the existing flow of funds that are currently appropriated to the PIHPs, would be diverted to the participating Specialty Integrated Plans (SIPs). This is not the SIP that was introduced by the department. In contrast, these SIPs will be the entities that will be awarded a contract to offer comprehensive Medicaid health care benefit package. DWIHN has already begun working

with the Association, stakeholders, the provider network, the people we serve and our lobbyist our opposition to this plan.

NCQA

I am excited to announce that DWIHN has made a giant step forward in our efforts to secure a 3-year recertification from NCQA. DWIHN's preliminary report from NCQA indicates a score of 89.69 out of 100 points. This preliminary score is well within the range necessary to receive another 3-year certification. A major portion of this outstanding preliminary result is due to perfect scores on three of four subject specific file reviews. Major thanks to the leadership of Bernard Hooper and Gail Parker for leading our NCQA efforts and to all the Directors and their staff who submitted their work under rigorous questioning and assessment for months. This is truly a team effort!

DWIHN's NCQA team is currently considering a submission of additional information to support earning even a few more points as excellence is never satisfied. The next step is a review of these preliminary results by NCQA's committee known as the ROC, which will validate the scoring of our submission and the correct application of the standards by the reviewers. DWIHN's final score should be available in May. We will certainly keep you posted.

COVID-19 EFFORTS

DWIHN continues to provide resources for our members during this pandemic including Behavioral Health Urgent Care Services, COVID recovery homes, COVID residential homes, crisis stabilization services, and access to PPE. DWIHN has partnered with the City of Detroit on vaccination efforts. This partnership has resulted in 3,221 persons getting vaccinated. When combined with vaccination efforts in both licensed and unlicensed facilities (members and staff), 7,314 persons have been vaccinated.

DWIHN applied for the Michigan Block Grant for COVID Supplemental Funding and was awarded \$1,545,000 over 3 years to assist with crisis training, Mental Health First Aid, outreach efforts, autism awareness, prison and jail re-entry, and enhanced discharge from inpatient settings in order to reduce risks of COVID-19 transmission.

FINANCE

DWIHN has concluded its audit for the period ending September 30, 2020. DWIHN has no reported findings for the fifth consecutive year. The audit will be presented by Plante Moran at the May 2021 Finance Committee meeting. In summary:

- DWIHN was unable to contribute 7.5% of its Medicaid capitation into its Internal Service Fund (ISF) as a reserve to cover any medically necessary Medicaid services in excess of our current funding model.
- DWIHN disbursed \$17.6M of the \$22.2M in DCW revenue to its providers.
- DWIHN incurred \$21.7M in HMP Medicaid savings.
- PA2 funds were increased by \$1.3M
- The Michigan Department of Health and Human Services (MDHHS) has not responded to the letter sent from DWIHN on July 23, 2020, requesting a waiver to carry forward general fund dollars above the 5% contractual cap. DWIHN has proceeded with the

assumption that this request has been approved and has included approximately \$3.6M in its FY2021 budget.

- DWIHN had \$3.6M in unspent SUD Treatment block grant funding.
- Administrative costs increased by \$2M.
- Overall, DWIHN incurred an increase in revenues and a decrease in expenditures as a direct result of Covid-19.

As reported last month, the Michigan legislation has extended the \$2.25/hr. direct care worker (DCW) increase through February 28, 2021. Legislation has now approved extending the DCW increase through September 30, 2021 along with an increase in the rate from \$2.00/hr. to \$2.25/hr.

INTEGRATED HEALTHCARE

The new Director of Integrated Health, Vicky Politowski, started with DWIHN on March 29, 2021. DWIHN is working with Vital Data on outcome measures that will assist us in monitoring provider performance and assist with new Health Home efforts. DWIHN is well-positioned to implement a Behavioral Health Home model in this region and is advocating at the State level to be included in an expansion of these services. This also includes CCBHS expansion efforts.

RESIDENTIAL SERVICES

Residential staff continues to monitor COVID-19 related issues, including tracking the number of COVID positive adult foster care staff and members and number of persons receiving the vaccinations. To date, 4,093 persons living in both licensed and unlicensed residential settings (including DCW staff) have been vaccinated.

CHILDREN'S INITIATIVES

DWIHN is in the final stage of completion of the RFP for Autism services to meet service gaps within Wayne County and Detroit. DWIHN will announce the RFP the week of April 12, 2021 and will hold informational sessions. Providers participating in the School Success Initiative received training on how to add outreach data in MH-WIN. This includes all three tiers of the School Success model. This will allow DWIHN to monitor outreach efforts and penetration rates.

SUBSTANCE USE SERVICES

DWIHN has started an Opioid Health Home pilot with MDHHS. DWIHN received technical assistance from MDHHS and the three regions who have been utilizing this model over the past year. DWIHN is the Lead Entity for our region and has nine Health Partners that will be providing the direct services. A list of eligible persons was provided from MDHHS and we provided that information to the Health Partners to start outreach efforts.

ACCESS CENTER

The DWIHN Access Call Center is streamlining internal processes to maximize customer satisfaction and overall Call Center efficiency. We successfully addressing backlog issues

from the initial Wellplace transition by utilizing existing clinical staff from other departments on a short-term basis. We developed a plan moving forward to hire part-time clinical staff to handle authorizations. At the end of our 90-day Call Center transition, we will be sending out a survey to providers and community stakeholders to get a better outlook and start evaluating the transition.

ADVOCACY/LEGISLATIVE EFFORTS

We continue to work with our lobbyists Public Affairs Associates (PAA) to engage legislators (Shirkey and Bizon) on their ideas on reshaping our behavioral healthcare system. A meeting is set up for April 21, 2021.

On April 7, 2021, a letter of support was sent to Director Hertel for DWIHN to be a Behavioral Health Home to support the people we serve and our programs and services.

On March 29, 2021, we sent a letter of concern to Sen. Curtis VanderWall and the Senate Health Policy Committee regarding SB 191. With input from our Chief Medical Officer, Dr. Shama Faheem, we indicated that proposed changes could be unfair to the vulnerable persons we serve as they can be involuntarily hospitalized or restrained. We additionally, asked that further consideration of the bill include involvement from local CMHSPs and patient advocate groups to help design, train, and support clinicians.

Following communication with Wayne County surrounding COVID-19 Vaccination Clinics, DWIHN starting to engage providers and persons served in Western Wayne County and Downriver communities and offered a series of clinics on a walk-in basis.

On March 11, 2021, DWIHN sent communication to MDHHS, the Wayne County Health Department and Wayne County mayors seeking support for persons served by DWIHN to receive COVID-19 vaccinations. DWIHN has taken a proactive approach to providing vaccinations to persons we serve through a collaboration with the Detroit Health Department.

CUSTOMER SERVICE

DWIHN hosted three events for Developmental Disability Awareness month in collaboration with community partners, Michigan Developmental Disabilities Council, Arc of Detroit, Services to Enhance Potential, Champions of Tomorrow, and Warriors on Wheels.

In collaboration with the Detroit Health Department and the Michigan Community Health Workers Alliance, we are working on a series on social determinants of health, now known as *Bridging the Gap: A Peer and Community Health Worker Collaborative*. On March 26, the Collaborative hosted a session involving approximately 70 participants. The topic was COVID vaccination. Japari Paul with the Detroit Health Department was the lead speaker.

We are developing a Plan of Correction to strengthen the Ambassador program. Policy, updated curriculum and routine engagement of Ambassadors are being reviewed.

FACILITIES



Crisis Assessment Center

- ✓ January - Prelim meeting with community was held
- ✓ February - All mechanical, abatement, plumbing, electrical, stormwater plans uploaded to City
- ✓ February - prelim paperwork submitted to Flagstar Bank
- ✓ March 90% - construction site plans delivered to City Final Plan Review
- ✓ End of March - Public hearing with City of Detroit
- April 12 - Issue RFP
- May 19 - Go before Full Board with General Contractor award and Flagstar Bank Financing

A meeting was held on March 5 with Flagstar Bank to discuss moving forward with the construction loan for the Crisis Assessment Center. Ms. Durant and a representative of Flagstar put together a draft term sheet for presentation to the Executive Committee and then Full Board in May.

Milwaukee Building

Social distancing/glass installation was completed the week of March 22, 2021.

Board Room Renovation updates:

- Relocation/renovation of the board table – waiting on two pieces to arrive for maximum social distancing
- Installation of carpet ordered, to be installed after table moved
- Moving electrical, in progress
- Paint/touch-up to be done after table moved

MDHHS 90-DAY RETURN SITE REVIEW OF DWIHN/REGION 7

The review is scheduled for April 22 through April 30, 2021. The follow-up review will evaluate the current status of the Corrective Action Plans submitted by DWIHN in response to the full site review that was conducted March 9 to October 16, 2020. It is DWIHN's expectation that the documentation will support remediation at both the individual and system levels to ensure compliance.

AUDIT

We are preparing for our State of Michigan audit (June) by reviewing cases, and noting any deficiencies and correcting them.

COMMUNICATIONS

In the Media

Crain's news article highlighting DWIHN's co-response teams that pair officers, mental health professionals for emergency calls goals include connecting people in need with services to reduce incarceration, homelessness.

<https://www.dwihn.org/news-dwihn-dpd-bx-health-project.pdf>

DWIHN is educating on Autism Awareness Month through our social media sites in addition to articles in the Michigan Chronicle, Latino Press and PSAs on WDIV-TV.

Several of our providers were featured in the Latino Press article highlighting "*Racial Disparities in the Black and African American Communities*".

DWIHN is conducting a survey of its Residential Providers to determine the IT and Telehealth needs of people living in our homes and need access to devices in order to connect to the Internet to better assist them with their telehealth support needs. Results of the survey will be utilized to support a grant received to support persons living in group home settings.

Over the past few months, we have ignited our *Ask the Doc* segments to address and educate people about COVID-19. Addressing questions and myths from quarantining, masks, social distancing and vaccine efficacy and where people can get a COVID Vaccination.

AskTheDoc@dwihn.org

Crain's Detroit - Reporter Jay Greene covered DWIHN's Crisis Center that will be opening near the Boston Edison area within the next 18 months or so. Greene also highlighted DWIHN's Behavioral Health pilot partnership with the Detroit Police Department and the city of Detroit's Housing Department.

<https://www.crainsdetroit.com/health-care/detroit-wayne-mental-health-building-crisis-center-near-boston-edison-neighborhood>

<https://www.crainsdetroit.com/health-care/detroit-wayne-police-team-fix-broken-mental-health-response>

Channel 7 - WXYZ also covered the pilot program between DPD and DWIHN as well as a separate story listing DWIHN as a mental health resource.

<https://www.wxyz.com/news/local-news/investigations/detroit-police-department-aims-to-better-serve-those-struggling-with-mental-illness>

<https://www.wxyz.com/news/managing-mental-health-here-is-a-list-of-michigan-mental-health-resources>

910 AM - Trent Sanford and Drake Phifer of CPI/WFD hosted a 60-minute segment on Horace Sheffield's channel where they discussed black male access to the COVID vaccinations.

OutFront Media - New billboards are up throughout several locations in Wayne County including Detroit, Hamtramck, Dearborn and Southwest Detroit, promoting coping during COVID-19, mental health awareness, stigma, SUD, and recovery.

Community Newspapers - DWIHN partnerships continue with the Michigan Chronicle, Latino Press, The Hamtramck Review and the Arab American News. Messaging in all

publications includes information on mental health resources, the DWIHN Access Center, disability-related information as well as substance use prevention, treatment and recovery. The latest stories focus on young people and addiction during the pandemic, DWIHN's partnership with law enforcement and SUD Providers, highlighting SUD Provider SOOAR.

What's Coming Up Videos – Customer Service and the Communications Department produce a monthly video called *What's Coming Up* which covers information to keep the people we serve engaged. Videos are published on DWIHN's website and social media including YouTube.

Social Media

The top performing Facebook post for March included the Crain's Detroit coverage on the access and crisis center, our partnership with the DPD pilot and Channel 7 listing DWIHN as a mental health resource. Our top performing Instagram post was a graphic promoting World Teen Mental Wellness Day with 20 engagements. Twitter's top performing post promoted the Men's Mental Health Panel with DWIHN SUD Provider Marseille Arbuckle. Our top performing LinkedIn post was my *Mind Matters* interview. Our total audience growth has increased .5%. Facebook followers have increased by 46% and LinkedIn followers have increased by 100%.

Community Outreach

Constituent's Voice hosted a virtual Q&A where former DWIHN Board Member Dr. Smitherman addressed questions and concerns about the COVID vaccine. Customer Service also held its EVOLVE meeting and a month-long series called "*Real Talk: Being Black with a Disability*". DWIHN Ambassadors distributed resource information at the Spring Spirit Festival at St. Suzanne Cody Rouge Community Resource Center in Detroit.

DWIHN, along with the City of Detroit Health Department, continues offering COVID vaccinations to all providers and people served, living or working in the city of Detroit. In March, there were 2176 people vaccinated. This story ran on WXYZ Channel 7.

Thank you so much. That concludes my report.

Sincerely,

Eric Doeh



Gearing Towards Integration

A proposal to move Michigan forward
with behavioral health integration

Moving Michigan Forward

As we consider the path forward for integration, we have created a proposal that is focused on incorporating core principles that would create a fully integrated health care delivery system that is person-centered, maximizes consumer choice, ensures quality services, exhibits transparency, maximizes efficiency, provides a continuum of health and wellness services, and maximizes resources reaching the persons served.

Person-Centered Care— Ensure that the needs and rights of persons served are at the forefront of the integration efforts.

Consumer/Patient Choice— Provide a full range of services and provider options where a person can move freely about the state.

Quality— Utilize evidence-based and best practices to ensure that high quality services are available and provided for persons served.










Transparency—Exhibit transparency in all aspects of service delivery and management.

Efficiency—Eliminate the multiple layers of administration or redundancies in services.

Comprehensive Services— Provide a full continuum of services within an integrated and holistic focus, including all aspects of health and wellness.

Stewardship—Ensure that resources stay as close as possible to the persons being served.

Through these core values, we envision this integrated model being supported by state and local public policies to promote a quality driven and efficiently run system for persons served in the community. As proposed, this model is designed to:

-  Reduce inefficiencies in funding, coordination of care, and service delivery.
-  Generate uniformity with benefits, contracts, training reciprocity, outcome measurement, care coordination, and utilization management.
-  Allow for portability throughout the State of Michigan without a change in access or benefits.
-  Increase beneficiary choice of service provider and delivery method by allowing the beneficiaries served to have autonomy to select their health care providers.
-  Allow for increased resources to be directed back into care delivery and services through the reduction of administrative layers and cost.
-  Eliminate current PIHP/CMHSP conflict of interest.
-  Allow for increased coordination with other agencies and organizations that are part of an individual's plan of care.
-  Standardize and centralize accountability for administering and managing Medicaid services.
-  Increase transparency and budget predictability.

Gearing Towards Integration

The Big Picture Proposal

This proposal is based on a framework that would require the use of managed care entities to administer a comprehensive Medicaid health care benefit package; incorporating all behavioral health services and supports. This model promotes **full integration** through financial, administrative, and clinical integration of physical and behavioral health services and supports.



Key Considerations:

- The Department would be required to use a procurement process for contracting with eligible managed care organizations to provide the integrated and comprehensive Medicaid health care benefit package.
- This competitive bidding process, administered by the Department of Technology, Management, and Budget (DTMB), will require that any contract awarded for purposes of administering the comprehensive Medicaid health care benefit package will be with an entity that is licensed and regulated as a Health Management Organization (HMO) or an Alternative Health Care Financing and Delivery System (AFDS).
 - This would ensure a fair and equitable bid process, open to any entity that meets the licensing requirements of, and has a valid certificate of authority (COA) to operate as, a HMO or AFDS.

Licensing requirements for the issuance of a Certificate of Authority to operate as a HMO or AFDS in the state of Michigan include, but are not limited to, an entity having and/or submitting:

- Articles of Incorporation
- Plan of Operation
- Management Agreement(s)
- Insolvency Coverage
- Financial Plans
- Contracted Provider Network(s)
- Coverage Service Area
- Provider Contracts/Agreements/Arrangements
- Quality Improvement and Quality Assessment Programs
- Health Professional Credentialing Procedures

- The bid/procurement process will require that applicants are able to demonstrate their managed care experience and expertise in managing complex physical and behavioral health needs. This includes having relevant clinical staff and programs, as well as a commitment to self-determination, person-centeredness, and community inclusion.
- Entities that are awarded a contract to offer the comprehensive Medicaid health care benefit package will be referred to as **Specialty Integrated Plans (SIPs)**.
- It is the legislative intent that this would be a statewide implementation; contingent upon receiving an adequate number of qualified applicants that respond to the request for proposal (RFP).
- Award determination and SIP selection will be conducted by the Department.
- The Department would be responsible for defining the full scope of the bid details, based on the legislative directive provided. This would include the number of SIPs, per county/region, that the Department determines is necessary to adequately service the Medicaid-eligible population; and ensure beneficiary choice of at least two SIPs.

The Big Picture Proposal



Key Considerations (Continued):

- Through this integration model, Prepaid Inpatient Health Plans (PIHPs) would be eliminated; unless they chose to pursue SIP designation by meeting all aforementioned requirements to be eligible to enter a bid during the procurement process; including the ability to adequately administer the entire comprehensive Medicaid health care benefit package.
- Statewide implementation of this integration initiative is intended to be conducted in phases that would eventually lead to integration of the full scope of populations currently served under the public option.
 - **Phase 1:** Severe Mental Illness (SMI), Children (KB v. Lyon)
 - **Phase 2:** Substance Use Disorder (SUD)
 - **Phase 3:** Intellectual and Developmental Disabilities (I/DD)
- Prior to implementation, the Department must adopt measurement standards to evaluate outcome, process, and structural factors to determine the efficacy of the integration efforts.
 - **Outcome Measures:** Assess results of care and patient outcomes (e.g., percent of patients that had controlled cholesterol)
 - **Process Measures:** Assess whether an action occurred (e.g., percent of patients that received depression screening)
 - **Structural Measures:** Assess the conditions under which the integrated delivery model is performing (e.g. reduction in administrative costs)
- These measures will be used, in part, to determine the state's readiness to move forward with the next phase of integration.
- The Department must not deem a phase as successful unless and until statistically significant improvements in service delivery, health outcomes, and access have been achieved. Without being able to achieve measured improvements in key metrics, additional phases shall not commence.
- This integration model is intended to highlight and elevate the important role that Community Mental Health Service Programs (CMHSPs) play in administering behavioral health services.
- The Department would be required to include, as a contract term, a requirement for contracted SIPs to contract with all CMHSPs within their approved service area. Similar to existing contractual requirements for Health Plans with FQHCs, this will ensure a future for the existing CMHSP system.
- The Department shall not require that CMHSPs are contracted as the exclusive provider for specialty services and supports. Contracted SIPs must be allowed to contract directly with behavioral health providers as they deem appropriate.

Gearing Towards Integration

The Big Picture Proposal: Clinical Integration Components

This model provides for a vast and open-ended application of components to promote ongoing clinical integration. At a minimum, it is the intent of the legislature that the implementation of this integration model includes requirements for integrated care coordination/care management, data sharing, and provider education, training, and screening.



Key Considerations:

- The SIPs care management/care coordination program will be required to be staffed with experts from both physical health and behavioral health sectors.
- SIP care coordinators will serve as the main points of contact for beneficiaries. The care coordinators will facilitate appropriate access to, and delivery of, the holistic suite of behavioral health and physical health services administered by the SIP.
- SIP care coordinators will be required to assess beneficiary needs and goals, create and manage care plans, help transition beneficiaries from an institutional setting to the community, follow-up after with the beneficiary after appointments, monitor compliance with doctors' orders, support self-management goals, and connect patients to community resources.
- The Department must determine an appropriate care coordinator to member ratio to ensure SIPs have adequate staffing to meet the complex needs of the populations served.
- SIPs will be required to have their care management/care coordination program work collaboratively with CMHSPs and other behavioral health providers in the management of the jointly-served beneficiaries.
- Through the use of existing technologies and capabilities offered through the Michigan Health Information Network (MiHIN), it is the intent of the legislature that SIPs, CMHSPs, and other behavioral health providers/organizations share real-time data exchanges for the beneficiaries served. This includes, but is not limited to, admission, discharge, and/or transfer notifications, prescription drug data, medical claims data, and care plans.
- The Department shall consider implementing incentives (i.e. kick-payments) for providers who participate in education/training that promotes the practice(s) of physical and behavioral health clinical integration.
- The Department shall consider incentive mechanisms for SIPs to promote network providers to adopt colocation integration of physical and behavioral health practices.


Gearing Towards Integration

The Big Picture Proposal: Financial Integration Components

Under this integration model, the existing flow of funds that are currently appropriated to PIHPs (for the Phase 1 population) would be diverted to the participating SIPs through a comprehensive risk-based managed care contract. This contract would include a capitated payment arrangement set on a per member per month (PMPM) payment schedule. Unlike fee-for-service (FFS), this capitation model provides upfront fixed payments to SIPs based on projected utilization of covered services, administrative costs, and profit. Plan rates are usually set for a 12-month rating period and must be reviewed and approved by CMS each year.

Under federal law, payments to Medicaid MCOs must be actuarially sound. Actuarial soundness means that "the capitation rates are projected to provide for all reasonable, appropriate, and attainable costs that are required under the terms of the contract and for the operation of the managed care plan for the time period and the population covered under the terms of the contract."

Key Considerations:


- 
- Prior to implementation, the Department would be required to produce an actuarially sound fee schedule for all behavioral health services and supports.
 - Statutory protections against profiteering should be enacted which would instruct the Department to establish actuarially sound capitation payments for contracted SIPs that must include a two-way risk corridor for the program specific to behavioral health specialty services and supports. The risk corridor must be for a period of time not less than 5 years (to allow for staged population go-live timeline), and should set a target Medical Loss Ratio (MLR) at an amount equal to actuarially sound capitation rates for the physical health benefits.
 - It is the intent of the legislature that actualized savings from this integration model be reinvested into non-Medicaid CMH services, and other innovative options to increase access to care throughout our state.

The Big Picture Proposal: Administrative Integration Components

Under this integration model, the Specialty Integrated Plans would be responsible for all of the following administrative functions:

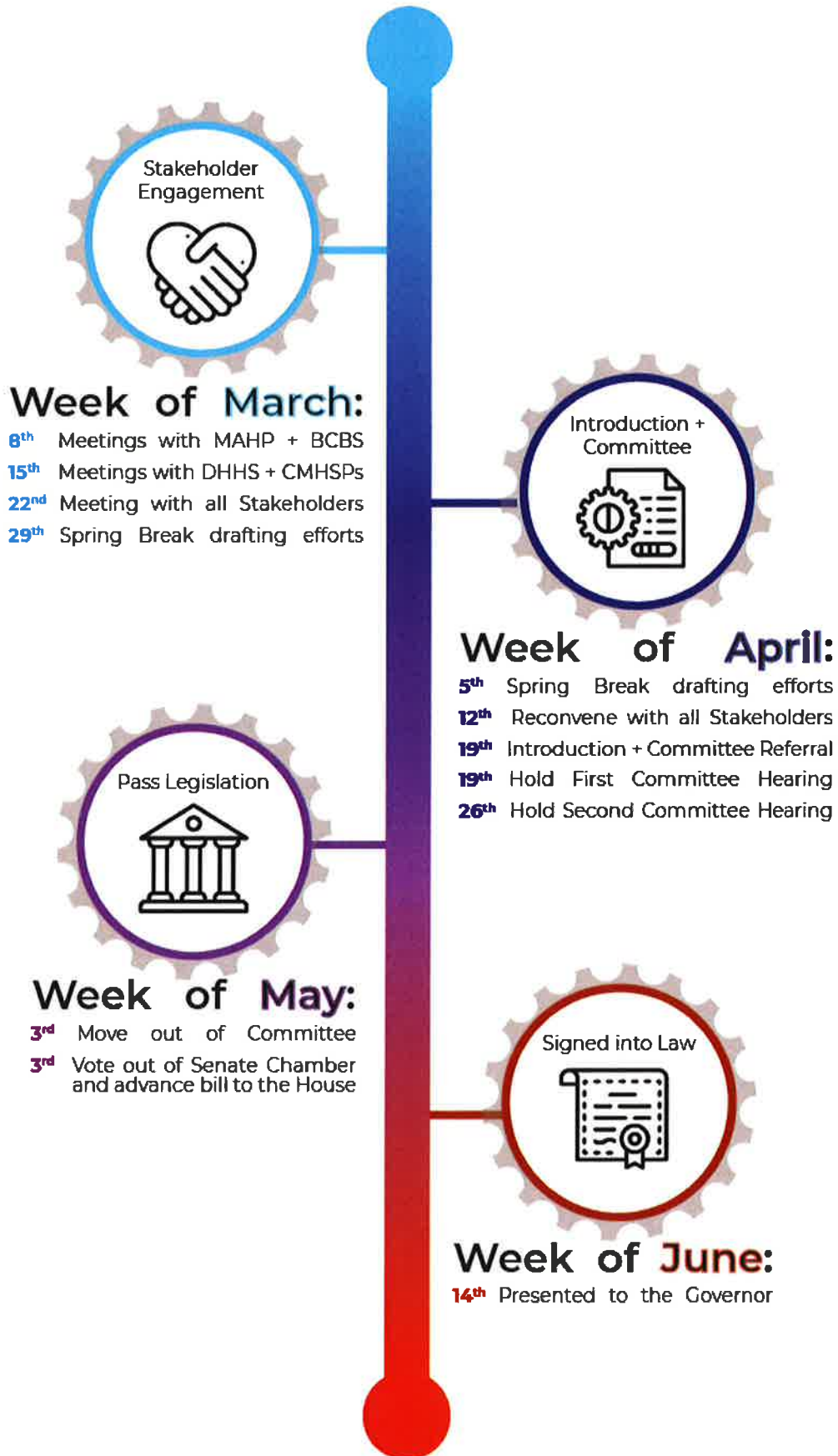
- Member Services/Communication
- Claims Payment
- Compliance/Oversight/Legal Functions
- Quality Improvement
- Appeals/Grievances
- Finance
- Data/Information Management
- Case Management/Care Coordination
- Network Management/Credentialing
- Utilization Management

Key Considerations:

- 
- Although these administrative functions would be the primary responsibility of the SIPs, there would be an emphasis for the SIPs to enter into value-based contract arrangements with CMHSPs and other behavioral health providers/organizations in order to promote collaborative partnerships to enhance the service delivery model.
 - These innovative contract arrangements would provide for the ability for SIPs to delegate or incorporate functions (with enhanced financial incentives) to CMHSPs and/or other organizations and providers to allow for a more dynamic and holistic service delivery model.

Gearing Towards Integration

Proposed Timeline to Implement



**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 20-32R Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 4/21/2021

Name of Provider: Scripps Media, Inc.

Contract Title: Media Campaign with SCRIPPS

Address where services are provided: 'None'

Presented to Finance Committee at its meeting on: 4/7/2021

Proposed Contract Term: 10/1/2019 to 9/30/2020

Amount of Contract: \$ 227,965.00 Previous Fiscal Year: \$ 210,000.00

Program Type: Continuation

Projected Number Served- Year 1: 2,000,000 Persons Served (previous fiscal year): 1000000

Date Contract First Initiated: 10/1/2017

Provider Impaneled (Y/N)?

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

This board action is requesting approval to increase the initial \$210,000 allocation to \$227,965, an increase of \$17,965 for the year ended September 30, 2020. There is available FY20 SUD block grant funding to cover the additional costs.

Due to additional services requested during the fiscal year, an outstanding amount of \$17,965 remains unpaid to Scripps as of September 30, 2020.

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

Source of Funds: Block Grant

Fee for Service (Y/N): N

Revenue	FY 20/21	Annualized
SUD Block Grant	\$ 227,965.00	\$ 227,965.00
	\$	\$
Total Revenue	\$ 227,965.00	\$ 227,965.00

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64932.826600.06700

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: Thursday, April 1, 2021

Signed: Thursday, April 1, 2021

BOARD ACTION TAKEN

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

- Approved
- Rejected
- Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature *William M. Beckman*
Board Liaison

Date 4/21/2021

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-25 R2 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 4/21/2021

Name of Provider: Detroit Wayne Integrated Health Network

Contract Title: FY 2020-2021 Operating Budget

Address where services are provided: 707 W. Milwaukee Detroit, MI 48202 United States

Presented to Finance Committee at its meeting on: 3/3/2021

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

Amount of Contract: \$ 893,003,407.00 Previous Fiscal Year: \$ 833,066,765.00

Program Type: Continuation

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

Date Contract First Initiated: 10/1/2020

Provider Impaneled (Y/N)?

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

This board action is amended for language changes only with the addition of the final paragraph.

The Detroit Wayne Integrated Health Network staff is requesting board approval to amend BA 21-25 R1 per budget adjustment #21-35-011 -- certification of additional Medicaid revenue of \$43,989,268 per the projection of 1st quarter Medicaid revenue received.

The revised FY 2021 operating budget of \$893,003,407 includes revenue of \$30,449,269 (State General Funds); \$691,742,398 (Medicaid, DHS Incentive, Medicaid-Autism, Children's/SED Waiver, HAB); \$7,486,123 (MI Health Lin); \$114,952,550 (Healthy MI - Mental Health and Substance Abuse); \$17,686,447 (Wayne County Local Match Funds); \$3,507,941 (State Grant portion of SUD and OBRA); \$21,735,490 (Federal Grants/Federal Block Grants/SUD); \$362,650 (Local Grant Revenue); \$1,000,000 (Interest Income); and \$40,000 (Misc Revenue).

Additionally, approximately \$11 million will be used to fund FY21 1st Quarter Direct Care Worker hazard pay for employees in the DWIHN Provider Network. The balance of the funds will be deposited in the Medicaid Internal Service Fund (ISF) account.

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
	\$ 893,003,407.00	\$ 893,003,407.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 893,003,407.00	\$ 893,003,407.00

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

Type of contract (Business/Clinical):

ACCOUNT NUMBER: VARIOUS

In Budget (Y/N)? N

Approved for Submittal to Board:

Eric Doeh, Interim CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Eric Doeh

Stacie Durant

Signed: Friday, April 9, 2021

Signed: Friday, April 9, 2021

BOARD ACTION TAKEN

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

- Approved
- Rejected
- Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature *William M. Beckman*
Board Liaison

Date 4/21/2021

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-59 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 4/21/2021

Name of Provider: Public Affairs Associates, LLC

Contract Title: Public Affairs Associates

Address where services are provided: 120 N. Washington Sq., Suite 1050 Lansing, MI 48933

Presented to Finance Committee at its meeting on: 4/7/2021

Proposed Contract Term: 10/1/2020 to 9/30/2023

Amount of Contract: \$ 144,000.00 Previous Fiscal Year: \$ 48,000.00

Program Type: New

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

Date Contract First Initiated: 10/1/2020

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's most recent Agreement with our lobbyist firm Public Affairs Associates (PAA) contained a term ending September 30, 2020 with an option to renew the contract for two additional one (1) year terms. In accordance with the same, staff is requesting to exercise both options renewing the agreement through September 30, 2022 for an amount not to exceed \$96,000 for the two year term and a total contracted amount of \$144,000.

PAA continues to work in conjunction with DWIHN staff and board members for government and legislative services. They have been a critical piece to DWIHN's legislative plan in working with the MDHHS and Lansing leadership and have assisted in spearheading collaborative meetings which have made extensive headway with our System Transformation efforts.

DWIHN feels that in this hyper-sensitive mental health climate the services provided by PAA are essential in developing strategies and relationships as we move forward as a successful community mental health organization.

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

Source of Funds: Local Funds

Fee for Service (Y/N): N

Revenue	FY 20/21	Annualized
Local Funds	\$ 144,000.00	\$ 144,000.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 144,000.00	\$ 144,000.00

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64910.817003.00000

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: Friday, April 16, 2021

Signed: Friday, April 16, 2021

BOARD ACTION TAKEN

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

Approved

Rejected

Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature William M. Backus
Board Liaison

Date 4/21/2021

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

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

Presented to Full Board at its Meeting on: 4/21/2021

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: 4/14/2021

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

Amount of Contract: \$ 65,000.00 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 Impaneled (Y/N)?

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

This board action is requesting the approval to increase the initial contract for \$20,000 and extend the terms to September 30, 2021. The initial contract was \$45,000 and therefore did not require a board action. The revised amount is \$65,000 and therefore requires board approval.

Due to DWIHN not having the availability of a psychiatrist for appeals & denials, we have been utilized MPRO. DWIHN estimated the \$20,000 amount based on the anticipation that we will decrease our utilization of MPRO by approximately 50% for the remaining 6.5 months of the contract (i.e., sending an average of 3 cases per month).

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	\$ 65,000.00	\$ 65,000.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 65,000.00	\$ 65,000.00

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: Friday, March 19, 2021

Signed: Friday, March 19, 2021

BOARD ACTION TAKEN

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

- Approved
- Rejected
- Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature *William M. Backus*
Board Liaison

Date 4/21/2021

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-61 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 4/21/2021

Name of Provider: National Council For Behavioral Health

Contract Title: National Council For Behavioral Health BHH Consultation

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 4/14/2021

Proposed Contract Term: 5/1/2021 to 12/31/2021

Amount of Contract: \$ 80,000.00 Previous Fiscal Year: \$ 0.00

Program Type: New

Projected Number Served- Year 1: 300 Persons Served (previous fiscal year): 0

Date Contract First Initiated: 5/1/2021

Provider Impanched (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 looking to enter into an eight month agreement from May 1, 2021 through December 31, 2021 for an amount not to exceed \$80,000 with The National Council for Behavioral Health to receive guidance and support in the organization's goal of becoming a Behavioral Health Home (BHH) and or a Certified Community Behavioral Health Clinic (CCBHC).

Focused attention on behavioral conditions, especially those that are co-morbid with a medical condition, can reduce costs across the board. Improved care coordination ensures that treatment is both specialized and integrated

Evaluation studies of current CCBHC programs have shown significant positive outcomes, including increased access to services, better care coordination, decreased wait times, and more appropriate, quality care.

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	\$ 80,000.00	\$ 80,000.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 80,000.00	\$ 80,000.00

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64911.815000.00000

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: Monday, April 12, 2021

Signed: Monday, April 12, 2021

BOARD ACTION TAKEN

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

Approved

Rejected

Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature William M. Backus
Board Liaison

Date 4/21/2021

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-62 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 4/21/2021

Name of Provider: The Hunter Group LLC

Contract Title: CEO Search Firm

Address where services are provided: 'None'

Presented to Executive Committee at its meeting on: 4/19/2021

Proposed Contract Term: 5/1/2021 to 8/31/2021

Amount of Contract: \$ 59,000.00 Previous Fiscal Year: \$ 0.00

Program Type: New

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

Date Contract First Initiated: 5/1/2021

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).

Board approval is requested in the amount of \$59,000 for the CEO Search Firm who will assist in our efforts to recruit a qualified President and Chief Executive Officer for DWIHN. The Board's Personnel/Search Committee was initiated and met to vet several executive search firms. After the interview process, The Hunter Group was deemed to be the most qualified.

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	\$ 59,000.00	\$ 59,000.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 59,000.00	\$ 59,000.00

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64910.815000.00000

In Budget (Y/N)? Y

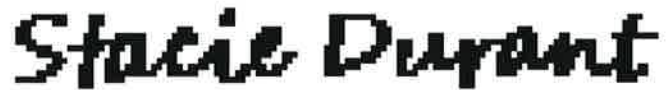
Approved for Submittal to Board:

Eric Doeh, Interim CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Signed: Tuesday, April 13, 2021

Signed: Tuesday, April 13, 2021

BOARD ACTION TAKEN

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

Approved

Rejected

Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature *Lillian M. Beckman*
Board Liaison

Date 4/21/2021



TEAM WELLNESS — CENTER —

What can we do for you today?

Who We Are

Proud partner of DWIHN and other industry providers
Premier provider of integrated care services since 2002
Certified Community Behavioral Health Clinic (CCBHC)
Accredited by CARF and the American Association of Suicidology
Mission Driven and Trauma Informed
‘Serve First, Sort Later’ approach to care



Service Sites

Greater Wayne County

Eastern Market - 2925 Russell St. Detroit, MI 48207

Team East - 6309 Mack Ave. Detroit MI, 48207

Southgate - 14799 Dix-Toledo Rd. Southgate, MI 48195

Primary Care & Dental Clinic - 3646 Mt. Elliott Detroit, Mi 48207

Team Jefferson - 11105 East Jefferson, Detroit, Mi 48214

Administrative Office - 921 Howard St. Dearborn, MI 48124



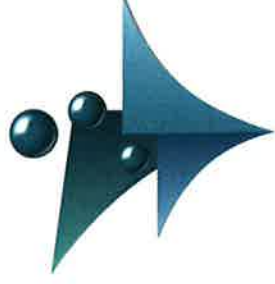
ully Integrated

- ▶ 24-hour community mental health services
Adult, Child/Adolescent - MI, IDD, SA
- ▶ Psychiatry & Behavioral Health
- ▶ Primary Care
- ▶ Dental Clinic (adult & children)
- ▶ Optometry
- ▶ Podiatry
- ▶ Same Day Appointments



Outpatient Substance Use Disorders

- ▶ Co-occurring disorder treatment
- ▶ Medication Assisted Treatment (MAT)
- ▶ Suboxone Clinic (Individual and Group Therapy)
- ▶ Community education on communicable diseases
- ▶ Proud partner of DWIHN's Residential S.A. programs



Crisis Response

- ▶ 24-Hour crisis continuum
- ▶ Crisis hotline 888-813-TEAM
- ▶ Crisis Stabilization Unit
- ▶ CART (Crisis & Addiction Response Team)
- ▶ Suicide prevention (certified representatives at our call center)
- ▶ Proud participant of the AOT collaborative and the DWIHN co-responder ride-along



Jail Diversion & Re-entry

Proud partner of Wayne County Courts
and DWIHN's Jail Diversion efforts

Team Jefferson

Mental health, Drug, & Juvenile courts

Strong relationship with DPD (7th & 9th precincts)

Co-responder pilot partnership with DWIHN

Women's re-entry program in development



rogram Development

- ▶ Women's jail diversion and re-entry program
- ▶ Domestic violence and Human Trafficking survivors' program
- ▶ Community College bridge and incubator
- ▶ Horticulture program
- ▶ Urgent Care Nurse Practitioner rotations
- ▶ Integrated Mobile Clinic



ther services

- ▶ Trauma informed care
- ▶ In-home, telehealth, and school supports
- ▶ Board-Certified child psychiatrist on staff
- ▶ Board-Certified Psychologist (Behavioral Treatment Team)
- ▶ ACT program
- ▶ On site X-Ray and Lab services
- ▶ Mobile mammogram



Collaboration & Partnership





THANK YOU
DWIHN!

QUESTIONS

