



# Detroit Wayne Integrated Health Network

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**FULL BOARD MEETING**  
**Wednesday, March 18, 2026**  
**Detroit Wayne Integrated Health Network**  
**Administration Building**  
**8726 Woodward, 1<sup>st</sup> Floor Board Room**  
**1:00 p.m.**  
**AGENDA**

- I. CALL TO ORDER**
- II. ROLL CALL**
- III. APPROVAL OF AGENDA**
- IV. MOMENT OF SILENCE**
- V. APPROVAL OF BOARD MINUTES – February 18, 2026**
- VI. RECEIVE AND FILE – Approved Finance Committee Minutes – February 4, 2026**  
Approved Program Compliance Committee Minutes – February 11, 2026
- VII. ANNOUNCEMENTS**
  - A. Network Announcements
  - B. Board Member Announcements
- VIII. BOARD COMMITTEE REPORTS**
  - A. Board Chair Report
    - 1. Board Committee Appointments (April)
    - 2. National Council for Mental Wellbeing NatCon26, Colorado Convention Center, Denver, CO (April 27 – 29, 2026)
    - 3. Regional Chamber of Commerce Mackinac Policy Conference 2026 – Mackinac Island, Michigan (May 26<sup>th</sup> – 29<sup>th</sup> 2026)
    - 4. National Council for Mental Wellbeing Hill Day – Washington, DC (June 2<sup>nd</sup> – 3<sup>rd</sup> 2026)
    - 5. Community Mental Health Association of Michigan Annual Summer Conference – Grand Traverse, Michigan (June 8 – 10, 2026)

**Board of Directors**

Dr. Cynthia Taueg, Chairperson  
Karima Bentounsi  
Kevin McNamara

Jonathan C. Kinloch, Vice Chairperson  
Angela Bullock  
Bernard Parker

Dora Brown, Treasurer  
Lynne F. Carter, MD  
William Phillips

Eva Garza Dewaelsche, Secretary  
Angelo Glenn  
Kenya Ruth

**James E. White, President and CEO**



- B. Executive Committee
  - 1. CEO Annual Performance Appraisal
  - 2. City of Detroit and Wayne County Appointments/Reappointments
  - 3. Update Annual Report to the Commission (March, 2026)
  - 4. Annual Meeting (June/July 2026)
- C. Finance Committee
- D. Program Compliance Committee
- E. Recipients Rights Advisory Committee
- F. Policy/Bylaw Committee

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

**X. UNFINISHED BUSINESS (Staff Recommendations)**

- A. **BA#26-16 (Revised)** – Children’s Crisis Intervention Services, PAR FY26 *(Program Compliance)*
- B. **BA#26-39 (Revision 2)** – Michigan Clinical Consultation and Care (MC3) FY26 *(Program Compliance)*

**XI. NEW BUSINESS (Staff Recommendations) - None**

**XII. AD HOC COMMITTEE REPORTS**

- A. Strategic Plan Committee
- B. Board Building Committee

**XIII. PRESIDENT AND CEO MONTHLY REPORT**

- A. Update Crisis Care Center
- B. Update Integration Pilot
- C. Update CCBHC
- D. Update Long Term Residential Care

**XIV. COMMUNICATIONS QUARTERLY MEDIA REPORT**

**XV. PROVIDER PRESENTATION – None**

**XVI. REVIEW OF ACTION ITEMS**

**XVII. GOOD AND WELFARE/PUBLIC COMMENT/ANNOUNCEMENTS**

Members of the public are welcome to address the Board during this time up to two (2) 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 who do not want to identify themselves may still address the Board. Issues raised during Good and Welfare/Public Comment that are of concern to them 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 instead responded to on an individual basis).

**XVIII. ADJOURNMENT**



**DETROIT WAYNE INTEGRATED HEALTH NETWORK  
FULL BOARD MEETING  
Meeting Minutes  
Wednesday, February 18, 2026  
1:00 p.m.**

**BOARD MEMBERS PRESENT**

Dr. Cynthia Taueg, Board Chairperson	Angelo Glenn
Jonathan C. Kinloch, Vice Chairperson	Kevin McNamara
Dora Brown, Treasurer	Bernard Parker
Eva Garza Dewaelsche, Secretary	William Phillips
Angela Bullock	Kenya Ruth
Lynne F. Carter, M.D.	

**BOARD MEMBERS ATTENDING VIRTUALLY:** Ms. Karima Bentounsi

**BOARD MEMBERS EXCUSED:** None

**SUBSTANCE USE DISORDER OVERSIGHT POLICY BOARD ATTENDING VIRTUALLY:**  
Mr. Thomas Adams, Chair

**GUEST(S):** None

**CALL TO ORDER**

The Board Chairperson, Dr. Taueg welcomed and thanked everyone for attending the meeting both in person and virtually. The meeting was called to order at 1:11 p.m. A roll call was requested.

**ROLL CALL**

Roll call was taken by Ms. Garza Dewaelsche, Board Secretary and a quorum was present.

**APPROVAL OF THE AGENDA**

The Board Chairperson Dr. Taueg called for a motion on the agenda. It was moved by Ms. Brown and supported by Ms. Garza Dewaelsche approval of the agenda. There was no further discussion. **Motion carried.**

**MOMENT OF SILENCE**

The Board Chair. Taueg called for a moment of silence. A moment of silence was taken.

**APPROVAL OF BOARD MINUTES**

The Board Chairperson, Dr. Taueg, called for a motion to approve the minutes from the January 21, 2026 Full Board meeting. It was moved by Ms. Brown and supported by Commissioner Kinloch approval of the Full Board minutes from the meeting held on January 21, 2026. There was no further discussion. **Motion carried.**

## **RECEIVE AND FILE**

The approved minutes from the Finance Committee meeting of January 7, 2026 and the Program Compliance Committee meeting of January 14, 2026 were received and filed.

## **ANNOUNCEMENTS**

### Network Announcements

Mr. M. McElrath, Public Affairs Manager, Communications Department reported. It was noted that there are no major events hosted by DWIHN, however we are supporting community events throughout the City of Detroit. There was a listing for each month in the board packet noting each different community events that we are either hosting or supporting. The Ruth Ellis Center has a DWIHN Social Identity Training Series and this is an ongoing series of trainings from Identity 101, Family Preservation with Unique Populations and Individualized Plans of Service with unique populations. The Arc of Northwest Detroit has several workshops, a relationship course, that addresses what it looks like to participate in safe relationships. The Arc of Northwest Detroit focuses and serves individuals with developmental and intellectual disabilities throughout the county. The Board was impressed with the range of events that are occurring and was especially pleased to see the one on safe relationships. Mr. McElrath noted that we promote events through our Friday roundups throughout the whole network and the community. There was no further discussion.

### Board Announcements

Board Chairperson Dr. Taueg called for Board Announcements. Ms. Ruth noted that it was Mr. Glenn's birthday and wished him a happy birthday. Commissioner Kinloch wished Ms. Ruth a happy birthday and Dr. Taueg wished Mr. Glenn and Ms. Ruth a happy birthday for the month of February.

Mr. Parker noted that he wanted to recognize the passing of a great giant in our community, Reverend Jesse Jackson, someone that we all know and recognize his contributions in the Civil Rights Movement and in a number of other areas, on a personal note, he is one that was consulted with when Operation Get Down was started, we were going to be Operation Red Basket, but that did not work out, and he has been a person the Mr. Parker has relied on throughout the years; has been very helpful in a number of areas that we have been involved in and has visited with us many times. His contributions will forever be beneficial to us as we move forward and his life and legacy live on.

Mr. McNamara noted that the Conference of Western Wayne (CWW), which has 17 mayors and supervisors west of Detroit has requested that he bring this topic up. There is only one Kids Talk program and it is in the City of Detroit. When there is sexual abuse or things like that the kids, if reached within three hours and placed into a Kids Talk Program they can find out what really happened. The one in Detroit is really busy, we can't get in there and when it takes several days by then it is too late; it is traumatic to move them all the way down to Detroit for this, so they are trying to start a Kids Talk Program in Western Wayne and they have most of the money put together, they are about \$800,000 short and are seeking a one-time commitment for \$800,000 and the CWW believes that this board that it falls within his borrowers purview for children and mental health problems and they can perhaps help them out with \$800,000 to get this program up and running. They have the money to keep it running; which is about \$3 million dollars, to build out the facility. A formal request was asked of staff that DWIHN look into figuring out if they can help get \$800,000 for a one-time capital improvement to build out their Kids Talk space that would be in Canton and they would pick up all the operational costs.

It was noted that Kids Talk is a good program, but it was believed that a proposal to DWIHN in that regard is in order and they can respond from that. Mr. White noted that would be correct and that they had already started conversation. It was also noted that there are three Kid Talk Programs, one in Southgate, one in Detroit and one in Canton. It was reported that the program is in Canton and that is where they are asking for the money to open the program. It was noted that the Children's Center shows Canton and they will take another look. They have the building, they are ready to go, they just have to build it out. Mr. White noted that they are trying to solve for exactly that and see how they can connect the dots to see if there is funding available. He agreed that the Kids Talk program is extremely important, the largest one is in Detroit and it is a valuable asset to our kids that have been victimized so we will do what we can to see how it fits. Dr. Taueg, Chair noted that they we will be sure to hear more about it at the Program Compliance Committee meeting as a proposal when developed.

*The record reflects that Ms. Bentounsi joined the meeting virtually.*

Mr. Glenn wished Ms. Ruth a happy birthday and Dr. Taueg noted that on behalf of Board she wanted to give belated birthday wishes for the month of December to Mr. Parker, Ms. Bentounsi and Mr. Phillips and for the month of January, Ms. Bullock. There was no further discussion.

## **BOARD COMMITTEE REPORTS**

### Board Chair Report

Board Chairperson, Dr. Taueg provided a verbal report. It was reported that the board committee appointments would be coming up in April, they are renewed every year after the board officer elections. Board members that are interested in being on a certain committee an announcement will come from the Board Liaison and you will need to let her know what committees you might be interested in.

The Annual meeting will be scheduled sometime in June or July, this was discussed at the Executive Committee meeting. There will be a recommendation coming forth from the Executive Committee in terms of when the meeting should occur either in June or July.

The Community Mental Health Annual Winter Conference took place earlier this month and Commissioner Kinloch attended and represented the board as well as some staff members. Commissioner Kinloch reported that there was a lot of conversation centering around the RFP as it relates to the state and the PIHP. There were presentations by our staff as it relates to AI, it uses and benefits within our mental health and behavioral health space. Commissioner Kinloch was thanked for his report and for his attendance.

The National Council for Mental Wellbeing NATCON 26 will be coming up in April in Denver and there is a number of board members including herself scheduled to attend this national conference. A lot has been going on in the area of behavioral health and we all will get an update and have a chance to report back.

The Regional Chamber of Commerce Mackinac Policy Conference is coming up in the month of May and there are several board members that are attending and representing and the board and some that are attending primarily on their own. It will be a very interesting, conference this year with all the elections that are taking place nationally and locally.

The National Council for Mental Health Wellbeing Hill Day in Washington DC will be held in Washington, DC on June 2<sup>nd</sup> and more information will be shared about that, there are some of us who are tentatively trying to arrange schedules to go, but we do have an opportunity to advocate for the people we serve.

The Community Mental Health Association of Michigan Summer Conference is coming up in June and we do have some board members interested in attending.

The Board Chair, Dr. Tauzeg noted that the Annual Meeting per their bylaws should be held in or around May or April. Discussion was held at the Executive Committee meeting to have the meeting in June or in July. They are working on the dates and once the dates are determined they will bring them back to the board. A recommendation is being made to this body and a vote is needed to have the annual meeting sometime in June or July to be in compliance with our bylaws and staff can proceed to plan. The Chair called for a motion. **It was moved by Mr. Parker and supported by Mr. Glenn to have the Annual meeting in June or July.** There was no further discussion. **Motion carried.**

The Board Chair report was received and filed.

#### **Executive Committee**

The Chair, Dr. Tauzeg provided a verbal report. It was reported the City of Detroit and Wayne County both had appointments and or reappointments coming up which should be made by March 31st. Dr. Tauzeg requested an update from Ms. B. Blackwell, VP of Government Affairs. Ms. Blackwell reported that the city appointments were Mr. Bernard Parker and Ms. Angela Bullock and the Wayne County Executive's appointments were Ms. Karima Bentounsi and Mr. Kevin McNamara. She has been in contact with both the City of Detroit and the Wayne County Executive's office and they are in the process of looking at all board members and are set to make their appointments or reappointments to the Wayne County Commission by the first or second week of March so that the appointments can be made to the Commission in time so that there are not any expiring board member terms prior to the deadline of March 31<sup>st</sup>. There was no further discussion. The report of the Executive Committee was received and filed.

Dr. Tauzeg, Board Chairperson, called for the Finance Committee report.

#### Finance Committee

Ms. Dora Brown, Chairperson of the Finance Committee, provided a verbal report. It was reported that the Finance Committee met on Wednesday, February 4, 2026. The audit report will be available at the board meeting in May from Plante Moran and the committee reviewed and moved to Full Board for approval three board actions. There was not a lot to go over as it relates to the financials; liquidity is strong and there was a follow-up item regarding the balances in the individual institutions. It was reported that Flagstar has about \$111 million dollars; Comerica has approximately \$90 million dollars; First Independence has approximately \$22 million dollars and Huntington Bank has approximately \$5 million dollars. There was no further discussion. The report was received and filed.

Dr. Tauzeg, Board Chair called for the report of the Program Compliance Committee.

### Program Compliance Committee

Commissioner Jonathan C. Kinloch, Chair of the Program Compliance Committee, provided a verbal report. It was reported that the Program Compliance Committee met on Wednesday, February 11, 2026. The Chief Medical Officer and the follow-up item from Customer Service will be provided at the March 11th, meeting. The VP of Corporate Compliance Ms. Jackson presented the Compliance Plan Policy and the Standards of Conduct Policy to the committee for consideration. After discussion it was recommended that the two policies be referred to the May meeting of the Policy/Bylaw Committee for review. After review by the Policy/Bylaw Committee the policies will be brought back to the Program Compliance Committee in May for consideration. Quarterly reports were received from the Access Call Center, Residential Services and Substance Use Disorder Initiatives. The Network Innovation and Community Engagement Quarterly report was deferred to the March meeting. The Committee reviewed, considered and moved to Full Board for approval the Quality Assessment Description Fiscal Year 2026-2028; The Quality Assessment Performance Improvement Plan Annual Evaluation Fiscal Year 2025 and the Quality Assessment Performance Improvement Plan Work Plan Fiscal Year 2026. Ms. Seibert, Director of Quality provided an Executive Summary of all three documents which will need a motion for approval from the Full Board at the meeting today.

The Associate VP of Clinical Operations, Ms. Sharpe provided an Executive Summary. Information was provided on Adult Initiatives, and it was reported that the Assisted Outpatient Treatment (AOT) program continues to provide court-ordered coordination for individuals with serious mental illness, aiming to reduce hospitalizations through consistent engagement and compliance support. Currently, the AOT Monitor is actively supporting 55 members ensuring medication adherence and collaboration with CRSP providers and Wayne County Probate Court. It was also reported the Habilitation Supports Waiver (HSW) program continues to perform strongly, maintaining an average slot utilization of 97.4% (1,095 slots) for the fiscal year to date, exceeding the state requirement of 95%.

The Committee considered and recommended for Full Board approval six board actions under Unfinished Business and one Board action under New Business. There was no further discussion. The Program Compliance Committee report was received and filed.

Dr. Taueg, Board Chairperson, called for the report of the Recipient Rights Advisory Committee.

### Recipient Rights Advisory Committee

Ms. Kenya Ruth, Chair of the Recipient Rights Advisory Committee noted that the Recipient Rights Advisory Committee did not meet during the month of February and there was no report.

Dr. Taueg, Board Chairperson, called for the Policy/Bylaw Committee report.

### Policy/Bylaw Committee

Mr. William Phillips, Committee Chair noted that the Policy/Bylaw Committee did not meet during the month of February, however a meeting was scheduled on March 11<sup>th</sup> at 3:10 p.m. following the Program Compliance Committee meeting. There was no report.

Dr. Taueg, Board Chairperson, called for the Nominating Committee report.

### Nominating Committee

Mr. Kevin McNamara, Committee Chair reported the Nominating Committee met on February 11, 2026 at 3:23 p.m. The charge of the committee was provided which was to recommend a slate of officers to the board for their approval at the Full Board meeting; if the slate was not approved, nominations would be taken from the floor during the Full Board meeting. The board shall accept or reject the slate of officers by majority vote. If the board rejects the slate of nominees, nominations for individual officer positions may be taken from the floor, or the Nominating Committee shall meet and create a new slate of nominees to be presented at the special board meeting prior to the March regular Board meeting. The committee is recommending for approval the following slate of officers, Commissioner Jonathan C. Kinloch, Board Chairperson; Mr. Bernard Parker, Vice Chairperson; Ms. Dora Brown, Treasurer; and Mr. Angelo Glenn, Secretary. The terms would begin April 1, 2026 through March 31, 2027. There was no further discussion.

Dr. Tauzeg, Board Chairperson called for a motion. **It was moved by Mr. Phillips and supported by Mr. McNamara approval of the recommendation from the Nominating Committee of the slate, with Mr. Jonathan C. Kinloch, Board Chairperson; Mr. Bernard Parker, Vice Chairperson; Ms. Dora Brown, Treasurer and Mr. Angelo Glenn, Secretary.** There was no further discussion. **Motion carried.** The incoming officers are Commissioner Jonathan C. Kinloch, Board Chairperson; Mr. Bernard Parker, Vice Chairperson; Ms. Dora Brown, Treasurer and Mr. Angelo Glenn, Secretary. The Chair, Dr. Tauzeg noted that the slate of officers had been approved with terms starting April 1, 2026. She thanked the Nominating Committee for their work and their timely completion of their tasks.

### **SUBSTANCE USE DISORDER (SUD) OVERSIGHT POLICY BOARD REPORT**

Mr. Adams, SUD Oversight Policy Board Chair, reported that the SUD Oversight Policy meeting was held on February 16<sup>th</sup> 2026. A Nominating Committee was appointed and they will bring their results back to the March meeting, in addition to that item there was a presentation on older adult substance use disorder prevention services which was extremely interesting. Thirdly, there was one board action which was approved unanimously. There was no further discussion. The Substance Use Disorder Oversight Policy Board was received and filed.

*The record reflects that Dr. Carter joined the meeting.*

The Chair, Dr. Tauzeg called for the Quality Assurance Performance Improvement

Ms. April Siebert, Director of Quality Improvement reporting. It was reported that in the board agenda packets there was an executive summary representing the three documents which provided a brief overview of what she was seeking approval for; the first document was the Quality Assurance Plan Improvement Plan Description FY 2026-2028 which outlines our strategic approach for fiscal year 2026-2028, the document highlights key areas of data-driven decision making; performance monitoring, continuous improvement and accountability and engagement. The plan serves as our foundation for achieving ongoing excellence, enhancing service delivery, and satisfying all regulatory requirements governing our operations and the expectations of the community we serve.

The second document is the Quality Assurance Performance Improvement Plan (QAPIP) Annual Evaluation FY2025, this document highlights our performance over the past year. She announced that we met the majority of our organizational goals achieving an overall completion of 89%, this is an area that requires further attention, which is our performance improvement projects which did not fully meet

our expectations. To enhance the performance of the QAPIP's a small committee to re-evaluate their effectiveness has been established. The committee will focus on the measurability of the QAPIP establishing and ensuring that there are clear objectives. We want to ensure that we are boosting the participation of our providers and our staff because we want to make sure that here at DWIHN that everything is trickling down to each department and that we are doing a thorough root cause analysis. The group will identify barriers and look at ways to implement solutions and lastly provider incentives. By creating incentives to encourage more involvement from our providers we believe with these steps that it would position us to have stronger outcomes by the end of fiscal year 2026.

The third document is the Fiscal Year 2026 Work Plan that outlines the initiatives and priorities for the upcoming year. Ms. Siebert requested board approval of the three documents. Discussion ensued regarding the 36 goals beginning on page 106 of the Work Plan. Ms. Ruth noted that it was a good presentation and inquired as to when the numbers for 2025, the Adult Echo Key Satisfaction Indicators over the last three years would be available. It was noted that at the time the report was prepared the data was not available and it was her understanding that the data would be available later in the year and could be brought back possibly in the second quarter.

The Chair called for a motion on the Quality Assurance Performance Improvement Plan (QAPIP) Plan Description – FY2026-2028; the Quality Assurance Performance Improvement Plan Annual Evaluation – FY2025 and the FY2026 Work Plan. **It was moved by Ms. Bullock and supported by Mr. Glenn approval of the Quality Assurance Performance Improvement Plan (QAPIP) Plan Description – FY2026-2028.** There was no further discussion. **Motion carried.**

**It was moved by Ms. Bullock and supported by Ms. Ruth approval of the Quality Assurance Performance Improvement Plan Annual Evaluation – FY2025.** There was no further discussion. **Motion carried.**

**It was moved by Ms. Bullock and supported by Ms. Ruth approval of the FY2026 Work Plan.** Discussion ensued regarding the numbers for fiscal year 2024 and there being interest in seeing if there was any significant improvement over 5-10% or if there has been a decline of 5-10% for some of these categories, if there are significant declines in any of the categories they would like to have that information pulled and the board be made aware of it the next time the report is presented. There was no further discussion. **Motion carried.** The Board thanked Ms. Siebert for the report and noted that this was a great deal of work.

The Chair, Dr. Tauveg called for Unfinished Business and noted that all of the board actions had gone through the committee vetting process.

### **XIII. Unfinished Business-Staff Recommendations:**

- A. BA#23-67 (Revision 3) – Modification TTEC.** The Chair called for a motion. **It was moved by Ms. Ruth and supported by Mr. Glenn approval of BA#23-67 (Revision 3).** Mr. K. Frambro, VP of IT Services reporting. This board action is requesting additional funds totaling \$218,000 to cover increased usage, phone lines, and expansion of licensed services. The contract terms remain unchanged with expiration date of November 21, 2026. There was no further discussion. **Motion carried.**
- B. BA#24-23 (Revision 2) – Quest Analytics, Inc.** The Chair called for a motion. **It was moved by Mr. Phillips and supported by Ms. Bullock approval of BA#24-23 (Revision 2).** Ms. Allison

Smith, Director of Strategic Operations reporting. – Staff requesting board approval to add \$36,738.42 to the existing contract with Quest Analytics to cover the final invoice for services performed in FY 2025. The additional amount is necessary to cover an annual price increase of 10%, which was not accounted for in the contract. Contract terms remain unchanged from October 1, 2023, through September 30, 2026, for a revised total amount not to exceed \$886,738.24. There was no further discussion. **Motion carried.**

C. **BA#25-30 (Revised)** Community Mental Health Data Platform. The Chair called for a motion. **It was moved by Mr. Phillips and supported by Mr. Glenn approval of BA#25-30 (Revised)** Ms. V. Politowski, Director, Integrated Care reporting. Staff requesting board approval for a three-month extension of the one-year project, which is funded by a \$500,000 grant from the Michigan Health Endowment Fund and a \$500,000 match from DWIHN for a total spend of \$1,000,000. This is a time-only extension, with no change to the total dollar amount. Michigan Department of Health and Human Services extended the grant award period to allow for completion. The extension is for three months through December 31, 2025, to allow time to spend down the entire grant amount. There was no further discussion. **Motion carried.**

D. **BA#26-02 (Revision 2)** – FY26 Detroit Wayne Integrated Health Network Operating Budget. The Chair called for a motion. **It was moved by Ms. Ruth and supported by Ms. Brown approval of BA#26-02 (Revision 2).** Ms. S. Durant, VP of Finance reporting. This board action is requesting Board approval to certify additional revenues totaling \$2,004,821 and authorize expenditures of the like to support the following: 1. Public Act 2 funding for substance use disorders treatment -\$355,250; Program expenses approved on Board Actions #26-12 (Revision 2) and BA#26-12 (Revision 3); 2. FY2025 carryover funding from the Healing & Recovery Community Engagement & Infrastructure grant totaling \$597,281 (includes administrative allocation of \$142,501); 3. FY2025 carryover funding from the CMH Data Platform Pilot grant - \$62,498; DWIHN’s required match of \$62,498 will be covered using Medicaid funds; Program expenses approved on Board Action #25-30(Revised); 4. Additional Block Grant funding under Infant & Early Child Mental Health program -\$50,907; 5. \$218,887 local funding from Highland Park Police Department (HPDD) to fund two positions for the purposes of implementing a co-response model and delivering crisis intervention team and behavioral health trainings to HPPD; Program expenses approved on Board Action #26-38; 6. \$200,000 local funding from Detroit Public Safety Foundation to fund a Mental Health Co-Response Adult Foster Care (AFC) Navigator consultant for two (2) years. The AFC Navigator will serve as a field-based behavioral health system liaison for high utilization AFC homes throughout the city of Detroit; 7. Medicaid/ISF reserves totaling \$600,00 to cover the following: a. Salaries and fringes for one part-time legal consultant - \$150,000. B. \$450,000 for DWC Connect (WIT, Inc.) approved with Board action #26-18. This budget adjustment also serves to reclassify expenses to bring PAR services in house. Effective April 1 and July 1, 2026 Phase I and Phase II includes adult and children PAR services, respectively. At the present time, these services are being performed by multiple service providers for approximately \$4.4 million per year. It is expected to be cost neutral. The following comprise of Phase I annual staff salaries and fringes totaling \$2,419,893; Administrative Assistant 3 (1 full-time) - \$62,485; PAR Administrator (1 full-time) - \$144,085; PAR Clinicians (7 full-time, 8 part-time) \$1,259,830; Dispatch Coordinators (3 full-time; 3 part-time) - \$375,058; PAR Managers (1 full-time, 2 part-time) - \$274,094 and Dispatch Manager (3 full-time)- \$304,341. The amended FY2026 Operating Budget of \$1,198,906,765 consists of the following revenue: \$913,681,798-Medicaid, DHS Incentive, Medicaid-Autism, Children’s/SED Waiver, HAB, and HRA; \$128,145,664 – Healthy MI Plan and HRA; \$3,138,061 MI Health Link; \$21,460,901 State General Funds; \$23,486,447 Wayne County Local Match Funds and PBIP; \$5,668,948 County PA2 Funds; \$55,319,977 State General

Funds (MDHHS/MDHHS SUD, OBRA); \$24,136,355 Federal Grants (MDHHS/MDHHS SUD, SAMHSA); \$1,193,762 Local Grants; \$6,260,000 Interest Income; \$40,000 Miscellaneous Revenue; \$16,374,852 Medicaid/Local Reserves. There was no further discussion. **Motion carried.**

- E. **BA#26-03 (Revision 2)** – Children’s Initiatives Waiver Services FY26. The Chair called for a motion. **It was moved by Ms. Bullock and supported by Mr. McNamara approval of BA#26-03 (Revision 2).** C. Phipps, Director of Children’s Initiatives reporting. Staff requesting board approval for the revision of SED Waiver and Children’s Waiver provider listings for FY 26 contract from 10/1/25 through 9/30/26 of the estimated Medicaid funding in the amount not to exceed \$4,475,852.00 (Children’s Waiver, \$2,389,645) and (SED Waiver, \$2,086,207). Refer to the attached listings provided for the estimated cost breakdown by provider. Adding the new provider, Wynning Foundation, to deliver Art Therapy, Music Therapy, and Recreational Therapy for children and youth on the SED Waiver and Children Waiver. No change in estimated funding for FY 26. There was no further discussion. **Motion carried with Ms. Ruth abstaining.**
- F. **BA#26-12 (Revision 4)** – Substance Use Disorder (SUD) Treatment Provider Network System FY26 – Acupuncture Trainings and Opioid Settlement Healing and Recovery Carry Over Funding. The Chair called for a motion. **It was moved by Mr. Glenn and supported by Mr. McNamara approval of BA#26-12 (Revision 4).** Mr. M. Yascolt, Director of Substance Use Disorder Initiatives reporting. Staff requesting board approval to contract for the delivery of acupuncture training services with Green Tara Holistics, LLC. The \$45,000 in PA2 funds were already allocated to BA#26-12. We are requesting the reallocation of \$45,000 from the Yoga Vendor (TBD) line item to be allocated to the vendor. The vendor will certify and credential 30 provider staff members across our network of treatment providers in the standardized, clinically acknowledged, and MDHHS-supported service of acupuncture and acudetox protocol, enabling our service provider network to utilize the CPT code and offer their own acudetox program as an ancillary service to substance use disorder treatment programming. The SUD department is requesting approval of MDHHS to redistribute unspent carry-forward funds from FY2025 totaling \$597,281, bringing the total allocated amount to \$747,281, with \$427,500 to support treatment programming for immediate access to medication for opioid use disorder. The funds are allocated to DRMM, and QBH. There was no further discussion. **Motion carried.**
- G. **BA#26-13 (Revision 2)** Substance Use Disorder (SUD) Prevention Provider Network System FY26 – Opioid Settlement Healing and Recovery Carry Over Funding. Dr. Taueg, Board Chair requested the correction on the Board action number. It was noted by the Board Liaison, L. Blackshire that there was a typographical error on the board action when presented at the Program Compliance Committee meeting held on February 11, 2026. The board action was moved for approval at the Program Compliance Committee meeting to Full Board for approval as BA#26-13 (Revision 4) however the correct board action number is BA#26-13 (Revision 2). The Chair called for a motion on BA#26-13 (Revision 2). **It was moved by Mr. Glenn and supported Ms. Bullock approval of BA#26-13 (Revision 2).** Mr. M. Yascolt, Director of Substance Use Disorder Initiatives reporting. Staff requesting board approval of MDHHS redistributed unspent carryforward funds from FY2025 totaling \$597,281 bringing the total allocated amount to \$747,281 with \$278,071 allocated to support prevention programming for harm reduction supplies, syringe service programs, and children's programming. The funds are allocated to SOOAR, DRP, CHAG, Oakwood Taylor Teen, and DRMM. There was no further discussion. **Motion carried.**
- H. **BA#26-14 (Revision 4)** DWIHN Provider Network System FY26. The Chair called for a motion. **It was moved by Commissioner Kinloch and supported by Ms. Ruth approval of BA#26-14 (Revision 4).** Ms. O. Ward, Managed Care Operations reporting. Staff requesting board approval

for the addition of the following two providers (Prentis Loft, LLC and Carevio Health LLC) to the DWIHN provider network for the fiscal year ending September 30, 2026 as outlined below. Note: Total amount of this board action remains the same, not to exceed the amount of \$837,791,038 for FY 2026. There was no further discussion. **Motion carried.**

The Chair Dr. Tauieg called for new business. It was moved by Commissioner Kinloch and supported by Mr. Glenn approval of Board Actions #26-44 Emergency Janitorial Services (Chompaway Ventures, LLC dba Jan-Pro); BA#26-46 MI Coordinate Health Highly Integrated Dual Eligible-Special Needs Plan (MICH HIDE-SNP) FY26; BA#26-47 Milwaukee Building Parking (Laz Parking, LLC) and BA#26-48 Purposeful Consulting, LLC – Professional & Strategy Development. Staff will provide information as requested by the Board.

#### **XIV. NEW BUSINESS – Staff Recommendations:**

**A. BA#26-44 – Emergency Janitorial Services (Chompaway Ventures, LLC dba Jan-Pro).** Mr. M. Maskey, Executive Director Facilities reporting, DWIHN is requesting Board approval for emergency janitorial services for the Milwaukee Care Center utilizing the vendor Chompaway Venture, LLC d/b/a Jan-Pro, for a period of eight (8) months. DWIHN has repeatedly issued competitive solicitations for janitorial services at the 24/7/365 Crisis Center. Each time, even when vendors met the low-bid requirements, they consistently failed to meet performance standards, including proper staffing, clinical cleaning expectations, and reliable overnight/weekend coverage. To continue to uphold the required health and safety standards of the individuals we serve, an emergency purchase order was issued to provide time for DWIHN to reevaluate and procure a new janitorial services contract. Discussion ensued regarding contractor taking a large portion of the contract leaving the subcontractor with a small portion of the contract; any hiccups becoming the responsibility of the subcontractor to make up the difference of any funds lost; requesting to see the actual contract they have with the subcontractor, temporary agencies preying upon subcontractors; hindering them from getting services done because they are unable to adequately pay staff; and having large turnover. Ms. Y. Turner, VP of Legal Affairs noted that typically contracts are drafted once the board approves them and it was possible for this body to see the contract once completed. Discussion ensued regarding minimum standards being placed in the contract, the contract being temporary and assignable. It was noted that the contract is not assignable; Ms. Turner noted that we do not generally agree to allow a contract to be assigned or without language that stops assignable contracts provided we use our professional services template that has standard language in there, but this may have gone out for an RFP. Discussion ensued regarding the emergency situation being caused by the current vendor being removed from the site for not meeting performance and staffing standards and basically not doing the work; Jan-Pro is replacing the removed vendor. Discussion ensued regarding how the decision was reached to hire this vendor, it was noted that they were part of our last RFP, they had bid for services with DWIHN and we moved down the list of vendors that had provided proposals for the facility; the next in line vendor was unavailable to provide services for a period of four months due to staffing concerns. There were some proposals that were not qualified in terms of the process, this was the first vendor that we were able to get in touch with that could provide the services so quickly and thoroughly. Ms. Durant, VP of Finance cautioned the board about not passing this board action today as there are serious health and safety concerns if the vendor walks off site because they have not been paid. We have been evaluating whether or not we are going to bring the services

in-house because there has been a lot of difficulty in finding qualified vendor to be able to staff and clean the Care Center, as it is sometimes not a great place to clean. **It was moved by Commissioner Kinloch to call the Question.** The Chair, Dr. Tauveg requested Ms. Turner to respond to the question as to whether the contract was assignable. Legal noted that there were several documents and if the standard template was used the contract could not be assigned without DWIHN's permission and the agreement is drafted after the body votes on it and she did not want to say something to the board that was incorrect. Mr. Maskey noted the contract was for eight months. Discussion ensued regarding repeatedly having low bid contractors and each time they failed to meet performance standards, and we cannot continue to have emergency contracts come before the board and they are continuing to come from the Crisis Center. The Board requested the CEO and Executive staff to give a full report on how we got here and what we are doing to prevent us from getting here in the future. Mr. White, CEO noted that the Crisis Center has been open a year and we are learning as we go in some areas. As it relates to this particular area there are some growth issues with the Crisis Center, we are going to have the same problem when we get to Seven Mile and another problem when we get to Ecorse so he did not want to characterize this as one problem and no more problems. He shared their concerns as it related to the consistency in which they are able to clean this building, but the building has to be clean. He was not aware they were having the problems with the cleaning service, it was brought to his attention and they had to remove the prior vendor from site, they went down the list found a reputable company that could provide the service on an emergency basis this contract would expire in July, concurrent with that we are going to put out an RFP ourselves. We are exploring the realistic opportunity of bringing in a consultant to teach and train in-house staff to take over the cleaning provisions for not just 707, but 7 Mile because we know we are going to continuously have this problem. He was uncertain if there was something we can put into the contract if we were to take over those responsibilities ourselves prior to July and unfortunately this is not a great or the best situation to be in but it is the best bad situation that we can make of it because we have to clean the building or we will be housing people who need behavioral health services inside of a dirty building and that is a direct violation of their rights. Ms. Durant was asked to talk through some of the economics. Discussion ensued regarding the board not having a problem with assuring the building was clean; how we got here, and prior to Mr. White coming here there being a lot of emergency contracts; there being emergency contracts to approve in order to open and service the Crisis Care Center; at a point needing to look at the process or who is managing the facility or look at what procedures and steps we are taking in order to manage it because we continue to have these emergency contracts. Mr. White noted that he was hired and started in November, he has been looking at every operational aspect of this organization there was some things he could not speak to, he did not know the whys and how's he could only respect the fact that they were operating on the condition in which they had it presented to them at the time, he asked to be held accountable for his decisions since November 11th . As it relates to this situation, he appreciated what the board was saying in regard to not asking that they not clean the building and if he suggested that then that was a mischaracterization on his part. He did not necessarily like any of the companies that we have, but it is the best of the companies that is being presented with regard to the operational components of the chosen contractor. He was not an attorney, we have a few good ones in the room and did not know if we were ever going to be able to control their business practices contractually, what we can do is have a standard of operation that we hold them to and if do not meet it we pull a contract back and fire them. In addition to that this board can rest assured that he was working diligently to determine if it is best and he

thought the answer was yes to have an on-site, emergency team that is trained to immediately take over if we ever end up in this situation again and that is his going-forward strategy, he could not speak to why that was not in place first, but moving forward it will be in place. We cannot have a single point of success, because if we do we will have a single point of failure, so we must build redundancies across this organizational landscape and that was his commitment to the board. Ms. Durant noted that she had information from the Procurement Administrator and there is a subcontracting form that has to be filled out, the box on their form is checked no, so there are no subcontractors on this contract.

The Chair, Dr. Taueg noted that there was motion on the floor. Discussion ensued regarding a clause stating that they have to pay their subcontractors and show proof of it and if it was existent or can it be added. There was no further discussion. **Commissioner Kinloch withdrew his motion to call the Question.** Mr. Phillips noted that around the corner as it related to BA#26-47 Milwaukee Building Parking (Laz Parking, LLC) that on Milwaukee, a block down there is parking deck for sale. It was noted that the address would be shared and the deck was next to Amtrak. There was no further discussion. **Motion carried.**

Dr. Taueg, Board Chair noted that there was a follow-up item that would come back to either the Finance or Program Compliance Committee on how we are going to proceed in the future on the whole janitorial piece to be able to prevent all these emergency motions and to ensure certain standards.

- B. **BA#26-46** – MI Coordinate Health Highly Integrated Dual Eligible-Special Needs Plan (MICH HIDE-SNP)FY 26. Staff requesting board approval for a one-year contract through December 31, 2026 with Amerihealth, HAP Care Source and Humana, three (3) Integrated Care Organizations (ICO) to receive and disburse Medicare dollars to reimburse the Affiliated Providers for an estimated amount of \$7,810,615. MDHHS ended the MHL Pilot project on 12/31/25, at which time they implemented and launched the Highly Integrated Dual Eligibles Special Needs Plan (HIDE-SNP) model on January 1, 2026. This board action will ensure the greatest degree of continuity in the infrastructure and successful transition to the new model, once finalized. The services performed by the Affiliated Providers are those behavioral health benefits available to the Dual Eligible (Medicare/Medicaid) beneficiaries being managed by the DWIHN through its contract with the Michigan Department of Health and Human Services MDHHS) and its contracts with the three ICOs. The Affiliated Providers consist of inpatient, outpatient, and substance use disorder providers. HIDE-SNP is designed to ensure that coordinated behavioral and physical health services are provided to this population. Medicaid-eligible services for HIDE-SNP members are provided by our provider network, and these costs were included in the board-approved Provider Network action. The same provider network provides Medicare benefits to the members. There was no further discussion. **Motion carried.**
- C. **BA#26-47** – Milwaukee Building Parking (Laz Parking, LLC) Mr. M. Maskey, Executive Director of Facilities reporting. The Facilities Department is requesting board approval to renew our current lease for up to 130 parking spaces located in the Baltimore Deck (previous BA#24-52) to accommodate staff members working at the Milwaukee Crisis Center and DOC. DWIHN will only be charged for the actual spaces utilized. The parking facility is the only gated 24-hour access facility within close proximity that will meet staff parking needs and was approved by the city as part of our parking

variance. We are requesting a two-year renewal of the lease as follows: Date/Rate/Totals – March 1, 2026 – January 31, 2027 \$155.00 per space x 11 months = \$221,650; February 1, 2027-February 29, 2028 \$160.00 per space x 13 months = \$270,400; Invoice/Account Maintenance Fee - \$10.00 per month x 24 months = \$240.00 Total: \$492,290.00. Facilities is requesting a not-to-exceed contract amount of \$492,290, for a term beginning March 1, 2026 and ending February 29, 2028. There was no further discussion. **Motion carried.**

- D. BA#26-48 – Purposeful Consulting, LLC – Professional & Strategy Development. DWIHN Administration is requesting approval to enter into a new Professional Services Agreement with Purposeful Consulting, LLC to provide a series of individual executive coaching sessions for Executive, Associate Vice President, and Director level team leaders. The focus is to support and enrich the team's leadership and alignment with the CEO's focus, organizational goals, and the coaches' professional and personal development goals, as well as other tasks as assigned by the President and CEO. The total cost of the new agreement is not to exceed \$135,000 for a period of twelve months beginning March 1, 2026 through February 28, 2027. There was no further discussion. **Motion carried.**

## **AD HOC COMMITTEE REPORTS**

### Strategic Plan Committee

Dr. Taueg, Board Chairperson called for the Strategic Plan Committee report. The Strategic Plan Committee did not meet in February. There was no report.

Dr. Taueg, Board Chairperson called for the Board Building Committee updates.

### Board Building Committee Updates

Mr. B. Parker, Committee Chair reported that the Building Committee met on Wednesday, February 4, 2026. The Administrative building and 707 W. Milwaukee are operating as expected, no serious problems and 7 Mile is moving forward. Because of the cold weather they could not do any outside work there so there may be a month or so delay in opening the 7 Mile facility. The other areas that we looked at is the downriver and Ecorse locations. There is an assessment that has been requested by the CEO to determine the best use of those buildings which they are in the process of doing that and expect to give a report at our next meeting. The Catholic Charities building is also having an assessment to determine the best use of that building. Those reports will be forthcoming. There was no further discussion. The Board Building Committee report was received and filed.

Dr. Taueg, Board Chairperson called for the President and CEO Monthly Report.

## **PRESIDENT AND CEO MONTHLY REPORT**

Mr. White, President and CEO, provided a written report for the record. It was reported that the Michigan Department of Health and Human Services has withdrawn its request for a proposal RFP to competitively procure the prepaid inpatient health plans effectively ending that process. We have no additional information as to what the next steps are, many have heard that potentially there could be another RFP coming, however there is no confirmation on that, people are thinking and speculating from around the state. The board will be kept updated on the progress.

The FY26 language in Section 1002 prohibits the department from using any appropriated funds to expand the CCBHC demonstration sites, this means that we will not be according to that, receiving at this time funding to operate our CCBHC going forward. We will continue to work with our CCBHC providers, also our mild to moderate population as well as our health plans will provide services on an outpatient basis. The demonstration ends in 2027 at which time there are two options, we could end up being included in the next fiscal year budget.

The Integrated Health Pilot, we continue to partner with different health systems and platforms to provide integrated healthcare. The hospital systems formerly known Health Plan Partner 3 has opened an outpatient clinic in Dearborn and we have been invited to tour that facility. We are going to get that done before the next meeting. The HEDIS scorecard, as the Board is aware is a tool used to measure how well health plans perform in key areas. DWIHN follows the NCQA guidelines for behavioral health and HEDIS measures, monitors and report effectiveness. MDHHS has started a three-year quality plan to evaluate all PIHPs using 11 specific HEDIS measures. DWIHN's Quality department continues to monitor all HEDIS measures to ensure providers follow rules. In January, the HEDIS scorecard was reviewed during seven monthly meetings of clinically responsible service providers and eight health plans. We are continuing to move along in that process, the board will be updated in upcoming reports.

Our Intensive Crisis Stabilization Service Department comprised of all the crisis call lines, mobile crisis teams, and ICSS teams at the time of this report have successfully submitted our MDHHS certification application. In July of 2025, MDHHS updated the intensive crisis stabilization service guidelines to include a more comprehensive service delivery model. All providers across the state who wish to continue providing services will have to undergo the new certification process. It is our understanding that we are the first in the region and the state to go through the new certification process. We are very confident that the package that we have submitted is going to be approved and it is a strong package. We anticipate the new certification being completed in the upcoming weeks.

The 707 Crisis Center received 258 presentations to the facility in one month, and 258 in the month of January, 192 of these presentations were for adults, and 66 presentations were for youth. We continue to see strong engagement during the triage process with no adult or youth leaving against medical advice.

We are finalizing the Integrated Healthcare services contracts with a few companies, HAP, CareSource, Humana, and AmeriHealth for the new highly anticipated integrated dual eligible special needs plans or commonly referred to as HITSNP. We have started care coordination with all medical and Medicaid Health Plans. The team has worked across departments, updated policies, procedures and also completed Medicare-compliant language and submitted them to HITSNP for audit.

The long-term residential care status update with Trillium, the Crisis and Geriatric Care Facility, which is in the old Riverview Facility on Jefferson, is moving along. Mr. Maskey has been keeping an eye on the progress even though he is not the project lead. We are anticipating an early mid-spring opening. A few things are in place over there, but we were delayed due to weather, the plumbing is progressing nicely, and is at 80%; the electrical is at 90%, HVAC is progressing between 80% and 90% and the fire suppression system is at 90%. We are pretty excited that we will be online hopefully early spring no later than early summer.

Mr. White congratulated Ms. Bostic on being selected as one of Crain's 2026 notable leaders in healthcare and noted that it is an outstanding accomplishment and she was congratulated at our all-staff

meeting and we are all proud of her. She is committee member of the DWIHN team. It was reported that he had an opportunity about a month ago to meet with SMART and their CEO Ms. Tiffany Gunther and discussed access and transportation, the barriers to people getting around that are in need of behavioral health services. She was on board, they also discussed a bus route for not only behavioral health services, but physical health services as well. She wants to get the DWIHN word out and talked about wrapping a bus, using some of our staff and moving it around our community. There will be more information presented.

The Autism Services department was highlighted. They successfully hosted the ABA Provider Network meeting on January 26<sup>th</sup> which included ABA providers, independent diagnostic evaluators or CRSP Providers. We were able to really sit down together and talk about performance monitoring tools and ensuring better outcomes for our members. He was encouraged by that interaction.

On February 2<sup>nd</sup> he was invited to Wayne State to speak with a group of mental health providers. The name of the event was Leading Change and Improving Community Health in a Shifting Political Environment, it was kind of a Town Hall event. Ms. Ruth was thanked for attending the event with him, also Dr. Asabigi was in attendance. We did a presentation and had the opportunity to interact with Mayor Sheffield, Senator Slotkin and Mr. Warren Evans. It was a very positive event, there was a huge turnout, we were scheduled for an hour but ended up staying for seven hours and it was an outstanding event.

Mr. White noted that DWIHN has an amazing staff and he was sure that the board agrees and he constantly compliments them on that, they continue to work hard, and we are shooting for perfection, and our members are going to be better for our efforts. We have a tremendous opportunity in front of us, regardless of what happens with an RFP, it was thought that it is imperative that we continue to look at best practices and outcomes for our members as well as innovations. We can't be afraid of or reluctant to look at technology and he appreciated the board's support on the AI too. Mr. Singla and Ms. S. Sharpe did a presentation at the CMHA Conference which was well received. We are going to continue to look at ways of improving outcomes. This business can't just be about medicating and treating; we have to return people to a quality of life that they deserve. They look to us for that, and he was proud of the work that his team does to ensure that end.

Ms. Ruth noted that Senator Slotkin referenced at the conference that she told everyone to "prepare her with the facts so she can go and stand for what is right."

Mr. Parker noted that on the news he saw a story that Riverview was having a problem with their heating system, they had an outside boiler and indicated that it may be 8 months before one is replaced inside and he wondered if we would be impacted by that in opening up the long-term center in the spring. Mr. White noted that we would look into it and find out if that is accurate. He also inquired about the homeless outreach data report and inquired if it was going to the Program Compliance Committee and if this data was just from the mobile units or if it included our work inside the various homeless shelters.

Ms. Blackwell, VP of Government Affairs reported. It was noted that there were two pending items, one was with outreach data and the other was with doing business as a vendor with DWIHN. Ms. Blackwell reported that through our DHOT program, we have been working with our provider network trying to connect persons who are unsheltered to services. The information before the board are the numbers for 2025, which is 3,052 persons that we have connected through various avenues. Individuals that are unsheltered do not have an address, the address that we put into our system is the hospital, which may

be Children's Hospital, the DMC, VA, Henry Ford Hospital or even the Woodward or our Crisis Center address or a shelter that they may be staying at or occasionally if they are at a shelter it may be Detroit Rescue Mission or Mariner's Inn because that is where they may go to for a hot meal from time to time. We reviewed all of our data and that is the figure that you see on the report.

For the two months in 2026, we have already encountered over 1,300 people in Detroit, Hamtramck and Highland Park through the DHOT program. We are out there trying to connect people to services. If one sees someone in need they can reach us at the 800 number.

We have purchased a number of the sleeping bag coats which have been handed out along with blankets, food, snack items and hygiene kits. We have been working with providers on a daily basis, we participated in the point-in-time count as we have throughout the years. Mr. Parker noted that in the future a report of how many people actually went to a provider would be helpful so that they can see what the follow-up is as we have a responsibility to do something with the people that may have a mental health challenge that are homeless.

Mr. Phillips noted that he has seen a decrease in the number of homeless people on the Northwest side, 8 Mile and 7 Mile; it may have been the weather, but he thought that it was due to the efforts of DWIHN and commended the staff for their hard work. Discussion ensued regarding the individual that had been at corner of Seven Mile and I-75 Expressway, he was not seen for three weeks and has been seen less frequently in that location. Ms. Smith and her team were commended for their hard work. Discussion ensued regarding DWIHN being contacted by the stores on Meyer and Eight Mile. It was reported that we are not typically called by a store, but more likely law enforcement, they will receive the call and then they will request support from DWIHN.

A report was provided on how other organizations can do business with DWIHN. It was noted that Mr. White has decided and Mr. Singla will work with him on doing a provider and vendor fair come the spring, as DWIHN should not be the best-kept secret. There was discussion regarding the procurement process noting that Wayne County business and Detroit -based business would have an opportunity to find out about any business opportunities that they may have. They can find out about our mandatory qualifications as a quasi-governmental entity whether that be insurance qualifications, licensing, or training that one must have so they will be armed with that information. It was thought the fair would be in the parking lot. Ms. Bullock inquired in the absence of the fair could the information be placed on the website. It was noted there is a new website, they are making a few corrections and some of the links are not working as anticipated. There will be a big media push. The fair will be no later than April 30<sup>th</sup>. Discussion ensued regarding the ESTRA advantage for Wayne County firms that bid. Ms. S. Durant, VP of Finance reported that in that regard to Medicaid funds preference cannot be given to those particular organizations. There are a set of funds that allow for some sort of deference to Wayne County and the revised procurement policy that was approved in July, 2025 extra credit points can be received if local funds are utilized. However, most of our funding, probably 98%, is Medicaid funds, the policy does address what we can use and give additional credits for Wayne County-based businesses. Mr. Parker noted that it should be included in our process to show that we are giving some advantage to Wayne County firms in non-Medicaid funds.

The Chair noted that the monthly report of the CEO and President be received and filed.

There was no Provider Presentation. The Chair called for the follow-up items.

#### **REVIEW OF ACTION ITEMS**

1. The board requested of CEO and staff to provide a report on emergency contracting and include how we got here and what we are doing to prevent this. Report is to be presented to Finance Committee.
2. The board requested that in future reports include how many unsheltered went to a Provider.

#### **GOOD AND WELFARE/PUBLIC COMMENT**

Dr. Taueg, Board Chair called for Good and Welfare/Public Comment. The Good and Welfare/Public Comment Statement was read by Board Secretary, Ms. Garza Dewaelsche. There were no members of the public requesting to make public comment or good and welfare.

#### **ADJOURNMENT**

There being no further business, Dr. Taueg, Board Chairperson, called for a motion to adjourn. **It was moved by Ms. Ruth and supported by Ms. Brown to adjourn the meeting.** There was no further discussion. **Motion carried.** The meeting was adjourned at 1:45 p.m.

Submitted by:  
Lillian M. Blackshire  
Board Liaison

# FINANCE COMMITTEE

MINUTES

FEBRUARY 4, 2026

1:00 P.M.

8726 WOODWARD AVE.  
DETROIT, MI 48202  
(HYBRID/ZOOM)

**MEETING  
CALLED BY**

Ms. Dora Brown, Chair, called the meeting to order at 1:06 p.m.

**TYPE OF  
MEETING**

Finance Committee Meeting

**FACILITATOR**

Ms. Dora Brown, Chair

**NOTE TAKER**

Ms. Lillian Blackshire, Board Liaison

**Finance Committee Members Present:**

Ms. Dora Brown, Chair

Ms. Karima Bentounsi

Mr. Bernard Parker

Ms. Eva Garza Dewaelsche

Ms. Kenya Ruth

**Committee Members Attending Virtually:** None

**Committee Members Excused:** Mr. Kevin McNamara, Committee Vice Chairperson;

**Board Members Present:** None

**Board Members Attending Virtually:** None

**SUD Oversight Policy Board Members Attending Virtually:** None

**Board Members Excused:** Dr. Cynthia Tauog, Board Chair

**ATTENDEES**

**Staff:** Mr. James E. White, President and CEO; Mr. Manny Singla, Deputy Chief Executive Officer; Ms. Stacie Durant, VP of Finance; Ms. Brooke Blackwell, VP of Government Affairs; Ms. Yolanda Turner, VP of Legal Affairs; Ms. Monifa Gray, Associate VP of Legal Affairs; Mr. Mike Maskey, Executive Director of Facilities; Ms. Grace Wolf, VP of Crisis Care; Mr. Keith Frambro, VP of Information Technology; Ms. Dayna Clark, Director of Communications; Mr. Rai Brown, Director of Contract Management; Mr. Darrin Crawford, Chief of Staff; Ms. Marlena Hampton, Director of Utilization Management; Mr. Ron Slater, Associate VP of IT Services Information Technology; Mr. Larry Lee, Procurement Administrator; Mr. Steve Zawisa, Director of Fiscal Informatics Analytics; Mr. Dan West, Director of Crisis Services; Ms. Vicky Politowski, Director of Integrated Care; Ms. Jacquelyn Davis, AVP Access; Ms. Allison Smith, Director of Strategic Operations; and Mr. Jody Connally, VP of Human Resources.

**Staff Attending Virtually:** Ms. Dhannetta Brown, Associate VP of Finance; Dr. Shama Faheem, Chief Medical Director; Ms. Suzie Sleeva, Director of Business Intelligence and Information Technology; Ms. Cassandra Phipps, Director of Children's Initiatives.

**Guests:** None

## AGENDA TOPICS

### I. Roll Call Ms. Lillian Blackshire, Board Liaison

### II. Roll Call

Roll Call was taken by Ms. Lillian Blackshire, Board Liaison, and a quorum was present.

### III. Committee Member Remarks

Ms. Brown, Chair, welcomed everyone to the meeting. She called for Committee members' remarks. There were no remarks given by the Committee.

### IV. Approval of Agenda

The Chair, Ms. Brown, called for a motion on the agenda. **Motion:** It was moved by Ms. Ruth and supported by Ms. Garza Dewaelsche approval of the agenda. There was no further discussion. **Motion carried.**

### V. Follow-up Items

The Chair called for any follow-up items. There was one follow-up item. Provide a list of institutions that have DWIHN monies along with the amounts held in each institution. Ms. S. Durant, VP of Finance noted the information would be provided in her presentation of the Monthly Finance Report.

### VI. Approval of the Meeting Minutes

The Chair, Ms. Brown, called for approval of the minutes from the meeting on Wednesday, January 7, 2026. **Motion:** It was moved by Ms. Bentounsi, and supported by Ms. Ruth approval of the Finance Committee minutes from the meeting on Wednesday, January 7, 2026. There were no corrections to the minutes. **Motion carried.** Minutes accepted as presented.

### VII. Presentation of the Monthly Finance Report

Ms. S. Durant, VP of Finance presented the Monthly Finance report. A written report for the three months ended December 31, 2025 was provided for the record. There were no noteworthy items or accomplishments to report for the three months ended December 31, 2025. It was reported that the annual audits through Plante Moran are still underway and we are going to meet all deadlines. The three audit reports are generally presented at the May meeting.

Cash flow is stable and should continue to remain so throughout the year.

A. Cash and investments – represent amount of cash held with three (3) investment managers, First Independence Bank, Flagstar and Huntington Bank.

B. Due from other governments and Accounts Receivable – Comprise various local, state and federal amounts due to DWIHN. Approximately \$8.2 million in SUD and Mental Health block grant due from MDHHS. Approximately \$19.9 million for 1<sup>th</sup> quarter pass-through HRA revenue. The Accounts receivable consist primarily of outstanding amounts associated with the FY25 year-end closing (i.e. self-determination cost settlements @ \$2 million and \$3.7 million PBIP accrual).

C. IBNR Payable – represents incurred but not reported. (IBNR) claims from the provider network; historical average claims incurred through December 31, 2025, were approximately \$23.1 million. However, actual payments were approximately \$176.8 million. The difference represents claims incurred but not reported and paid \$54.3 million.

D. State grants and contracts – The \$11.2 million variance is due to the timing related to 7 Mile Care Center, HRA and grant revenues.

E. Autism, adult, children, IDD and SUD expenses – The \$10.2 million variance is consistent with the spending patterns in fiscal year 2025. It should be noted that Autism revenues are sufficient to cover the autism costs over budget.

Note: DWIHN's audit is underway, therefore balances will change.

On the Statement of Cash Flows for the three months ending December 31, 2025 the cash balances on hand at December 31, 2025 for Flagstar, Comerica (investment managers), First Independence Bank and Huntington Bank were provided accordingly for the follow-up item. It was noted the Investments are fine, we do not have any high risk. Our investing is in accordance with our cash investment policy approved by the board which is consistent with Public Act 20 which dictates the type of investments and risk levels of governmental entities.

Discussion ensued regarding the budget, variances and the autism budget. Ms. Durant provided the information on the three investment Managers and discussion ensued as to how each one was performing. There was no further discussion.

The Chair, Ms. Brown, noted that the Finance Monthly Report was received and filed.

1<sup>st</sup> Quarter FY2026 Non-Competitive Under \$100,000, Emergency, Cooperative Purchasing. Mr. Larry Lee, Procurement Administrator, provided a written report. It was noted that this report includes all cooperative purchases, including those over \$100,000 and the total of all small procurements made in this quarter. It was reported that the contract percentage for Wayne County was 37%; the percentage for Out County was 63%; the funding percentage without IT for Wayne County was 42%; and for Out County the percentage was 58%. Discussion ensued regarding increasing the total purchases with Wayne County and vendor purchases that were reported on the list. It was reported that the 2<sup>nd</sup> Quarter report would have the Ecorse project numbers as the Purchase Order has just been approved. Discussion ensued regarding Continental Linen Services, it was reported that there were very few services that can handle the linen services requirements as they had to move to elastic from strings on the scrubs for health and safety reasons and Continental Linen Services was an all-in-one service. Screenvision is a 12 week campaign to be in the Imagine Theatres and they are tracking how the commercials are doing. Discussion ensued regarding the Michigan Association for Infant Mental Health and that it provides training for professionals with infant mental health professionals credentials which is a state of Michigan requirement and the services provided by North Star Facility Services. There was no further discussion. The report was received and filed.

**IX. Unfinished Business – Staff Recommendations:**

A. BA#23-67 (Revision 3) – Modification to TTEC Contract. The Chair called for a motion. **It was moved by Ms. Ruth and supported by Mr. Parker approval of BA#23-67 (Revision 3).** Mr. Keith Frambro, VP of IT reporting. This board action is requesting additional funds totaling \$218,000 to cover increased usage, phone lines, and expansion of licensed services. The contract terms remain unchanged with expiration date of November 21, 2026. The revised contract amount is not to exceed \$1,150,000. A budget adjustment will be forthcoming to certify the additional \$218,000. Discussion ensued regarding the growth of DWIHN and the number of employees and the number of lines that were initially contracted before the increase. There was no further discussion. **Motion carried.**

B. BA#26-02 (Revision 2) – FY26 Detroit Wayne Integrated Health Network Operating Budget. The Chair called for a motion. **It was moved by Mr. Parker and supported by Ms. Garza Dewaelsche approval of BA#26-02 (Revision 2).** Ms. Stacie Durant reporting. This board action

is requesting Board approval to certify additional revenues totaling \$2,004,821 and authorize expenditures of the like to support the following: 1. Public Act 2 funding for substance use disorders treatment -\$355,250; Program expenses approved on Board Actions #26-12 (Revision 2) and BA#26-12 (Revision 3); 2. FY2025 carryover funding from the Healing & Recovery Community Engagement & Infrastructure grant totaling \$597,281 (includes administrative allocation of \$142,501); 3. FY2025 carryover funding from the CMH Data Platform Pilot grant - \$62,498; DWIHN's required match of \$62,498 will be covered using Medicaid funds; Program expenses approved on Board Action #25-30(Revised); 4. Additional Block Grant funding under Infant & Early Child Mental Health program -\$50,907; 5. \$218,887 local funding from Highland Park Police Department (HPDD) to fund two positions for the purposes of implementing a co-response model and delivering crisis intervention team and behavioral health trainings to HPPD; Program expenses approved on Board Action #26-38; 6. \$200,000 local funding from Detroit Public Safety Foundation to fund a Mental Health Co-Response Adult Foster Care (AFC) Navigator consultant for two (2) years. The AFC Navigator will serve as a field-based behavioral health system liaison for high utilization AFC homes throughout the city of Detroit; 7. Medicaid/ISF reserves totaling \$600,00 to cover the following: a. Salaries and fringes for one part-time legal consultant - \$150,000. B. \$450,000 for DWC Connect (WIT, Inc.) approved with Board action #26-18. This budget adjustment also serves to reclassify expenses to bring PAR services in house. Effective April 1 and July 1, 2026 Phase I and Phase II includes adult and children PAR services, respectively. At the present time, these services are being performed by multiple service providers for approximately \$4.4 million per year. It is expected to be cost neutral. The following comprise of Phase I annual staff salaries and fringes totaling \$2,419,893; Administrative Assistant 3 (1 full-time) - \$62,485; PAR Administrator (1 full-time) - \$144,085; PAR Clinicians (7 full-time, 8 part-time) \$1,259,830; Dispatch Coordinators (3 full-time; 3 part-time) - \$375,058; PAR Managers (1 full-time, 2 part-time) - \$274,094 and Dispatch Manager (3 full-time)- \$304,341. The amended FY2026 Operating Budget of \$1,198,906,765 consists of the following revenue: \$913,681,798-Medicaid, DHS Incentive, Medicaid-Autism, Children's/SED Waiver, HAB, and HRA; \$128,145,664 – Healthy MI Plan and HRA; \$3,138,061 MI Health Link; \$21,460,901 State General Funds; \$23,486,447 Wayne County Local Match Funds and PBIP; \$5,668,948 County PA2 Funds; \$55,319,977 State General Funds (MDHHS/MDHHS SUD, OBRA); \$24,136,355 Federal Grants (MDHHS/MDHHS SUD, SAMHSA); \$1,193,762 Local Grants; \$6,260,000 Interest Income; \$40,000 Miscellaneous Revenue; \$16,374,852 Medicaid/Local Reserves. Discussion ensued regarding PAR Services, assessments, the credentials required to perform the services and the services being brought in house. There was no further discussion. **Motion carried.**

#### **X. New Business – Staff Recommendations:**

A. BA#26-47 – Milwaukee Building Parking (LAZ Parking, LLC.) The Chair called for a motion. **It was moved by Ms. Ruth and supported by Ms. Garza Dewaelsche approval of BA#26-47.** Mr. M. Maskey, Executive Director of Facilities reporting. The Facilities Department is requesting board approval to renew our current lease for up to 130 parking spaces located in the Baltimore Deck (previous BA#24-52) to accommodate staff members working at the Milwaukee Crisis Center and DOC. DWIHN will only be charged for the actual spaces utilized. The parking facility is the only gated 24-hour access facility within close proximity that will meet staff parking needs and was approved by the city as part of our parking variance. We are requesting a two-year renewal of the lease as follows: Date/Rate/Totals – March 1, 2026 – January 31, 2027 \$155.00 per space x 11 months = \$221,650; February 1, 2027-February 29, 2028 \$160.00 per space x 13 months = \$270,400; Invoice/Account Maintenance Fee - \$10.00 per month x 24 months = \$240.00 Total: \$492,290.00. Facilities is requesting a not-to-exceed contract amount of \$492,290, for a term beginning March 1, 2026 and ending February 29, 2028. Discussion ensued regarding DWIHN building a parking lot and its cost; code requirements and parking for guests and members that will use the services. There was no further discussion. **Motion carried.**

Mr. White provided comments regarding the RFP and noted that we were all excited to see the email. He did not have a whole lot more to share, other than that is how they were notified and there was no additional conversation. We were ready to go, our proposal was submitted and much of what has been learned in our process of preparing to compete is those improvements will be maintained, we are going ahead with those, as it relates to the state and their response, they have chosen not to go any further with the RFP and they withdrew it. We have not heard from the state about the next steps and if they plan to do something different. We are going to continue as we were prior to the RFP, but we are going to be adopting some of those improvements operationally for the organization, all the information that was brought forward with regards to the structure, and the agreements that we got from the county with regards to the new organization. We are not dependent upon the implementation of the RFP and the winning of the RFP, all of that has been discontinued and closed out so we are business as usual, continuing to make improvements in the organization moving forward. We are unsure of what the state is going to do, but more than likely they are not going to issue another RFP that would start in October. He would love to be able to say that, but did not know, the timeline of that would just be outrageous and he did not think it would be achievable. It was his hope that whatever they were hoping to accomplish with the RFP we can demonstrate that we can get there without that process. He thought we have a tremendous opportunity in front of us to make some improvements to the organization and other CMH's, like with the PAR services, just looking at outcomes and serving the people that look to us for services. He did not think the system was broken, but certainly knows that it needs some improvements, and we have some great ideas internally how we can improve the system; access continues to be a barrier, just tremendous paperwork and just tasks that are too difficult for the common folk to come in and get services, we have some recommendations that he will be making about how we can eliminate those barrier to access, and as it relates to billing and there is a whole conversation that we are willing to have with our VP of Finance and talk about what the costs are what the real numbers are and that is how we are preparing to move forward, but nothing has been established yet from the state as the next steps.

The committee inquired as to whether we would be pursuing who else had submitted a proposal. Mr. White noted that through the Freedom of Information application we would be looking to see who did bid and what their concepts were so we may gain something from that or at least we will know what the threat is out there, who had a competitive bid and how much of that is going to be made public. We are discussing how we can learn from that information and certainly make our organization better. We think that our proposal was a winning one which is why it is imperative that we continue down the tracks and the relationships that we put together both with education institutions and others that we think makes us the best in the state. Some of the information is starting to come forward now and we will continue to pursue that information and determine if there is a better idea that we did not consider, we will certainly implement it as long as it is to keep the system public and to help the people that look to us for service.

The committee noted that they did agree with Mr. White and they felt that we had a great proposal and a lot of the ideas, even though they felt like it was an exercise, it was a good exercise because it allowed us to do or look and kind of tighten up in some areas and do some things differently or try new things and we just have to stay ready so we don't have to get ready. There was no further discussion.

**XI. Good and Welfare/Public Comment**

The Chair read the Good and Welfare/Public Comment statement. There were no members of the public who requested to address the committee.

**XII. Adjournment** – There being no further business, the Chair, Ms. Brown, called for a motion to adjourn. **Motion:** It was moved by Ms. Ruth and supported by Ms. Garza Dewaelsche to adjourn. There was no further discussion. **Motion carried.** The meeting was adjourned at 1:47 p.m.

**FOLLOW-UP  
ITEMS**

- a. Provide a 6-month update on WestComm, and this will determine additional commitment.

# PROGRAM COMPLIANCE COMMITTEE

**MINUTES**      **FEBRUARY 11, 2026**      **1:00 P.M.**      ***IN-PERSON MEETING***

**MEETING CALLED BY** I. Commissioner Jonathan Kinloch, Program Compliance Committee Chair at 1:14 p.m.

**TYPE OF MEETING** Program Compliance Committee

**FACILITATOR** Commissioner Kinloch, Committee Chair

**NOTE TAKER** Sonya Davis

**TIMEKEEPER**

**Committee Members:** Angela Bullock; Dr. Lynne Carter; Angelo Glenn; and Commissioner Jonathan Kinloch, Committee Chair

**Committee Member(s) Excused:** William Phillips

**Board Members:** Dr. Cynthia Taueg, Board Chair, Dora Brown, Board Treasurer, and Kenya Ruth

**ATTENDEES**

**SUD Oversight Policy Board Members:** Tom Adams, SUD Oversight Policy Board Chair (Virtual)

**Staff:** Brooke Blackwell; Jody Connally; Alison Gabridge (on behalf of Marianne Lyons); Monifa Gray; Marlena Hampton; Sheree Jackson; Ryan Morgan; Cassandra Phipps; Vicky Politowski; Stacey Sharp; Manny Singla; Andrea Smith; Yolanda Turner; Daniel West; James White; Rai Brown; and Matthew Yascolt

## AGENDA TOPICS

### II. Moment of Silence

**DISCUSSION** Commissioner Kinloch called for a moment of silence.

**CONCLUSIONS** A moment of silence was taken.

### III. Roll Call

**DISCUSSION** Commissioner Kinloch called for a roll call.

**CONCLUSIONS** Roll call was taken by Lillian Blackshire, Board Liaison, and a quorum was present.

### IV. Approval of the Agenda

**DISCUSSION/CONCLUSIONS** Commissioner Kinloch called for a motion to approve the agenda. **Motion:** It was moved by Mrs. Bullock and supported by Mr. Glenn to approve the agenda. Commissioner Kinloch asked if there were any changes/modifications to the agenda. There were no changes/modifications to the agenda. **Motion carried.**

and board members must adhere to. The policy outlines expectations for staff behavior regarding confidentiality, billing, and conflicts of interest. It highlights areas related to the workplace environment and the expectations staff must follow. There are key components the HR department must adhere to, such as hiring and firing based on race, religion, national origin, age, sex, and related factors, as outlined in this policy. One key change on page 14, the Governing Body Oversight and Approval section was added, "**The DWIHN governing body maintains ultimate responsibility for oversight of the Compliance program, including the Standard of Conduct.**" "**These standards of conduct and any material revisions shall be reviewed and approved by the governing body to ensure continued alignment with applicable federal and state laws, regulatory requirements, and organizational compliance obligations.**"

Discussion ensued.

The committee requested that the Compliance Policy and the Standards of Conduct Policy be referred to the May Policy/Bylaw Committee meeting for review, then returned to the PCC meeting in May for approval. Commissioner Kinloch called for a motion to refer the Compliance Policy and the Standards of Conduct Policy to the Policy/Bylaw Committee meeting in May, then return them to the PCC meeting in May for approval. **Motion:** It was moved by Dr. Taueg and supported by Mr. Glenn to refer the Compliance Policy and the Standards of Conduct Policy to the Policy/Bylaw Committee meeting in May and bring them back to the PCC meeting in May. Commissioner Kinloch opened the floor for further discussion. There was no further discussion. **Motion carried.**

## VIII. Quarterly Reports

- A. **Access Call Center** – Yvonne Bostic, Director of the Access Call Center, submitted and gave highlights of the Access Call Center’s quarterly report. It was reported that:
1. **Activity 1: Staffing and Training** – The Access Call Center is made up of 3 units: Access Call Center Representatives (ACCR), Access Call Center Clinicians, and Access Call Center SUD Techs. These 3 units work together to handle calls to # 800-241-4949. The department engages in monthly department meetings and monthly unit meetings where they learn more about the departments, providers, and services offered through DWIHN and engage in trainings to improve skills. Staff participated in several department overviews and trainings from October 2025 through December 2025. The Access Call Center experienced periods of turnover due to resignation (2) and termination (1); however, the use of overtime and contingent staff has contributed to the achievement of call standards and goals. There continues to be regular reviews of applications, interviewing, hiring, and training to fill vacancies.
  2. **Activity 2: Call Center Performance (Call detail report)** – For the 1st Quarter of FY 25-26, there were 44,967 calls handled by the Access Call Center. In an annual comparison of the 1st Quarter FY 24-25 (3.0%) to the 1st Quarter FY 25-26 (1.0%) abandonment rate, there was a 2% improvement. There has also been a significant improvement in service levels and response time. Even with a decrease in staffing over the last 4 months, the Access Call Center’s ability to manage high call volume has improved through the use of overtime and strategic staffing.

## DISCUSSION/ CONCLUSIONS

2. **Activity 2: Analysis of Members Leaving Against Medical Advice (AMA)** - The AMA rate for fiscal year 2026 is currently 1,208 basis points less than the AMA rate for FY25. A lower AMA rate compared to withdrawal management and a larger margin of improvement. This can be attributed to lower AMA during the winter months. The department will ensure the provider network has plans to decrease AMA rates and develop retention policies, in collaboration with service providers, to develop a strategy to reduce AMA rates.
3. **Activity 3: Analysis of Members Leaving Against Medical Advice (AMA) by Service Provider** - On average, in FY26YTD, AMA rates by provider are at 13.15%. Providers deviating above the average in both volume and rate are DRMM, Elmhurst, Hegira, QBH, and Sacred Heart. The department will schedule one-on-one consultations with DRMM, Elmhurst, Hegira, QBH, and Sacred Heart to review their AMA trends and develop tailored improvement plans.

Commissioner Kinloch opened the floor for discussion. Discussion ensued. The committee requested that staff stratify the data to determine whether certain parts of the SUD programs affect some populations more than others, and to ensure there are no disparities in future reports. *(Action)* Mr. White informed the committee that all presentations of reporting data and data points will be clearer, and the importance of providing information that tells us what it determines, what the data tells us, what we are learning from the data, and how it is shaping how we are moving in the organization will be included in future reports.

Commissioner Kinloch noted that the Access Call Center, Residential Services, and Substance Use Disorder Initiatives' quarterly reports have been received and placed on file.

**IX. Strategic Plan - None**

**DISCUSSION/  
CONCLUSIONS**

*There was no Strategic Plan to review this month.*

**X. Quality Review(s) – QAPIP Executive Summary**

**DISCUSSION/  
CONCLUSIONS**

- A. **Quality Assessment Performance Improvement Plan (QAPIP) Description FY 2026-2028** - The Quality Assessment Performance Improvement Plan (QAPIP) is a two-year strategy that details our quality assessment and performance initiatives for the fiscal years 2026 through 2028. The plan focuses on the following key areas: Data-Driven Decision Making, Performance Monitoring, Continuous Improvement, and Accountability and Engagement. The plan serves as our foundation for achieving ongoing excellence, enhancing service delivery, and satisfying all regulatory requirements governing our operations and the expectations of the community we serve.
- B. **QAPIP Annual Evaluation FY 25** - The FY2025 evaluation of the QAPIP demonstrated notable progress toward achieving our organizational quality objectives, while highlighting opportunities for continued improvement. Of the 36 goals established, 32 were successfully assessed, and 4 could not be evaluated due to data limitations, resulting in an overall completion rate of

responsible for overseeing the implementation of evidence-based practices and treatment interventions for individuals with behavioral and physical health challenges and co-occurring disorders. Clinical Practice Guidelines are reviewed annually and updated every two (2) years; 2026 is an update year. Updates are being developed in collaboration with our National Committee for Quality Assurance (NCQA) consultant to define Healthcare Effectiveness Data and Information Set (HEDIS) measures linking evidence-based standards to measurable outcomes for monitoring adherence. Provider education and integration of CPGs into Utilization Management decisions remain priorities. Revised CPGs will be presented to the IPLT committee in March 2026. Commissioner Kinloch opened the floor for discussion. There was no discussion. Commissioner Kinloch noted that the Associate VP of Clinical Operations' Executive Summary has been received and placed on file.

## XII. Unfinished Business

- A. **BA #24-23 (Revised 2) – Quest Analytics, Inc.** – Staff requesting board approval to add \$36,738.42 to the existing contract with Quest Analytics to cover the final invoice for services performed in FY 2025. The additional amount is necessary to cover an annual price increase of 10%, which was not accounted for in the contract. Contract terms remain unchanged from October 1, 2023, through September 30, 2026, for a revised total amount not to exceed \$886,738.24. Commissioner Kinloch called for a motion on BA #24-23 (Revised 2). **Motion:** It was moved by Dr. Tauog and supported by Mr. Glenn to move BA #24-23 (Revised 2) to the Full Board for approval. Commissioner Kinloch opened the floor for discussion. There was no discussion. **Motion carried.**
- B. **BA #25-30 (Revised) – Community Mental Health Data Platform** – Staff requesting board approval for a three-month extension of the one-year project, which is funded by a \$500,000 grant from the Michigan Health Endowment Fund and a \$500,000 match from DWIHN for a total spend of \$1,000,000. This is a time-only extension, with no change to the total dollar amount. Michigan Department of Health and Human Services extended the grant award period to allow for completion. The extension is for 3 months through December 31, 2025, to allow time to spend down the entire grant amount. Commissioner Kinloch called for a motion on BA #25-30 (Revised). **Motion:** It was moved by Mrs. Bullock and supported by Mr. Glenn to move BA #25-30 (Revised) to the Full Board for approval. Commissioner Kinloch opened the floor for discussion. Discussion ensued. **Motion carried.**
- C. **BA #26-03 (Revised 2) – Children's Initiatives Waiver Services FY 26** – Staff requesting board approval for the revision of SED Waiver and Children's Waiver provider listings for FY 26 contract from 10/1/25 through 9/30/26 of the estimated Medicaid funding in the amount not to exceed \$4,475,852.00 (Children's Waiver, \$2,389,645) and (SED Waiver, \$2,086,207). Refer to the attached listings provided for the estimated cost breakdown by provider. Adding the new provider, Wynning Foundation, to deliver Art Therapy, Music Therapy, and Recreational Therapy for children and youth on the SED Waiver and Children Waiver. No change in estimated funding for FY 26. Commissioner Kinloch called for a motion on BA #26-03 (Revised 2). **Motion:** It was moved by Mrs. Bullock and supported by Dr. Tauog to move BA #26-03 (Revised 2) to the Full Board for approval. Commissioner Kinloch opened the floor for discussion. There was no discussion. **Motion carried.**
- D. **BA #26-12 (Revised 4) – Substance Use Disorder (SUD) Treatment Provider Network System FY 26 – Acupuncture Trainings and Opioid Settlement**

## DISCUSSION/ CONCLUSIONS

Special Needs Plan (HIDE-SNP) model on January 1, 2026. This board action will ensure the greatest degree of continuity in the infrastructure and successful transition to the new model, once finalized. The services performed by the Affiliated Providers are those behavioral health benefits available to the Dual Eligible (Medicare/Medicaid) beneficiaries being managed by the DWIHN through its contract with the Michigan Department of Health and Human Services (MDHHS) and its contracts with the three ICOs. The Affiliated Providers consist of inpatient, outpatient, and substance use disorder providers. HIDE-SNP is designed to ensure that coordinated behavioral and physical health services are provided to this population. Medicaid-eligible services for HIDE-SNP members are provided by our provider network, and these costs were included in the board-approved Provider Network action. The same provider network provides Medicare benefits to the members. Commissioner Kinloch called for a motion on BA #26-46. **Motion:** It was moved by Mrs. Bullock and supported by Dr. Taueg to move BA #26-46 to the Full Board for approval. Commissioner Kinloch opened the floor for discussion. There was no discussion. **Motion carried.**

**XIV. Good and Welfare/Public Comment**

**DISCUSSION/  
CONCLUSIONS**

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

<b>Action Items</b>	<b>Responsible Person</b>	<b>Due Date</b>
1. <b>Residential Services' Quarterly Report</b> – Provide a breakdown of residential members by zip code.	Ryan Morgan	<i>March 11, 2026</i>
2. <b>Substance Use Disorder Initiatives' Quarterly Report</b> – The committee requested that staff stratify the data to determine whether certain parts of the SUD programs affect some populations more than others, and to ensure there are no disparities in future reports.	Matthew Yascolt	<i>Ongoing in future reports</i>

The Chair called for a motion to adjourn the meeting. **Motion:** It was moved by Mr. Glenn and supported by Mrs. Bullock to adjourn the meeting. **Motion carried.**

**ADJOURNED:** 2:30 p.m.

**NEXT MEETING:** Wednesday, March 11, 2026, at 1:00 p.m.

## DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 26-16R Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 3/18/2026

Name of Provider: Guidance Center, The, New Oakland Child Adolescent and Family Ctr, DWIHN Provider Network - see attached list

Contract Title: Children's Crisis Intervention Services, PAR FY 26

Address where services are provided: Multiple

Presented to Program Compliance Committee at its meeting on: 3/11/2026

Proposed Contract Term: 4/1/2026 to 6/30/2026

Amount of Contract: \$ 610,884.00 Previous Fiscal Year: \$ 1,137,986.00

Program Type: Continuation

Projected Number Served- Year 1: 1,000 Persons Served (previous fiscal year): 700

Date Contract First Initiated: 1/1/2015

Provider Impaneled (Y/N)? Y

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

This board action (BA# 26-16R) is asking for a 3 month extension of the contracts with New Oakland Family Centers (NOFC) and The Guidance Center (TGC) for \$610,884 to continue with the provision of Crisis Intervention Services.

**The 3 month extension for NOFC and TGC will run from April 1, 2026 through June 30, 2026. Additional estimated amounts total \$344,725 for NOFC and \$266,159 for TGC for a total estimated amount of \$610,884 for the 3 months ended June 30, 2026.**

**The revised total estimated amount of PAR services is as follows:**

- **Hegira (10/1/2025 - 3/31/3036) - \$2,109,871**
- **NOFC (10/1/2025 - 6/30/2026) - \$717,758**
- **TGC (10/1/2025 - 6/30/2026) - \$453,339**

As a result of the crisis continuum of care RFP 2023-009, this board action is requesting approval for the provision of Pre-Admission Review (PAR) services for children.

NOFC and TGC will provide Pre-Admission Review (PAR) services to children in crisis with severe emotional disturbance (SED) intellectual and developmental disabilities (I/DD) and co-occurring disorders in need of a crisis screening and authorization for higher levels of care. PAR services include 24-hour availability to provide assessment and screening services for individuals to determine if members meet inpatient criteria or re-direction to lower levels of care.

Board Action #: 26-16R

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

Source of Funds: Multiple

Fee for Service (Y/N): N

<b>Revenue</b>	<b>FY 25/26</b>	<b>Annualized</b>
MULTIPLE	\$ 610,884.00	\$ 610,884.00
	\$	\$
<b>Total Revenue</b>	\$	\$

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64931.825004.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

James White, Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

*James White*

*Stacie Durant*

Signed: Wednesday, March 4, 2026

Signed: Tuesday, February 24, 2026

Board Action #: 26-16R

**Board Action Taken**

The following Action was taken by the Full Board on the 18th day of March 18, 2026.

X Approved

€ Rejected

€ Modified as follows:

€ Tabled as follows:

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Executive Director -initial here: \_\_\_\_\_

*Lillian M. Blackshire*  
Board Liaison Signature

*March 18, 2026*

## DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 26-39R2 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 3/18/2026

Name of Provider: DWIHN Provider Network - see attached list

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

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

Presented to Program Compliance Committee at its meeting on: 3/11/2026

Proposed Contract Term: 10/1/2025 to 9/30/2026

Amount of Contract: \$ 105,596.00 Previous Fiscal Year: \$ 124,755.00

Program Type: Modification

Projected Number Served- Year 1: 300 Persons Served (previous fiscal year): 365

Date Contract First Initiated: 6/1/2015

Provider Impaneled (Y/N)? Y

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

This board action is requesting a second revision to the Michigan Child Collaborative Care Program (MC3). Total funding (\$105,596) provided by (U of M) includes \$84,612 for clinical services and \$20,984 for administrative services.

U of M has requested provision of services be transferred from Starfish to DWIHN. **Requesting to extend Starfish's contract term end date from 2/28/2026 to 6/30/2026 for additional time to hire staff and finalize business agreement with Corewell Health Clinic. Requesting Board approval to alter the transfer date and funding allocation as needed, in the event services are transferred prior to 6/30/2026.**

Starfish is not to exceed a total of \$71,211 (\$57,834 for Clinical Services and \$13,377 for Administrative Services) for the 9 month period ending 6/30/2026. Effective 7/1/2026, DWIHN Outpatient to receive a total of \$21,373 (\$16,764 for Clinical Services and \$4,609 for Administrative Services) for the 3 month period ending 9/30/2026.

DWIHN to receive a total of \$13,012 for indirect costs (\$10,014 for Clinical and \$2,998 for Administrative).

**Program Description:** The Michigan Child Collaborative Care Program and Behavioral Health Consultant Project provides behavioral health consultation for local primary care providers with MC3 child, adolescent and prenatal psychiatrists. Provider provides local oversight, in collaboration with MC3 program, of the Behavioral Health Consultant as they implement MC3 in Wayne County as well as work in concert with other regional Behavioral Health Consultants.

Behavioral Health Consultant will act as the liaison with the primary care physician staff and the University of Michigan psychiatric staff.

Services include:

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

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

Source of Funds: Multiple

Fee for Service (Y/N): N

Revenue	FY 25/26	Annualized
state grant	\$ 84,612.00	\$ 84,612.00
federal grant	\$ 20,984.00	\$ 20,984.00
<b>Total Revenue</b>	<b>\$ 105,596.00</b>	<b>\$ 105,596.00</b>

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)? Y

Approved for Submittal to Board:

James White, Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

*James White*

*Stacie Durant*

Board Action #: 26-39R2

Signed: Wednesday, March 4, 2026  
3/4/2026 7:59:24 AM

Signed: Friday, February 27, 2026  
2/27/2026 8:24:08 AM

## Board Action Taken

The following Action was taken by the Full Board on the 18th day of March 18, 2026.

X Approved

€ Rejected

€ Modified as follows:

€ Tabled as follows:

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Executive Director -initial here: \_\_\_\_\_

*Lillian M. Blackshire*  
Board Liaison Signature

*March 18, 2026*



**President and CEO Report to the Board**  
**March 2026**  
**James E. White**

**GOVERNMENT AFFAIRS/LEGISLATIVE EFFORTS**

DWIHN leadership continues to work with our lobbyists at PAA to strengthen our bipartisan relationships with policymakers and key stakeholders. This is an election year that will bring a shorter legislative calendar with every statewide office and legislative seat on the ballot.

DWIHN Leadership attended the State of the State events and had several key meetings to discuss future funding efforts with behavioral health leaders in Lansing. Meetings were had with Senate Majority Leader Winnie Brinks, Senate Minority Leader Aric Nesbitt, Rep. Alabas Farhat, Rep. Laurie Pohutsky, Sen. Sarah Anthony, Rep. Stephanie Young, Rep. Kim Edwards, and MDHHS Director Elizabeth Hertel, just to name a few.

DWIHN leadership toured the 7 Mile Behavioral Health Campus with Director Elizabeth Hertel and other MDHHS leadership.

**Budget timeline:**

- o January 16, 2026: Michigan’s Consensus Revenue Estimating Conference discussed the economic outlook, state revenue estimates, and revenue trend lines for the next two fiscal years. The revenue projections legislators must address take into consideration approximately \$1.2 billion in required cuts, driven largely by tax changes and federal changes to healthcare, education, food assistance, housing and other basic needs that will impact families across the state.
- o February – Governor Whitmer’s budget recommendation.
- o May – A second Revenue Conference held.
- o July – Legislative deadline to present the final budget bills to the Governor.
- o October 1, 2026 – Constitutional deadline for the signed budget to take effect.

**Board Follow-up Item:**

**Medicaid Eligibility Enrollment**  
Source: MDHHS

Year Month	02-2026
Wayne County Medicaid Members:	656,601
o Members with Open Admission:	66,460
Medicaid Number in MHWIN:	192,326

## ADVOCACY AND ENGAGEMENT

On March 5, 2026, Mr. White delivered his 2<sup>nd</sup> Annual Report before the Wayne County Commission per our Enabling Resolution.

### **Board of Directors Appointments:**

Two seats from the City and two seats from the County are up for appointment/reappointment - Angela Bullock and Bernard Parker (City) and Karima Bentounsi and Kevin McNamara (County)

### **SUD Board of Directors Appointments:**

Two seats by the Wayne County Commission are up for appointment/reappointment. James Perry is being reappointed and Stacie Clayton is being nominated to the SUD Board.

### **Upcoming Events**

- NatCon (April 27–29, 2026), Denver, CO: Visit DWIHN’s own VP of Crisis Service Grace Wolf presentation “*From Zero to Crisis Hero: Wayne County’s 12-month Systemwide Transformation*”. The session will share Michigan’s statewide crisis framework, DWIHN’s implementation strategy, and the rapid launch of crisis call centers, mobile crisis teams, and crisis stabilization units.
- Hill Day (June 2-3, 2026) – Washington DC: Hill Day brings together hundreds of advocates from across the country to share their experiences, highlight the urgent needs in their communities, and urge lawmakers to expand access to mental health and substance use services. By elevating these voices, Hill Day helps ensure that policy decisions reflect the realities faced by individuals, families, and providers every day.
- CMHA Summer Conference, *Rising to the Moment*, scheduled to take place at the Grand Traverse Resort in Traverse City, MI (June 8-10, 2026). The CMHA Metro Region recommended, with support of Mr. James White, Commissioner Kinloch to run for the vacant seat of CMHA Secretary. Elections will be held during the Member Assembly Meeting.

## INTEGRATED HEALTH PILOT UPDATE

The Detroit Wayne Integrated Health Network (DWIHN) continues its partnership with different health systems and platforms to provide integrated care.

### **Joint Care Coordination DWIHN and Medicaid Health Plans**

DWIHN is required to complete Joint Care Coordination with all eight Medicaid Health Plans. This progress is monitored by MDHHS, which tracks the joint care treatment plans entered into the MDHHS portal, CC360. DWIHN must ensure that 25% of eligible members for joint care coordination have active treatment plans in CC360. Currently, there are 519 individuals eligible, and DWIHN has successfully opened treatment plans for 195 of them, which represents 37%.

### **Hospital Systems (formerly known as Health Plan Partner Three)**

This health system has opened an outpatient clinic in Dearborn. The IHC Director toured the facility on 2/10/2026 and discussed potential opportunities. IHC Director connected this health system with the DWIHN MCO department to discuss contracts and potential member servicing.

## **Shared Platforms:**

### **HEDIS Scorecard**

The Healthcare Effectiveness Data and Information Set (HEDIS) is a tool used by health plans to evaluate performance in key areas of care. The Detroit Wayne Integrated Health Network (DWIHN) is following the National Committee for Quality Assurance (NCQA) guidelines for behavioral health HEDIS measures to monitor and report on their effectiveness.

The Michigan Department of Health and Human Services (MDHHS) has initiated a three-year quality plan to evaluate all Prepaid Inpatient Health Plans (PIHPs) using 11 specific HEDIS measures. The DWIHN Quality Department is monitoring all HEDIS measures to ensure provider adherence.

In February, the HEDIS scorecard was reviewed during five monthly meetings of Clinically Responsible Service Providers and eight health plans.

Clinical departments, finance, and quality have collaborated to develop incentive payments based on HEDIS.

### **Lumenore**

A customized predictive model uses new data to accurately assess the risk of recidivism. Lumenore segments individuals based on their likelihood of experiencing recidivism within 30 days. This model recommends tailored interventions for each person's risk profile. The DWIHN Utilization Management and Integrated Health Care Departments will review the recommendations for members and forward them to the appropriate provider. This project was launched in January with a single CRSP, and to date, 485 interventions have been assigned. DWIHN has worked with the CRSP to discuss the process and flow of incorporating the interventions. Through this testing process, three (3) new interventions have been added to the intervention recommendations: vocational services, home-based, and med drop.

## **LONG TERM RESIDENTIAL STATUS UPDATE**

Plumbing Progress - Hot and cold-water plumbing loops are approximately 80% installed.

Electrical Work - Electrical rough-in across all sections is approximately 90% complete.

HVAC Progress -

- All anti-ligature grilles and finish assemblies are onsite.
- Condenser installed on the roof; roof repairs completed.
- Above-ceiling ductwork is approximately 90% complete.

Fire Suppression System - Sprinkler fitter work is progressing well, with installation at approximately 90% complete.

## **ADULT INITIATIVES**

Skill Building services continue to play a vital role in helping members strengthen daily living skills, build greater independence, and engage meaningfully in their communities. Across the network, these programs offer supportive, hands-on opportunities in both home and community settings—including innovative environments such as working farms, to help members increase self-sufficiency and quality of life. Recent work focused on understanding who is accessing these services and ensuring the network has the capacity and accessibility needed to meet member demand.

## CRISIS SERVICES

Crisis Services continued focused work in February to better support members who return to the emergency department shortly after an inpatient stay. By partnering closely with COPE, the team is identifying these high-risk individuals in real time and working to redirect them to lower levels of care when appropriate. While diversions increased slightly this month, limited CSU availability constrained some opportunities. The department is now analyzing these cases to strengthen future diversion efforts and improve member outcomes.

## CRISIS CARE CENTER UPDATE

February was another busy month at the 707 Crisis Care Center. With our highest number of presentations ever to the facility since opening in June 2024 at 313 individuals. 128 adults were admitted to the CSU and 21 adults admitted to the BHUC. Additionally, 47 youth were admitted to the CFCU and 40 youth admitted to the BHUC.

## FINANCE

In accordance with the Michigan Department of Health and Human Services (MDHHS), Detroit Wayne Integrated Health Network (DWIHN) submitted all the FY25 financial reports (i.e. FSR, EQI and LR) by the due date of 2/28/26. Below is the summary of the fiscal year 2025 operating results:

- Exhausted Healthy Michigan Plan (HMP) Medicaid carryover of \$12.7 million and abated (spent) \$10.1 million in Medicaid Internal Service Fund (ISF).
- \$61.2 million remains in Medicaid ISF; \$76.6 million is the maximum allowed.
- Medicaid expenses exceeded revenues totaling \$22.8 million (i.e. structural deficit); prior year amount totaled \$20 million; an increase of \$2.8 million as compared to FY24.
- \$11.2 million incurred in excess General Fund; budget contemplated \$10.5 million. Current year local revenue was able to absorb the shortfall. DWIHN did not have to use local reserves.
- Public Act 2 (PA2) absorbed \$2.8 million in substance use disorder (SUD) block grant expenses.
- PA2 balance on 09/30/25 was \$8.0 million as compared to \$9.9 million at the beginning of the fiscal year.

DWIHN offers several value-based incentives to the provider network. The following are the additional payments received above and beyond the normal fee-for-service (FFS) revenue:

	Q1	Q2	Q3	Q4	Total
AMI	452,156	588,036	570,959	667,820	2,278,972
SED	219,401	273,276	262,340	214,531	969,547
IDD	182,815	138,680	171,651	263,796	756,942
HSW	37,000	19,000	24,000	23,000	103,000
					4,108,460

Note: HSW incentives are paid directly to the supports coordinators.

## HUMAN RESOURCES

Our new Vice President of Clinical Services, Erik Hutchison, joins the DWIHN leadership team effective March 16, 2026. The ASE Supervisor Institute Group E sessions and the LEAD (Lead, Engage, Advance, Develop) middle management program classes are ongoing. Participants for the new cohort with Harvard Business School Online have begun their courses.

The Human Resources Department is thrilled to announce the launch of our new employee wellness program, *Wellable*, starting April 2026! We will be hosting a series of challenges through the app. Within the app, staff will be able to connect their wearable device or smartphone to automatically track fitness activity. They will be able to compete in fun challenges against colleagues, chat with peers, set new goals, and watch their progress over time while earning points!

## **RESIDENTIAL SERVICES**

The Residential Services Department continued strengthening the reliability and timeliness of residential authorizations in February—an essential function for preventing service disruption and ensuring members receive supports that accurately reflect their current needs. Ongoing monitoring and process improvements have resulted in major gains in both speed and consistency of authorization approvals, demonstrating meaningful progress in operational efficiency and member-centered stewardship.

## **SUBSTANCE USE DISORDERS**

The SAMHSA Substance Use Prevention, Treatment and Recovery Services (SUPTRS) Block Grant remains an essential safety-net resource, ensuring access to prevention and treatment services for individuals who are uninsured, underinsured, or whose benefits have been temporarily exhausted. Required set-asides continue to prioritize services for pregnant women, women with dependent children, and individuals who use drugs intravenously. Ongoing monitoring this period focused on understanding utilization trends and ensuring members are connected to the most appropriate and sustainable funding sources.

Spending trends indicate improved insurance stability. Block grant expenditures are trending down in FY26 year-to-date, even as admissions are projected to rise. This pattern suggests providers are successfully helping members transition from block grant support to longer-term insurance coverage options.

## **COMMUNICATIONS**

### **Media Outreach:**

For the 25/26 fiscal year, the Communications team continued to use Critical Mention, an online media analytics, monitoring, and search tool. It is used to measure earned media impact for stories, gather clips of broadcast segments and print articles, and search for media contacts to reach more outlets.

### **Quarterly Highlights:**

#### **Strategic Media Partnerships:**

In the last few months, DWIHN has forged strategic relationships with media to reach audiences in specific communities and for specific initiatives. Here are just a few:

SPONSORED MESSAGE

## New Year, New You?

### How to set goals without stressing yourself out

For many people, with each new year comes a new set of goals aimed at self-improvement. What most people don't realize is that unrealistic goal setting can actually be counterproductive, causing added stress and negatively affecting mental health.

Dr. Della Mammo, Medical Director of Crisis Services for Dubois Wayne Integrated Health Network (DWHIN), shares practical tips on how to set smart goals that actually stick.

**Set realistic goals**  
 "Good goals are designed with 'consideration,'" Dr. Mammo said.  
 She explained that unrealistic goals often lead to discouragement and discouragement can negatively affect mental health.  
 "Resolutions should support mental health instead of becoming another source of pressure or another thing to do in the new year," she said.

**Simple, achievable goals are more likely to stick with people and help them feel successful**  
 Dr. Mammo explained that the brain responds better to small, specific goals rather than large, vague goals because the smaller goals create frequent, manageable signals of progress that trigger dopamine release and help sustain motivation.

**Set fewer priorities**  
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 It's important for people to prioritize the goals that matter most to them, and can be done without feeling like a chore or a burden.

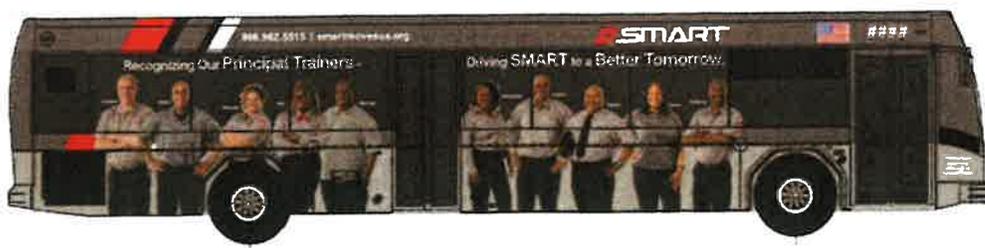
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 When it comes to deciding what goals to make, Dr. Mammo encourages people to ask themselves, "Why does this matter to me right now?"  
 Today, especially with the prevalence of social media, many people are subconsciously comparing themselves to others.  
 "Instead of making it something that other people are doing, people should make their goals something that brings joy to their lives and makes them grow as a person," she said.

**Understand that setbacks happen**  
 Just like with anything else, setbacks are a part of working toward a goal. Dr. Mammo said the important part is getting back up when you fall. Self-compassion is an important part of goal setting.  
 "Setbacks are completely normal. Having a bad day or a bad week doesn't mean any progress," she said. "The whole point of a goal is to improve, not be perfect."  
 Regardless of the goal, it's important to make sure that mental health is a priority when people are working to achieve their resolutions.  
 "Especially during this time of year, when the sky is dark and gloomy, the holidays are over and seasonal changes can impact people's mood and motivation," Dr. Mammo said. "It's important to pay attention if you or someone you know is feeling overwhelmed - seek out professional resources if quality of life is being impacted."  
 DWHIN offers free, confidential help for Wayne County residents and provides an array of integrated services that improve behavioral and physical health. If you have or think you might have mental health issues, visit [www.dwhin.org](http://www.dwhin.org) to find a trusted provider or access the clinical call center for an outpatient clinic screening and referral. For 24/7 help, call the DWHIN Crisis Helpline at 800-261-9947 and speak to a mental health professional.

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After the first episode of [SmartCast](#), the informational podcast for SMART bus riders, there will be two more episodes and development of a special bus wrap highlighting our phenomenal staff and services. Similar to the example below.



**First Quarter Media Metrics:**  
(Includes earned and paid media)

	<b>1.43M</b> Total TV Audience	<b>\$272k</b> Total TV Publicity	\$
	<b>1.43M</b> Local Audience	<b>\$272k</b> Local Publicity	
	<b>1.61M</b> Total Radio Audience	<b>\$3.477k</b> Total Radio Publicity	\$
	<b>261k</b> Total Online Audience	<b>\$1.781k</b> Total Online Publicity	\$

**Quarterly Comparison**  
(Includes earned and paid media)

Category	4 <sup>th</sup> Quarter	1 <sup>st</sup> Quarter
Total Mentions	164	416
Total Audience	5M	3.3M
Total Publicity Value	\$113,242	\$276,906

**Access Call Center Calls Related to Outreach**

Each quarter the Access Call Center asked callers "How Did you Hear About Us?" During the 1<sup>st</sup> quarter of FY '25-'26, the total number of calls managed by the Call Center.

Category	4 <sup>th</sup> Quarter	1 <sup>st</sup> Quarter
Total Number of Calls	47,555	44,967
Callers who Answered the Question	46,075	43,967
Billboard / Bus Advertisement	169	73
Website/Online/Flyer/Hotline/TV/Radio/internet/ Google/ social media /MyDWIHNapp	428	563

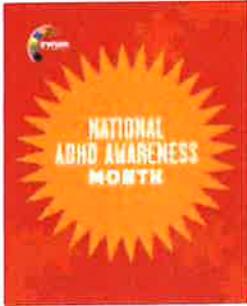
**Social Media**

Social Media Performance Report Summary

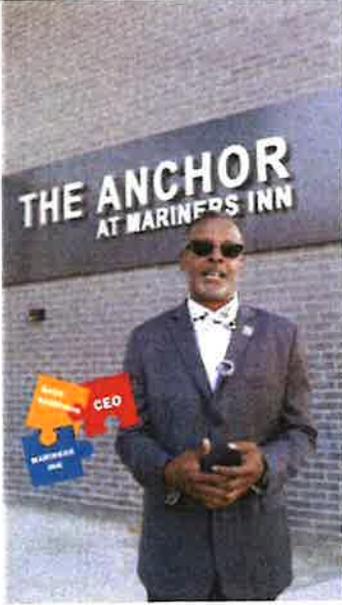
Social Media Performance (Facebook, Instagram, LinkedIn, X, and You Tube)		
Followers	11,047	23,340
Total Audience Growth (Number of new followers)	551	1,192
Engagements (Likes, comments, shares, saves, link clicks)	7627	9,000
Link Clicks (Click to the website)	1,288	5,362
Impressions (Visibility of our content, views)	172,884	321,962

**Social Media Performance brief:** (Based on Instagram analytics; consistent across platforms)  
For this quarter, posts highlighting mental and behavioral health statistics and community support outperformed other content types. Additionally, collaborative posts were highly engaged with and frequently shared.

Here are the top posts of the quarter (Hyperlinks direct to posts):

<b>October</b>	<b>November</b>	<b>December</b>
<a href="#"><u>National ADHD Awareness Month</u></a>	<a href="#"><u>Thanksgiving Food Drive (Collaboration with Team Wellness) Covered by MDN</u></a>	<a href="#"><u>PAL, Detroit Police and DWIHN Mentoring Youth</u></a>
Oct. 1	Nov. 7	Dec. 19
2.4K Views	220K Views	17.6K Views
		

**Provider Profiles: Our opportunity to share the wonderful work of our dedicated providers.**

<b>October</b>	<b>November</b>	<b>December</b>
<a href="#"><u>Centers for Family Development</u></a>	<a href="#"><u>Mariners Inn</u></a>	<a href="#"><u>Lincoln Behavioral Services</u></a>
Oct. 6, 2025	Nov. 3, 2025	Dec. 1, 2025
447 Views	840 views	1.1K Views
		

### Community Outreach

Report on community events DWIHN hosts or is requested to attend to provide resources or presentation. We will compare outreach efforts quarter to quarter as with other areas of Communications.

	<b>4<sup>th</sup> Quarter</b>	<b>1<sup>st</sup> Quarter</b>
<b>Community Events</b>	23	<b>36</b>
<b>Estimated Individuals Reached</b>	5,255	<b>1,270</b>
4 <sup>th</sup> Quarter events included the back-to-school rally and youth conferences. Winter months typically have less large community events due to weather.		

### Branding and Visual Design

This quarter, the Communications team made significant strides in unifying DWIHN's internal and external communications while strengthening outreach through consistent visual branding. In February we concluded partnership with Screen Vision, a media company that specializes in movie theatre advertising. The commercials ran in Emagine and Bel-Air theatres. 12-weeks in 10-theaters – also ads ran in the year-round Dearborn Drive Inn) on 103 screens.

These ads ran multiple times before **EVERY** movie that played at the theaters.

	<b>Projected/Contracted Impressions</b>	<b>Actual Impressions</b>
<b>"Big Screen" Ads</b>	941,653	2,128,565
<b>Mobile Ads</b>	437,500	474,550
Additional :05 second kiosk ads ran that highlighted DWIHN's logo and services in theatre lobbies.		

Upcoming Events

# Infant Massage Class

FREE Three Week Series via Zoom

Parents/caregivers and their babies will improve:

- Communication
- Relaxation
- Caregiver confidence

This class is best suited for babies at least 6 weeks old and up until they start crawling.



**Class size is limited.  
Registration required.**

**REGISTER HERE**



[guidance-center.org/massage](https://guidance-center.org/massage)

After registering you will receive a confirmation phone call.

**Wednesdays via Zoom  
from 9:30–10:30am**

**WEEK 1**

**March 4, 2026  
Leg & Arm Massage**

**WEEK 2**

**March 11, 2026  
Abdomen & Chest Massage**

**WEEK 3**

**March 18, 2026  
Face & Back Massage**



For questions or more information contact Jane Reitman at 734-785-7705 x7369 or [jreitman@guidance-center.org](mailto:jreitman@guidance-center.org).



This Event is presented by  
**DWIHN Constituents'  
Voice Advocacy Action  
Committee**

**IN OBSERVANCE OF  
DEVELOPMENTAL DISABILITIES  
AWARENESS MONTH**

**Navigating Health Disparities  
& Growing Older in the  
Developmental Disabilities  
Community**

**Thursday, March 19, 2026  
From 10:30 AM to 12:00 PM**



Please use the QR code or  
RSVP link below to register

[https://form.jotform.com/23033400  
5589150](https://form.jotform.com/230334005589150)

**DWIHN FIGHTS STIGMA**

Love & Logic  
**Parenting  
Made Enjoyable**

**VIRTUAL PARENTING EDUCATION SERIES**

These workshops provide concrete (helpful) information needed to be a more effective parent to motivate, lead and inspire the very best in your children.

**Wednesday Evenings  
March 4, 11, 18, 25,  
and April 1, 2026  
7-8:30pm**

Have you ever asked yourself: *Why can't I get my child to be more responsible and make better decisions?* Come and join us!

**WORKSHOP SESSIONS**

- 1: Handling Misbehavior without Breaking a Sweat**
- 2: Teaching Kids to Listen the First Time**
- 3: Avoiding Power Struggles and Bedtime Battles**
- 4: Setting Limits**
- 5: What to Do When Your Kids Leave You Speechless**



Register in advance at  
[bit.ly/  
march26parenting](https://bit.ly/march26parenting)  
or use the QR code:



After registering, you will receive a confirmation email containing information about joining the meeting.

Certificate provided after entire series has been completed.

**Full participation required.**

For more information contact Anita Rothert at [arothert@guidance-center.org](mailto:arothert@guidance-center.org) or 734-785-7705 x7035.

 **THE  
GUIDANCE  
CENTER**  
NURTURE THE FUTURE  
Family Resources & Support

# Mental Health YOUTH COUNCIL

2026

DWIHN AND YOUTH UNITED ARE ACTIVELY SEEKING PASSIONATE HIGH SCHOOL STUDENTS IN WAYNE COUNTY (GRADES 9-12) TO JOIN OUR MENTAL HEALTH YOUTH COUNCIL. THIS COUNCIL AIMS TO AMPLIFY YOUTH VOICES IN SHAPING MENTAL HEALTH SERVICES AND POLICIES. MEMBERS WILL ENGAGE IN DISCUSSIONS, PROVIDE FEEDBACK, AND PARTICIPATE IN INITIATIVES THAT PROMOTE MENTAL WELLNESS AMONG YOUNG PEOPLE. RECRUITMENT OPENS MARCH 2ND! IF YOU'RE INTERESTED IN MAKING A DIFFERENCE AND ADVOCATING FOR MENTAL HEALTH, THIS IS A GREAT OPPORTUNITY TO GET INVOLVED!



DWIHN ADMIN BUILDING  
8726 Woodward Ave, Detroit, MI 48202

**DEADLINE IS MARCH 30TH**

**MORE INFO:**

**CONTACT: 313-989-9327**





# CONSTITUENTS' VOICE ADVISORY COMMITTEE

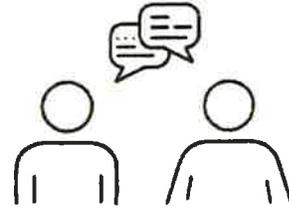
## ACTION SUBCOMMITTEES



**ADVOCATE**



**EMPOWER**



**ENGAGE**

### WHO WE ARE

- Subcommittees of DWIHN's Constituents' Voice Advisory Board
- Includes members with experience receiving community mental health services
- Residents of Wayne County looking to make a positive impact in their community

### WHAT WE DO

- Provide DWIHN with input concerning the policies and activities related to community inclusion
- Collaborate with DWIHN & the Wayne County community to identify & address needs
- Volunteer in activities such as collecting basic goods for those in need

DETROIT WAYNE INTEGRATED HEALTH NETWORK 8726 WOODWARD AVE., DETROIT MI 48202

For more information, contact [Bwarrick@dwihn.org](mailto:Bwarrick@dwihn.org)



# RECRUITMENT FOR THE CONSTITUENTS' VOICE



## WHO WE ARE

The Constituents' Voice (CV) is an advisory group to the Detroit Wayne Integrated Health Network

## MISSION

To advance community inclusion - the personal sense of valued participation and interaction in everyday life.

## FUNCTIONS WHY JOIN THE CV?

- Advise DWIHN on its policies, plans, and practices
- Empower "persons who receive services" to be at the center of their care
- Advocate for system values that promote dignity and respect
- Award mini-grants to self-directed "persons who receive services"

DETROIT WAYNE INTEGRATED HEALTH NETWORK  
8726 WOODWARD AVE., DETROIT, MI 48202

For more information please contact Belinda Warrick at [bwarrick@dwihn.org](mailto:bwarrick@dwihn.org)



# COMMUNICATIONS REPORT

## DWIHN Full Board Meeting

### 25/26 FY First Quarter Report

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## Quarterly Comparison

*(Includes earned and paid media)*

Category	4 <sup>th</sup> Quarter	1 <sup>st</sup> Quarter
Total Mentions	164	416
Total Audience	5M	3.3M
Total Publicity Value	\$113,242	\$276,906

## Access Call Center Calls Related to Outreach

Each quarter the Access Call Center asked callers "How Did you Hear About Us?" During the 1<sup>st</sup> quarter of FY '25-'26, the total number of calls managed by the Call Center.

Category	4 <sup>th</sup> Quarter	1 <sup>st</sup> Quarter
Total Number of Calls	47,555	44,967
Callers who Answered the Question	46,075	43,967
Billboard / Bus Advertisement	169	73
Website/Online/Flyer/Hotline/TV/Radio/internet/ Google/ social media /MyDWIHNapp	428	563

## Social Media

### Social Media Performance Report Summary

Social Media Performance (Facebook, Instagram, LinkedIn, X and YouTube)	4 <sup>th</sup> Quarter	1 <sup>st</sup> Quarter
Followers	22,150	22,800

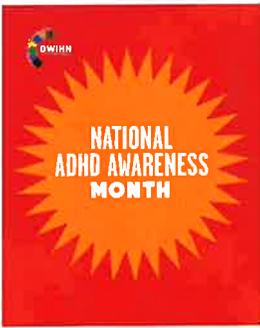
Total Audience Growth ( <i>Number of new followers</i> )	7,370	650
Engagements (Likes, comments, shares, saves, link clicks)	25,170	6,913
Link Clicks (Click to the website)	14,750	963
Impressions (Visibility of our content, views)	2,130,000	302,760

**Key Insights:**

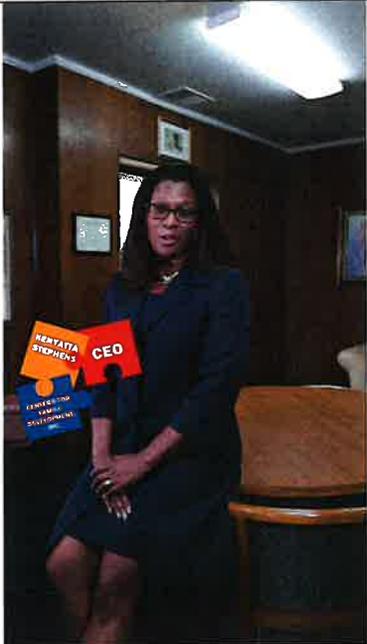
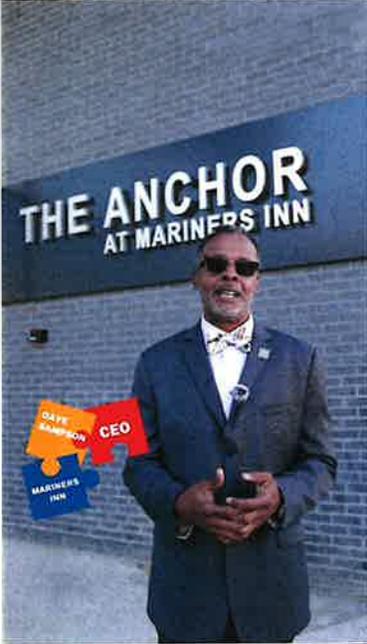
- DWIHN social media audience grew from 14,378 followers in Q1
- FY25 to 22,800 by Q1 FY26. FY25 campaigns generated over 7.5M impressions and more than 40K interactions in a single quarter.
- Q3/Q4 overall traffic is attributed to the SUD Campaign with the additional paid investment.

**Social Media Performance brief:** (Based on Instagram analytics; consistent across platforms)  
 For this quarter, posts highlighting mental and behavioral health statistics and community support outperformed other content types. Additionally, collaborative posts were highly engaged with and frequently shared.

Here are the top posts of the quarter (Hyperlinks direct to posts):

October	November	December
<a href="#"><u>National ADHD Awareness Month</u></a>	<a href="#"><u>Thanksgiving Food Drive (Collaboration with Team Wellness) Covered by MDN</u></a>	<a href="#"><u>PAL, Detroit Police and DWIHN Mentoring Youth</u></a>
Oct. 1	Nov. 7	Dec. 19
2.4K Views	220K Views	17.6K Views
		
		

**Provider Profiles:** Our opportunity to share the wonderful work of our dedicated providers.

October	November	December
<u>Centers for Family Development</u>	<u>Mariners Inn</u>	<u>Lincoln Behavioral Services</u>
Oct. 6, 2025	Nov. 3, 2025	Dec. 1, 2025
447 Views	840 views	1.1K Views
		

## Community Outreach

Report on community events DWIHN hosts or is requested to attend to provide resources or presentation. We will compare outreach efforts quarter to quarter as with other areas of Communications.

	4 <sup>th</sup> Quarter	1 <sup>st</sup> Quarter
<b>Community Events</b>	23	36
<b>Estimated Individuals Reached</b>	5,255	1,270
4 <sup>th</sup> Quarter events included the back-to-school rally and youth conferences. Winter months typically have less large community events due to weather.		

## Branding and Visual Design

This quarter, the Communications team made significant strides in unifying DWIHN's internal and external communications while strengthening outreach through consistent visual branding.

In February we concluded partnership with Screen Vision, a media company that specializes in movie theatre advertising. **The commercials ran in Emagine and Bel-Air theatres. 12-weeks**

in 10-theaters – also ads ran in the year-round Dearborn Drive Inn) on 103 screens. Screen Vision “BIG SCREEN” Ads can be found in the links below:

- [Suicide Prevention](#)
- [Bullying Prevention](#)

These ads ran multiple times before **EVERY** movie that played at the theaters.

	<b>Projected/Contracted Impressions</b>	<b>Actual Impressions</b>
<b>“Big Screen” Ads</b>	941,653	2,128,565
<b>Mobile Ads</b>	437,500	474,550
Additional :05 second kiosk ads ran that highlighted DWIHN’s logo and services in theatre lobbies.		

## Upcoming Events

# Infant Massage Class

FREE Three Week Series via Zoom

Parents/caregivers and their babies will improve:

- Communication
- Relaxation
- Caregiver confidence

This class is best suited for babies at least 6 weeks old and up until they start crawling.



Class size is limited.  
Registration required.

**REGISTER HERE**



[guidance-center.org/massage](https://guidance-center.org/massage)

After registering you will receive a confirmation phone call.

**Wednesdays via Zoom  
from 9:30–10:30am**

**WEEK 1**

**March 4, 2026**

**Leg & Arm Massage**

**WEEK 2**

**March 11, 2026**

**Abdomen & Chest Massage**

**WEEK 3**

**March 18, 2026**

**Face & Back Massage**

  
**THE  
GUIDANCE  
CENTER**  
**NURTURE THE FUTURE**  
Family Resources & Support

For questions or more information contact Jane Reitman at 734-785-7705 x7369 or [jreitman@guidance-center.org](mailto:jreitman@guidance-center.org).



This Event is presented by  
**DWIHN Constituents'  
Voice Advocacy Action  
Committee**

**IN OBSERVANCE OF  
DEVELOPMENTAL DISABILITIES  
AWARENESS MONTH**

**Navigating Health Disparities  
& Growing Older in the  
Developmental Disabilities  
Community**

**Thursday, March 19, 2026  
From 10:30 AM to 12:00 PM**



Please use the QR code or  
RSVP link below to register

[https://form.jotform.com/23033400  
5589150](https://form.jotform.com/230334005589150)

**DWIHN FIGHTS STIGMA**

# Love & Logic Parenting Made Enjoyable

## VIRTUAL PARENTING EDUCATION SERIES

These workshops provide concrete (helpful) information needed to be a more effective parent to motivate, lead and inspire the very best in your children.

**Wednesday Evenings**  
**March 4, 11, 18, 25,**  
**and April 1, 2026**  
**7-8:30pm**

Have you ever asked yourself: *Why can't I get my child to be more responsible and make better decisions?* Come and join us!

### WORKSHOP SESSIONS

- 1: Handling Misbehavior without Breaking a Sweat
- 2: Teaching Kids to Listen the First Time
- 3: Avoiding Power Struggles and Bedtime Battles
- 4: Setting Limits
- 5: What to Do When Your Kids Leave You Speechless



Register in advance at  
[bit.ly/  
march26parenting](https://bit.ly/march26parenting)  
or use the QR code:



After registering, you will receive a confirmation email containing information about joining the meeting.

**Certificate provided after entire series has been completed.**

***Full participation required.***

For more information contact Anita Rothert at [arothert@guidance-center.org](mailto:arothert@guidance-center.org) or 734-785-7705 x7035.

 **THE  
GUIDANCE  
CENTER**  
**NURTURE THE FUTURE**  
Family Resources & Support



# Mental Health YOUTH COUNCIL



2026

DWIHN AND YOUTH UNITED ARE ACTIVELY SEEKING PASSIONATE HIGH SCHOOL STUDENTS IN WAYNE COUNTY (GRADES 9-12) TO JOIN OUR MENTAL HEALTH YOUTH COUNCIL. THIS COUNCIL AIMS TO AMPLIFY YOUTH VOICES IN SHAPING MENTAL HEALTH SERVICES AND POLICIES. MEMBERS WILL ENGAGE IN DISCUSSIONS, PROVIDE FEEDBACK, AND PARTICIPATE IN INITIATIVES THAT PROMOTE MENTAL WELLNESS AMONG YOUNG PEOPLE. RECRUITMENT OPENS MARCH 2ND! IF YOU'RE INTERESTED IN MAKING A DIFFERENCE AND ADVOCATING FOR MENTAL HEALTH, THIS IS A GREAT OPPORTUNITY TO GET INVOLVED!



DWIHN ADMIN BUILDING  
8726 Woodward Ave, Detroit, MI 48202

**DEADLINE IS MARCH 30TH**

**MORE INFO:**

**CONTACT: 313-989-9327**





# CONSTITUENTS' VOICE ADVISORY COMMITTEE

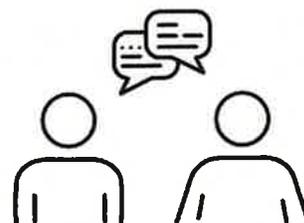
## ACTION SUBCOMMITTEES



### ADVOCATE



### EMPOWER



### ENGAGE

#### WHO WE ARE

- Subcommittees of DWIHN's Constituents' Voice Advisory Board
- Includes members with experience receiving community mental health services
- Residents of Wayne County looking to make a positive impact in their community

#### WHAT WE DO

- Provide DWIHN with input concerning the policies and activities related to community inclusion
- Collaborate with DWIHN & the Wayne County community to identify & address needs
- Volunteer in activities such as collecting basic goods for those in need

DETROIT WAYNE INTEGRATED HEALTH NETWORK 8726 WOODWARD AVE., DETROIT MI 48202

For more information, contact [Bwarrick@dwihn.org](mailto:Bwarrick@dwihn.org)



# RECRUITMENT FOR THE CONSTITUENTS' VOICE



## WHO WE ARE

The Constituents' Voice (CV) is an advisory group to the Detroit Wayne Integrated Health Network

## MISSION

To advance community inclusion - the personal sense of valued participation and interaction in everyday life.

## FUNCTIONS WHY JOIN THE CV?

- **Advise DWIHN on its policies, plans, and practices**
- **Empower "persons who receive services" to be at the center of their care**
- **Advocate for system values that promote dignity and respect**
- **Award mini-grants to self-directed "persons who receive services"**

DETROIT WAYNE INTEGRATED HEALTH NETWORK  
8726 WOODWARD AVE., DETROIT, MI 48202

For more information please contact Belinda Warrick at [bwarrick@dwihn.org](mailto:bwarrick@dwihn.org)