

**HEALTHWEST**  
**FULL BOARD MINUTES**

**October 27, 2023**

**8:00 a.m.**

**376 E. Apple Ave.  
Muskegon, MI 49442**

**CALL TO ORDER**

The meeting of the Full Board was called to order by Chair Thomas at 8:01 a.m.

**ROLL CALL**

Members Present: Jeff Fortenbacher, Tamara Madison, Thomas Hardy, Janice Hilleary, Kim Cyr, Marcia Hovey-Wright, Janet Thomas, Remington Sprague, MD, Cheryl Natte

Members Absent: Charles Nash

Others Present: Rich Francisco, Holly Brink, Amber Berndt, Tasha Percy, Gina Post, Melina Barrett, Gary Ridley, Mickey Wallace, Matt Plaska, Suzanne Beckeman, Brandon Baskin, Stephanie Baskin, Brandy Carlson, Pam Kimble, Kim Huey, Christy LaDronka, Amanda Absher, Natalie Walther, Kim Davis, Linda Wagner, Jennifer Hoeker, Jason Bates, Chelsea Kirksey, Nate Kennert, Susan Plotts, Shannon Morgan,

Guests Present: Matt Farrar, Sara Hough, John Weerstra

**MINUTES**

HWB 14-B - It was moved by Mr. Hardy, seconded by Dr. Sprague, to approve the minutes of the September 22, 2023 Full Board meeting as written.

**MOTION CARRIED.**

**COMMITTEE REPORTS**

***Program Personnel Committee***

HWB 1-P - It was moved by Mr. Hardy, seconded by Ms. Madison, to approve the minutes of the August 11, 2023 meeting as written.

**MOTION CARRIED.**

HWB 2-P - It was moved by Ms. Thomas, seconded by Mr. Hardy, to authorize the policy and procedural changes as described above and attached, effective October 27, 2023.

**MOTION CARRIED.**

HWB 3-P - It was moved by Mr. Hardy, seconded by Ms. Thomas, to authorize the policy and procedural changes as described above and attached, effective October 27, 2023.

**MOTION CARRIED.**

***Recipient Rights Committee***

HWB 4-R - It was moved by Ms. Madison, seconded by Ms. Thomas, to approve the minutes of the August 11, 2023 meeting as written.

**MOTION CARRIED.**

HWB 5-R - It was moved by Ms. Thomas, seconded by Ms. Madison, to approve the Recipient Rights Reports for August 2023 / September 2023.

**MOTION CARRIED.**

***Finance Committee***

HWB 6-F - It was moved by Mr. Hardy, seconded by Commissioner Nash, to approve the minutes of the September 15, 2023, meeting as written.

**MOTION CARRIED.**

HWB 7-F - It was moved by Mr. Hardy, seconded by Commissioner Hovey-Wright, to approve expenditures for the month ending August 31, 2023, in the total amount of \$8,124,216.41.

**MOTION CARRIED.**

HWB 8-F - It was moved by Mr. Hardy, seconded by Commissioner Hovey-Wright, to approve pay for a Butler Inclined Platform Lift up to \$29,490.00 to replace the current broken Inclined Platform Lift, by December 31, 2023.

**MOTION CARRIED.**

HWB 9-F - It was moved by Commissioner Hovey-Wright, seconded Mr. Hardy, to authorize HealthWest to approve signing single case agreements with various out of network hospitals in the amount of \$103,306.00 for psychiatric inpatient stays for HealthWest consumers.

**MOTION CARRIED.**

HWB 10-F- It was moved by Mr. Hardy, seconded Commissioner Nash, to authorize the HealthWest Board of Directors to accept the inpatient, partial hospitalization, and ECT rates negotiated by Lakeshore Regional Entity with the hospitals listed on Attachment A, effective October 1, 2023 through September 30, 2024.

**MOTION CARRIED.**

HWB 11-F - It was moved by Commissioner Nash, seconded by Commissioner Hovey-Wright, to authorize the HealthWest Board of Director to contract with those FY23 service vendors/providers listed in Attachment A with their individual projected expenditures for the time period effective October 1, 2023 through September 30, 2024.

**MOTION CARRIED.**

HWB 12-F - It was moved by Mr. Hardy, seconded by Commissioner Hovey-Wright, to authorize HealthWest to approve Provider Relief Funds an amount not to exceed \$142,385.31. to providers listed on Attachment A, through funding provided by the LRE.

**MOTION CARRIED.**

HWB 13-F - It was moved by Mr. Hardy, seconded by Commissioner Hovey-Wright, to authorize HealthWest to approve the projected expenditures for the vendor increases stated above with a total not to exceed \$340,000.00, effective October 1, 2022 through September 30, 2023.

**MOTION CARRIED.**

## **ITEMS FOR CONSIDERATION**

HWB 15-B - It was moved by Mr. Hardy, seconded by Commissioner Hovey-Wright, to authorize the approval of EOB 4392 to Moonyeen Lincoln with a total not to exceed \$7,440.70.

**MOTION CARRIED.**

HWB 16-B - It was moved by Mr. Hardy, seconded by Dr. Sprague, to authorize and approve the changes to the HealthWest Consumer Advisory Committee members, effective October 27, 2023.

**MOTION CARRIED.**

## **OLD BUSINESS**

There was no old business.

## **NEW BUSINESS**

There was no new business.

## **COMMUNICATION**

- Ms. Carlson, Chief Financial Officer, shared her Finance Memo with the Board of Directors.
- Ms. Madison provided an update on behalf of the Consumer Advisory Committee.
- Ms. Betts shared the kudos letter being sent to staff for their great work.
- Ms. Plotts, Human Resources Manager, provided a presentation on behalf of the Human Resources Department.
- Ms. Kimble, Director of Quality Assurance, provided the QAPIP Update presentation.
- Mr. Plaska, Accreditation and Performance Improvement Manager, provided the Key Performance Indicators & Quality Performance presentation.

## **DIRECTOR'S COMMENTS**

### **MDHHS Updates:**

- The MichiCANS soft launch sites which HW is a part of is waiting on a response from the MDHHS leadership overseeing the effort. At the last Director's forum, it was brought to our attention that a memo was released adding scope to the soft launch sites to also screen for Kids in the foster care system. The original intent of the soft launch was to test for a replacement for the CAFAS and PECFAS, but the scope has changed. The soft launch sites got together over several meetings and with the assistance of CMHA to formulate a set of remarks and recommendations voicing our concerns to MDHHS. We are still waiting for that response. One of the recommendations the group had was for MDHHS to conduct a separate pilot and test to use the MichiCANS without the involvement of soft launch sites.
- The final rates and budget have been released by the LRE and Brandy our CFO has updated our Budget. Our revenue in FY24 will be up by about 10M. We were waiting on final numbers to make final decisions related to operations, and glad that we were finally able to determine what we can proceed with as far as budget items. This includes recommendations related to staff benefits among other things.

### **Lakeshore Regional Entity updates:**

- LRE Wakely Study –The study was finally presented to the LRE board and the Wakely team made a recommendation to LRE board to support ISF funding at 35M which equals about 8% to 8.2%. There were various scenarios presented based on Milliman rates and anticipated rates, but Wakely recommended at least an average of the 50% probability for baseline and pessimistic scenarios. The LRE still has a question out to the state regarding the 7.5% number that we are supposed to have in ISF. The contract language changed in 2021 which now states that it PIHP's can keep 7.5% each year or per year. Prior to this the language read 7.5% cap. These are very different things. There are a couple of CMHSPS out there right now not giving back money to the state and keeping as much as 7.5% per year.

### **Executive Director activities CMH Level:**

- Quality improvement training – KATA lean training ramping up and our quality improvement director is working on a regular schedule for training. We are pushing close to about 50 trained in KATA. I was approached by the LRE to include them in the KATA training if we were going to have more or even train them directly. Mary Dumas asked if their quality staff could be trained as well. Internally, KATA projects are on the rise and the quality team is looking at a methodology to prioritize these improvement projects.
- Our CMH organizational chart is continuing to change as we address some of the issues related to the high caseloads. The development of a 3<sup>rd</sup> MI team and Assessment Team should alleviate some of the case load numbers. I have asked Data Analytics to develop a report that allows HW to continue to monitor caseloads so that it is available for supervisors, managers, and directors to monitor this information more readily.
- Continuing to evaluate processes related to contracts, quality improvement structure development and identify areas for efficiencies.
- I wanted to give a “Shout out” to Heather Weigand, Christy LaDronka and Bruce Morningstar from Norton Shores Police for sharing our CIT program at the CMHA fall conference, which our board members attended this past Monday and Tuesday. I am sure they received several questions, after asking if they can copy and replicate what we have at HW. I know this because I received questions as well. Kudos to the 3 of them for a great presentation.
- Continuing to work on space consolidation and ensure that we are optimizing the space that we have. There is a plan to move some of our HR and Finance staff over to Marquette, and I am working with County leadership to accomplish this.
- The leadership team at HW is beginning to look more closely at our Turnover rate. Based on the information provided by Susan from HR, we are about 19.5% turnover rate. This equals to about 1% to about 2% monthly since October of last year. We currently have about 430 staff on average and had 84 separations for a variety of reasons.

### **On the horizon:**

- Continue to review Organizational Chart and evaluate programmatic level need.
- Continue to work on improvements in various areas of the agency from administration to clinical processes.
- Upcoming meetings with various agencies in the community and looking for opportunities to partner. Recently met with Muskegon Family Center and looking forward to having a second meeting. I am also scheduled this coming week with Muskegon Community College as well.



**AUDIENCE PARTICIPATION**

There was no audience participation.

**ADJOURNMENT**

There being no further business to come before the board, the meeting adjourned at 9:16 a.m.

Respectfully,



Janet Thomas  
Board Chair

/hb



**TO:** HealthWest Board Members  
**FROM:** Janet Thomas, Board Chair, via Rich Francisco, Executive Director  
**SUBJECT:** Full Board Meeting  
October 27, 2023  
376 E. Apple Ave., Muskegon, MI 49442  
<https://healthwest.zoom.us/j/97691360092?pwd=dk9CRnVxUDdkbWtGREIZVCsydGdYdz09>  
One tap mobile: (309)205-3325, 97691360092#

**REVISED AGENDA**

- |    |  |             |
|----|--|-------------|
| 1) | Call to Order  | Action      |
| 2) | Approval of Agenda   | Action      |
| 3) | Approval of Minutes  |             |
|    | A) Approval of the Full Board Minutes of September 22, 2023<br>(Attachment #1 – pg. 1-4)     | Action      |
| 4) | Public Comment (on an agenda item)   |             |
| 5) | Committee Reports  |             |
|    | A) Program Personnel<br>(Attachment #2 – pg. 5-7)  | Action      |
|    | B) Recipient Rights<br>(Attachment #3 – pg. 8-10)  | Action      |
|    | C) Finance Committee<br>(Attachment #4 – pg. 11-14)  | Action      |
| 6) | Items for Consideration  |             |
|    | A) Approval of EOB 4392 Moonyeen Lincoln<br>(Attachment #5 – pg. 15)                         | Action      |
|    | B) Approval of Changes to HealthWest Consumer Advisory Committee<br>(Attachment #6 – pg. 16) | Action      |
| 7) | Old Business   |             |
| 8) | New Business   |             |
| 9) | Communication  |             |
|    | A) Finance Memo – Brandy Carlson, Chief Finance Officer<br>(Attachment #7 – pg. 17-18)       | Information |

Main Office

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[HealthWest.net](http://HealthWest.net)

- |  |             |
|--|-------------|
| B) Consumer Advisory Update – Kelly Betts, Customer Service<br>(Attachment #8 – pg.19-25)  | Information |
| C) Employee Recognition Letters – Kelly Betts, Customer Service<br>(Attachment #9 – pg.26-27)  | Information |
| D) Human Resource Program Presentation –<br>Susan Plotts, Human Resource Manager<br>(Attachment #10 – pg.28-42)  | Information |
| E) QAPIP Update – Pam Kimble, Director of Quality Assurance<br>(Attachment #11 – pg.43-66)   | Information |
| F) Key Performance Indicators & Quality Performance –<br>Matt Plaska, Accreditation and Performance Improvement Manager<br>(Attachment #12 – pg.67-72) | Information |
| G) Director's Report – Rich Francisco, Executive Director<br>(Attachment #13 – pg. 73-74)  | Information |
| 10) Public Comment   |             |
| 11) Adjournment  | Action      |

/hb

**HEALTHWEST**  
**FULL BOARD MINUTES**

**September 22, 2023**

**8:00 a.m.**

**376 E. Apple Ave.  
Muskegon, MI 49442**

**CALL TO ORDER**

The meeting of the Full Board was called to order by Chair Thomas at 8:01 a.m.

**ROLL CALL**

Members Present: Jeff Fortenbacher, Tamara Madison, Thomas Hardy, Janice Hilleary, Kim Cyr, Marcia Hovey-Wright, Janet Thomas, Remington Sprague, MD, Cheryl Natte, Charles Nash

Others Present: Rich Francisco, Holly Brink, Amber Berndt, Tasha Percy, Gina Post, Melina Barrett, Gordon Peterman, Gary Ridley, Mickey Wallace, Matt Plaska, Suzanne Beckeman, Brandon Baskin, Michael Pyne, Linda Cloz, Brandy Carlson, Justine Tufts, Devan Peterson

Guests Present: Kristen Wade, Matt Farrar

**MINUTES**

HWB 158-B - It was moved by Commissioner Cyr, seconded by Mr. Hardy, to approve the minutes of the August 25, 2023 Full Board meeting as written.

**MOTION CARRIED.**

**COMMITTEE REPORTS**

***Finance Committee***

HWB 146-F - It was moved by Mr. Hardy, seconded by Ms. Thomas, to approve the minutes of the August 18, 2023, meeting as written.

**MOTION CARRIED.**

HWB 147-F - It was moved by Dr. Sprague, seconded by Mr. Hardy, to approve expenditures for the month ending July 31, 2023, in the total amount of \$6,367,315.27.

**MOTION CARRIED.**

HWB 148-F - It was moved by Mr. Hardy, seconded Dr. Sprague, to authorize HealthWest to approve the increase in projected expenditure for CRC Recovery Inc dba as Western Michigan Treatment Center at a cost not to exceed \$60,675.00 effective July 1, 2023 through September 30, 2023.

**MOTION CARRIED.**

HWB 149-F - It was moved by Mr. Hardy, seconded Dr. Sprague, to authorize the HealthWest Board of Directors to contract with the Substance Use Disorder Services agencies listed on Attachment A with their individual projected expenditures for the time period effective October 1, 2023 through September 30, 2024.

**MOTION CARRIED.**

HWB 150-F- It was moved by Dr. Sprague, seconded by Ms. Thomas, to authorize the HealthWest Board of Director to authorize the HealthWest expense for a single case agreement with Residential Opportunities, Inc. in the amount not to exceed \$34,650.00 for specialized autism residential.

**MOTION CARRIED.**

HWB 151-F - It was moved by Ms. Thomas, seconded by Mr. Hardy, to authorize HealthWest to approve the projected expenditures for Amanda Family, Case Management of Michigan, Reliance Community Care Partners, and St. Mary's Family Pharmacy as stated above with a total not to exceed \$124,000.00, effective October 1, 2022 through September 30, 2023.

**MOTION CARRIED.**

HWB 152-F - It was moved by Mr. Hardy, seconded by Commissioner Hovey-Wright, to authorize HealthWest authorize acceptance of the attached grants and of the requirements within for a total of \$6,852,083, effective October 1, 2023 through September 30, 2024.

**MOTION CARRIED.**

HWB 153-F - It was moved by Ms. Thomas, seconded by Commissioner Hovey-Wright, to authorize HealthWest to pay for a Savaria Portable Ceiling Track Motor & Cradle up to \$4,072 to replace broken motor & cradle, by September 30, 2023.

**MOTION CARRIED.**

HWB 155-F - It was moved by Ms. Thomas, seconded by Commissioner Hovey-Wright, to authorize the HealthWest Executive Director to enter into an agreement in support of Hackley Community Care purchasing professional services and entering into a lease arrangement, effective September 25, 2023 through September 30, 2024.

**MOTION CARRIED.**

HWB 156-F - It was moved by Mr. Hardy, seconded by Commissioner Hovey-Wright, to authorize the HealthWest Executive Director to sign an agreement in support of Brewer & Bristow Training in the amount not to exceed \$21,200 for fiscal year 2024.

**MOTION CARRIED.**

HWB 157-F - It was moved by Mr. Hardy, seconded by Commissioner Hovey-Wright, to authorize the HealthWest Executive Director to contract with those FY23 service vendors/providers listed in Attachment A with their individual projected expenditures for the time period effective October 1, 2023 through September 30, 2024.

**MOTION CARRIED.**

**ITEMS FOR CONSIDERATION**

HWB 159-B- It was moved by Mr. Hardy, seconded by Commissioner Hovey-Wright, to authorize Janice Hilleary as a recommendation for the Executive Board Member for the LRE (Lakeshore Regional Entity), and authorizes HealthWest Board Chairperson, Janet Thomas, to recommend her on behalf of the HealthWest Board of Directors.

**MOTION CARRIED.**

## **OLD BUSINESS**

There was no old business.

## **NEW BUSINESS**

There was no new business.

## **COMMUNICATION**

There was no communication.

## **DIRECTOR'S COMMENTS**

### **MDHHS Updates:**

- I will be attending the Quality Improvement Council sponsored by MDHHS and as the member representative for HealthWest. This is a quarterly meeting. The next meeting for this state council and workgroup will be held on Wednesday Oct. 4<sup>th</sup> from 10am to 12pm. This group discusses initiatives and upcoming changes at the departmental level. Various agencies and departments present updates on what is going on at the state level impacting PIHPs and CMHSPs.
- Draft rates from Milliman have been shared to PIHPs & CMHSP and Brandy has prepared an impact summary for HealthWest. The biggest factor is the PHE unwind where we are seeing a decrease in population in DAB, TANF, HMP from a peak in August 2023 at 71,017 individuals to an estimated 60,698 by next year September 2024. The other factors are Entity Factors (geographic and demographic factors), which was a decrease of 1.4% decrease (0.9953 to 0.9415) entity factor. The other factors contributing to the Milliman rates are Acuity Adjustment by population: DAB is at 1.0159, TANF is at 1.0364, HMP is 1.0590 which have all increased from the previous year.
- I will be attending the Director's forum in Lansing on 09/28 to 09/29 brought together by CMHA for directors to get updates on state level initiatives. I will also be attending the CMHA fall conference on October 23<sup>rd</sup> & 24<sup>th</sup>.

### **Lakeshore Regional Entity updates:**

- Past 20% Liabilities: A balance of historical deficit of \$2,479,928.03 has been deposited into the Restricted Account set up by Muskegon County Finance department for HealthWest.
- LRE Site review – occurred last week and the LRE is continuing to ask for additional proof and clarification questions on proofs provided. This has certainly been a learning curve for our new QI Director, but they are doing an amazing job of keeping up with the LRE audit.
- LRE Wakely study – Will be presented to the LRE board in October. The requirement is for the LRE to complete a study for contract requirement. The LRE Board will then decide what to do with the data.
- I attended the LRE Finance ROAT meeting on 09/20/2023, and the LRE presented various reports related to the draft Milliman rates. The LRE also presented an updated Revenue projection reports and compared the CMHSPs spending plan against the projected numbers. The LRE will be reaching out to the CMHSPs to talk about variances in the two and get feedback.

### **Executive Director activities CMH Level:**

- Quality improvement training – KATA lean training ramping up. There will be additional training provided in September and then again in October. There have been 8 requests for process improvements from various teams. The quality improvement team has also been meeting with program supervisors/managers/directors to review outcome measures.
- Our CMH organizational chart is slowly changing as there are some changes occurring on the clinical level to address issues with high clinical case volumes. The formation of the assessment

team to share in the workload experienced by staff should help. I am also reviewing case load numbers and discussing with each Program and team director at leadership.

- Piloting the implementation of HIRE reach at HW with some positions. Leadership is now reviewing the updated hiring procedures as it relates to HIRE reach implementation which was put together by our HR HealthWest team in conjunction with County HR.

**On the horizon:**

- Continue to review Organizational Chart and evaluate programmatic level need.
- Continue to work on improvements in various areas of the agency from administration to clinical processes.

**AUDIENCE PARTICIPATION**

There was no audience participation.

**ADJOURNMENT**

There being no further business to come before the board, the meeting adjourned at 8:38 a.m.

Respectfully,

Janet Thomas  
Board Chair

/hb

***PRELIMINARY MINUTES  
To be adopted and approved at the Full Board Meeting of October 27, 2023***

**HEALTHWEST**

**PROGRAM AND PERSONNEL COMMITTEE REPORT TO THE BOARD**

**via Cheryl Natte, Committee Chair**

1. The Program Personnel Committee met on October 13, 2023
- \* 2. It was recommended, and I move, to approve the minutes of the August 11, 2023 meeting as written.
- \* 3. It was recommended, and I move, to approve the policy and procedural changes as described above and attached, effective October 27, 2023.
- \* 4. It was recommended, and I move, to approve the policy and procedural changes as described above and attached, effective October 27, 2023.

/hb



**HEALTHWEST**  
**PROGRAM/PERSONNEL MEETING MINUTES**

**October 13, 2023**  
**8:00 a.m.**

**376 E. Apple Ave.**  
**Muskegon, MI 49442**

**CALL TO ORDER**

The regular meeting of the Program/Personnel Committee was called to order by Chair Natte at 8:03 a.m.

**ROLL CALL**

Members Present: Cheryl Natte, Janet Thomas, Tamara Madison, Thomas Hardy

Members Absent: Janice Hilleary

Staff Present: Gina Post, Shannon Morgan, Cyndi Blair, Amber Berndt, Rich Francisco, Linda Wagner, Christy LaDronka, Heather Wiegand, Brian Speer, Gary Ridley, Randi Bennett, Mike Kimble, Chelsea Kirksey, Pam Kimble, Melina Barrett

Guests Present: Kristen Wade, John Weerstra

**MINUTES**

It was moved by Mr. Hardy, seconded by Ms. Madison, to approve the minutes of the August 11, 2023 meeting as written.

**MOTION CARRIED.**

**PUBLIC COMMENT (ON AN AGENDA ITEM)**

There was no public comment.

**ITEMS FOR CONSIDERATION**

It was moved by Ms. Thomas, seconded by Mr. Hardy, to authorize the policy and procedural changes as described above and attached, effective October 27, 2023.

**MOTION CARRIED.**

It was moved by Mr. Hardy, seconded by Ms. Thomas, to authorize the policy and procedural changes as described above and attached, effective October 27, 2023.

**MOTION CARRIED.**

### **OLD BUSINESS**

There was no old business.

### **NEW BUSINESS**

There was no new business.

### **COMMUNICATION**

Heather Wiegand, Clinical Service Manager of Correctional Services, provided her Crisis Intervention Training presentation. Christy LaDronka, Access Service Manager, provided her Behavioral Health Alternative Response presentation.

### **DIRECTOR'S COMMENTS**

Executive Director, Rich Francisco, provided an update. HealthWest is participating in the soft launch of MichiCANS, MDHHS has determined that they will be replacing the CAFAS and PECFAS, two assessments previously selected for our child population. HW agreed to do the soft launch, but the scope of testing MichiCANS has changed. MDHHS released a memo that they now want the soft launch sites to conduct the MichiCANS on the foster kid population as well. At the Director's forum about 2 weeks ago on the 29<sup>th</sup>, the CEOs and directors first learned of this, and there were many pushing back because of the additional scope that was added. MDHHS has since relaxed their stance and is offering more opportunities to work this out. We have now had several meetings with CMHA and developing a stance that if the soft launch sites will continue to do this, that it would have to have certain conditions. We were told during a meeting with MDHHS, Phil Kurdowicz that his instructions came from high above. Some of the concerns brought by CMHSPs are financing, administrative burden, staffing issues, coordination details. KATA and quality improvement, HW has completed another training for KATA, and trained more managers and supervisors this past Monday. Again today, there will be another training with about 17 more staff added to the list. Our QI director, Pam Kimble has taken on doing the training now and has received more requests to do these kata project initiatives.

### **AUDIENCE PARTICIPATION**

There was no audience participation.

### **ADJOURNMENT**

There being no further business to come before the board, the meeting adjourned at 8:48 a.m.

Respectfully,

Cheryl Natte  
Program/Personnel Committee Chair

CN/hb

**HEALTHWEST**  
**RECIPIENT RIGHTS ADVISORY COMMITTEE**  
**REPORT TO THE BOARD**

**via Thomas Hardy, Committee Chair**

1. The Recipient Rights Advisory Committee met on October 13, 2023.
- \* 2. It was recommended, and I move, to approve the minutes of the August 11, 2023 meeting as written.
- \* 3. It was recommended, and I move, to approve the Recipient Rights Reports for August 2023 / September 2023.

/hb

**HEALTHWEST**

**RECIPIENT RIGHTS ADVISORY COMMITTEE MEETING MINUTES**

**Friday, October 13, 2023  
8:00 a.m.  
376 E. Apple Ave., Muskegon, MI 49442**

**CALL TO ORDER**

The regular meeting of the Recipient Rights Advisory Committee was called to order by Chair Hardy at 8:49 a.m.

**ROLL CALL**

Members Present: Janet Thomas, Tamara Madison, Cheryl Natte, Thomas Hardy

Members Absent: Janice Hilleary

HealthWest Staff Present: Gina Post, Shannon Morgan, Cyndi Blair, Amber Berndt, Rich Francisco, Linda Wagner, Christy LaDronka, Heather Wiegand, Brian Speer, Gary Ridley, Randi Bennett, Mike Kimble, Chelsea Kirksey, Pam Kimble, Melina Barrett

Guest Present: Kristen Wade, John Weerstra

**APPROVAL OF MINUTES**

It was moved by Ms. Madison, seconded by Ms. Thomas, to approve the minutes of the August 11, 2023 meeting as written.

**MOTION CARRIED.**

**ITEMS FOR CONSIDERATION**

**A. *Motion to Accept Recipient Rights Reports for August 2023 / September 2023***

It was moved by Ms. Thomas, seconded by Ms. Madison, to approve the Recipient Rights Reports for August 2023 / September 2023.

**MOTION CARRIED.**

For the months of August 2023 / September 2023, there were 64 HealthWest and 28 provider employees trained:

Rights Updates HealthWest	45
Rights Updates Provider	1
New Employee Training HealthWest/Contracted	13
New Employee Training Provider	14
SUD Recipient Rights Orientation Employee	1
SUD Recipient Rights Orientation Provider	2

For the months of August 2023 / September 2023 there were 737 incident reports and 35 rights allegations.

Statistical data showing type and code was provided in the enclosed report.

There were a total of 8 deaths reported in August 2023 / September 2023.

**OLD BUSINESS**

There was no old business.

**NEW BUSINESS**

There was no new business.

**COMMUNICATIONS**

There was no communication.

**DIRECTOR'S COMMENTS**

There was no Director's Comments.

**AUDIENCE PARTICIPATION / PUBLIC COMMENT**

There was no audience participation.

**ADJOURNMENT**

There being no further business to come before the committee, the meeting adjourned at 9:11 a.m.

Respectfully,

Thomas Hardy  
HealthWest Rights Advisory Committee Chair

TH/hb

***PRELIMINARY MINUTES  
To be approved at the Rights Advisory Committee Meeting of  
December 1, 2023***

**HEALTHWEST****FINANCE COMMITTEE REPORT TO THE BOARD****via Janet Thomas, Committee Vice Chair**

1. The Finance Committee met on October 20, 2023
- \* 2. It was recommended, and I move to approve the minutes of the September 15, 2023, meeting as written.
- \* 3. It was recommended, and I move to approve expenditures for the month ending August 31, 2023, in the total amount of \$8,124,216.41.
- \* 4. It was recommended, and I move to approve to approve pay for a Butler Inclined Platform Lift up to \$29,490.00 to replace the current broken Inclined Platform Lift, by December 31, 2023.
- \* 5. It was recommended, and I move to approve HealthWest to approve signing single case agreements with various out of network hospitals in the amount of \$103,306.00 for psychiatric inpatient stays for HealthWest consumers.
- \* 6. It was recommended, and I move to approve HealthWest to approve HealthWest Board of Directors to accept the inpatient, partial hospitalization, and ECT rates negotiated by Lakeshore Regional Entity with the hospitals listed on Attachment A, effective October 1, 2023 through September 30, 2024.
- \* 7. It was recommended, and I move to approve the HealthWest Board of Director to contract with those FY23 service vendors/providers listed in Attachment A with their individual projected expenditures for the time period effective October 1, 2023 through September 30, 2024.
- \* 8. It was recommended, and I move to approve HealthWest to approve Provider Relief Funds an amount not to exceed \$142,385.31. to providers listed on Attachment A, through funding provided by the LRE.
- \* 9. It was recommended, and I move to approve the authorize HealthWest to approve the projected expenditures for the vendor increases stated above with a total not to exceed \$340,000.00, effective October 1, 2022 through September 30, 2023.

/hb

**HEALTHWEST**

FINANCE COMMITTEE MEETING MINUTES

**Friday, October 20, 2023**

**8:00 a.m.**

**CALL TO ORDER**

The regular meeting of the Finance Committee was called to order by Committee Vice Chair Thomas at 8:01 a.m.

**ROLL CALL**

Committee Members Present: Janet Thomas, Thomas Hardy, Commissioner Marcia Hovey-Wright, Commissioner Charles Nash

Committee Members Absent: Jeff Fortenbacher, Remington Sprague, M.D

Also Present: Rich Francisco, Holly Brink, Shannon Morgan, Gina Post, Brandy Carlson, Brian Speer, Gary Ridley, Melina Barrett, Christy LaDronka, Amber Berndt, Linda Wagner, Tasha Percy, Cyndi Blair, Mickey Wallace, Kim Huey, Justine Belvitch, Chelsea Kirksey, Nate Kennert, Jennifer Hoeker

Guests: Angie Gasiewski, John Weerstra

**MINUTES**

It was moved by Mr. Hardy, seconded by Commissioner Nash, to approve the minutes of the September 15, 2023, meeting as written.

**MOTION CARRIED.**

**ITEMS FOR CONSIDERATION**

A. Approval of Expenditures for August 2023

It was moved by Mr. Hardy, seconded by Commissioner Hovey-Wright, to approve expenditures for the month ending August 31, 2023, in the total amount of \$8,124,216.41.

**MOTION CARRIED**

B. Monthly Report from the Chief Financial Officer

Ms. Carlson presented the August report, noting an overall cash balance of \$4,076,207.53 as of August 31, 2023.

C. FY23 Actual and Projected Expenditures

Ms. Carlson presented the August report for the Board review.

D. FY23 Retention and Stipend Report

Ms. Carlson presented the FY23 Retention and Stipend report for the Board review.

**E. Authorization to Approve Butler Inclined Platform Lift**

It was moved by Mr. Hardy, seconded by Commissioner Hovey-Wright, to approve pay for a Butler Inclined Platform Lift up to \$29,490.00 to replace the current broken Inclined Platform Lift, by December 31, 2023.

**MOTION CARRIED**

**F. Authorization to Approve Single Case Agreements with Hurley Medical Center and Heartland Center for Autism**

It was moved by Commissioner Hovey-Wright, seconded Mr. Hardy, to authorize HealthWest to approve signing single case agreements with various out of network hospitals in the amount of \$103,306.00 for psychiatric inpatient stays for HealthWest consumers.

**MOTION CARRIED**

**G. Authorization to Approve Inpatient, Partial Hospitalization, and ECT Rates**

It was moved by Mr. Hardy, seconded Commissioner Nash, to authorize the HealthWest Board of Directors to accept the inpatient, partial hospitalization, and ECT rates negotiated by Lakeshore Regional Entity with the hospitals listed on Attachment A, effective October 1, 2023 through September 30, 2024.

**MOTION CARRIED**

**H. Authorization to Approve Continuation of Contracting with FY23 Service Vendors / Providers**

It was moved by Commissioner Nash, seconded by Commissioner Hovey-Wright, to authorize the HealthWest Board of Director to contract with those FY23 service vendors/providers listed in Attachment A with their individual projected expenditures for the time period effective October 1, 2023 through September 30, 2024.

**MOTION CARRIED**

**I. Authorization to Approve Providing Provider Relief Funds**

It was moved by Mr. Hardy, seconded by Commissioner Hovey-Wright, to authorize HealthWest to approve Provider Relief Funds an amount not to exceed \$142,385.31. to providers listed on Attachment A, through funding provided by the LRE.

**MOTION CARRIED**

**J. Authorization to Approve Increased Projected Contract Expenditures**

It was moved by Mr. Hardy, seconded by Commissioner Hovey-Wright, to authorize HealthWest to approve the projected expenditures for the vendor increases stated above with a total not to exceed \$340,000.00, effective October 1, 2022 through September 30, 2023.

**MOTION CARRIED**

**OLD BUSINESS**

There was no old business.

**NEW BUSINESS**

There was no new business.



## **COMMUNICATIONS**

There was no communication.

## **DIRECTOR'S COMMENTS**

Rich Francisco, Executive Director, provided his Director's Report:

- I just wanted to commend Brandy and the hard work that the Finance team and provider network team is doing I have been asking for quite a bit as far as data and improvements. Some of the many projects that they have managed to accomplish in a short time that I have been here are numerous:
  - Adjusting board reports, fulfilling data requests
  - Starting the budget meetings with each of the teams and programs. Providing a standard report so that directors are aware of their financial status on a monthly basis.
  - Working on finalizing the SCA and the integration with BSA and the county system.
  - Procuring Attendance on Demand for a new timeout system that aligns more with SCA requirements.
  - Procuring Contract Logix which will streamline the work they are doing for contract management.
  - Taking on the management of CMHSP certification via the BH CRM for MDHHS.
  - IN addition to of all this, they have managed to get contracts renewed, on their way to finalizing closing the books, and at the same time preparing for the next financial audit which is starting soon. They have also sustained continued operation processing claims and ensuring our providers are getting paid and resolving issues with providers via regular meetings.
- LRE update: We are still waiting for the final budget/revenue report from the LRE. They received the final rates from the LRE last September 25<sup>th</sup>. This is important for HealthWest because this allows us to make some decisions important decisions for our budget this year. I did follow up again with an email to the LRE executive director and requested a status of the report. Other regions, we have reached out to have already provided this to their CMHs.
- This coming week is also the CMHA Fall conference. I look forward to seeing some of the board members there. There will be over 675 attendees.

## **AUDIENCE PARTICIPATION**

There was no audience participation.

## **ADJOURNMENT**

There being no further business to come before the committee, the meeting adjourned at 8:39 a.m.

Respectfully,

Janet Thomas  
Committee Vice Chair

JT/hb

**PRELIMINARY MINUTES**  
**To be approved at the Finance Meeting on**  
November 9, 2023

## REQUEST FOR HEALTHWEST BOARD CONSIDERATION AND AUTHORIZATION

<b>COMMITTEE</b> Full Board	<b>BUDGETED</b> X	<b>NON BUDGETED</b>	<b>PARTIALLY BUDGETED</b>
<b>REQUESTING DIVISION</b> Provider Network Management	<b>REQUEST DATE</b> October 27, 2023	<b>REQUESTOR SIGNATURE</b> Brandy Carlson, Chief Financial Officer	
<b><u>SUMMARY OF REQUEST (GENERAL DESCRIPTION, FINANCING, OTHER OPERATIONAL IMPACT, POSSIBLE ALTERNATIVES)</u></b>			
<p>HealthWest Board authorization is requested to approve the payment of EOB 4392 to Moonyeen Lincoln (Rocking Horse Ranch). This expense was previously approved for FY23, but the County is requesting approval for the check to be disbursed, as HealthWest is over budget as a whole. The total expense for EOB 4392 is not to exceed \$7,440.70.</p>			
<b><u>SUGGESTED MOTION (STATE EXACTLY AS IT SHOULD APPEAR IN THE MINUTES)</u></b>			
I move to authorize the approval of EOB 4392 to Moonyeen Lincoln with a total not to exceed \$7,440.70.			
<b>COMMITTEE DATE</b> 10/27/2023	<b>COMMITTEE APPROVAL</b> _____ Yes    _____ No    _____ Other		
<b>BOARD DATE</b> 10/27/2023	<b>BOARD APPROVAL</b> _____ Yes    _____ No    _____ Other		

## REQUEST FOR HEALTHWEST BOARD CONSIDERATION AND AUTHORIZATION

<b>COMMITTEE</b> Full Board	<b>BUDGETED</b> X	<b>NON BUDGETED</b>	<b>PARTIALLY BUDGETED</b>
<b>REQUESTING DIVISION</b> Administration	<b>REQUEST DATE</b> October 27, 2023	<b>REQUESTOR SIGNATURE</b> Kelly Betts, Customer Service Specialist	
<b>SUMMARY OF REQUEST (GENERAL DESCRIPTION, FINANCING, OTHER OPERATIONAL IMPACT, POSSIBLE ALTERNATIVES)</b>			
<p>HealthWest Board authorization is requested to approve the changes to the HealthWest Consumer Advisory Committee members as suggested below.</p> <p>Per Policy: 01-007, the Consumer Advisory Committee shall consist of nine (9) to twelve (12) members defined as follows:</p> <ol style="list-style-type: none"> <li>1. Inaugural Persons shall be appointed to the CAC by HealthWest Board. Subsequent <b><u>CAC Members shall be recommended by the CAC and appointed by the HealthWest Board.</u></b></li> <li>2. A person who resides or is employed within Muskegon County.</li> <li>3. A person who shall have the interest, time, and energy to promote the development and/or improvement of mental health, developmental disability, and substance abuse services in Muskegon County.</li> <li>4. The CAC shall make every effort to ensure that its membership represents the populations served by HealthWest in equal proportions.</li> </ol> <p><b>The Consumer Advisory Committee Facilitators would like to have the following members appointed to the Consumer Advisory Committee:</b></p> <ol style="list-style-type: none"> <li>1. John Weerstra – Primary</li> </ol> <p><b>The Consumer Advisory Committee Facilitators would like to have the following members removed from the Consumer Advisory Committee:</b></p> <ol style="list-style-type: none"> <li>1. Christopher Ware - Primary</li> <li>2. Darcy Donat - Primary</li> <li>3. Eric Johnson - Primary</li> </ol> <p>Per Policy: 01-007, the Consumer Advisory Committee Terms:</p> <ol style="list-style-type: none"> <li>1. Three (3) unexcused absences in a calendar year will result in termination of membership from the CAC.</li> </ol>			
<b>SUGGESTED MOTION (STATE EXACTLY AS IT SHOULD APPEAR IN THE MINUTES)</b>			
I move to authorize and approve the changes to the HealthWest Consumer Advisory Committee members, effective October 27, 2023.			
<b>COMMITTEE DATE</b> 10/27/2023	<b>COMMITTEE APPROVAL</b> _____ Yes    _____ No    _____ Other		
<b>BOARD DATE</b> 10/27/2023	<b>BOARD APPROVAL</b> _____ Yes    _____ No    _____ Other		

HWB 16-B

**HEALTHWEST**  
**MEMORANDUM**

**DATE:** October 25, 2023

**TO:** Mark Eisenbarth, Administrator, Muskegon County  
Matt Farrar, Assistant County Administrator, Muskegon County  
Angela Gasiewski, Director of Finance, Muskegon County  
HealthWest Board Members

**CC:** Rich Francisco, Executive Director, HealthWest

**FROM:** Brandy Carlson, Chief Financial Officer, HealthWest

**SUBJECT:** HealthWest Finance Update

As of Tuesday, October 17, 2023, HealthWest went over their Fiscal Year 2023 Budget. The Board approved budget for HealthWest Fiscal Year 2023 is \$88,654,287. I had purposely created a smaller expense budget than we had in our unapproved revenue budget and our approved Lakeshore Regional Entity Spending Plan by \$5,850,996. This was done to account for historic large swings at fiscal year-end and to start to decrease our Medicaid and Healthy Michigan budget to prepare for the end of the Public Health Emergency and individuals losing their Medicaid eligibility; thus our revenue is decreasing.

However, what has happened is that I did not allow room for those historic swings in our approved Board budget to process payments, which is occurring now. Nor did we recognize the need to amend the budget until October, which is too late to amend the fiscal year budget. As of Thursday, October 19, 2023, HealthWest has received \$5,093,326 more in revenue than what was approved in our revenue for the year. We are still expecting more revenue to come into HealthWest through November 30, 2023, for the remainder of Fiscal Year 2023.

With this, HealthWest is now experiencing outstanding payments to providers and vendors of up to \$3,000,000 above and beyond the Board-approved budget. This is creating a delay in payments and will require HealthWest to ask Muskegon County Board of Commissioners for authorization to approve the payments. As you can see, HealthWest does have the money in the bank to do so and does have a motion prepared to go to the County Board of Commissioners Human Services Committee on Tuesday, November 7, 2023. However, we have some small providers who are experiencing financial difficulties in waiting until the end of November to receive their funds for services provided in October 2023.

As of the start of Fiscal Year 2024, HealthWest is putting practices into place to monitor and remedy this in the future. The HealthWest Finance Department now has two individuals fully devoted to monitoring the HealthWest budget and trends in revenue and expenses. HealthWest will make monthly adjustments within the approved Board budget to move line items to the appropriate category. We will monitor Purchase Orders, meet with providers regularly, and make purchase order changes if funds are not utilized as projected. HealthWest Budget Staff will also meet with our Team Leaders to review their internal budgets and monthly expense reports. Quarterly, HealthWest will be seeking budget amendments as needed to right size the budget

based on the revenue trends coming in. Making sure that before September 30th of each year, the budget matches the year-end projections accordingly.

I would also like to point out that HealthWest has received \$13,240,364.69 in prior year revenues in Fiscal Year 2023. This has paid off all Fiscal Year 2018 and 2019 liabilities from the Lakeshore Regional Entity. This also paid a portion of the Fiscal Year 2022 liabilities. As you can see, it has been a very busy year, and while going over budget is not a success, the year as a whole has been very successful, and we are in a much better place today than we were a year ago. My mission is to improve our process every year.



*The Consumer Advisory Committee met on October 11, 2023*

- Committee members request to have a motion for John Weerstra to be added as a member.
- Consumer Advisory Committee facilitator asks that Christopher Ware, Darcy Donat, and Eric Johnson have membership terminated due to three unexcused absences in a calendar year.
- The LRE Community Advisory Newsletter has started sharing encouraging member stories. Tamara Madison was chosen as the Fall Spotlight. The LRE CAC newsletter is attached.
- A member of the Performance Improvement Committee provided an opportunity to brainstorm ways to improve the average number of days from the request for service to the initial assessment.
- Lisa Picard presented information on the L.E.A.D (Law Enforcement Assisted Diversion) team.
- Gary Ridley presented information on HB 4707 – a piece of comprehensive mental health and substance use disorder legislation that would provide real parity for those with commercial insurance for the first time in Michigan.

**Main Office**

376 E. Apple Ave. | Muskegon, MI 49442 | P (231) 724-1111 | F (231) 724-3659

[HealthWest.net](http://HealthWest.net)

# THE **COMMUNITY** ADVISORY NEWSLETTER

Fall 2023



## Community Advisory Panel

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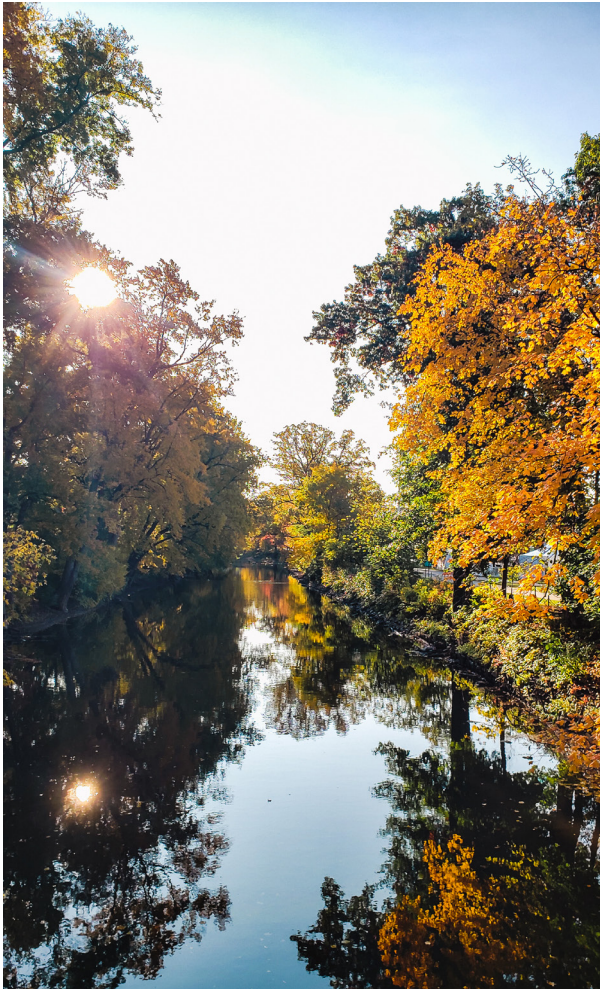
The Lakeshore Regional Entity's **Community Advisory Panel** (CAP) is a group of people who are passionate about the behavioral health system in West Michigan and have partnered with Lakeshore Regional Entity to improve and enhance the quality of these services.

Please take some time to read the wonderful stories inside our **Fall Newsletter** highlighting some of the events, activities and resources available in our West Michigan Community!

We love to share encouraging stories and inspiring artwork from all over West Michigan! If you would like to have your artwork, stories, or poetry featured in a future issue, please send it to **LRE Customer Services: 5000 Hakes Drive, Norton Shores MI, 49441**. You can also email written pieces and pictures to [marih@lsre.org](mailto:marih@lsre.org).







# The LRE Board of Directors

The Lakeshore Regional Entity Board of Directors **meeting is on the 4th Wednesday of each month.** Unless otherwise noted, prior to each Board meeting a Work session is scheduled for 11am. The Board meetings are held in person at the GVSU-Muskegon Innovation Hub, 200 Viridian Dr., Muskegon, MI 49440. Please note, the November meeting is on the 3rd Wednesday, due to the Thanksgiving Holiday.

## Upcoming Board Meetings

**September 27, 2023**

**October 25, 2023**

**November 15, 2023**

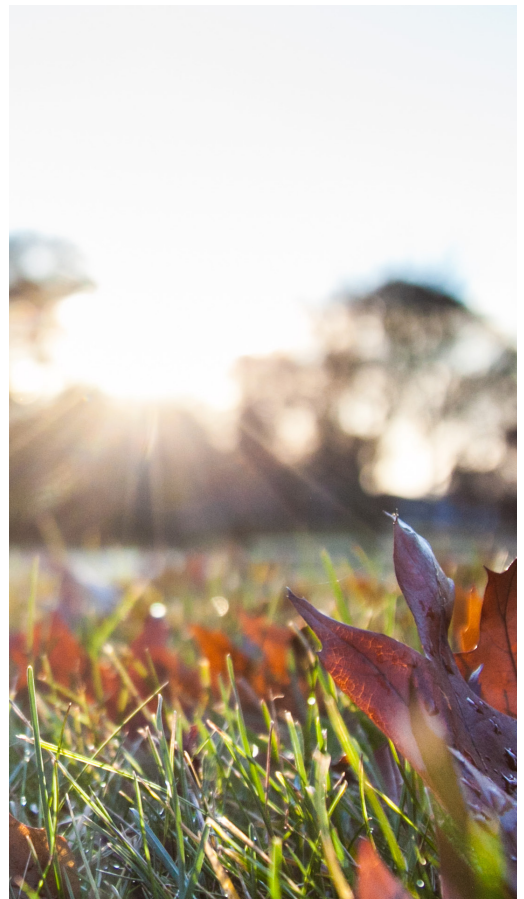
For more information on the LRE Board meetings please visit [www.lсре.org](http://www.lсре.org)

## The LRE Website

For more information on your Consumer rights, please visit [www.lсре.org](http://www.lсре.org). Once there you will be able to:

- [File an Appeal](#)
- [File a Grievance](#)
- [Learn More about the CAP](#)

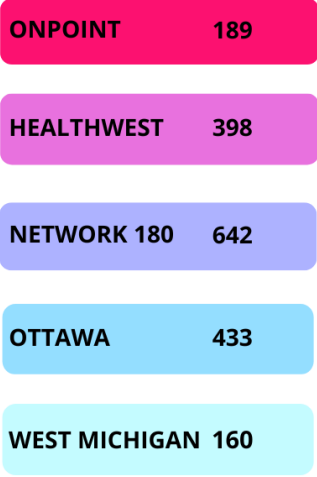
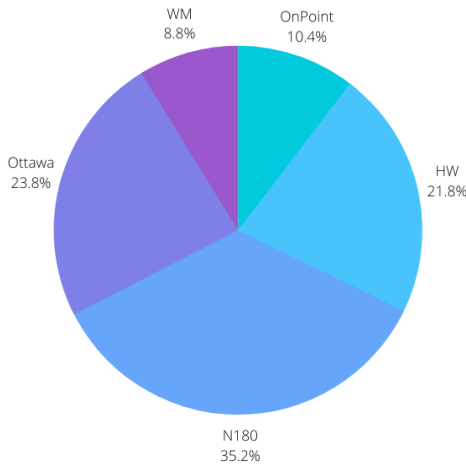
For more information or to talk to our Customer Services specialist, please call 800.897.3301





# Customer Satisfaction Survey Results May 8, 2023 - June 30, 2023

## CMHSP # of Completed Surveys Total: 1822



The **Lakeshore Regional Entity**, in collaboration with our partner CMH's, has created and implemented a revised regional Customer Satisfaction Survey. The data provided in the new survey allowed for an indepth analysis of data not seen on previous versions of the survey. This allowed for the LRE to more clearly identify areas of dissatisfaction within the region.

**LAKESHORE REGIONAL ENTITY**

### Overall

AVERAGE SCORES

CMHSP	ACCESS & AVAILABILITY	LONG TERM SERVICES	QUALITY	OUTCOMES	OVERALL
OnPoint	2.9	3.4	2.2	3.3	2.8
HealthWest	2.9	3.5	2.4	3.4	3.0
Network 180	2.9	3.4	2.3	3.4	2.9
Ottawa	2.9	3.4	2.3	3.4	2.9
West Michigan	2.9	3.6	2.5	3.6	3.1
LRE	<b>2.9</b>	<b>3.4</b>	<b>2.3</b>	<b>3.4</b>	<b>2.9</b>

**LAKESHORE REGIONAL ENTITY**

### Quality

AVERAGE SCORES

CMHSP	CONNECTED TO COMM RES SUP	TREATMENT TEAM ANSWERED QUESTIONS	I FEEL WELCOME	I KNOW HOW TO FILE A GRIEVANCE	I KNOW HOW TO FILE AN APPEAL
OnPoint	2.8	3.2	2.9	0.6	0.7
HealthWest	3.3	3.5	3.5	0.8	0.8
Network 180	3.2	3.2	2.9	0.8	0.8
Ottawa	3.1	3.3	3.2	0.8	0.8
West Michigan	3.4	3.6	3.4	0.8	0.8
LRE	<b>3.1</b>	<b>3.3</b>	<b>3.2</b>	<b>0.8</b>	<b>0.8</b>

**LAKESHORE REGIONAL ENTITY**

### Access & Availability

AVERAGE SCORES

CMHSP	I HAVE OPTIONS	I KNOW THE NUMBER TO CALL	APPTS WORKED	LOCATION APPTS WORKED
OnPoint	3.3	2.8	3.3	3.2
HealthWest	3.2	3.1	3.4	3.3
Network 180	3.3	3.0	3.2	3.3
Ottawa	3.4	2.8	3.4	3.4
West Michigan	3.6	2.9	3.4	3.4
LRE	<b>3.3</b>	<b>2.9</b>	<b>3.3</b>	<b>3.3</b>

**LAKESHORE REGIONAL ENTITY**

### Long Term Services

AVERAGE SCORES

CMHSP	SATISFIED WITH CASE MGR	SATISFIED WITH COUNSELOR	SATISFIED WITH PSYCHIATRICS	SATISFIED WITH SUPPORT COORD	DECIDED MY GOALS
OnPoint	3.2	2.9	2.6	3.3	3.1
HealthWest	3.3	3.2	3.0	3.1	3.4
Network 180	3.4	3.1	3.1	3.4	3.1
Ottawa	3.4	3.4	3.4	3.4	3.1
West Michigan	2.6	2.8	3.3	3.5	3.4
LRE	<b>3.3</b>	<b>3.2</b>	<b>3.2</b>	<b>3.3</b>	<b>3.2</b>

# Community Advisory Panel Fall Spotlight: Tamara Madison

Hello! My name is Tamara Madison and I was diagnosed with a mental illness about five years ago. I had symptoms of a mental illness far before that, but it got to be more noticeable in my mid-twenties. I had a lot of unhealthy coping skills which made my life and behavior spiral out of control. That is when I came in contact with Healthwest. They literally changed my life for the better. I have gotten a psychiatrist, case manager, recovery coach, therapist, and Kelly from customer service as a team that stood behind me. They helped me so much as far as getting me to a healthy state of mind. I am on great medication and I have had the opportunity to be involved in so many wonderful events such as the Walk a Mile, The Suicide Prevention Walk, and The Healthwest Health and Wellness Event. I am now a Board Member of Healthwest, as a consumer. I am also on the Consumer Advisory Panel of Healthwest and LRE. Who would have thought this would be my life five years ago? Who would have thought that my obstacles would turn into my passion? Not me! Yet, here I am. I just want to say thank you to Case Manager Joseph, Dr. Dillon, Recovery Coach Andy, Therapist Jillian, Mari from LRE, and Kelly from Health west for your support, kind words, encouragement, and for listening to me and giving me the tools that I need to survive. I am where I am today because of the wonderful mental health organizations that we have in Michigan. I am honored and appreciative of how they pushed me to become the woman I am today. I love you guys!

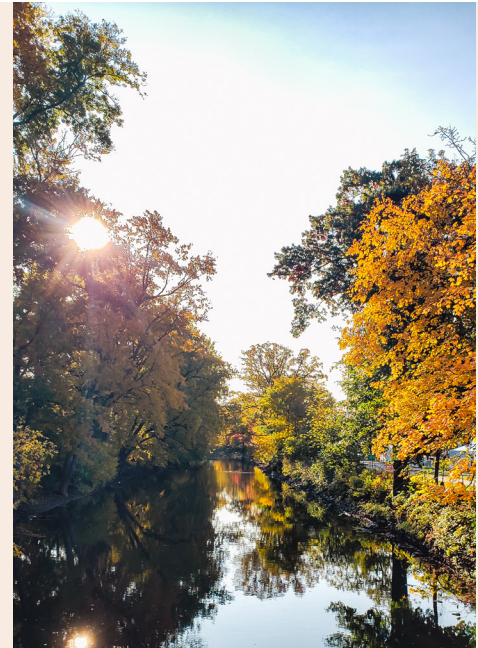


## We Want to Hear From You

We love to share your encouraging stories and inspiring artwork from all over Western Michigan! If you would like to have your artwork, stories, or poetry featured in a future issue, please send it to LRE Customer Services: 1-800-897-3301. You can also email pictures and written pieces to us at [customerservice@lsre.org](mailto:customerservice@lsre.org).

# Autumn Anxiety & Seasonal Affective Disorder (SAD)

As the seasons change from sunny summer afternoons to chilly air and falling leaves, many people are overcome with feelings of depression and anxiety. Many people go through short periods of time where they feel sad or not like their usual selves. Sometimes, these mood changes begin and end when the seasons change. People may start to feel “down” when the days get shorter in the fall and winter (also called “winter blues”) and begin to feel better in the spring, with longer daylight hours.



In some cases, these mood changes are more serious and can affect how a person feels, thinks, and handles daily activities. If you have noticed significant changes in your mood and behavior whenever the seasons change, you may be suffering from seasonal affective disorder (SAD), a type of depression. In most cases, SAD symptoms start in the late fall or early winter and go away during the spring and summer; this is known as winter-pattern SAD or winter depression. Some people may experience depressive episodes during the spring and summer months; this is called summer-pattern SAD or summer depression and is less common (NIMH, 2021). SAD often begins as “Autumn Anxiety”. According to Healthline (2020), autumn anxiety is an annual increase in anxiety some people begin to feel during the fall months. Experts say some of the causes may be due to beginning a new school year, the stress of the approaching holiday season, or possible regret from not having reached desired goals during the summer. Other possible causes frequently cited are: stress of having to make preparations for the coming winter (yard work, winterization, heat bills), seasonal job changes, bad weather and driving conditions, less free time, less exercise due to being outside less, and the afore-mentioned reduction in sunlight.





## How to Cope with Increased **Anxiety/SAD**

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**How do we deal with this increased anxiety? Psychologist Patricia Thornton, PhD, and Dr. Claire Morrison suggest the following:**

1. **Get more light.** Spend as much time outdoors as you can, and consider using a light therapy box.
2. **Exercise every day.** Exercise is key across the board for mental health, every study shows improved mood after exercise!
3. **Change your diet.** Autumn is a great time to think about what you eat. Look forward to your favorite seasonal soups and warm meals you didn't get to enjoy during the summer. Remember to eat plenty of fruits and vegetables and drink plenty of water.
4. **Start something new.** Autumn is the time for fresh starts, and a new season. Think of it as a time to declutter, tidy the house, and reorganize. Find a new hobby or pick up an old one!
5. **Reframe your outlook.** Rather than associating autumn with negative experiences and stress, try to look at it differently. "Humans are very focused on loss. In this case, the loss of sunlight and being outside, so think about what you can do about being inside. Rather than thinking, 'it's cold and I'll be stuck inside,' try to think of being inside as cozy," says Thornton.
6. **Seek out professional help.** Cognitive behavioral therapy (CBT) has been shown in research to effectively treat anxiety and SAD. If you feel overwhelmed, Morrison says to see your doctor. "Don't wait until things get really bad, if you start to feel anxious and depressed take prompt action to improve your mood." (Cassata, 2019).





[Date]

[Name]

The HealthWest Board of Directors would like to take this opportunity to recognize your outstanding services provided to our consumers and the community on behalf of HealthWest.

Your efforts make a difference and do not go unnoticed. We are grateful to have employees like you representing HealthWest and displaying our Mission, Vision, and Values.

Thank you for all you do and for leading by example!

Sincerely,

Janet Thomas  
Board Chair



## HealthWest Employee Recognition / Feedback from Consumers:

- **Consumer reached out to Customer Service via phone:**

*“Kevin is an A++++”, “He is helpful in this village!”*

- **Guardian reached out to Customer Service via email:**

*“We had to call the crisis team to the middle school for my son Thursday. Oh, my goodness, they were amazing”.*

*Specific name of worker-Brook Archer*

*“Then a couple of days ago I was able to get him to HealthWest for the evaluation intake. They were absolutely amazing also”*

*Specific name of worker – Kassandra Gansen*

- **During a customer service phone call:**

*“A positive comment was made regarding Katie Lipski. This person chose to continue with treatment elsewhere but wanted to be sure we knew that Katie did a great job. I wanted to pass this along. Thank you, Katie, for your work with consumers.*

*“Katie was amazing with me”.*

- **Voicemail to customer service phone call:**

*Hi, I was just coming home from Coffee with Kevin today and I feel like I should just let you guys know how much that is appreciated and how helpful it is. I've had grandsons in the healthcare and mental health services with HealthWest for several years and I can't tell you how alone sometimes we feel. There are just so many issues that parents face and it is so nice to be able to go someplace and sit down with people who understand. And people who can help you find resources that you need, give you advice, and just listen to you without judgment. It's really important and I just want to thank you guys for having that Coffee with Kevin. Thank you very much.*

### Main Office

376 E. Apple Ave. | Muskegon, MI 49442 | P (231) 724-1111 | F (231) 724-3659

[HealthWest.net](http://HealthWest.net)



HealthWest

Human Resources Team

**HealthWest HR philosophy:** We serve our staff using the same values in which the organization services our clients.

We treat individuals in a manner that is:

- Person Centered
- Strengths-Based
- Culturally Responsive
- Trauma-Informed
- Evidence-Informed
- Aligned with Motivational Interviewing

## Our Values

### DIVERSITY

We value differences and recognize our unique experiences and perspectives make us stronger and more effective.

### INTEGRITY

We value differences and recognize our unique experiences and perspectives make us stronger and more effective.

### EXCELLENCE

We work to be the very best in our field and embrace innovation, creativity and continual improvement.

### DEVELOPMENT

We hold ourselves accountable and operate with fairness and honesty.





Treating our staff with the same person-centered approach as our individuals in services is crucial; happy staff offers the opportunity for improved community service.



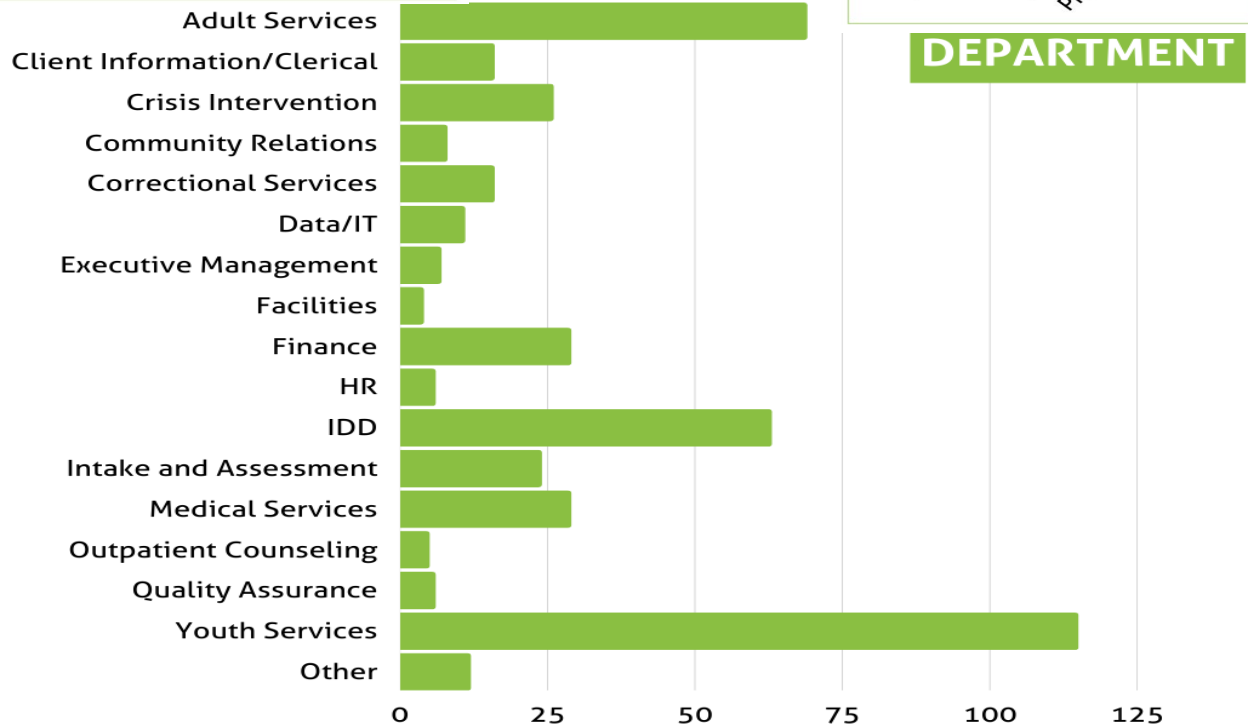


## HealthWest Human Resources Staff

HR Manager	Susan Plotts
Sr. HR Coord	Kim Huey
HR Coordinator	Laurie Johnson
Staff Support Spec.	Chelsea Kirksey
Credentialing Spec.	Amber Berndt
HR Assistant	Cindy Ballew
HR Assistant	Kathy Fremd
HR Assistant	Barb Carriere

## Muskegon County Human Resources

HR Director	Kristen Wade
HR Manager	Sara Hough
HR Supervisor	Crystal Brown
HR Specialist	Sue Deuling
HR Analyst	Elizabeth Colvin
Risk Mgmt Coord	Karen Mendham
Benefits Analyst	Anne James
HR Generalist	Lyric Kendra





# Meet the Team



# POSITION MANAGEMENT

## Kim Huey

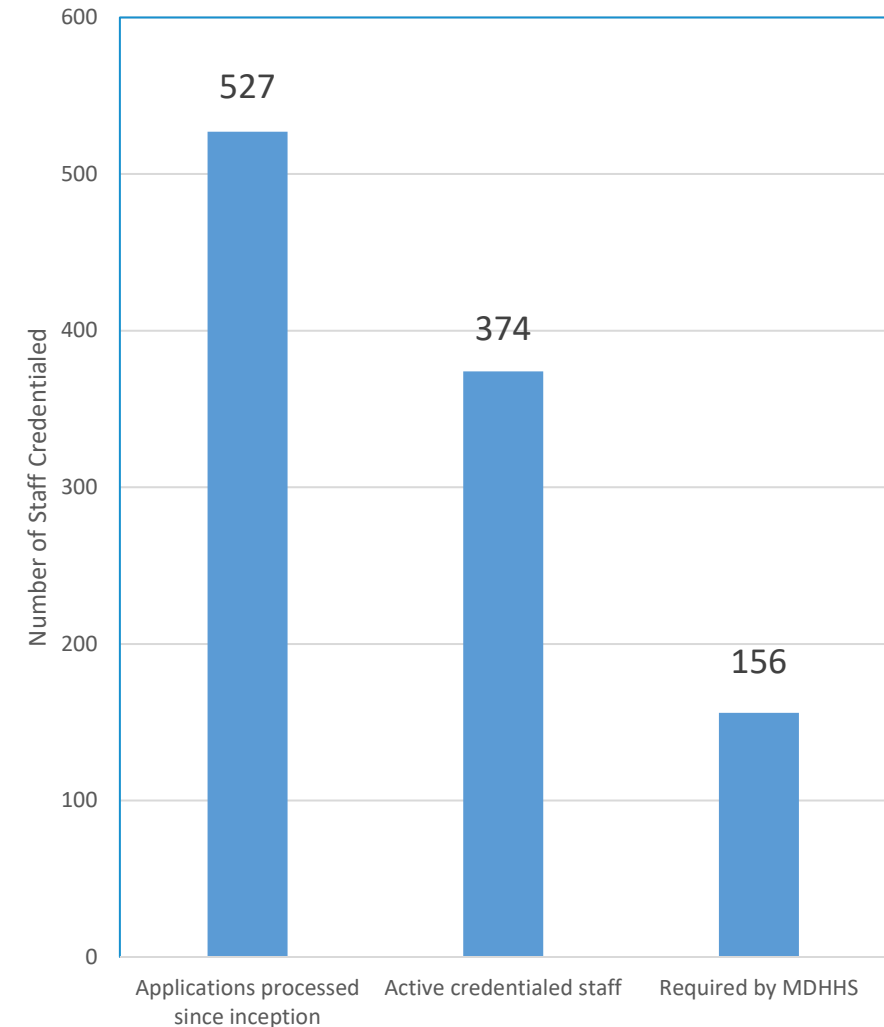
- Positions:
  - 580 positions to track - 430 filled positions and 150 vacant & approved to fill
- Manages the Personnel Requisition Process
- Ensures staff are assigned the correct funding accounts and cost centers
  - 40+ Funding Accounts/Cost Centers      38 Grants & other funding accounts
- Maintains staff Electronic Health Record Accounts in the Latitude 43 system
- Maintains record of staff supervisors, teams, and locations
  - 10 building locations, 5 School district locations, 3 police department locations
  - 70 Hiring managers & 62 Teams to support
- Processes Recommendations for Hire
- Assists with FMLA, ADA and employee injuries
- Assists with managing staff incentive programs
- Special projects and reporting

# CREDENTIALING

## Amber Berndt

To ensure staff meet job description & Medicaid Provider Qualification Requirements and be appropriately qualified and competent to provide covered services.

- Human Resources Credentials and re-credentials HealthWest direct service staff as well as DCO and independent contractors.
- Must stay in compliance with Universal Credentialing requirements
- Report credentialed staff to the LRE
- We must successfully pass credentialing site reviews conducted by MDHHS and the LRE. Overall, HealthWest scored 96.0% for the Credentialing and Training audits, which is an increase of 5.9% over FY22. LRE commends HealthWest for its credentialing and training remediation efforts in FY22.







# RECRUITMENT

Laurie Johnson

## Recruiting and Onboarding

- Supports 70 Hiring managers
- Manages our Online Hiring Center and applicant pools
- Screens applicants and conducts values-based screening interviews
- Ensures that all applicants receive a communication in response to their application
- Schedules interviews
- Assists applicants with questions
- Attends recruitment & hiring events
- Relationship building activities with colleges and universities
- Manages TriShare Childcare Program
- Conducts new employee orientation



# RECRUITMENT

Laurie Johnson

## Internship Coordination

**44 Internship Placements**

8 former masters level interns hired into permanent positions in fiscal year 2023

## 19 Post Secondary Partnerships

Muskegon Community College

Cornerstone University

Western Michigan University

Central Michigan University

Walden University

Grand Canyon University

Ball State University

Point Park University

Cedarville University

State of Michigan Health Care Worker Certification

Baker College

Ferris State University

Grand Valley State University

Michigan State University

Spring Arbor University

Louisiana State University

Indiana Wesleyan University

Florida Institute of Technology

Ross Medical



# RECRUITMENT

Laurie Johnson

## Recruitment Outreach

### CAREER FAIR UNIVERSITY VISITS:

Aquinas College

Central Michigan University

Eastern Michigan University

Ferris State University

Grand Valley State University

Michigan State University

University of Michigan

Western Michigan University

### OTHER RECRUITMENT EVENTS:

HW Recruitment Fair

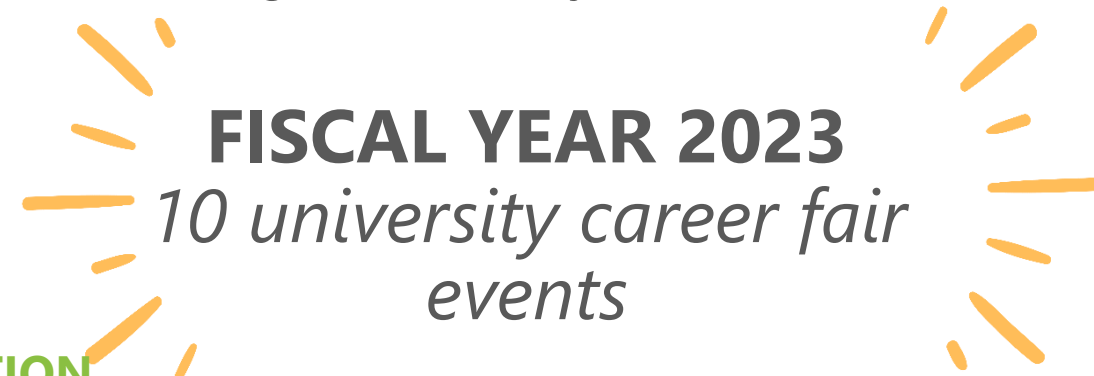
Speaking Engagements

Mock Interviews

Resume Building

University Employer highlights

GVSU HealthWest Campus Visit



**FISCAL YEAR 2023**

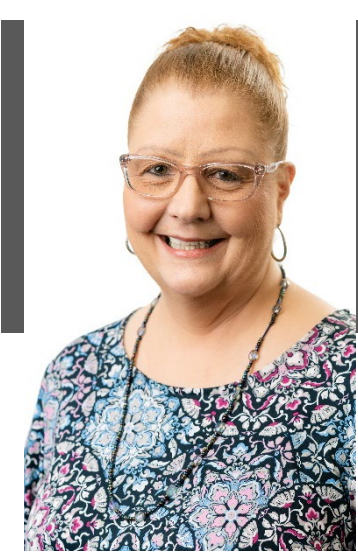
*10 university career fair events*

**STAYING CONNECTED IS CRUCIAL TO THE SUCCESS OF OUR INTERSHIP PROGRAM**

### BOARD PARTICIPATION

- Ross Medical Advisory Board
- Muskegon Community College Medical Assistant Advisory Board
- Baker Registered Nurse Advisory Board





# HIRING & TURNOVER

Susan Plotts

## Fiscal Year 2023

- 175 positions filled in FY 2023
  - 113 new hires
  - 62 internal transfers
- 87 staff separated employment on FY 2023
- Net gain of 26 staff.
- Turnover
  - 20% - as a percent of total employees
  - 77% - as a percent of new hires

### New Hires

2018	-	66
2019	-	87
2020	-	51
2021	-	156
2022	-	117
2023	-	113

### Number of Staff

2018	-	333
2019	-	364
2020	-	348
2021	-	403
2022	-	404
2023	-	430

- We hired 590 staff in six years
- Increased in the number of employees - 97



# STAFF ENGAGEMENT

## Chelsea Kirksey

### **We strive for our staff to:**

**Be recognized and developed for their talents, passions, and abilities**

**Feel valued, respected, and have trusted relationships**

**See their role in supporting the agency and community**

#### New Hire Orientation

- Conducts New Hire Orientation
- New employee check-ins

#### Performance Evaluations

- Monitors performance evaluations, reaches out to supervisors when evaluations are past due, assisting to keep performance appraisals up to date
- Assists supervisors in troubleshooting PERFORM system issues



# STAFF ENGAGEMENT

## Chelsea Kirksey

### Connection & Recognition

- Staff and Family Halloween Party
- Workiversary Cards
- Westies – Staff Recognition Event
- Team and Staff Spotlights in Newsletter
- Building Tours

### Staff Leadership and Engagement Opportunities

- 2023 – 41 committee & workgroup chair & co-chairs

### Staff Development Committee

- Working on creating a seamless and innovative process for staff development based on cultural intelligence framework.

### Progressive Resolution Committee

- Creating a fair and equitable conflict resolution process





# STAFF ENGAGEMENT

## Chelsea Kirksey

### Staff Satisfaction Indicators

#### Satisfaction & Engagement Survey

- September 2021 & May 2023
- Satisfaction and engagement measurements were modeled after national study report by Society for Human Resource Management.

#### Staff Referral Incentive

- 2022 - 72 employee referrals, 61 hired
- 2023 – 36 employee referrals, 30 hired





# HUMAN RESOURCES ASSISTANTS

Kathy Fremd, Cindy Ballew, and Barb

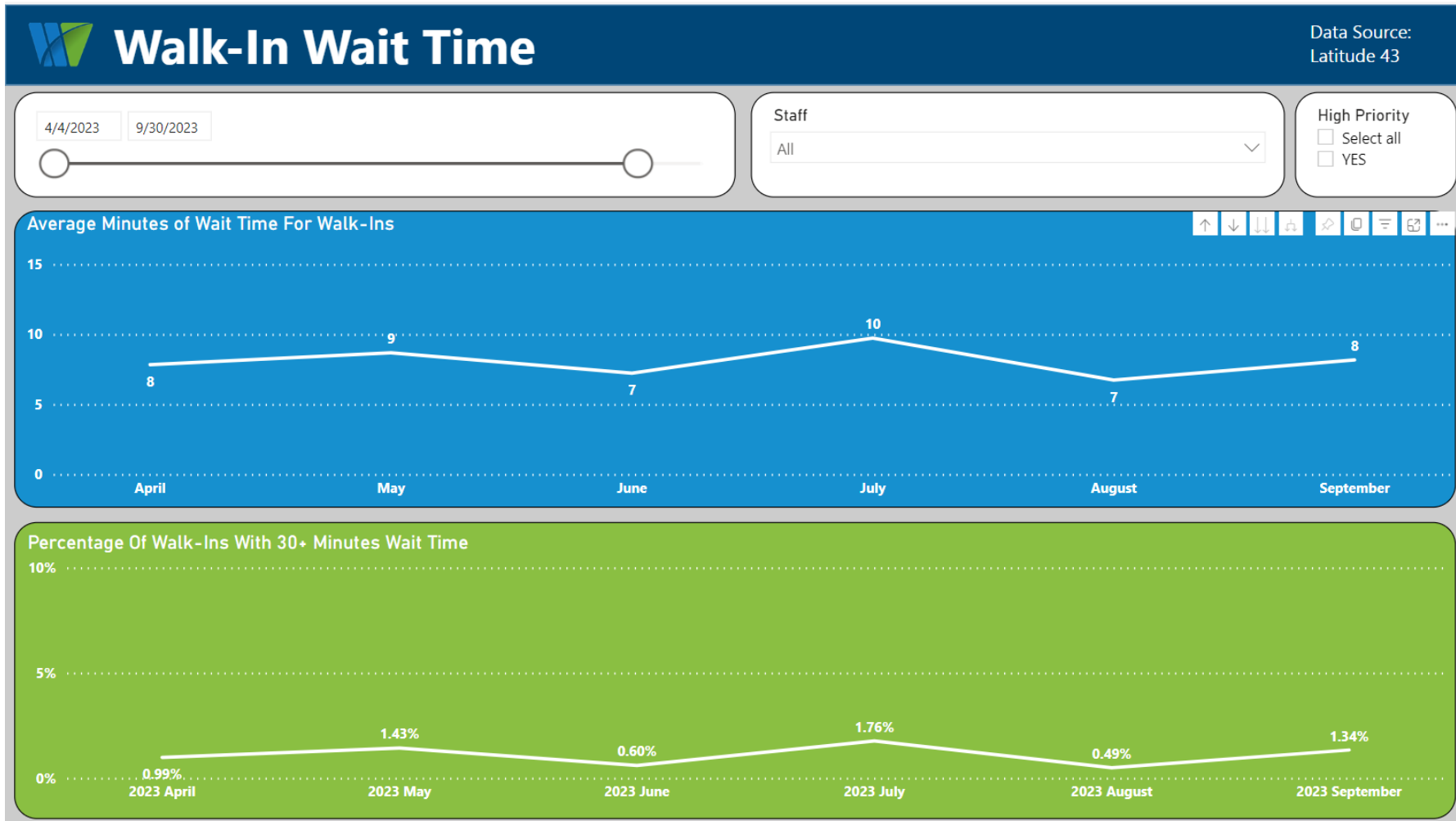
These three staff keep this team organized and our processes flowing well. We are very lucky to have them because they believe in HealthWest and our staff, and their commitment to customer service is second to none.

- Provide clerical support to the HR Team
- Monitor fax line and Human Resources email inbox
- Make Employee ID Badges and maintain badge system
- Maintain electronic personnel files
- Processes new hire, separation, and position change paperwork
- Cindy is full-time and supports HR and the Recipient Rights Team
- Kathy and Barb are both retirees from HealthWest. They both came back to work part-time to assist HR. They bring a high level of skill to their positions along with their expertise and knowledge about HW and CMH.

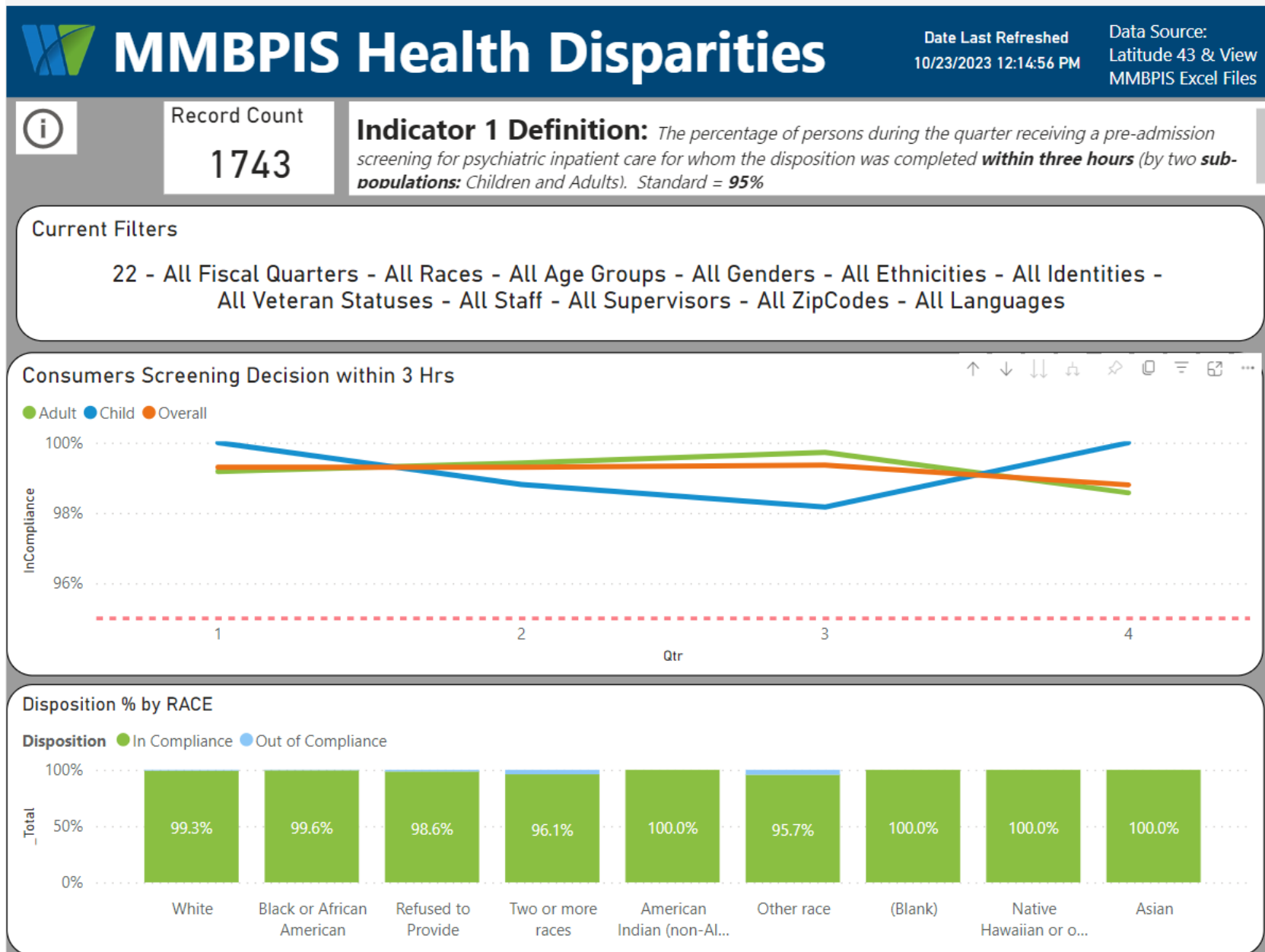


**ACCESS – Individual must be able to access services with ease and in a timely, barrier-free manner.**

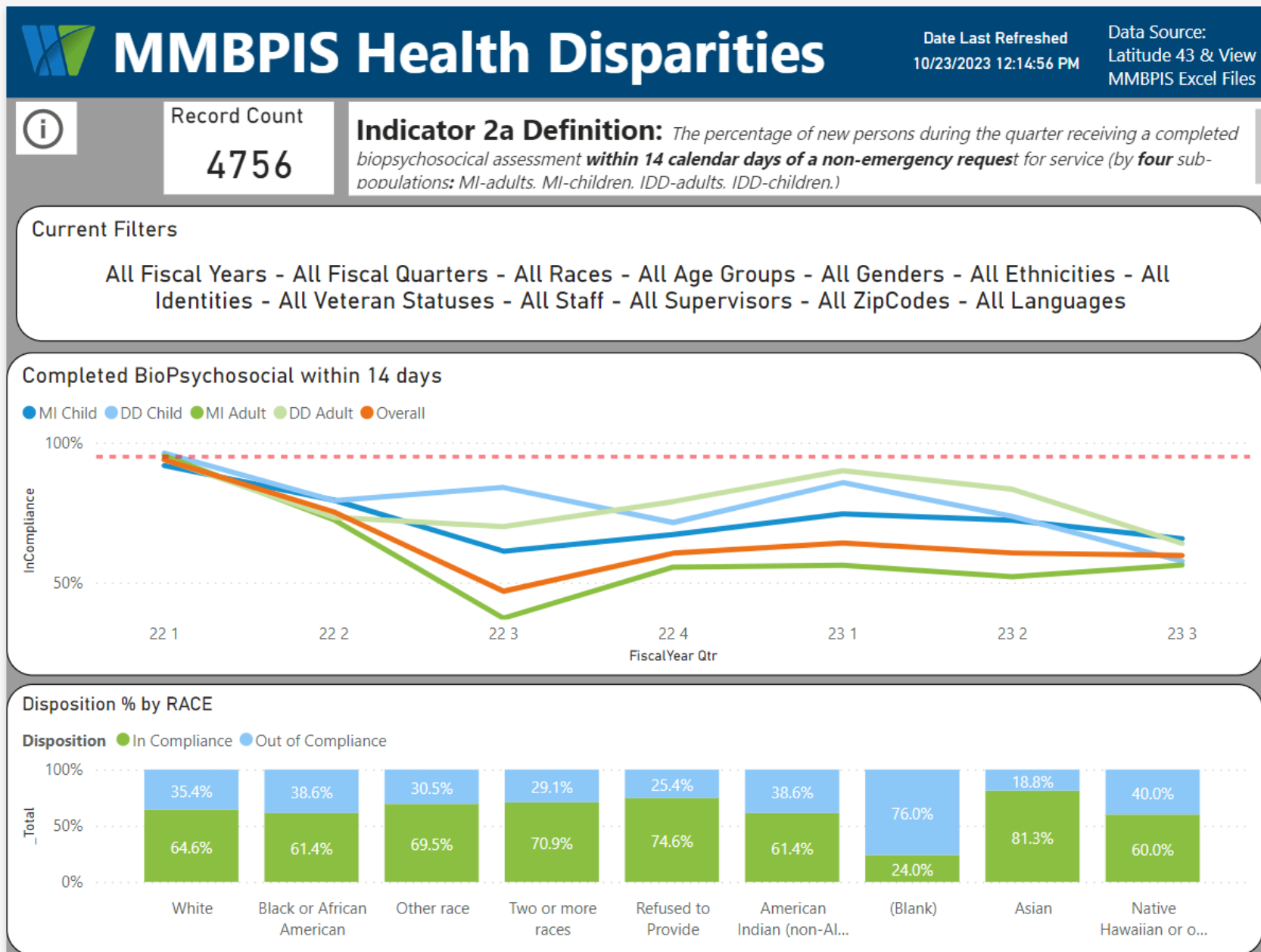
- On-hold wait times for non-emergent requests for screening must not exceed 3 minutes without being offered options for callback or talking with non-professional in the interim: Performance Target 100%
  - Data is not readily available, however it is noted that the process by which calls are handled does not allow for a call to ever be placed on hold. Assuming the process is working correctly, this performance is at 100%.
  
- Individuals with routine needs, must be screened or other arrangements made within 30 minutes: Performance Target 100%



- Determination for inpatient admission must occur within three hours of request: **Performance Target > 95%**

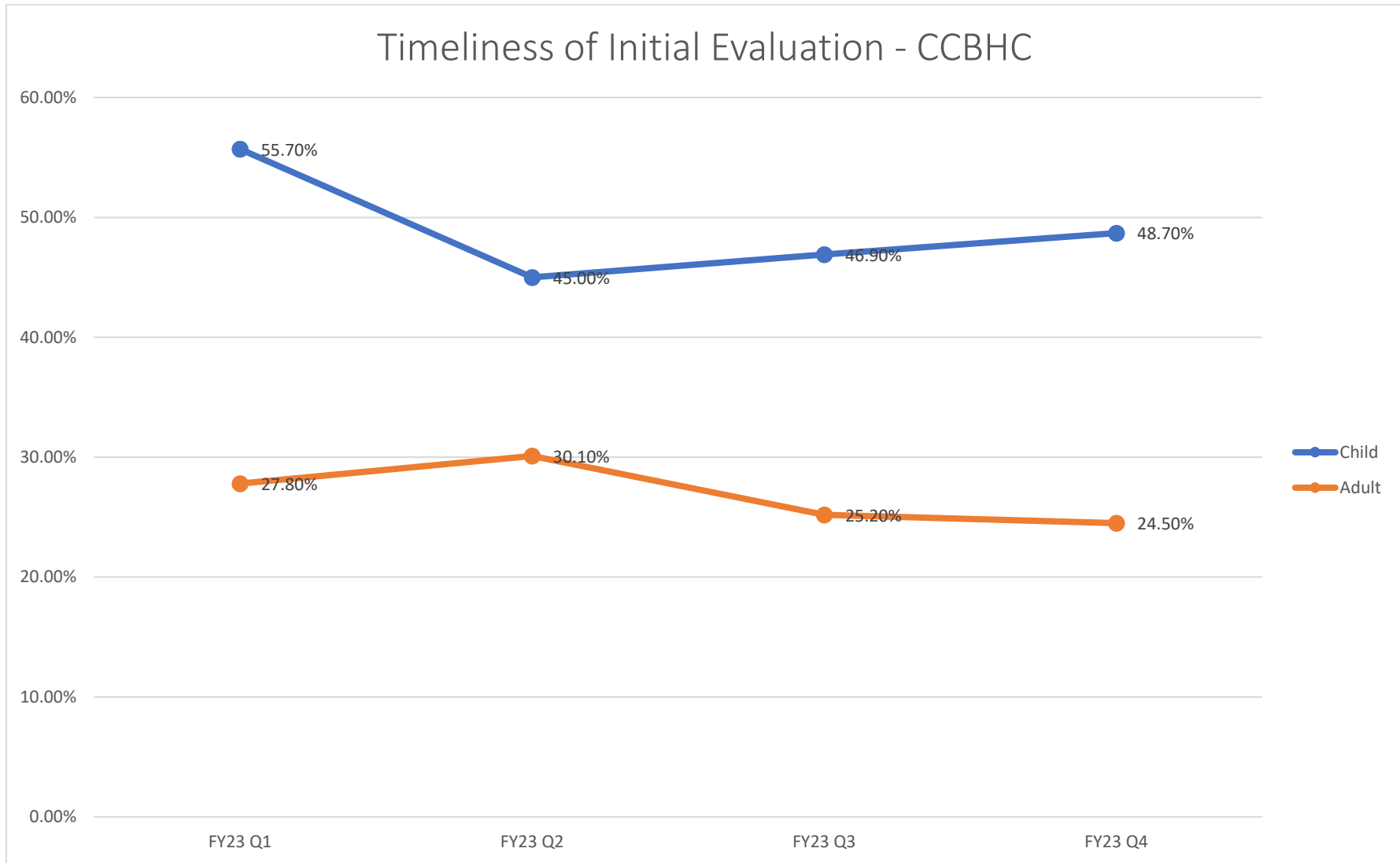


- Initial assessments must occur within 14 days of request for services, Non-CCBHC: Performance Target > 95%

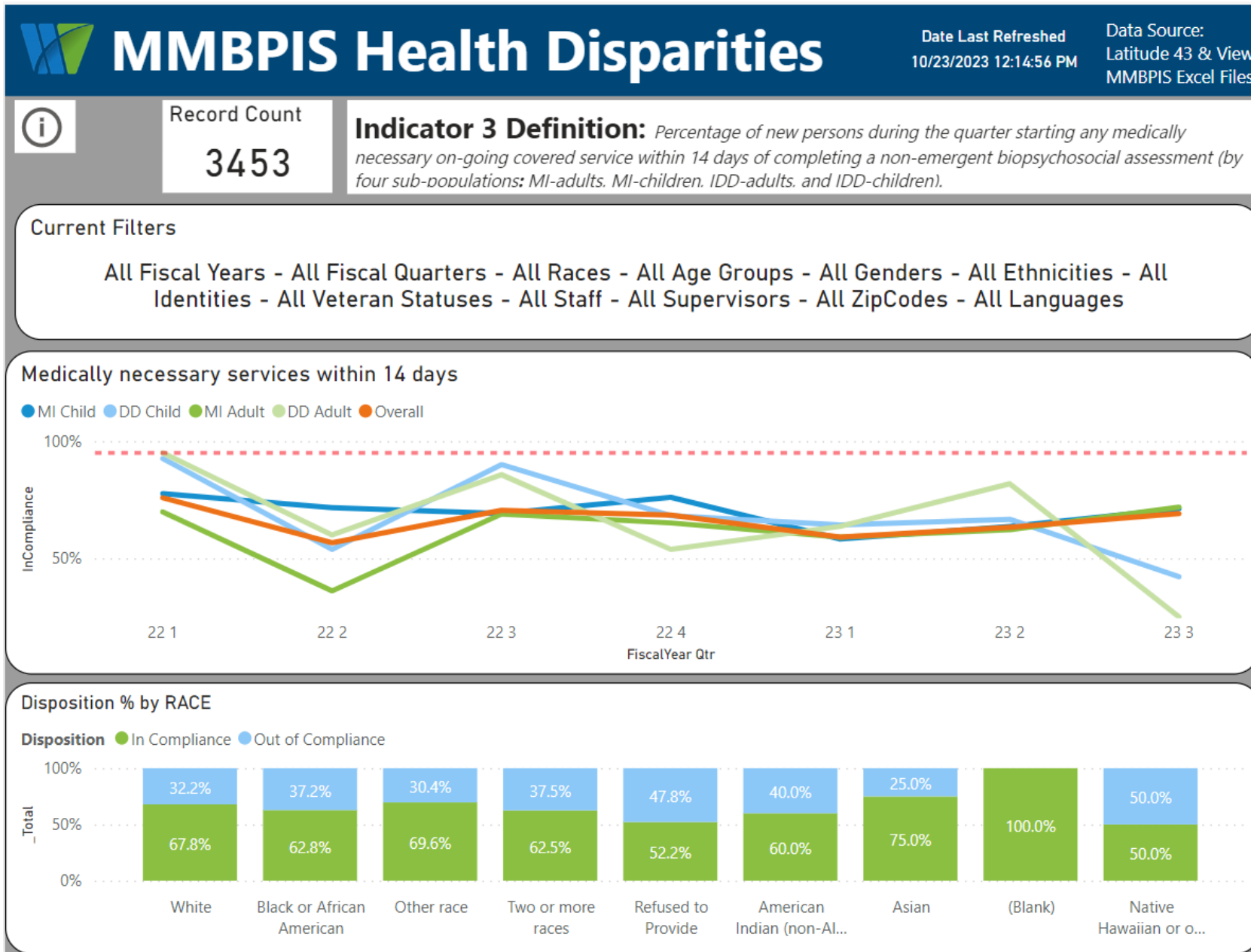




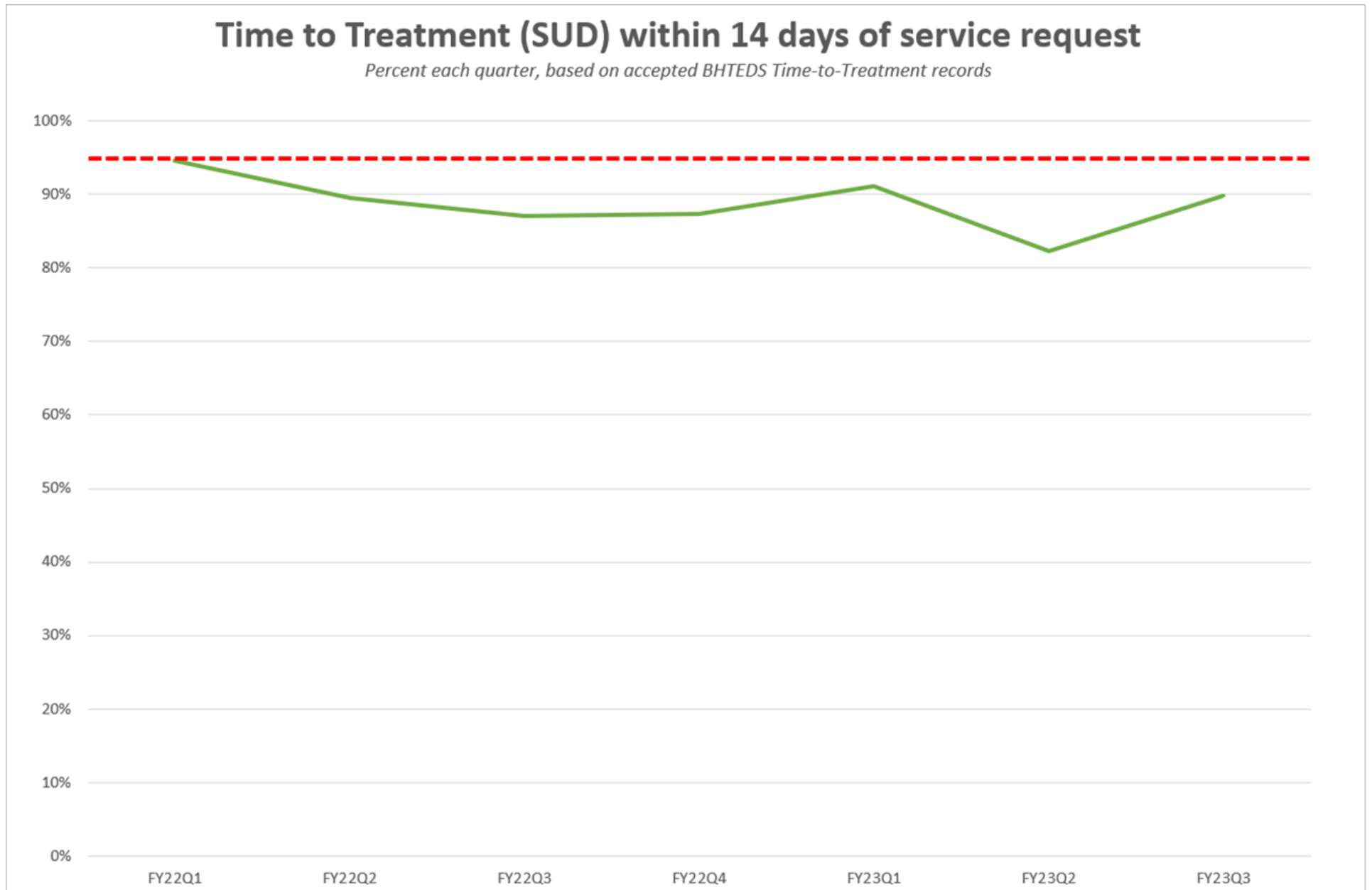
- Initial evaluation must occur within 14 days of request for services, CCBHC: Performance Target > 95%



- First face-to-face service must occur within 14 days of initial assessment (non-SUD): Performance Target > 95%

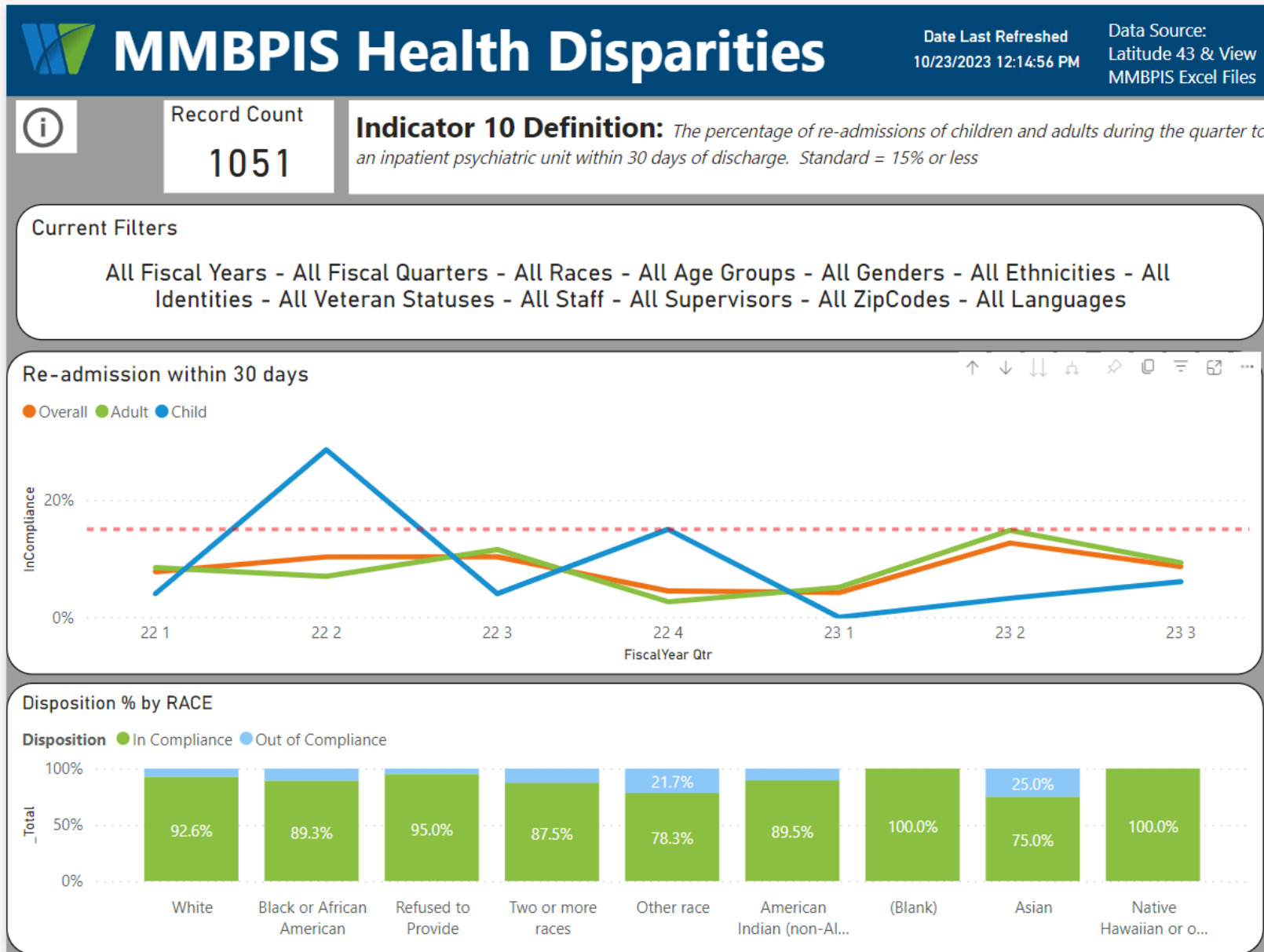


- First face-to-face service must occur within 14 days of request for services (SUD): Performance Target > 95

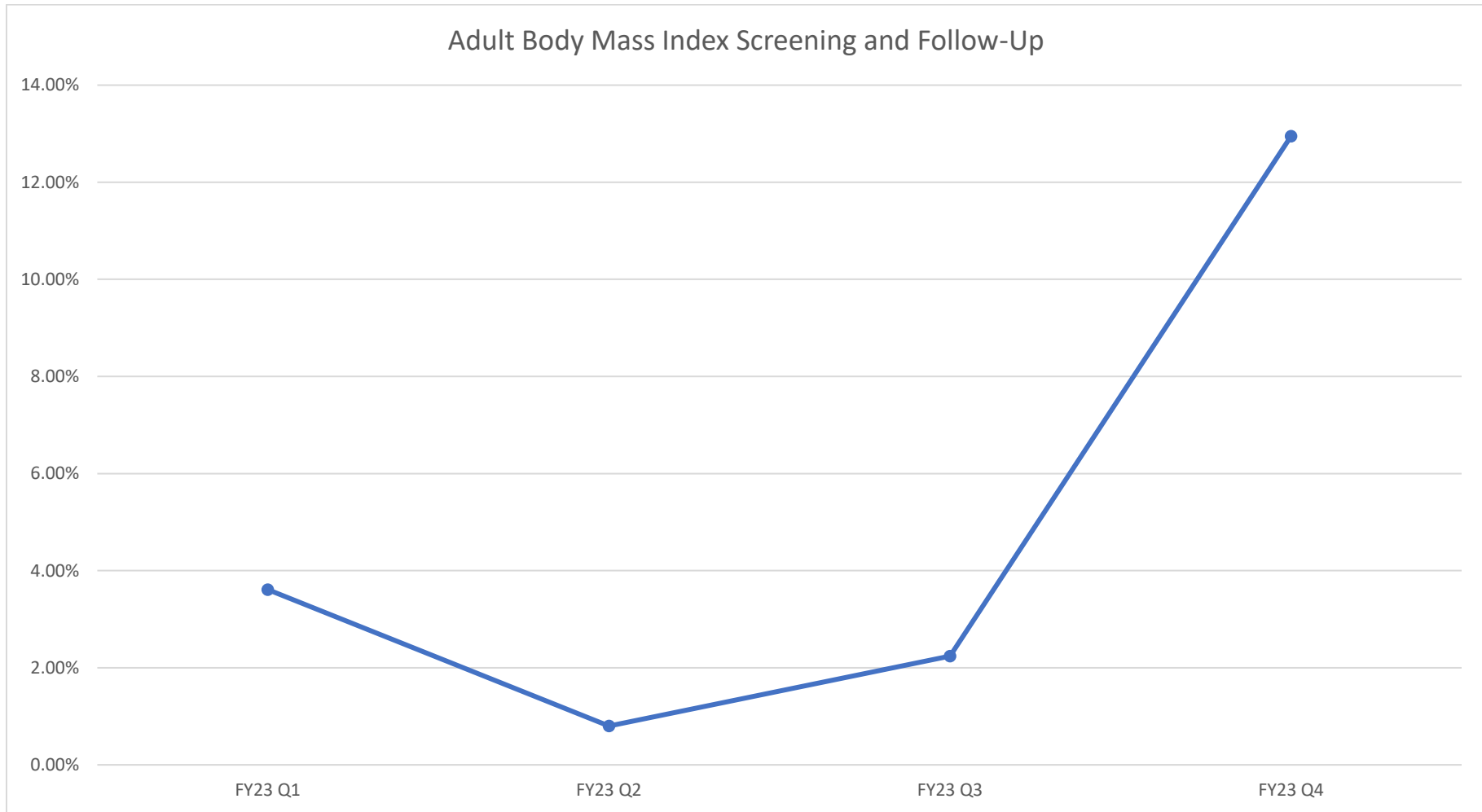


**EFFECTIVENESS – Outcomes and changes experienced by persons served as a result of services.**

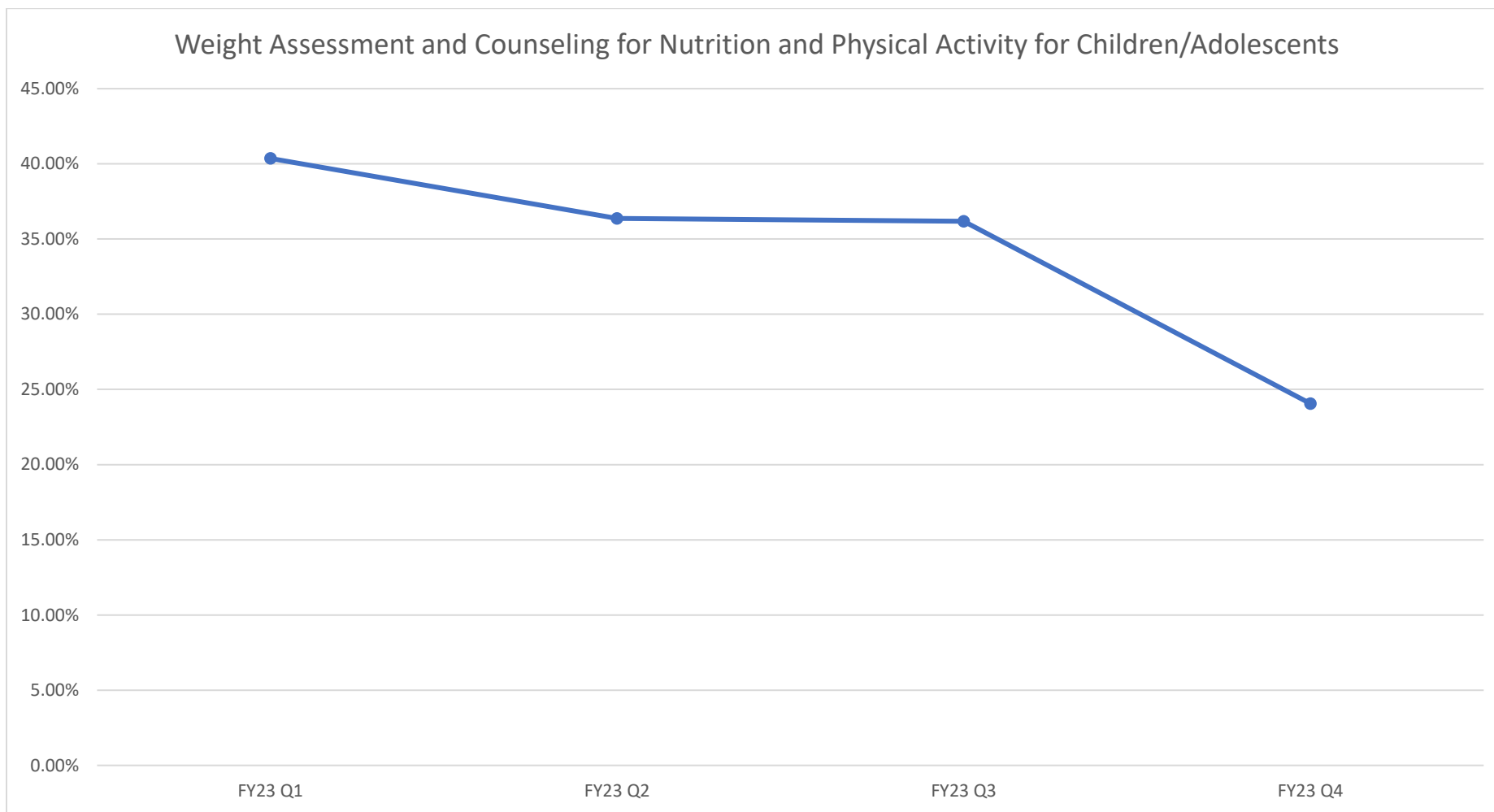
- Individual discharged from an inpatient psychiatric unit will not be readmitted within 30 days of discharge: **Performance Target: < 15%**



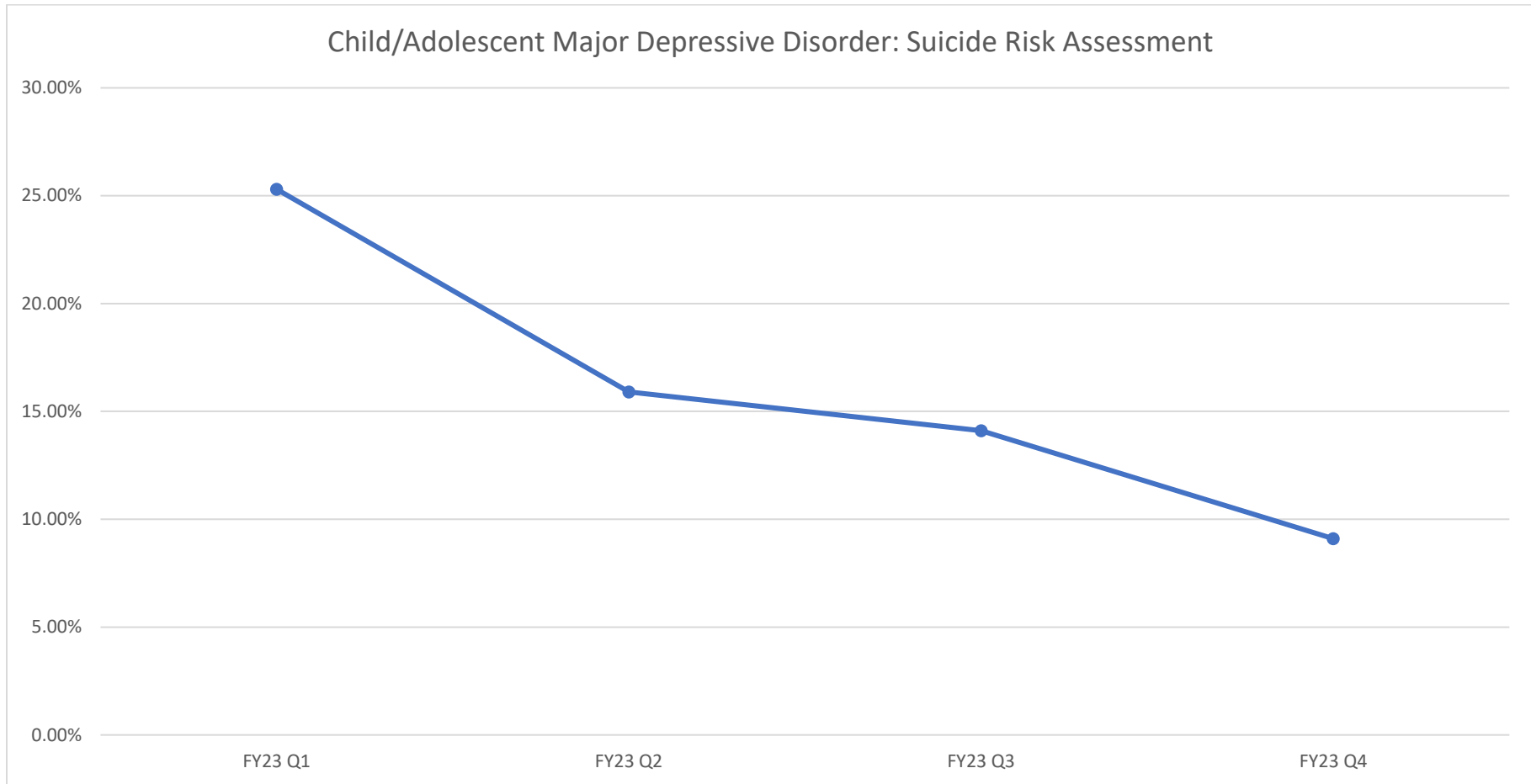
- Percent of consumers 18+ with BMI documented during current encounter or previous 6 months AND body mass index outside normal parameters, with a follow-up plan documented during the encounter or the 6 months prior to the encounter: Performance Target: Not Determined
  - Note – After consulting with the CCBHC Coordinator, there is some concern as to the logic of the data. Often the data shows low numbers, but a chart review reveals documentation to support it occurred.



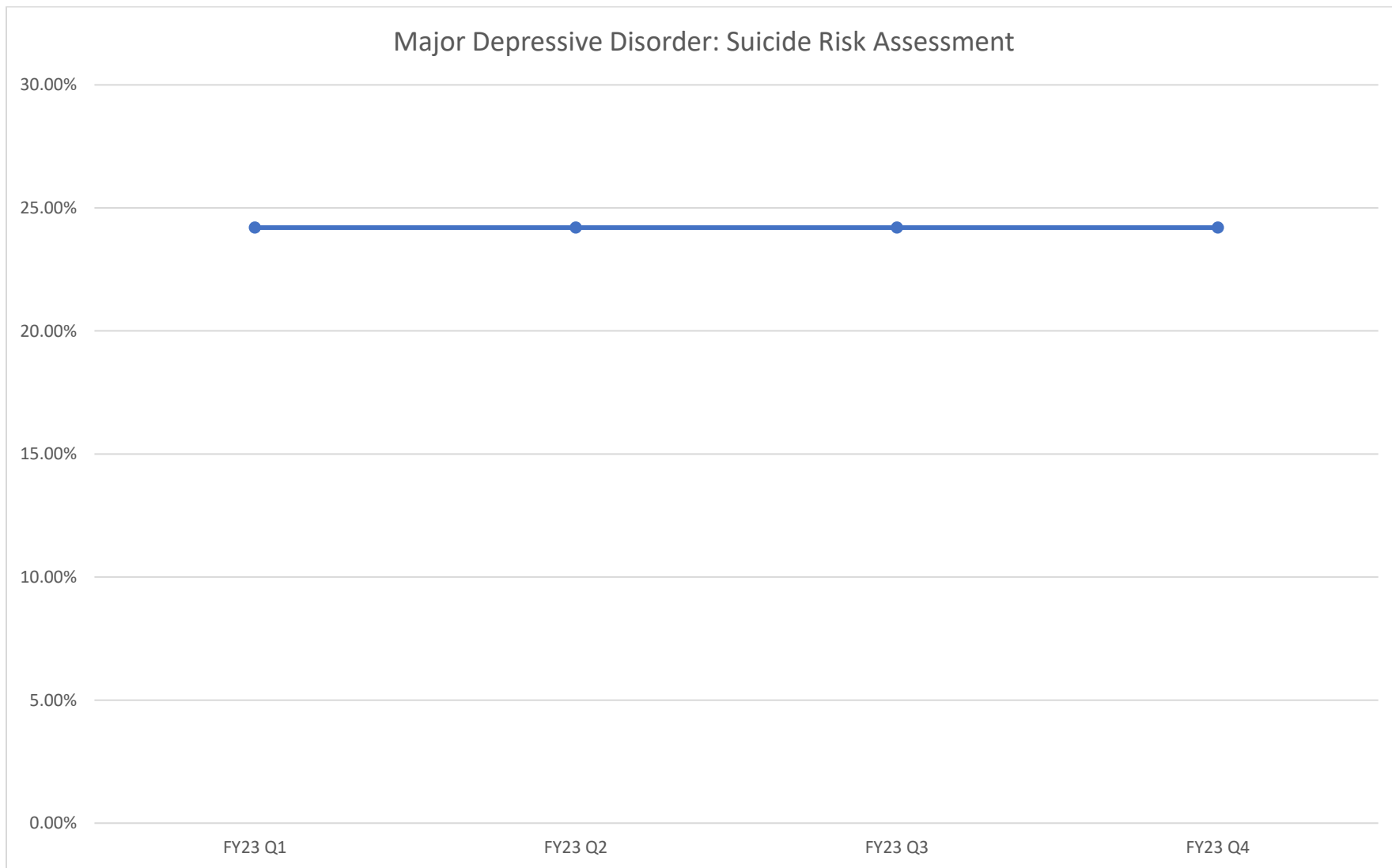
- Children ages 3-17 with PCP or OB/GYN outpatient visit AND evidence of BMI documentation, counseling for nutrition and physical activity during measurement year: Performance Target: Not Determined



- Visits for consumers aged 6-17 with a diagnosis of major depressive disorder with an assessment for suicide risk: Performance Target 23.9%



- Consumers 18+ with a diagnosis of major depressive disorder with a suicide risk assessment completed during a visit in which a new diagnosis or recurrent episode is identified: Performance Target 12.5%
  - Note: Follow up with CCBHC Coordinator indicates it could be possible that this would not vary much from quarter to quarter, due to the requirement period.





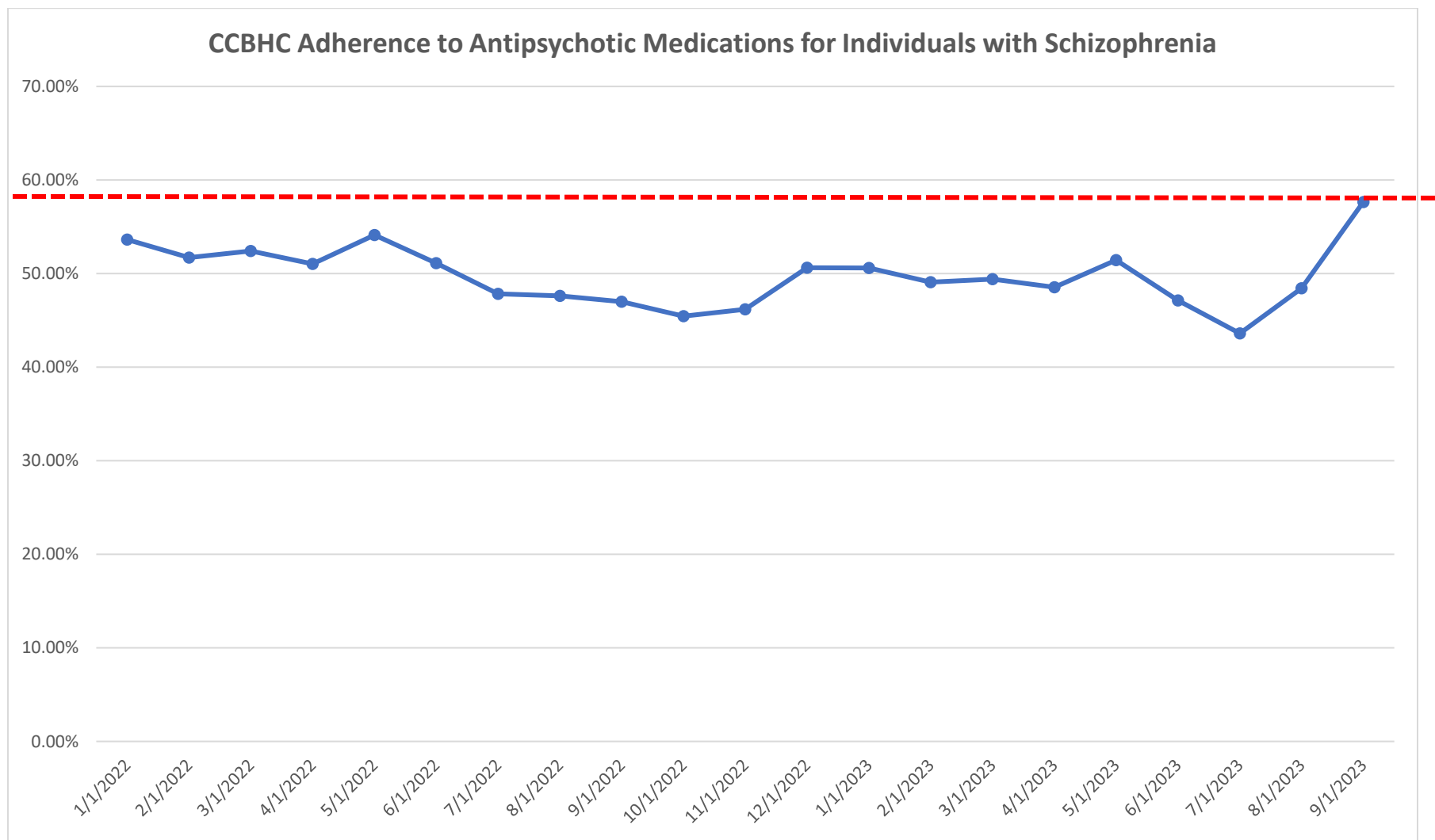
- The following Effectiveness Performance Indicators and Quality Measures identified in the QAPIP showed 0.0% three or more quarters and so are not graphed:
  - Note: After speaking with the CCBHC Coordinator it appears there are concerns with the logic being used by PCE for this report, which have not been addressed yet. Will be addressed following those measures which have quality bonus payments attached to them.

Tobacco Use: Screening & Cessation Intervention (TSC)	Percentage of consumers 18+ who were screened for tobacco use 1+ times within 24 months AND who received cessation counseling intervention if identified as a tobacco user	TBD	Adults	CCBHC	Annual
Screening for Depression and Follow-Up Plan: Age 18 and Older (CDF-AD)	Percentage of consumers 18+ screened for depression during an encounter or 14 days prior to the encounter using an age-appropriate standardized screening tool, and a follow-up plan documented on the date of the eligible encounter if positive.	TBD	Adults	CCBHC	Annual
Depression Remission at 12 months (DEP-REM-12)	Consumers 18+ with diagnosis of Major Depression or Dysthymia who reached remission 12 months ( $\pm$ 30 days) after an index visit.	TBD	Adults	CCBHC	Annual

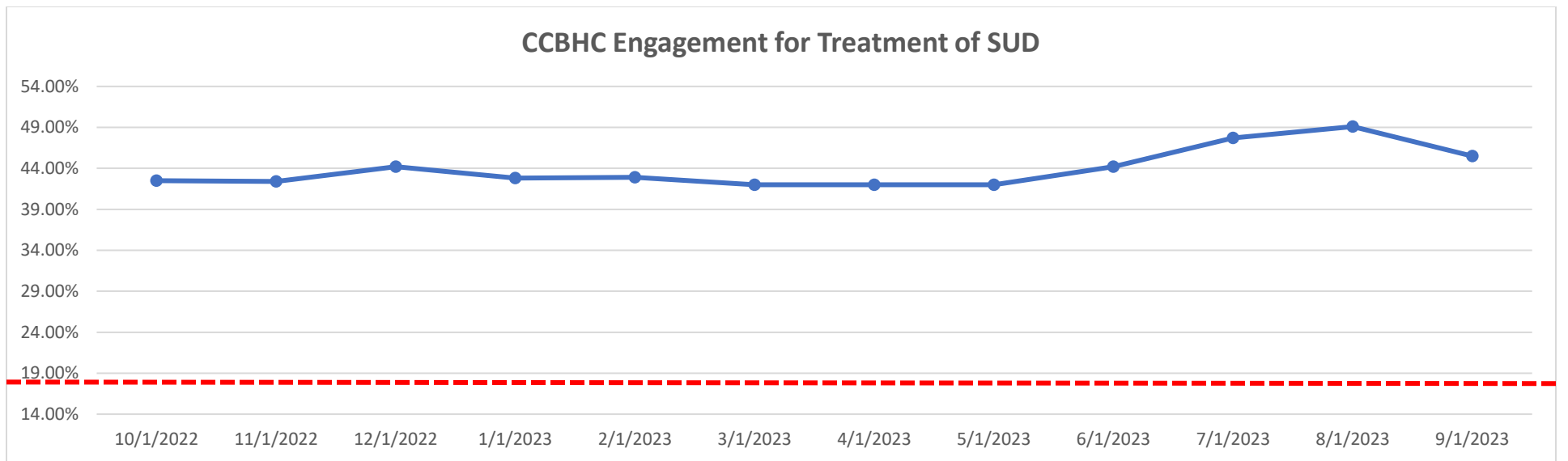
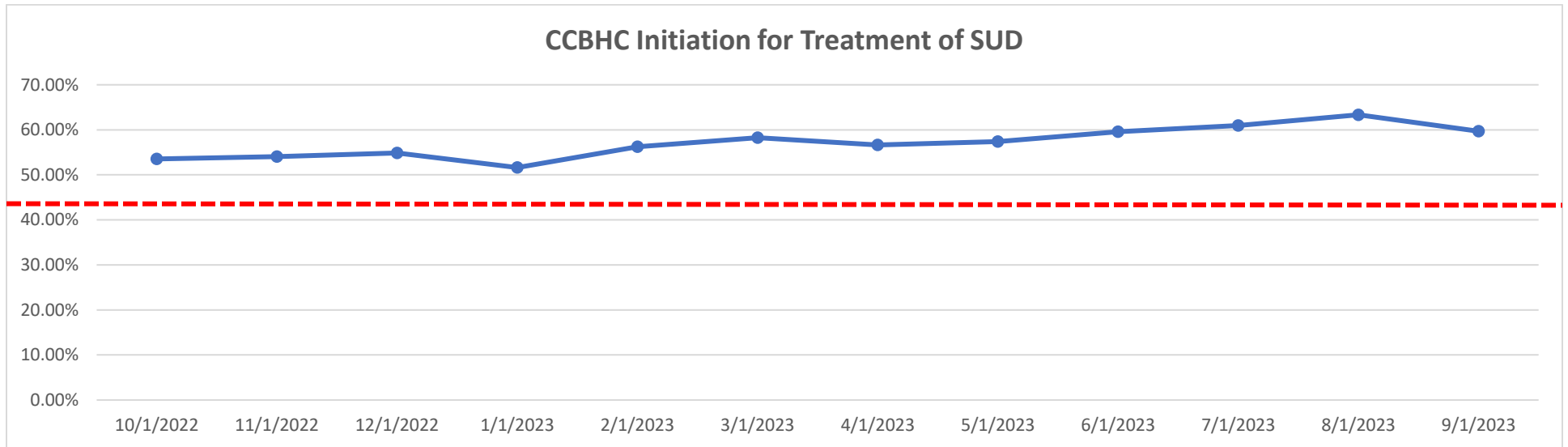
- The following Effectiveness Performance Indicator and Quality Measure identified in the QAPIP did not have data readily available:

Follow-Up After Hospitalization for Mental Illness (FUH)	Increase the number of individuals identifying as African American who received follow-up services within 30 days of discharge from inpatient hospitalization	TBD	All	LRE	Annual
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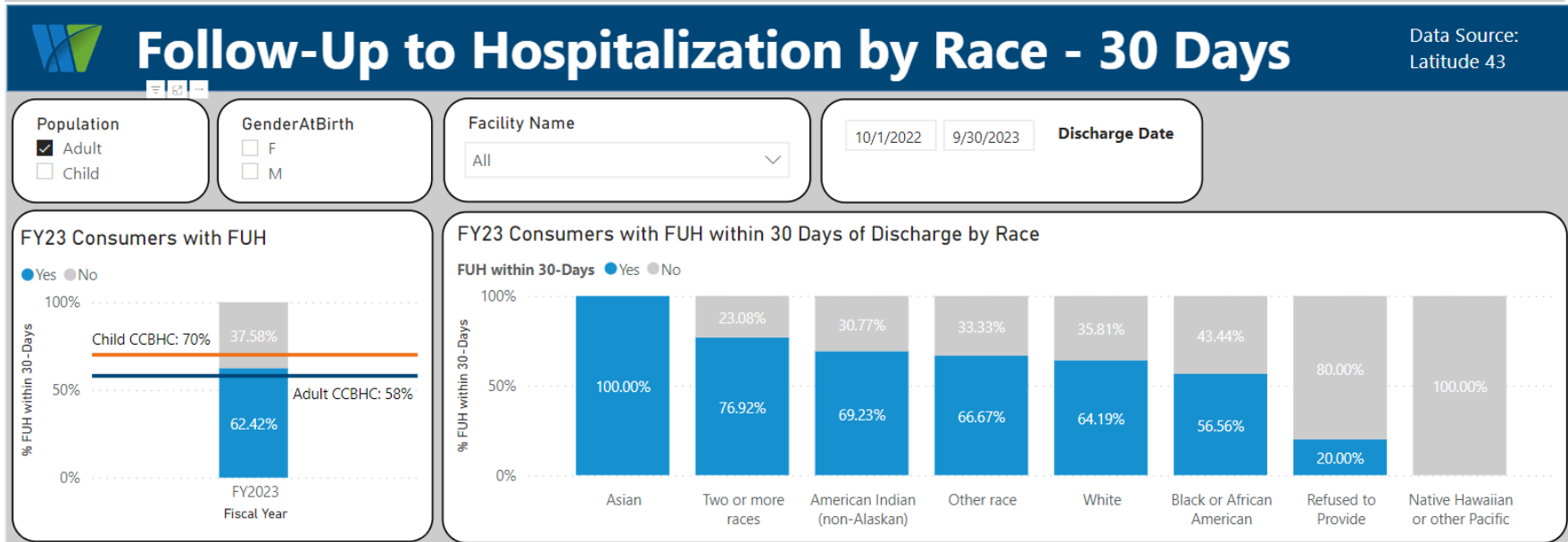
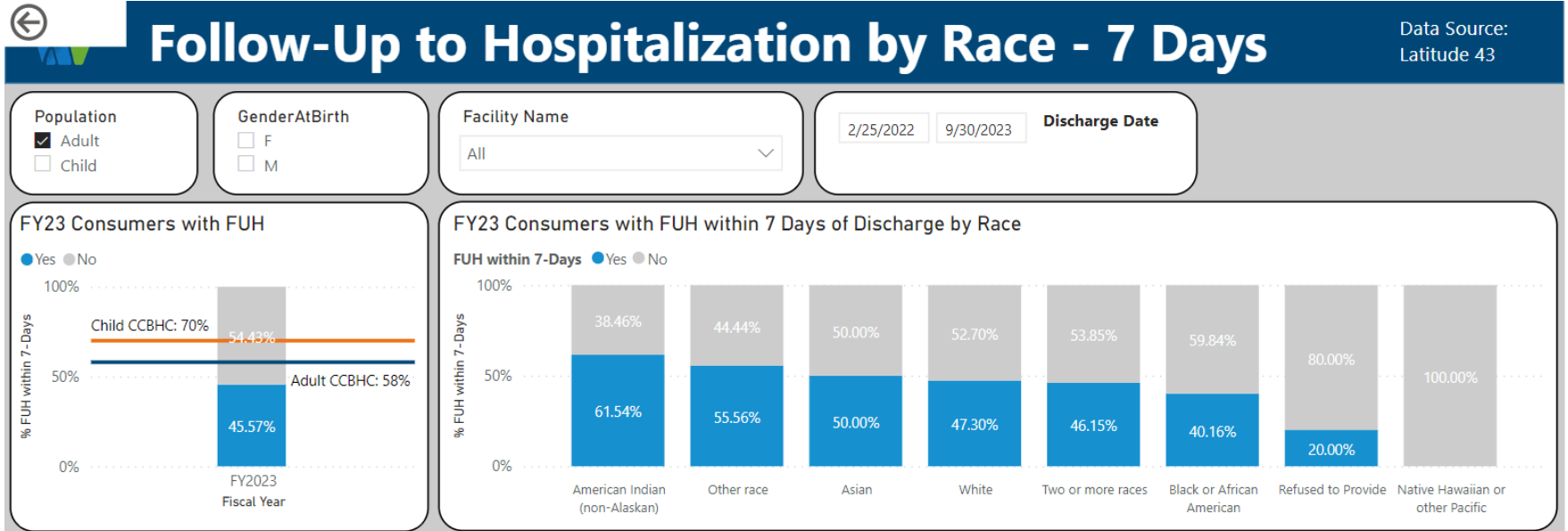
- Adults 18+ with schizophrenia or schizoaffective disorder who were dispensed and remained on an antipsychotic med for at least 80% of their treatment episode: **Performance Target 58%**



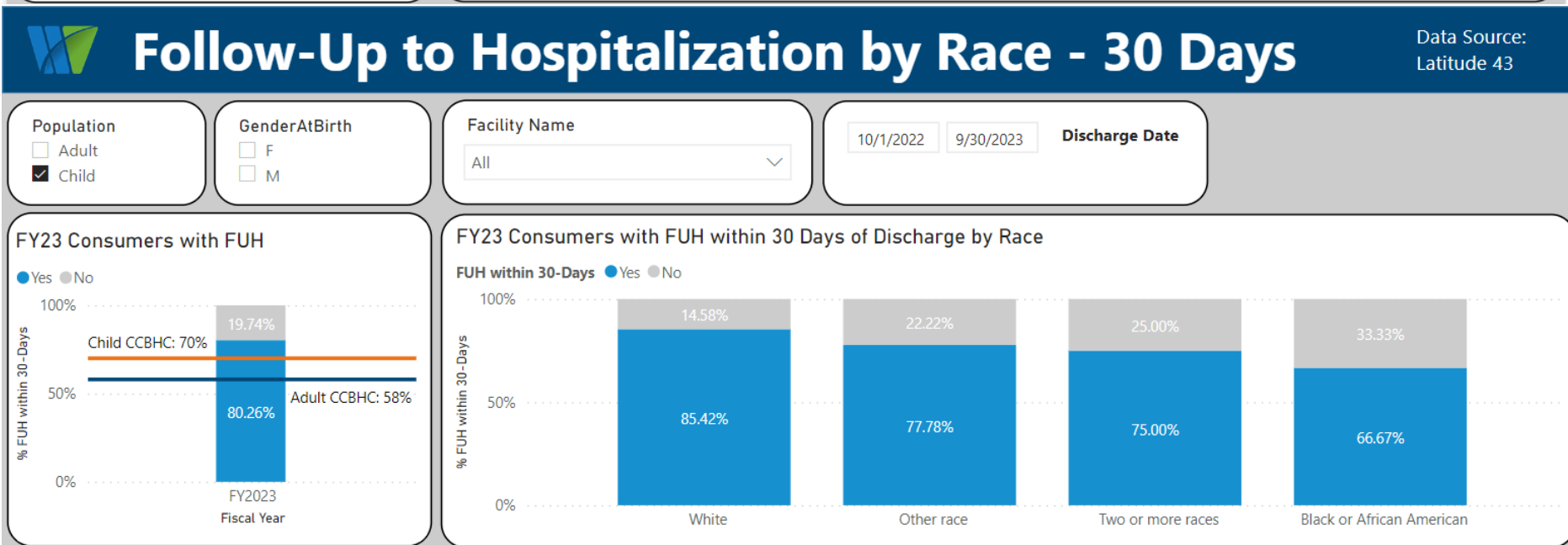
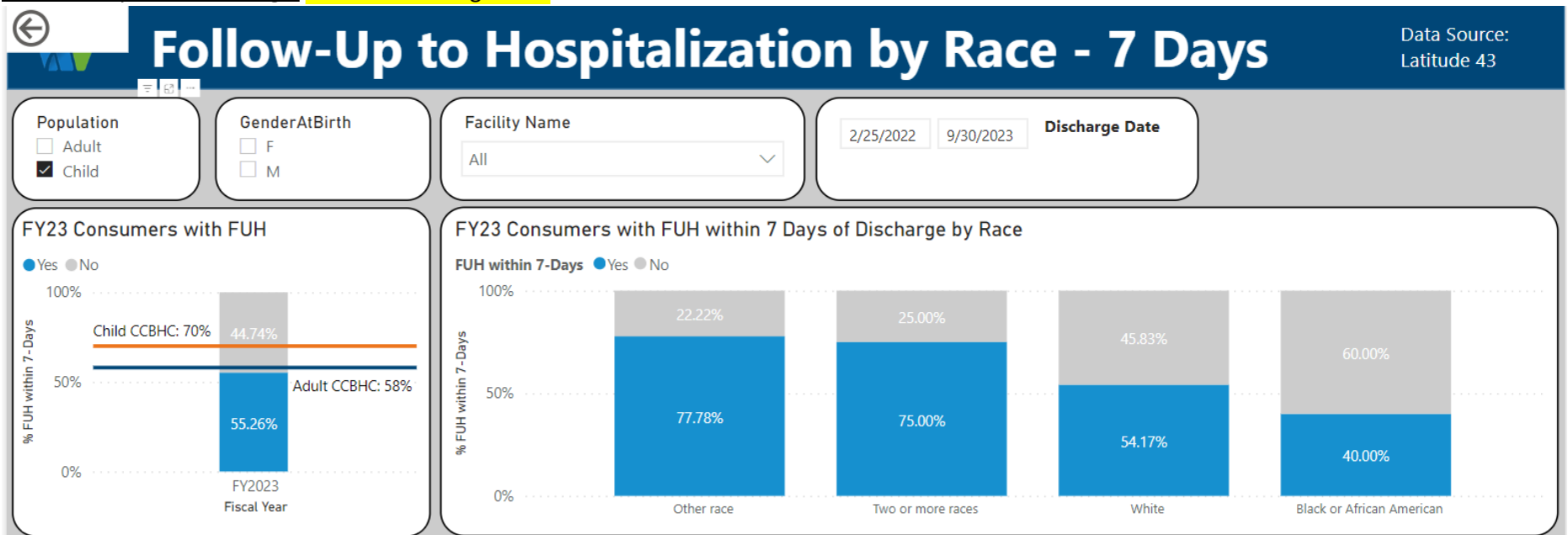
- Consumers age 13+ with a new episode of Alcohol and Other Drug Dependence (AOD) who initiated treatment through inpatient AOD admission, outpatient visit, IOP encounter, or partial hospitalization within 14 days of diagnosis OR initiated treatment and had 2+ services with a diagnosis of AOD within 30 days of the initiation visit: **Performance Target, Initiate 42.5 and Engage 18.5%**



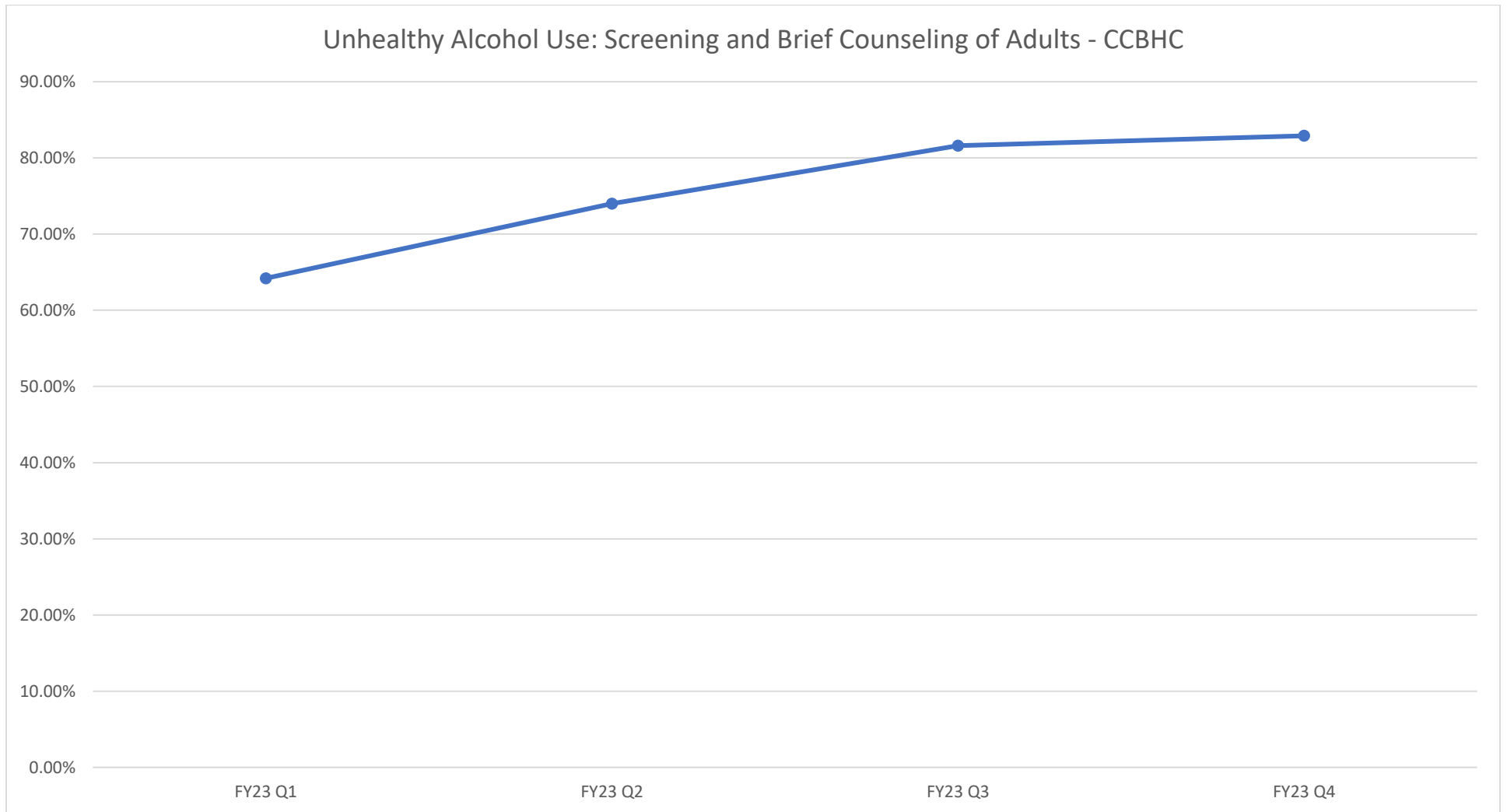
- Percent of discharges (age 18+) hospitalized for mental illness who had a follow-up visit with a mental health provider, reported for follow-up within 7 and 30 days after discharge: **Performance Target 58%**



- Percentage of discharges (age 6 – 17) hospitalized for mental illness who had a follow-up visit with a mental health provider, reported for follow-up within 7 and 30 days after discharge: **Performance Target 70%**

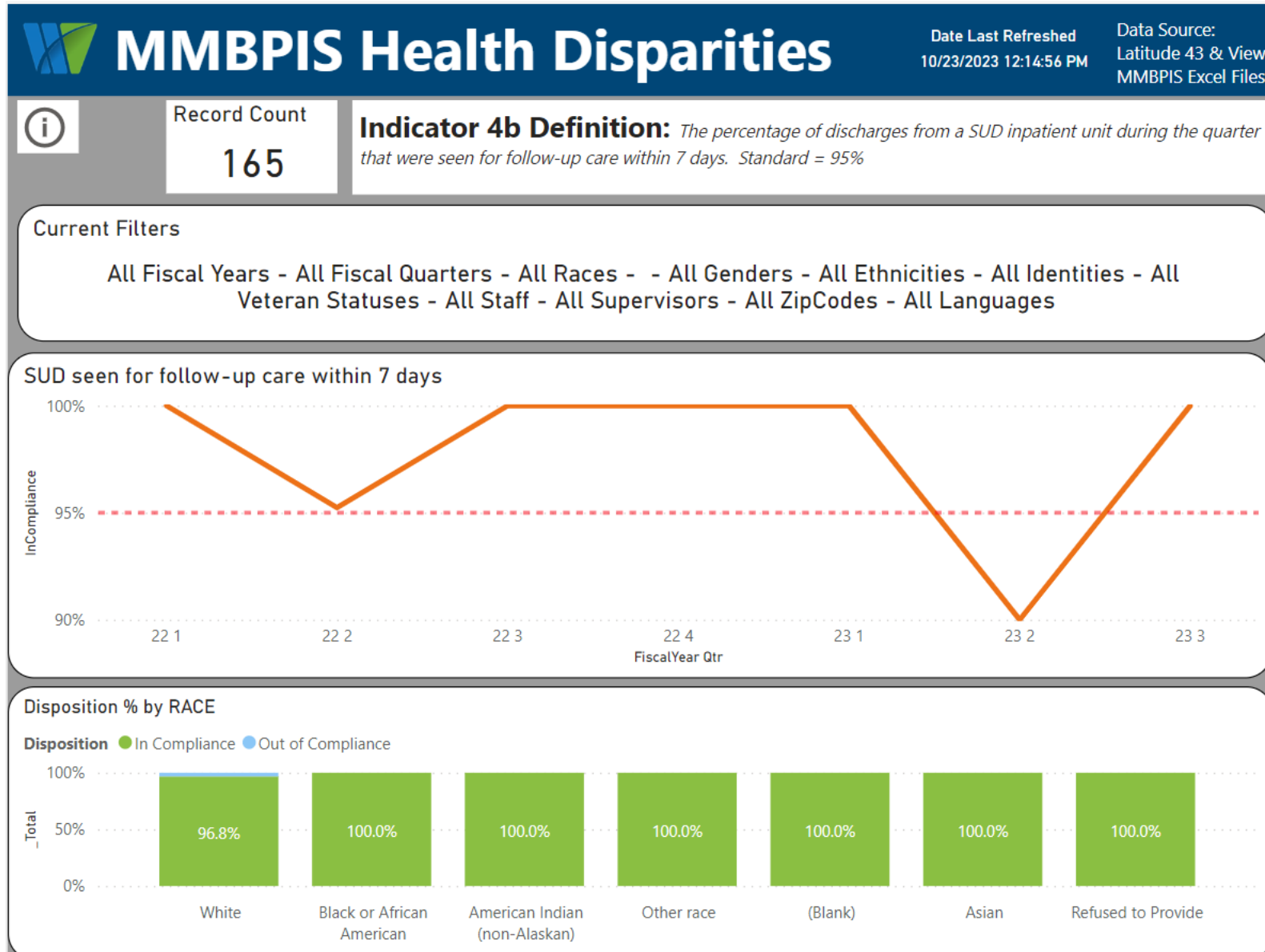


- Consumers 18+ screened at least once in the last 24 months for unhealthy alcohol use using a systematic screening method AND received brief counseling if identified as an unhealthy alcohol user: Performance Target: Not Determined



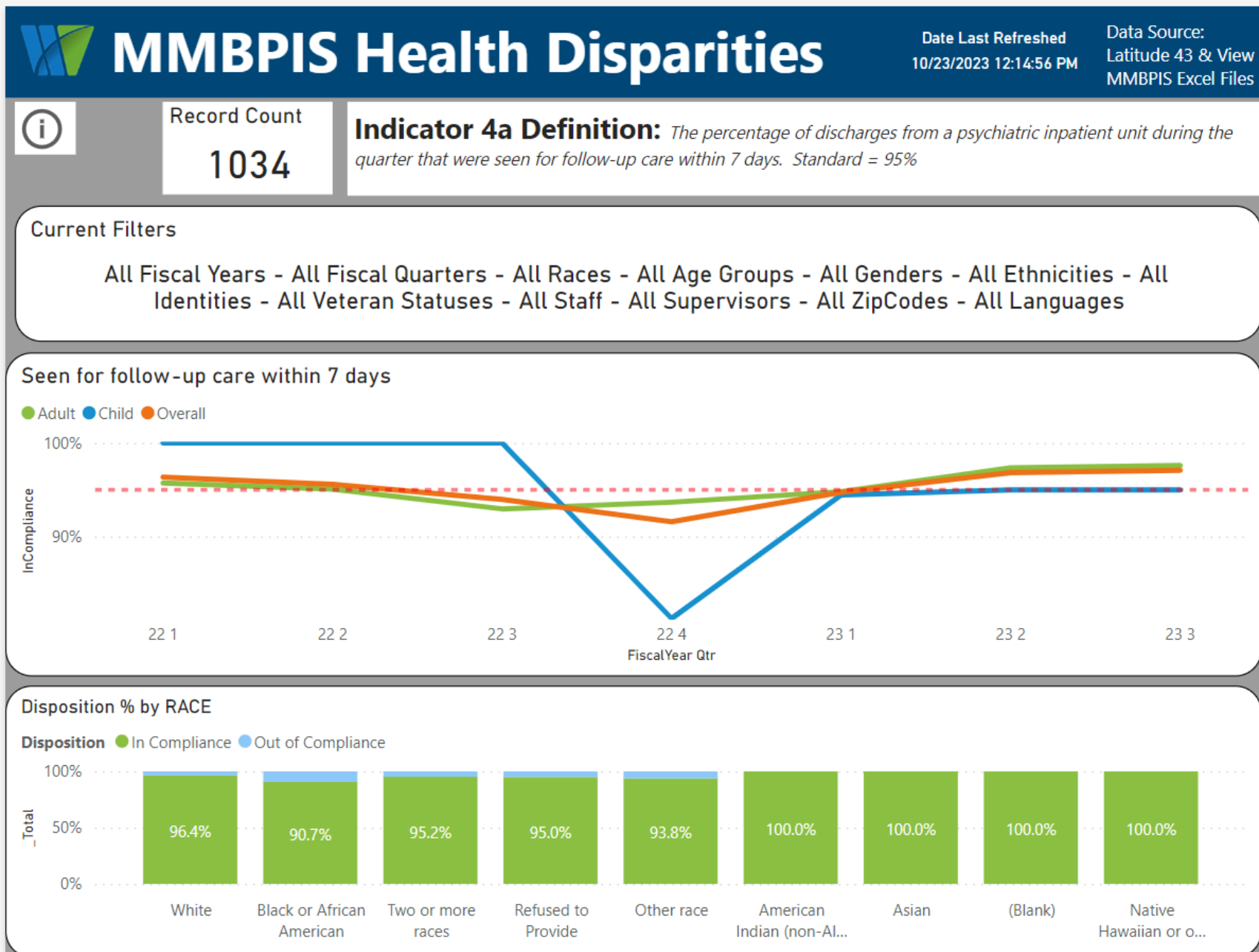
**EFFICIENCY – The resources required to achieve desired outcomes for persons served.**

- Consumers discharged from SUD detox episodes will receive follow-up SUD treatment within 7 days of discharge: **Performance Target > 95%**





- Consumers discharged from inpatient hospitalization episodes will receive follow-up care with a mental health professional within 7 days of discharge: Performance Indicator > 95%



- Consumers receive at least one face-to-face service every 30 days: **Performance Target 100%**

# Efficiency Measure: Ongoing Services

Date Last Refreshed 10/19/2023 8:04:30 AM

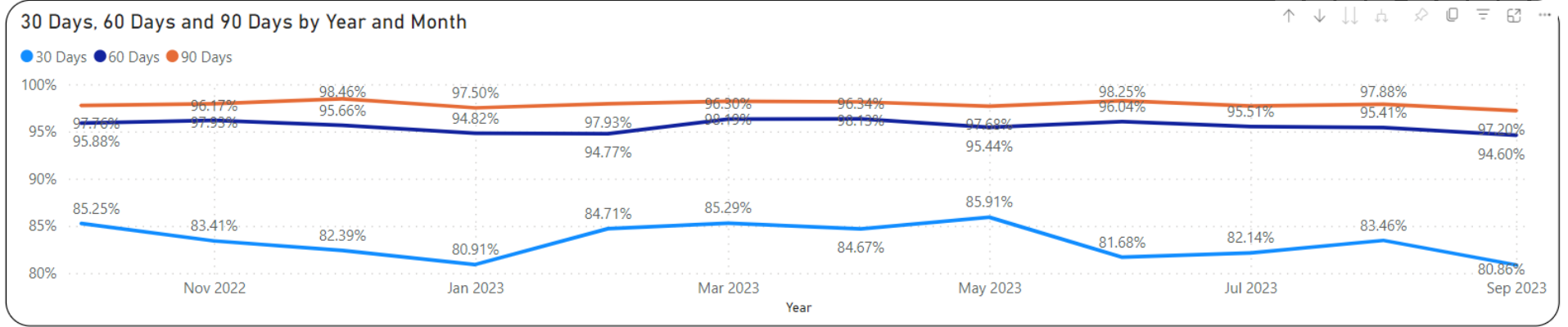
Service Date: 10/1/2022 to 9/30/2023

Current Consumer Program: All

Supervisor: All

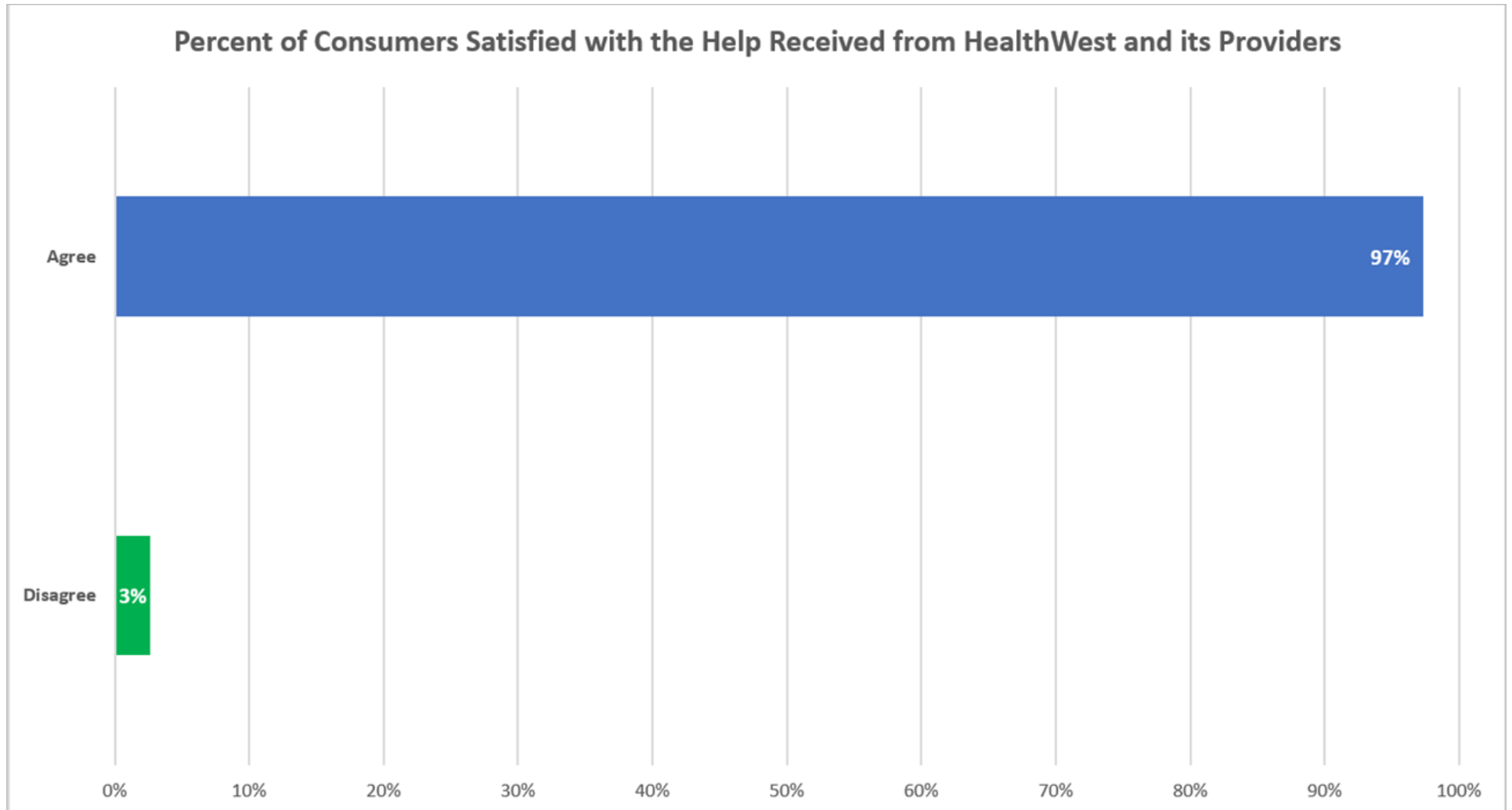
Staff: All

CPTcode: All



**SATISFACTION: Persons served and other stakeholders are satisfied with their experience of care:**

- Consumers will report overall satisfaction with services based on responses to satisfaction surveys: Performance Target > 95%

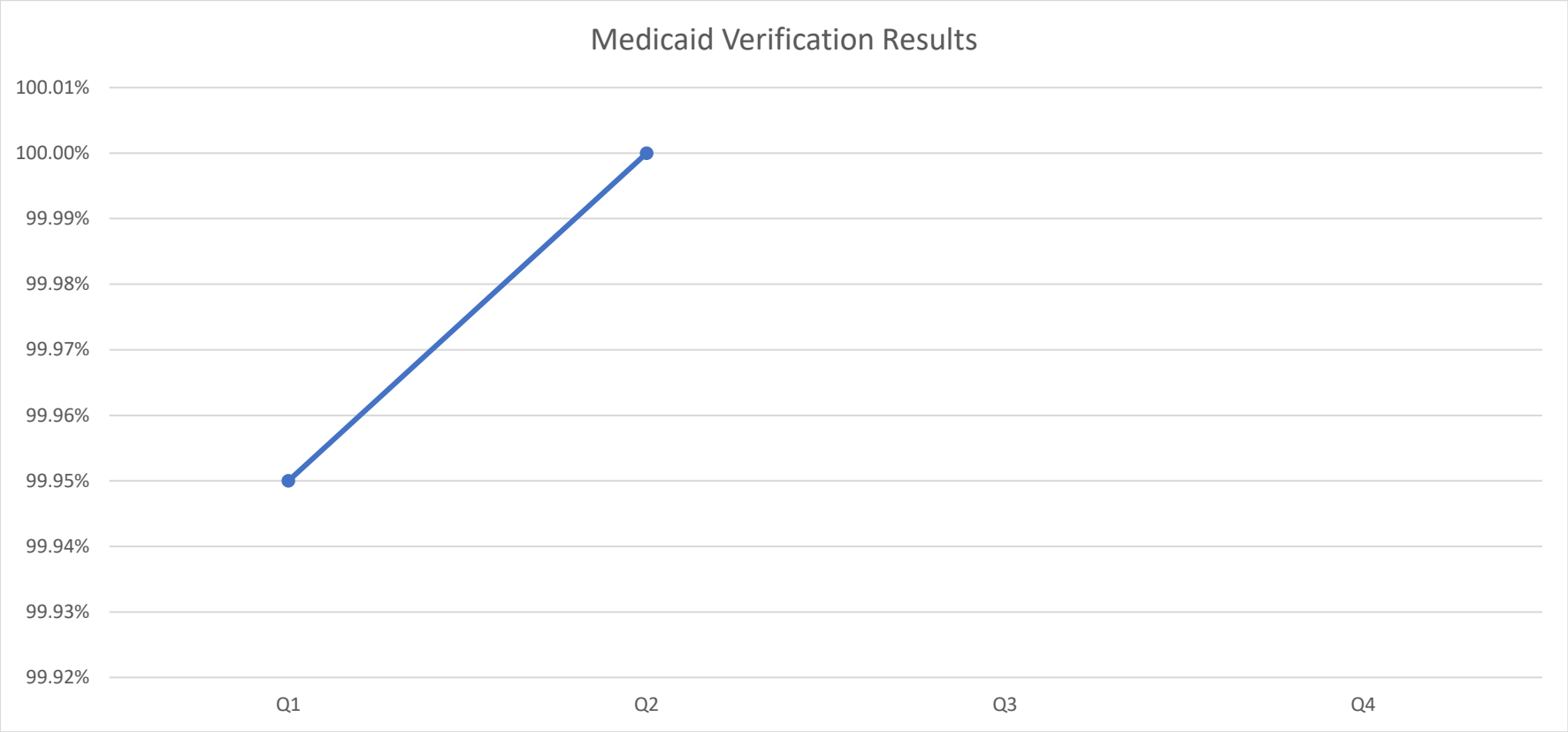


**BUSINESS FUNCTIONS:**

- HealthWest will achieve an overall score above 95% on the final site review report for FY22: **Performance Target 95%**

<b>Comprehensive Score:</b>				
	<b>Combined Score</b>	<b>Score</b>	<b>Possible Score</b>	<b>% of Indicators Met</b>
A	Admin/Managed Care Functions: Desk Audit	872	934	93.4%
B	Program Specific Standards	266	276	96.4%
D.	Non-Waiver/Autism Clinical Charts	2643	2852	92.7%
E.	Non-Waiver/Non-Autism Staff Training	224	250	89.6%
F.	Non-Waiver/Non-Autism Staff Credentialing	219	230	95.2%
H.	Autism Charts	817	852	95.9%
I.	Autism Training/HR	632	690	91.6%
K.	SEDW Charts	448	460	97.4%
L.	SEDW Training/HR	184	232	79.3%
N.	HSW Charts	1176	1324	88.8%
O.	HSW Training/HR	1341	1504	89.2%
Q.	CWP Charts	484	516	93.8%
R.	CWP Training/HR	267	294	90.8%
U.	Facility Reviews/ Autism & Crisis Residential	209	210	99.5%
V.	MEV Review	695	702	99.0%
W.	MMBPIS Review	155	157	98.7%
X.	CIRE Review	21	22	95.5%
<b>Comprehensive Score</b>		<b>10653</b>	<b>11505</b>	<b>92.6%</b>
				<b>93.0%</b>

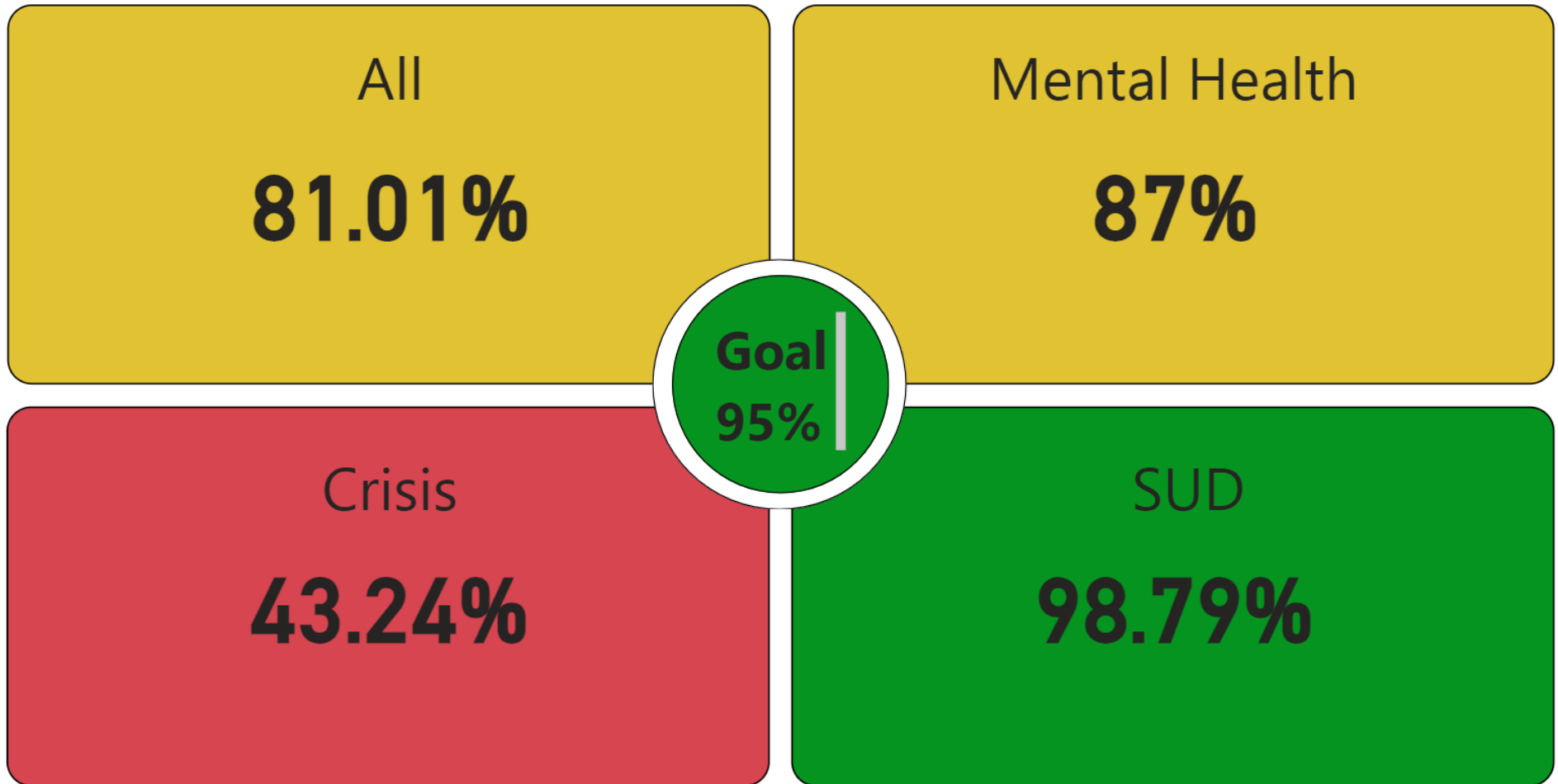
- 100% of Medicaid claims selected for verification will be supported by source documentation, resulting in zero recoupments: Performance Target 100%
  - There are no results yet for Quarters 3 or 4



- Required BHTEDS records will be submitted and accepted, for all record types: Performance Target 95%

# BH-TEDS Completeness

Data Source:  
Latitude 43



- Required report submissions will be submitted on time: Performance Target 100%
  - Data is not readily available for timeliness of submission across reports. Note that over FY 2023, there were still concerns with timeliness of MMBPIS submission. To improve this, a Kata project was started. Throughout that process, changes were made to the PCE system to reduce the number of manual chart reviews required prior to report submission and new workflows were created so that Q4 data was submitted on time.



Vision: Building a healthier, more informed, and inclusive community through innovation and collaboration.

Mission: To be a leader in integrated health care, inspiring hope and wellness in partnership with individuals, families, and the community.

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## Key Performance Indicators & Quality Report

October 2023

- **Kata Training**
  - The QA team facilitated two more rounds of training on the Kata improvement framework, which were geared toward supervisors and managers from across the organization.
  - The goal is to have all supervisors and managers trained, so they can be coaches for Kata projects
  - Requests for new Kata projects continue to come in from a variety of teams and supervisors
- **Documenting Incidents Training**
  - All staff have now completed training on documenting and reporting incidents, including using the incident reporting module in Lat43.
  - Next steps are to deliver a tailored training to our provider agencies and to use the improved data for risk management and monitoring for improvement opportunities
- **MMBPIS Performance Indicator Reporting**
  - New performance thresholds for MMBPIS Indicator 2a (timeliness of assessment following request for service), 2e (time to treatment for SUD requests for service), and Indicator 3 (timeliness of service following assessment), took effect on 10/1/23.
  - The new standards were reviewed with managers this week, along with recent MMBPIS data from FY23Q3 (included in the packet on the following page).
  - All indicators and populations with performance thresholds for FY23 met or exceeded MDHHS standards.
- **2022 MDHHS Waiver Audit 90-Day Follow-Up Review**
  - All corrective actions have been completed and citations resolved by HealthWest and our provider agencies. The LRE received final approval of all remediations from MDHHS on September 8, 2023, which formally concluded the audit.
  - The next MDHHS waiver audit will occur in the fall of 2024.
- **2023 CMHSP Site Review**
  - LRE has completed the HealthWest CMHSP site review and issued the final report.
  - MANY staff contributed to the site review, which was extremely successful and resulted in scores above 95% in nearly every section audited by the LRE.
  - The QA team has been working with teams and supervisors over the past two weeks to develop corrective plans for all partially met/unmet standards. Once the LRE approves our CAP, we will have 30 days to complete our plans and remediate all citations.
- **2024 CARF Re-Accreditation Survey**
  - We recently received notice from CARF that we are due to apply for our next re-accreditation survey.
  - Submitting our application formally initiates the re-accreditation process with CARF and kicks off the preparations that will take place over the next six months leading up to the survey.
  - Our survey is expected to occur in March – May 2024 (our current accreditation expires on May 31, 2024).



**FY22/FY23 MDHHS Performance Indicator  
MMBPIS Summary Report**

Performance Measure	Indicator	Population	FY22Q1	FY22Q2	FY22Q3	FY22Q4	FY23Q1	FY23Q2	FY23Q3
<b>Timeliness of Pre-Admission Screening Decision</b> <i>Decision within 3 hrs. of request</i>	1	Child	100.0%	98.7%	98.1%	100.0%	100.0%	99.3%	100.0%
		Adult	99.1%	99.4%	99.7%	98.5%	100.0%	99.5%	98.1%
		Overall	99.3%	99.3%	99.3%	98.8%	100.0%	100.0%	100.0%
		Threshold	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%
			<b>FY22Q1</b>	<b>FY22Q2</b>	<b>FY22Q3</b>	<b>FY22Q4</b>	<b>FY23Q1</b>	<b>FY23Q2</b>	<b>FY23Q3</b>
<b>Timeliness of Assessment Following Request for Service*</b> <i>Assessment within 14 days of request</i>	2a	MI Child	94.6%	79.8%	68.9%	66.7%	75.3%	73.2%	65.6%
		MI Adult	97.1%	73.4%	48.8%	56.0%	56.5%	52.2%	54.7%
		DD Child	96.3%	79.3%	95.2%	70.4%	85.2%	70.6%	56.0%
		DD Adult	93.8%	71.4%	68.4%	77.8%	90.0%	85.7%	63.6%
		Overall	96.0%	75.9%	58.2%	60.7%	64.8%	61.1%	58.7%
Threshold	62.0%	62.0%	62.0%	62.0%	62.0%	62.0%	62.0%		
			<b>FY22Q1</b>	<b>FY22Q2</b>	<b>FY22Q3</b>	<b>FY22Q4</b>	<b>FY23Q1</b>	<b>FY23Q2</b>	<b>FY23Q3</b>
<b>Time to Treatment (SUD)*</b> <i>First service within 14 days of request</i>	2e	Time to Treatment	94.5%	89.6%	87.1%	87.4%	91.4%	82.2%	90.0%
		Threshold	68.2%	68.2%	68.2%	68.2%	68.2%	68.2%	68.2%
			<b>FY22Q1</b>	<b>FY22Q2</b>	<b>FY22Q3</b>	<b>FY22Q4</b>	<b>FY23Q1</b>	<b>FY23Q2</b>	<b>FY23Q3</b>
<b>Timeliness of Start of Services Following Assessment*</b> <i>Next service within 14 days of assessment</i>	3	MI Child	79.2%	73.0%	67.5%	74.6%	57.1%	61.7%	70.7%
		MI Adult	72.9%	37.9%	67.6%	62.7%	57.4%	59.9%	70.9%
		DD Child	92.6%	53.8%	83.3%	66.7%	66.7%	61.5%	38.9%
		DD Adult	94.1%	60.0%	85.0%	53.8%	63.6%	88.9%	21.1%
		Overall	78.0%	58.4%	69.0%	66.5%	57.9%	61.1%	68.0%
Threshold	72.9%	72.9%	72.9%	72.9%	72.9%	72.9%	72.9%		
			<b>FY22Q1</b>	<b>FY22Q2</b>	<b>FY22Q3</b>	<b>FY22Q4</b>	<b>FY23Q1</b>	<b>FY23Q2</b>	<b>FY23Q3</b>
<b>Follow-Up to Inpatient Discharge</b> <i>Within 7 days of discharge</i>	4a	Child	100.0%	100.0%	100.0%	81.3%	94.4%	95.0%	95.0%
		Adult	95.5%	95.1%	95.7%	94.7%	94.7%	97.4%	97.6%
		Overall	96.1%	95.6%	96.3%	92.4%	94.6%	96.9%	97.1%
		Threshold	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%
			<b>FY22Q1</b>	<b>FY22Q2</b>	<b>FY22Q3</b>	<b>FY22Q4</b>	<b>FY23Q1</b>	<b>FY23Q2</b>	<b>FY23Q3</b>
<b>Follow-Up to SUD Detox Discharge</b> <i>Within 7 days of discharge</i>	4b	Follow-Up	100.0%	95.2%	100.0%	100.0%	100.0%	90.0%	100.0%
		Threshold	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%
			<b>FY22Q1</b>	<b>FY22Q2</b>	<b>FY22Q3</b>	<b>FY22Q4</b>	<b>FY23Q1</b>	<b>FY23Q2</b>	<b>FY23Q3</b>
<b>Inpatient Recidivism</b> <i>Readmission to an inpatient facility within 30 days of previous discharge</i>	10	Child	4.2%	28.6%	4.0%	15.0%	0.0%	3.3%	6.1%
		Adult	8.3%	7.0%	12.2%	2.8%	5.3%	14.8%	9.3%
		Overall	7.6%	10.4%	10.8%	4.7%	4.4%	12.7%	8.6%
		Threshold	15.0%	15.0%	15.0%	15.0%	15.0%	15.0%	15.0%

**\* Understanding the new performance thresholds introduced by MDHHS**

MDHHS recently released updated performance thresholds for Medicaid beneficiaries for MMBPIS Indicators 2a, 2e, and 3. These new thresholds, which are based on PIHP performance data from FY22, are included in the FY24 MDHHS/PIHP contract and went into effect on October 1, 2023.

Even though the new thresholds will not be used by MDHHS until we begin reporting FY24 data, we have applied them to FY22 and FY23 data above so we can assess ourselves and begin to proactively address any gaps. Please note: MDHHS will only use the new thresholds to evaluate overall performance across all populations - the thresholds will not be applied to specific subpopulations. However, HealthWest will continue to monitor at the population and program level to recognize both our strengths and areas for improvement.

While existing criteria for Indicators 1, 4a, and 10 do allow CMHs to claim exceptions for certain scenarios considered outside their control, the new indicator thresholds for Indicators 2a, 2e, and 3 do not allow for any exceptions. This means our data for these indicators includes cases where an individual cancelled or no-showed, appointments were rescheduled (either by staff or the consumer), or where there was a shortage of providers for the requested service. In other words, out-of-compliance cases include all instances when an individual was not assessed, as well as when the assessment was completed outside of 14 days, regardless of the underlying reason.

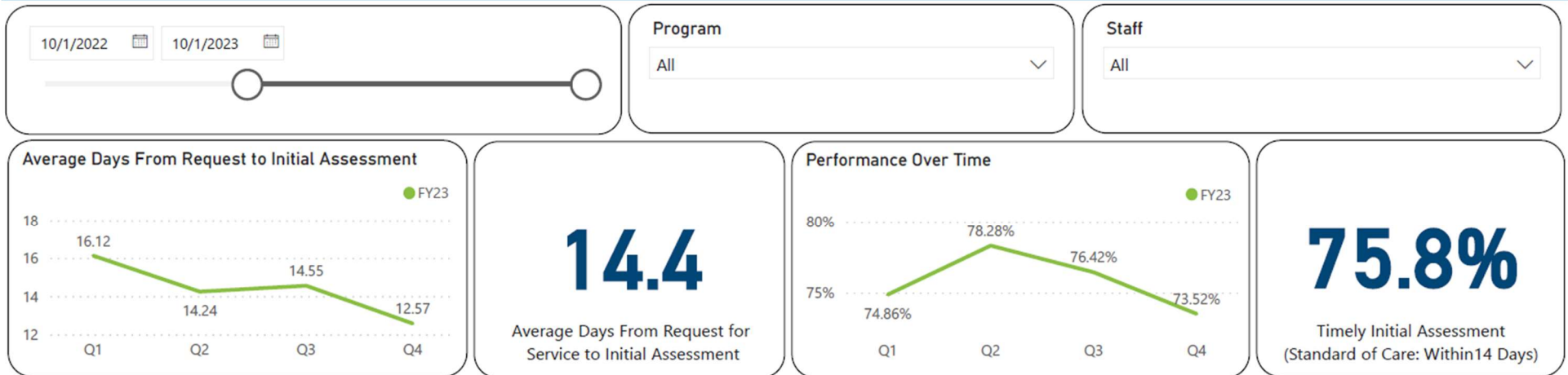
During the most recent quarter, HealthWest performance was slightly below the new thresholds (in pink, under FY23Q3). Our performance, however, was higher than the overall regional rate, and exceeded all but two CMHs on indicator 2a and all but one CMH on indicator 3.

# Key Performance Indicators



## Access: Request for Service to Initial Assessment

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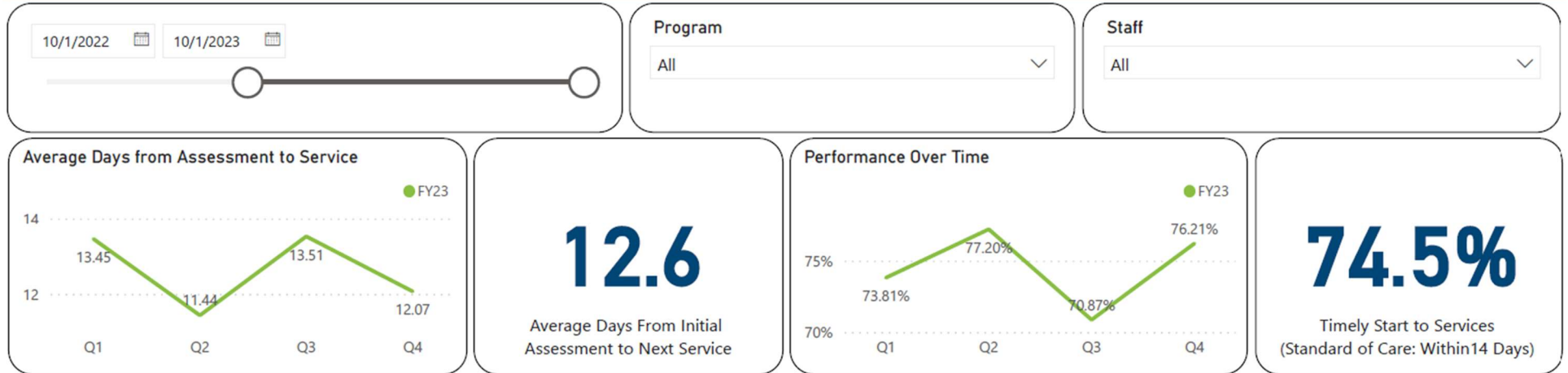
- Requirement: initial assessment within 14 days of request (equal to MDHHS' Michigan Mission-Based Performance Indicator System (MMBPIS) measures)
- All consumers are included in this dashboard, however, regardless of population, level of care, and funding source; result is that clinical teams have data to monitor timeliness for all consumers, regardless of their inclusion in state measures for Medicaid-only populations
- Accordingly, performance on this dashboard will vary slightly from published MMBPIS performance for Medicaid-only consumers.

- ★ **Average number of days from request for services to initial assessment has IMPROVED, dropping from 16.1 days to 12.6 days since the start of FY23.**
  - On average, initial assessments for children (within 12.0 days of request) are completed quicker than adults (within 16.0 days of request)
- ⊖ **IDENTIFIED BARRIERS** to timely access to services include:
  - High caseloads and current clinical workflows for staff create challenges for engaging new consumers and completing assessments.
  - No-shows, cancellation, and rescheduled appointments are most common reasons assessments are not completed (68% of non-compliant cases)
- ➡ **IMPROVEMENT PROJECTS UNDERWAY** to address barriers:
  - Implement a dedicated Assessment Team to complete all initial assessments for new consumers
  - Update the intake workflow/functionality within Lat43
  - Add a peer support specialist to the Access department, who can perform outreach and engage with consumers
  - Analysis by PI Committee to identify trends among individuals who drop out of the intake process or who never receive an assessment



# Access: Initial Assessment to Next Service

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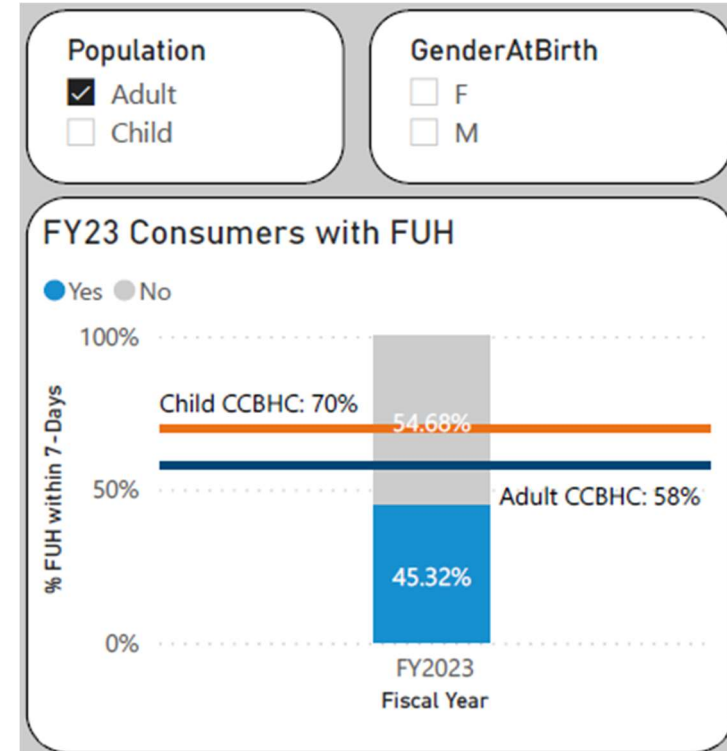
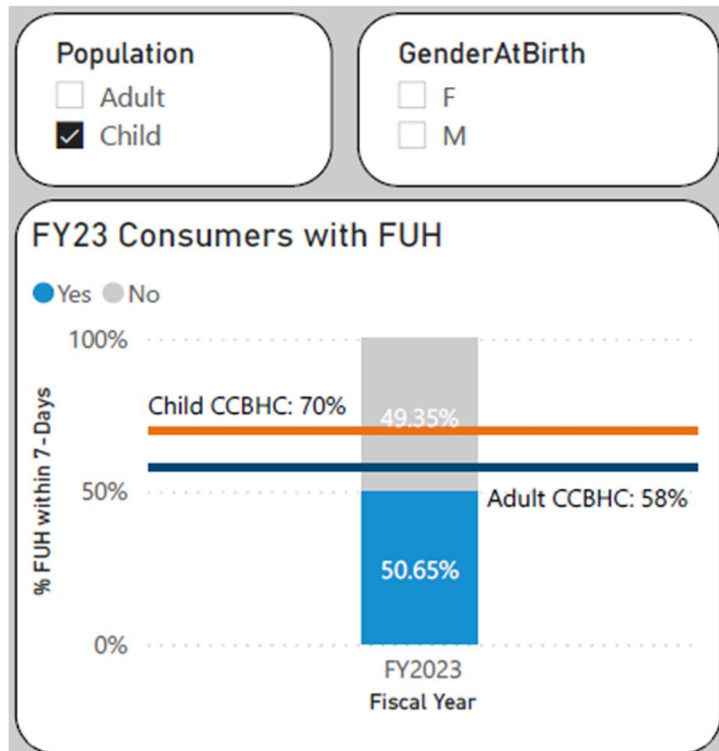
- Requirement: next service within 14 days of assessment (equal to MDHHS' Michigan Mission-Based Performance Indicator System (MMBPIS) measures)
- All consumers are included in this dashboard, however, regardless of population, level of care, and funding source; result is that clinical teams have data to monitor timeliness for all consumers, regardless of their inclusion in state measures for Medicaid-only populations
- Accordingly, performance on this dashboard will vary slightly from published MMBPIS performance for Medicaid-only consumers.

- ★ **Average number of days from initial assessment to next service FLUCTUATED BUT IMPROVED OVERALL during FY23, dropping from 13.5 to 12.1 days.**
  - On average, the next face-to-face service for adults (within 12.2 days) is provided sooner than it is for children/youth (within 14.2 days)
- ⊖ Identified barriers to timely access to service include:
  - High caseloads and current clinical workflows for staff create challenges for engaging new consumers and completing assessments
  - No-show, cancellation and rescheduled appointments are most common reasons next service is not within 14 days (47% of non-compliant cases)
- ➡ **IMPROVEMENT PROJECTS UNDERWAY** to address barriers:
  - Implement a dedicated Assessment Team to complete all initial assessments for new consumers
  - Utilize peer support specialists to perform outreach and engage in follow-up with consumers who cancel or no-show for an appointment
  - Enhance dashboard so it can be used proactively by staff to monitor caseloads and meet standards for timely services
  - Analysis by PI Committee to identify trends among individuals who drop out of or do not engage in treatment following an assessment
  - Reorganization of teams to balance/redistribute team caseloads and supervisory responsibilities
  - Continue recruitment and hiring to fill vacant positions



# Follow-Up to Hospitalization by Race - 7 Days

Data Source:  
Latitude 43

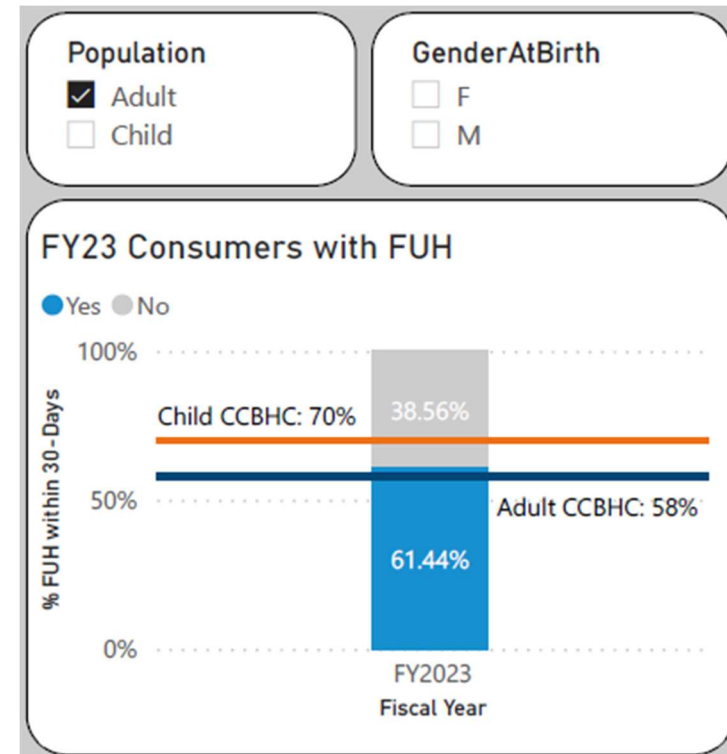
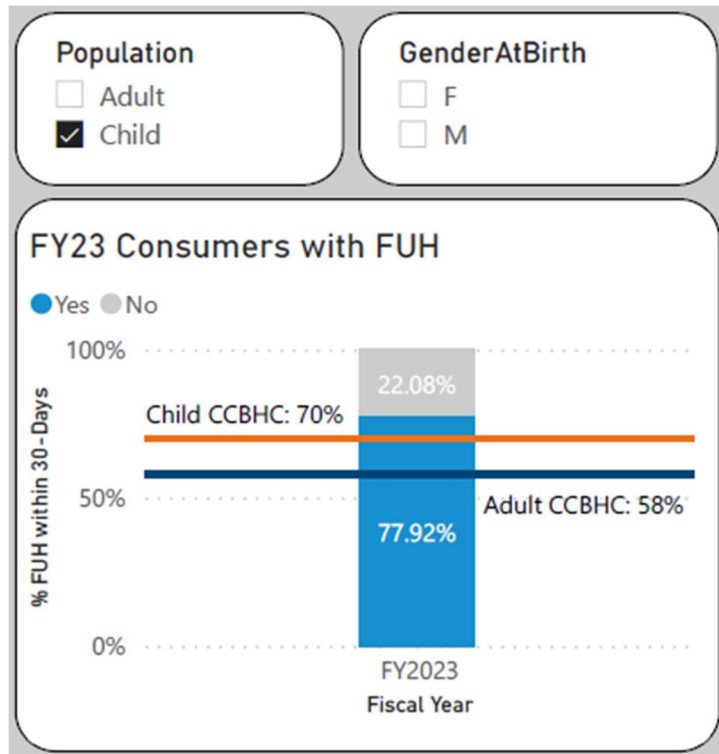


- 🚫 Both children and adults are currently **BELOW** the CCBHC thresholds of 70% and 58%, respectively, for the 7-day FUH measure.
- ★ **Overall disparities DECREASED between White adults and Black/African American adults, dropping to 6.26%, according to data as of 9/30/23.**
  - Adult females are separated by less than 1.5%, while the difference for Black/African American adult males is currently at 7.1%.
- ⚠️ Assessments of disparities for children are limited by the small number of consumers in the designated populations.
- ➡️ **IMPROVEMENT ACTIVITIES** for this measure
  - Utilize peers for education and support leading up to discharge (as well as outreach between discharge and follow-up appointments)
  - Compile and analyze data to pinpoint differences between individuals open to services at the time of inpatient admission v. new consumers
  - Conduct case studies and chart reviews to uncover underlying reasons behind no-shows and cancellations
  - Enhance dashboard (case-level data, charts depicting performance over time, ability to study reasons for non-compliance and geographic trends)



# Follow-Up to Hospitalization by Race - 30 Days

Data Source:  
Latitude 43



- ★ Both Children (77.92%) and Adults (61.44%) **EXCEED** the CCBHC thresholds of 70% and 58%, respectively, for the 30-day FUH measure.
- ★ Overall disparities **DECREASED** between White adults and Black/African American adults. As of 9/30/23, the difference has been cut in half to 5.78%.
  - When grouped by gender, Black/African American adult females actually have a higher percentage (68.57%) than White adult females (64.29%).
  - Black/African American adult males (52.33%) continue to lag behind their White counterparts (61.68%) by nearly 10%.
  - ⚠ Assessments of disparities for children are limited by the small number of consumers in the designated populations.
- ➡ **IMPROVEMENT ACTIVITIES** for this measure
  - Utilize peers for education and support leading up to discharge (as well as outreach between discharge and follow-up appointments)
  - Compile and analyze data to pinpoint differences between individuals open to services at the time of inpatient admission v. new consumers
  - Conduct case studies and chart reviews to uncover underlying reasons behind no-shows and cancellations
  - Enhance dashboard (case-level data, charts depicting performance over time, ability to study reasons for non-compliance and geographic trends)



## MEMORANDUM

Date: October 26, 2023

To: HealthWest Board of Directors

CC: Mark Eisenbarth, Muskegon County Administrator  
 Matt Farrar, Muskegon County Deputy Administrator  
 Angie Gasiewski, Muskegon County Accounting Manager

From: Rich Francisco, Executive Director

Subject: **Director's Update**

### MDHHS Updates:

- The MichiCANS soft launch sites which HW is a part of is waiting on a response from the MDHHS leadership overseeing the effort. At the last Director's forum, it was brought to our attention that a memo was released adding scope to the soft launch sites to also screen for Kids in the foster care system. The original intent of the soft launch was to test for a replacement for the CAFAS and PECFAS, but the scope has changed. The soft launch sites got together over several meetings and with the assistance of CMHA to formulate a set of remarks and recommendations voicing our concerns to MDHHS. We are still waiting for that response. One of the recommendations the group had was for MDHHS to conduct a separate pilot and test to use the MichiCANS without the involvement of soft launch sites.
- The final rates and budget have been released by the LRE and Brandy our CFO has updated our Budget. Our revenue in FY24 will be up by about 10M. We were waiting on final numbers to make final decisions related to operations, and glad that we were finally able to determine what we can proceed with as far as budget items. This includes recommendations related to staff benefits among other things.

### Lakeshore Regional Entity Updates:

- LRE Wakely Study –The study was finally presented to the LRE board and the Wakely team made a recommendation to LRE board to support ISF funding at 35M which equals about 8% to 8.2%. There were various scenarios presented based on Milliman rates and anticipated rates, but Wakely recommended at least an average of the 50% probability for baseline and pessimistic scenarios. The LRE still has a question out to the state regarding the 7.5% number that we are supposed to have in ISF. The contract language changed in 2021 which now states that it PIHP's can keep 7.5% each year or per year. Prior to this the language read 7.5% cap. These are very different things. There are a couple of CMHSPS out there right now not giving back money to the state and keeping as much as 7.5% per year.



### **Executive Director activities CMH level:**

- Quality improvement training – KATA lean training ramping up and our quality improvement director is working on a regular schedule for training. We are pushing close to about 50 trained in KATA. I was approached by the LRE to include them in the KATA training if we were going to have more or even train them directly. Mary Dumas asked if their quality staff could be trained as well. Internally, KATA projects are on the rise and the quality team is looking at a methodology to prioritize these improvement projects.
- Our CMH organizational chart is continuing to change as we address some of the issues related to the high caseloads. The development of a 3<sup>rd</sup> MI team and Assessment Team should alleviate some of the case load numbers. I have asked Data Analytics to develop a report that allows HW to continue to monitor caseloads so that it is available for supervisors, managers, and directors to monitor this information more readily.
- Continuing to evaluate processes related to contracts, quality improvement structure development and identify areas for efficiencies.
- I wanted to give a “Shout out” to Heather Weigand, Christy LaDronka and Bruce Morningstar from Norton Shores Police for sharing our CIT program at the CMHA fall conference, which our board members attended this past Monday and Tuesday. I am sure they received several questions, after asking if they can copy and replicate what we have at HW. I know this because I received questions as well. Kudos to the 3 of them for a great presentation.
- Continuing to work on space consolidation and ensure that we are optimizing the space that we have. There is a plan to move some of our HR and Finance staff over to Marquette, and I am working with County leadership to accomplish this.
- The leadership team at HW is beginning to look more closely at our Turnover rate. Based on the information provided by Susan from HR, we are about 19.5% turnover rate. This equals to about 1% to about 2% monthly since October of last year. We currently have about 430 staff on average and had 84 separations for a variety of reasons.

### **On the Horizon:**

- Continue to review Organizational Chart and evaluate programmatic level need.
- Continue to work on improvements in various areas of the agency from administration to clinical processes.
- Upcoming meetings with various agencies in the community and looking for opportunities to partner. Recently met with Muskegon Family Center and looking forward to having a second meeting. I am also scheduled this coming week with Muskegon Community College as well.