



Jeffrey W. Patton
Chief Executive Officer

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(269) 553-8000

Administrative Services:
610 South Burdick Street
Kalamazoo, MI 49007

Community • Independence • Empowerment

AGENDA

INTEGRATED Services of Kalamazoo Board of Directors HAS SCHEDULED ITS MEETING FOR MONDAY, February 26, 2024, BEGINNING @ 4:00PM via *Microsoft TEAMS* or in-person at 610 S. Burdick Street/Kalamazoo, MI., (2nd Floor/Board Conference Room).

- I. CALL TO ORDER – CITY & COUNTY DECLARATION
- II. AGENDA
- III. CITIZEN TIME
- IV. RECIPIENT RIGHTS
 - a. Recipient Rights Monthly Report
- V. PROGRAM SERVICE REPORT
 - a. *Wanda Brown*, Integrated Health Services Clinic (Psychiatric Services)
 - b. *Beth Ann Meints*, Administrator of Clinical Services/CCBHC Report/**VERBAL**
- VI. CONSENT CALENDAR/**VERBAL MOTION**
 - a. Minutes January 22, 2024/January 29, 2024
 - b. Quality Management (Policy)
 - c. Board Travel (Policy)
 - d. Investment (Policy)
 - e. Collaboration (Policy & Report)
- VII. MONITORING REPORTS
 - a. None
- VIII. FINANCIAL REPORTS
 - a. Financial Condition Report
 - b. Utilization Report
 - c. January 2024 Disbursement/**MOTION**
- IX. ACTION ITEMS - NEW or REVISITED/**MOTION**
 - a. None
- X. CHIEF EXECUTIVE OFFICER VERBAL REPORT
 - a. CEO Report
- XI. CITIZEN TIME
- XII. BOARD MEMBER TIME
 - a. SWMBH (Southwest Michigan Behavioral Health) Updates/*Erik Krogh*
- XIII. ADJOURNMENT

IV.a.

Office of Recipient Rights
Report to the Mental Health Board
On Complaints/Allegations
Closed in: January 2024

Office of Recipient Rights Report to the Mental Health Board
Complaints/Allegations Closed in January 2024

	January 2024	FY 23-24	January 2023	FY 22-23
Total # of Complaints Closed	38	130	25	139
Total # of Allegations Closed	65	239	44	247
Total # of Allegations Substantiated	14	55	15	90

The data below represents the total number of closed allegations and substantiations for the following categories:
Consumer Safety, Dignity/Respect of Consumer, Treatment Issues, and Abuse/Neglect.

ALLEGATIONS	January 2024		January 2023	
Category	TOTAL	SUBSTANTIATED	TOTAL	SUBSTANTIATED
Consumer Safety	7	1	2	0
Dignity/Respect of Consumer	13	4	9	2
Treatment Issues/Suitable Services (Including Person Centered Planning)	12	4	1	0
Abuse I	0	0	0	0
Abuse II	2	0	2	0
Abuse III	6	3	6	2
Neglect I	0	0	0	0
Neglect II	2	0	2	2
Neglect III	7	2	5	4
	49	14	27	10

APPEALS	January 2024	FY 23-24	January 2023	FY 22-23
Uphold Investigative Findings & Plan of Action	1	1	1	1
Return Investigation to ORR; Reopen or Reinvestigate	0	0	0	0
Uphold Investigative Findings but Recommend Respondent Take Additional or Different Action to Remedy the Violation	0	0	0	0
Request an External Investigation by the State ORR	0	0	0	0

ABUSE AND NEGLECT DEFINITIONS – SUMMARIZED

Abuse Class I means serious injury to the recipient by staff. Also, sexual contact between a staff and a recipient.

Abuse Class II means non-serious injury or exploitation to the recipient by staff and includes using unreasonable force, even if no injury results.

Abuse Class III means communication by staff to a recipient that is threatening or degrading. (such as; putting down, making fun of, insulting)

Neglect Class I means a serious injury occurred because a staff person DID NOT do something he or she should have done (an omission). It also includes failure to report apparent or suspected abuse I or neglect I of a recipient.

Neglect Class II means a non-serious injury occurred to a recipient because a staff person DID NOT do something he or she should have done (an omission). It also includes failure to report apparent or suspected abuse II or neglect II of a recipient

Neglect Class III means a recipient was put at risk of physical harm or sexual abuse because a staff person DID NOT do something he or she should have done per rule or guideline. It also includes failure to report apparent or suspected abuse III or neglect III of a recipient.

ORR ADDENDUM TO MH BOARD REPORT

February 2024

Re: January 2024 Abuse/Neglect Violations

January

Abuse Violations

- There were three substantiated Abuse III violations in January 2024.
 - The remedial actions for these violations were Staff Transfer (1), Written Reprimand (4), and Training (3) There were 2 staff for one violation.

The 3 violations occurred at the same agency but different program sites.

Neglect Violations

- There were two substantiated Neglect III violations in January 2024.
 - The remedial actions for these violations were Written Reprimand (2), and Suspension (1). One violation was a Failure to Report.

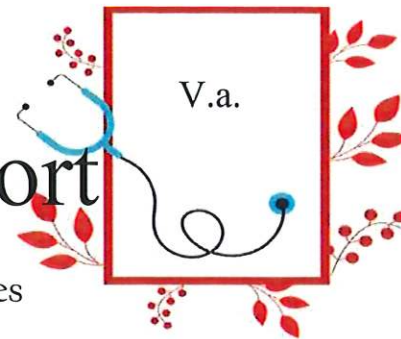
The 2 violations occurred at the same agency but different program sites.

Program Services Report

February 26, 2024

Integrated Health Services Clinic/Psychiatric Services

Wanda Brown, ISK, Senior Executive



The Integrated Health Services Clinic at ISK continues to elevate to new heights in the quality of care that is provided for members of our community. Our goal is to strive for excellence and to deliver exceptional experiences for each individual/patient that we serve at every interaction. We continue to look for quality improvement initiatives that will enhance the services offered at ISK. We are committed to health equity for all.

Since our last report to the Board, the IHSC team continues to work to improve the workflow at the clinic. Now, that ISK is in year two of the CCBHC designation it is imperative to remain up to date on policies, procedures and best practices that support the operations a Community Mental Health Clinic such as ours. IHSC provides an array of behavior health services to adults and children. Collaboration alliances within and outside of the organization remain in place with the Family Health Center, Borgess Hospital, Bronson Hospital and the WMU Homer Stryker School of Medicine, Department of Psychiatry under the leadership of Dr. Eric Achtyes, Department Chair for Psychiatry.

The latest collaboration is one that focuses on RESEARCH in the field of Psychiatry. ISK and WMU Department of Psychiatry will partner performing research studies. Over the next several weeks the research team will provide information to the psychiatrist and midlevel staff on the details of the studies and what the involvement will be for the patients and staff of ISK. Participation is fully voluntary. Dr. Achtyes described participating in the studies as a “bonus”, it will not have any affect on the services that the patients receive from ISK. The research team is being led by Dr. Eric Achtyes. Currently, the research team at IHSC consisted of Dr. Achtyes, Dr. Valrie Honablue and Wanda Brown, MSN. The most recent members to join the team are Dr. Richard Myers, Psychiatrist, Heather Mayle and Bill Boshoven, research assistants. The first study which is titled *Impact TD* is the one looking at tardive dyskinesia. The second study is titled *Research Registry*, this study is just seeing if people are interested in learning about research. This is a huge opportunity for ISK, Kalamazoo County, and the patients we serve.

ISK, PCE and Bronson Hospital have recently put into practice a laboratory interface. The interface system will support the ISK prescribers entering lab orders electronically for patients during their appointment. Paper orders will no longer be necessary to obtain labs drawn at a Bronson Hospital system facility. The Bronson Epic system and the lab results will be sent electronically to the ISK/KARE system. Once the prescriber reviews the results and signs off on the order/results, the information will automatically link into the individual's electronic health record at ISK. Overall, this process will decrease the time it takes to receive lab results that can be shared with the patient in a timelier manner.

We continue to strengthen the collaboration with WMU Psychiatry Department by having the medical students and residents participate in shadowing and ride along experiences with the ISK teams. Gaining firsthand experience working in the CMH community. The collaboration between the WMU School of Medicine Psychiatry Department and ISK has afforded the Board-Certified Psychiatrist (Dr. Valrie Honablue) to continue providing evidenced based lectures and best practice peer review lectures to the ISK clinical team.

The Nurse Care Managers are collaborating with the EMH, Finance and Arcadia pharmacy departments to reimplement the Medication Assistance Program for patients without insurance and in need of assistance to obtain their prescribed medications. Stay tuned for more information about this initiative.



INTEGRATED Services of Kalamazoo
 (ISK) Board of Director's Meeting
 INTEGRATED Services of Kalamazoo
 610 South Burdick Street
 Kalamazoo MI 49007

January 22, 2024

VI.a.

<u>ISK Board Member</u>	<u>Board Members PRESENT</u>	<u>Declaration of Location City/County</u>	<u>Board Members ABSENT</u>
Karen Longanecker, <i>CHAIR</i>	X	Kalamazoo/Kalamazoo	
Michael Seals, <i>VICE CHAIR</i>	X	Kalamazoo/Kalamazoo	
Nkenge Bergan			X
Sarah Carmany	X	Kalamazoo/Kalamazoo	
Patrick Dolly			X
Pat Guenther	X	Kalamazoo/Kalamazoo	
Ramona Lumpkin			X
Michael Raphelson	X	Kalamazoo/Kalamazoo	
Sharon Spears	X	Kalamazoo/Kalamazoo	
Erik Krogh	X	Kalamazoo/Kalamazoo	
Melissa Woosley			X
Montez Morales, <i>COMMISSIONER</i>			X

ISK - KCMHSAS Staff Present:

Jeff Patton, *CHIEF EXECUTIVE OFFICER*
 Amy Rottman
 Charlotte Bowser
 Lisa Brannan
 Wanda Brown
 Sheila Hibbs
 Kathy Lentz
 Beth Ann Meints
 Michael Schlack, *CORPORATE COUNSEL*
 Dianne Shaffer
 Lisa Smith
 Ed Sova
 Alecia Pollard
 Demeta Wallace, *BOARD LIAISON*

Providers/Guests:

<i>Latrieva Boston</i>	<i>Fi Spalvieri</i>
Executive Director	Executive Director
ASK	Community Living
Family Services	Options
<i>Diane Marquess</i>	<i>Doug Schroeder</i>
Chief Executive Officer	Clinical Director
Family & Childrens Services	Community Living
	Options
	<i>Ann Brunn</i>
	Community Living
	Options

Call to Order

The Board of Directors (Integrated Services of Kalamazoo) held their meeting on Monday, January 22, 2024. It began @ 4:00pm and was presided over by Chair, *Karen Longanecker*.

AgendaMOTION

Member Krogh, I moved to approve the agenda for the meeting. Supported by Vice Chair Seals and carried without dissent.

Citizen Time No citizens came forth.

Recipient Rights Monthly Reports

Lisa Smith, ISK, Director of ORR, presented the complaints/allegations closed in November & December 2023.

November 2023Abuse Violations

- There were two substantiated Abuse II violations in November 2023.
 - The remedial actions for these violations were Employment Termination (1), Demotion (4), Written Reprimand (4), and Training (4).
The two violations occurred at different agencies. There were 4 staff involved in one violation.
- There were two substantiated Abuse III violations in November 2023.
 - The remedial actions for these violations were Employment Termination (1), Staff Transfer (1), Written Reprimand (2), and Training (2).
The 2 violations occurred different agencies. There were 2 staff involved in one violation.

Neglect Violations

- There was one substantiated Neglect II violation in November 2022.
 - The remedial actions for this violation was Employment Termination (1), Written Reprimand (3), Training (3), and Policy Revision/Development(3).
There were 4 staff involved in the violation.
- There were two substantiated Neglect III violations in November 2022.
 - The remedial actions for these violations were Employment Termination (1), Written Reprimand (1), and Training (1).
The 2 violations occurred at the same agency but different program sites.

All of the ORR case information is sent to the ISK Population Directors on a monthly basis for any tracking/trending of the RR information in their areas of authority. *(Agencies can include ISK).

December 2023

Abuse Violations

- There were two substantiated Abuse II violations in December 2023.
 - The remedial actions for these violations were Training (1), Written Reprimand (1), and Pending (1).
The 2 violations occurred at 2 different agencies.
- There were three substantiated Abuse III violations in December 2023.
 - The remedial actions for these violations were Employment Termination (1), Written Reprimand (2), and Training (2).
The 3 violations occurred at 3 different agencies.

Neglect Violations

- There were seven substantiated Neglect III violations in December 2023. One of the seven was Neglect III, Failure to Report.
 - The remedial actions for these violations were Employment Termination (2), Employee left the agency (2), Written Reprimand (4), Policy Revision/Development (1), Training (3), and Pending (1).

The 7 violations occurred at the 5 different agencies. Two different agencies each had 2 violations at the same program site.

All of the ORR case information is sent to the ISK Population Directors on a monthly basis for any tracking/trending of the RR information in their areas of authority. *(Agencies can include ISK).

Recipient Rights ANNUAL Report

Lisa Smith, ORR Director, ISK, presented the ORR Annual Report from October 1, 2022-September 30, 2023.

This report is a summary of the data by type or category about the rights of recipients receiving services from ISK including the number of complaints, investigations substantiated and the remedial actions. It also highlights the training provided to staff and contract providers.

To review the entire Recipient Rights Annual Report, please contact the Office of Recipient Rights @ [269-364-6920](tel:269-364-6920).

Program Service Report

Kathy Lentz, Senior Executive, IDDA/Intellectual and Developmental Disabilities Adult & Letter of Commendation – Fi Spalvieri/Community Living Options

Adults with Intellectual/Developmental Disabilities

Integrated Services has a department devoted to supporting adults with Intellectual and/or Developmental Disabilities (I/DD). A Developmental Disability is defined as:

“...a disabling condition that originated before an individual reaches 22 years of age, continues (or can be expected to continue) indefinitely, and constitutes a substantial disability for the individual in three of seven major life activities (self-care, receptive/expressive language, mobility, learning, self-direction, economic self-sufficiency, capacity for independent living). Common diagnoses include Autism Spectrum Disorder, Intellectual Disability, Cerebral Palsy, Epilepsy and various genetic abnormalities/syndromes.”

Intellectual Disability is defined as:

“...a condition that originated before an individual reaches 22 years of age, characterized by significant limitations in intellect, with IQ being 70 or lower.”

Most of the individuals served by ISK IDD Adult Department have both an Intellectual Disability and a Developmental Disability, but not all. Integrated Services of Kalamazoo supports some individuals who do not have an Intellectual Disability; however, their condition is significantly disabling and causes difficulty in everyday living and functioning. This may occur for individuals with Autism Spectrum disorder, Epilepsy or Cerebral Palsy.

Currently, the IDD Adult Department serves 644 adults. During the course of a year, we serve approximately 750 adults. Of these, approximately 60% at any time are eligible for and enrolled in the ISK Certified Community Behavioral Health Center (CCBHC) due to a co-occurring mental health condition.

Our primary focus is to support adults with I/DD to identify their best life through a person-centered planning process. Steps to achieve the life of their choosing are identified and implemented, with direct support and monitoring by the Case Manager. The Case Manager also identifies clinical, and community supports, as well as individual strengths and connections, to assist the individual to live the life they want. Medicaid Home and Community Based Services are provided through ISK’s provider partners. These Home and Community Based Services include Community Living Supports, Skill Building Assistance, Specialized Residential, Supported Employment and Respite. This is the current count of individuals receiving these supports:

 Community Living Supports	210
 Skill Building Assistance	189
 Specialized Residential	200
 Supported Employment	33
 Respite	146

The IDD Adult Department has several initiatives and partnerships designed to best and collaboratively support individuals. These include:

- Self Determination
 - Self Determination is the principle that all adults have the right to make their own choices, direct their lives, be responsible for their actions and be a valued community member.
 - Self Determination principles can be leveraged through the use of Self-Directed services, where individuals use the budget for their services to select providers for their supports. Adults with I/DD can directly hire employees to support them, or select a qualified agency, not on the ISK provider panel, to provide services.
 - Directly managing a service budget and service delivery gives individuals greater control over their lives and outcomes.
- Inclusion Advisory Council
 - A group of adults with I/DD, served by ISK, providing guidance, feedback, support and recommendations to ISK. The purpose is to develop pathways to fuller community inclusion and participation.
- Project SEARCH
 - National model, based upon partnership with Michigan Rehabilitation Services, local Intermediate School District and local CMHSP, supporting students with I/DD in internships with a host business. Bronson Hospital is our host business. They provide 17 different internship opportunities for students in their last year of schooling. This provides invaluable real life job experiences for these young adults. The employment outcomes for this partnership exceed 80% during all of the past 10 years.
- Students Transitioning to Employment Partnership (STEP)
 - Partnership with the Intermediate School District (ISD) and Michigan Rehabilitation Services
 - The ISD identifies students who have had successful community work internships. The STEP group meets to ensure everything in place for employment (transportation, Michigan ID, Social Security numbers, other supports in family home, other support needs such as therapy, etc).
 - This model has resulted in a smooth job search experience for students with I/DD.

I am happy to provide additional information and answer questions.
Respectfully given, Kathy Lentz, Senior Executive Officer

That concludes my reports.

Letter of Commendation

Kathy Lentz said, “I can’t say enough about our partnership with Fi Spalvieri and the CLO staff. We recently had 2 emergency placements and the CLO team went above and beyond this week to secure placement and to supply the immediate and necessary supports for the re-establishing of stability. Like many of our other provider agencies, CLO is experiencing staff shortages. However, they came up with some creative staffing initiatives and were able to secure the extra staff necessary. Thank you for your diligence and willingness to always help in getting the job done!”

Beth Ann Meints, Administrator of Clinical Services/CCBHC Report

Beth Ann Meints said, “One of the requirements for being a CCBHC, is that we must complete a Community Health Needs Assessment (CHNA) every 3 years. It has been 3 years since we completed our last CHNA. Therefore, we will be gathering data, getting community input from our providers and individuals living in this community. A significant focus will be on African American males within substance use treatment and how to improve engagement. Engagement with those in a substance use treatment is one of our CCBHC Health Indicators. The Urgent Care/Access Center has served 1,938 individuals, 63% intakes and 30% crisis services since July 2023. The remaining time was for routine services of peer contacts, Case Management and ACT.” That concludes my reports.

Consent CalendarMOTION

Chair Longanecker, “Are there any materials that the ISK Board would like to have removed from the Consent Calendar before we proceed with the verbal motion?” No materials were requested to be removed.

- a. Minutes November 27, 2023
- b. MISSION/VISION/VALUE STATEMENT (Policy)
- c. Bylaws and Rules of Procedure (Policy)
- d. Annual Leave Reserve (Policy & Report)
- e. Annual Board Planning Cycle (Report)
- f. Ends Development Process (Policy)
- g. Ends for Individuals Served (Policy)

Member Krogh, “I MOVE TO ACCEPT THE CONSENT CALENDAR MONITORING REPORTS BOTH “AS-IS” OR WITH PROPOSED RECOMMENDED CHANGES.” Supported by Member Guenther. MOTION PASSED.

Monitoring ReportsQuality Improvement and Performance Measurement Mgmt Plan (Report)MOTION

“The Michigan Department of Health and Human Services (MDHHS) requires that each specialty Prepaid Inpatient Health Plan (PIHP) have a quality assessment and performance improvement program (QAPIP) which meet the specified standards in the contract with MDHHS. In addition to the QAPIP, MDHHS requires each Community Mental Health Services Program (CMHSP) to have a Quality Improvement Program (QIP). The description that follows provides the QIP for the Integrated Services of Kalamazoo (ISK) for fiscal year 2023/24. Aside from this QIP, ISK participates in and contributes to the QAPIP of our PIHP – Southwest Michigan Behavioral Health. CARF International, the accrediting body for ISK, requires a Performance Measurement and Management Plan to be established. This Plan outlines the intent and expectations of the ISK Performance Measurement and Management Plan. Specific measures and identified outcomes are to be

established by ISK leadership and program staff. Results of the Performance Measurement and Management Plan shall be reported to the ISK Board of Directors as established within this plan.

The purpose and assurances of the QIP for ISK is as follows:

1. Continually evaluate and enhance organizational processes that most influence organizational effectiveness and efficiency. Each Continuous Quality Improvement (CQI) project implemented will include documentation of the reason for the project and measurable progress achieved. All improvement activities will be evaluated for effectiveness, including tracking of issues and identified barriers.
2. Monitor and evaluate the systems and processes related to the quality of clinical care and non-clinical services that can be expected to affect the health status, quality of life and satisfaction of persons served. All improvement activities will be evaluated for effectiveness.
3. Focuses on indicators related to improved behavioral and physical health outcomes and takes action to demonstrate improved performance.
4. Monitor and evaluate quality of care reflected through the populations served in terms of age group, disease categories, special risk status, and other areas identified. This shall be monitored at least annually through a Year-End report that is reviewed by IQIC and the ISK Board.
5. Identify and assign priority to identified opportunities for performance improvement. Addresses priorities for improved quality of care and individuals served safety.
6. Create a culture that has a focus on the individuals we serve and includes their input and participation in problem solving.”

MOTION

Member Guenther, “I MOVE APPROVAL OF THE ISK QUALITY IMPROVEMENT PROGRAM PLAN FOR FISCAL YEAR 2023/2024.” Supported by Member Raphelson.

MOTION PASSED.

Strategic Plan (Report)

Sheila Hibbs reported, “*The current plan was completed in 2023. Therefore, ISK has entered into a joint agreement with TDB Solutions will help us in facilitating a strategic planning process which includes conducting an environmental scan, engaging with stakeholders via interviews, identifying strategic priorities and key objectives to ultimately develop a documentation of the process and plan.*”

To review this report in its entirety, please use the following link: <https://iskzoo.org/about-us/board/>

Emergency Executive Succession Policy

MOTION

Vice Chair Seals, “I MOVE TO ACCEPT THE PROPOSED RECOMMENDED CHANGES TO THE ISK BOARD POLICY V.05, TO REARRANGE THE EXECUTIVE ORDER.” Supported by Member Krogh. MOTION PASSED.

PURPOSE/EXPLANATION

To establish limitations of means regarding emergency executive succession.

POLICY

- I. In order to protect the Board from sudden loss of Chief Executive Officer (CEO) services, the ~~Chief Executive Officer~~ may not have fewer than two other executives familiar with board and ~~Chief Executive Officer~~ issues and processes.
- II. The order of succession in an emergency is as follows:
 - A. ~~Chief Executive Officer~~
 - A.B. Administrator of Clinical Services
 - B.C. Administrator of Operations
 - D. ~~Chief Medical Officer~~
 - C. ~~Chief Executive Officer~~
 - B. ~~Deputy Director Program Services~~
 - C. ~~Deputy Director Administrative Services~~
 - D. ~~Chief Medical Officer~~
- III. This policy will be monitored through internal mechanisms on an annual basis.

Financial Reports/Financial Condition Reports December 31, 2023

Amy Rottman, ISK, Chief Financial Officer, presented the Financial Condition Reports for December 31, 2023.

To review the financial and investment reports, please use the following link:

<https://iskzoo.org/about-us/board/>

Utilization Reports

Charlotte Bowser, ISK, Accounting Manager, presented the Utilization Report for the period ending December 31, 2023.

- Youth Community Inpatient Services is at (54) days and is unfavorable at \$58,061
- MI Adult Community Inpatient Services is at (135) days and is favorable at \$225,860
- Community Living Supports, Personal Care, and Crisis Residential is unfavorable at \$519,861

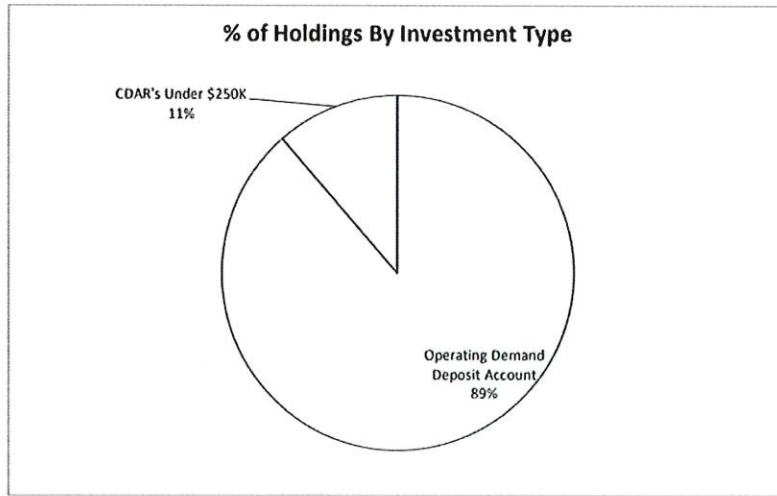
Investment Report

Charlotte Bowser, ISK, Accounting Manager, presented the Investment Report for the period ending December 31, 2023.

**Quarterly Cash & Investments Report
Quarter Ending December 31st, 2023**

Financial Institution	Type of Investment	Cost Basis	Maturity Date	% Yield
CASH				
PNC	Operating Demand Deposit Account	\$30,593,295	NA	0.03%
	Payroll Account	\$5,000		
	Accrued Leave Reserve	\$119,687		
	Prelax Reimbursement Account	\$73,824		
	Various Petty Cash Funds	\$780		
	Total Cash Accounts		\$30,792,585	
INVESTMENTS				
CDAR's (via Independent Bank)	CD's Issued Under FDIC Limit of \$250,000	\$3,927,006		4.55%
	Total CDAR's	\$3,927,006		
	Total Investments	\$3,927,006		
TOTAL CASH AND INVESTMENTS		\$34,719,591		

% of Holdings By Institution		% of Holdings By Investment Type	
PNC - Cash	88.69%	Cash	88.69%
CDAR's (via Independent Bank)	11.31%	CDAR's	11.31%
	100.00%		100.00%



November & December Disbursements

MOTION

Member Guenther, "BASED ON THE BOARD FINANCE MEETING REVIEW, I MOVE THAT ISK APPROVE THE November 2023 vendor disbursements of \$9,026,721.78 and the December 2023 vendor disbursements of \$12,336,667.60." Supported by Member Carmany.

MOTION PASSED.

Action Items - NEW or REVISITEDFamily Support Advisory Council (FSAC) AppointmentMOTION

Vice Chair Seals, "I MOVE TO APPROVE THE APPOINTMENT OF **JALISSA MURRAY** TO THE FAMILY SUPPORT ADVISORY COUNCIL (FSAC)." Supported by Member Raphelson.

MOTION PASSED.

Chief Executive Officer Report

My report will be brief. Welcome Ms. Latrieva Boston to our board meeting. Ms. Boston is the new Executive Director of ASK Family Services.

Please make the necessary arrangements to attend our special board meeting on Monday, January 29, 2024, @ 4:00pm. Our special guest will be Brad Casemore & Susan Radwan.

That concludes my report.

Citizen Time

No citizens came forth.

SWMBH (Southwest Michigan Behavioral Health) Updates/Erik Krogh

Member Krogh announced that the SWMBH did not have a meeting due to inclement weather.

That concludes my report.

Meeting ended at 5:26PM.

Demeta J. Wallace

Administrative Coordinator & Board Liaison

INTEGRATED Services of Kalamazoo



INTEGRATED Services of Kalamazoo
 (ISK) Board of Director's Meeting
 INTEGRATED Services of Kalamazoo
 610 South Burdick Street
 Kalamazoo MI 49007

January 29, 2024

VI.a.

<u>ISK Board Member</u>	<u>Board Members PRESENT</u>	<u>Declaration of Location City/County</u>	<u>Board Members ABSENT</u>
Karen Longanecker, <i>CHAIR</i>	X	Kalamazoo/Kalamazoo	
Michael Seals, <i>VICE CHAIR</i>	X	Kalamazoo/Kalamazoo	
Nkenge Bergan	X	Kalamazoo/Kalamazoo	
Sarah Carmany			X
Patrick Dolly			X
Pat Guenther	X	Kalamazoo/Kalamazoo	
Ramona Lumpkin	X	Kalamazoo/Kalamazoo	
Michael Raphelson			X
Sharon Spears	X	Kalamazoo/Kalamazoo	
Erik Krogh	X	Kalamazoo/Kalamazoo	
Melissa Woosley			X
Montez Morales, <i>COMMISSIONER</i>			X

ISK - KCMHSAS Staff Present:

Jeff Patton, *CHIEF EXECUTIVE OFFICER*
 Sheila Hibbs
 Beth Ann Meints
 Michael Schlack, *CORPORATE COUNSEL*
 Alecia Pollard
 Demeta Wallace, *BOARD LIAISON*

Providers/Guests:

Brad Casemore Chief Executive Officer
 SWMBH
Ella Philander CCBHC Coordinator
 SWMBH
Susan Radwan Policy Governance
 Consultant - LEM

Call to Order

The Board of Directors (Integrated Services of Kalamazoo) held their meeting on Monday, January 29, 2024. It began @ 4:01pm and was presided over by Chair, *Karen Longanecker*.

Agenda

MOTION

Member Krogh, "I moved to approve the agenda for the meeting." Supported by Vice Chair Seals and carried without dissent.

Citizen Time No citizens came forth.

Special Presentation:

Background: On September 20, 2023, Ed Meny, SWMBH Board Chair, sent an email to Karen Longanecker, ISK Board Chair and Erik Krogh, SWMBH Board Member standing for Integrated Services of Kalamazoo, informing them of a new initiative that the SWMBH Board would like to visit each CMHSP Boards in our region to discuss SWMBH's value and expectations to the CMHSPs.

“In its efforts to govern well, the SWMBH Board is initiating an effort to solicit the expected impacts of SWMBH on each of its founding CMHs and their communities. The SWMBH Board has a governing duty to be the informed voice and agent of the member CMH Boards. The SWMBH Board’s intent is to connect with the founding member CMH boards to assure that SWMBH is aligning with the members’ values and expectations about impacts and performance goals. We ask your cooperation and facilitation to the request below. The SWMBH Board understands it has accountability to the CMH member Boards.

The SWMBH Board's hope is to have direct engagement with the CMH Boards over the coming months. We would like to send Susan Radwan, SWMBH Board Consultant and SWMBH CEO Bradley Casemore to engage with your board to gather input that will inform the SWMBH Board.”

Their (Brad Casemore, CEO/SWMBH and Susan Radwan, Policy Governance Consultant – LEM) board tours began with the integrated Services of Kalamazoo Board of Directors.

Susan walked through the discussion and mentioned information that was on the document input from the 6 proposed questions and heard other input from the board members. They also sent a power point presentation (*SWMBH Owner Engagement and Ends Development For Constituent CMHA Board 2023-2024*) to be shared with all ISK Board of Directors members.

The ISK Board of Directors engaged in a stimulating conversation with Susan and Brad. Offered many meaningful suggestions on how to improve relationships, share information, and make even better services for our persons served.

Following all these meetings, the SWMBH Board will consider all the input as it is reviewed and revise its Ends for further review and finalization of the fiscal year end budget.

Citizen Time

No citizens came forth.

Meeting ended at 5:26PM.

Demeta J. Wallace
Administrative Coordinator & Board Liaison
INTEGRATED Services of Kalamazoo

INTEGRATED SERVICES OF KALAMAZOO

BOARD POLICY V.09

AREA: Governance	
SECTION: System Governance	PAGE: 1 of 1
SUBJECT: QUALITY MANAGEMENT	SUPERSEDES: 02/24/2014 REVISED: 02/22/2016

PURPOSE/EXPLANATION

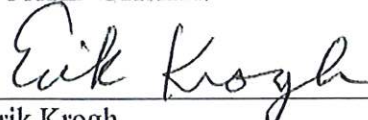
To establish limitations of means regarding the management of organizational quality.

POLICY

- I. With respect to quality management, the Chief Executive Officer (CEO) may not deviate from accepted standards of practice, stifle improvement efforts, nor promote the dissemination of inaccurate or misleading information. Accordingly, he/she may not:
 - A. Promote practices that are inconsistent with applicable accreditation, state, and federal quality standards.
 - B. Fail to implement the PIHP Quality Assessment Performance Improvement Program as indicated through Southwest Michigan Behavioral Health (SWMBH) and the development and implementation of the ISK Quality Improvement Plan which meet both accreditation standards and the Michigan Department of Health and Human Services (MDHHS) requirements.
- II. This policy will be monitored through internal mechanisms on a semi-annual basis. One report will focus on the review compliance with elements of this policy. The second will be a year-end summary of results of the ISK Quality Improvement Plan. A summary of the results of external quality reviews will be in the semi-annual reports.

CHIEF EXECUTIVE OFFICER:


Jeff Patton
Chief Executive Officer

BOARD CHAIR:


Erik Krogh
Board Chair

INTEGRATED SERVICES OF KALAMAZOO

BOARD POLICY II.14

AREA:	Governance		
SECTION:	Board Governance Process	PAGE:	1 of 3
SUBJECT:	BOARD TRAVEL	SUPERSEDES:	02/24/2014
		REVISED	03/28/2022

PURPOSE/EXPLANATION

To provide a uniform method for approval and payment of board member travel.

POLICY

It is the policy of the board to continually support the education of board members in the areas of board governance and evidenced based practices.

The board annually budgets an amount towards that end.

PROCEDURE**I. APPROVAL**

- A. Board members are encouraged to participate in the Community Mental Health Association of Michigan (CMHAM) conferences, which cover many topics related to board governance and evidenced-based practices.

Administrative staff will register board members and make hotel arrangements once notified by a board member that they wish to attend. The board member will follow all guidelines on reimbursement following the conference to receive reimbursement for any other travel related expenditures.

- B. Board members may request funding assistance for other conferences or trainings. Below are the procedures a board member must follow to request funding assistance:
1. Provide written description of the relevance of the conference or training to the work of the board.
 2. Completion of a ISK board member's Overnight/Out-of-State Travel Request form detailing the cost.
 3. Funding assistance will be limited to \$500 per conference, per board member, and only be available if funds are available in the board conference budget line.
 4. The request will be submitted to the board chair. The board chair will consult with staff as to the relevance of the conference or training. If the board chair determines that the conference or training is relevant to the

member's service on the board, the chair will appoint two additional board members who are to review the request with the chair and determine whether to approve the request. The review and determination are to occur within a reasonable period of time. The two additional board members will be selected on a rotating basis in alphabetical order, excluding the member making the request.

5. Once approved, the board member will follow all guidelines on reimbursement following the conference to receive reimbursement.

II. REIMBURSEMENT

- A. All requests for reimbursement must be accompanied with legible, detailed receipts for all items requested for reimbursement. A summary receipt is not sufficient and not subject to reimbursement by ISK. All vendors can provide a detailed receipt, however one may need to be requested from the vendor indicating the date, time, amount and detail where possible.
- B. If receipts are not attached, no reimbursement will be made.
- C. The mileage reimbursement rate shall be the Internal Revenue Service (IRS) standard deductible mileage allowance for the current year.
- D. Mileage and business expense claims should be submitted to the Finance Department within 30 days of travel. A ISK Travel Voucher form must be completed specifying the purpose of the trip, point of origin, destination and the actual number of miles traveled (rounded to the nearest whole number).

III. MEALS

- A. ISK utilizes a blended Meals and Incidental Expenses for all in State travel as computed from the applicable IRS Per Diem Rates. Any travel outside of Michigan shall be determined by utilizing the applicable IRS Per Diem Rate for the specific travel destination. Effective 10/01 of every year the maximum meals reimbursement rate shall be the recomputed based on the applicable IRS Per Diem Rates.
- B. Meals may be reimbursed to board members when ISK business requires a board member to travel out-of-county. The approved rates of reimbursement for meals, including tips, are as follows:

Meal(s)	Travel Time Requirement	Maximum Allowed
Breakfast	Prior to 7:00 a.m. & extends beyond 9:00 a.m.	\$11.00
Lunch	Prior to 12:00 p.m. & extends beyond 2:00 p.m.	\$16.00
Dinner	Prior to 6:30 p.m. & extends beyond 7:00 p.m.	\$37.00
Per Diem	Prior to 7:00 a.m. & extends beyond 7:00 p.m.	\$64.00

Note: All Maximums Include Tips and Other Incidental Expenses

EXHIBITS

- A. Overnight/Out-of-State Travel Request
- B. ISK Travel Voucher

CHIEF EXECUTIVE OFFICER



Jeff Patton
Chief Executive Officer

APPROVED



Erik Krogh
Board Chair

INTEGRATED SERVICES OF KALAMAZOO

BOARD POLICY VI.02

AREA:	Governance	PAGE:	1 of 5
SECTION:	System Governance	SUPERSEDES:	04/15/21
SUBJECT:	INVESTMENT POLICY	REVISED:	03/28/2022

PURPOSE/EXPLANATION

It is the policy of Integrated Services of Kalamazoo (ISK) to invest public funds in a manner which will ensure the preservation of principal while providing the highest investment return with maximum security, meeting the daily cash flow requirements of the organization and conforming to all state statutes governing the investment of public funds.

POLICY**I. SCOPE**

This policy applies to all financial assets of ISK. These funds shall be accounted for in the Independent Annual Audit Report.

II. OBJECTIVE

The primary investment objectives, in priority order shall be:

A. *Safety*

Safety of principal is the foremost objective in the investment of ISK funds. Investments shall be undertaken in a manner that seeks to ensure the preservation of principal in the overall portfolio. To attain this objective diversification is required in order that potential losses on individual securities do not exceed the income generated from the remainder of the portfolio.

B. *Liquidity*

The investment portfolio shall remain sufficiently liquid to enable ISK to meet all operating requirements that might be reasonably anticipated.

C. *Return on Investments*

The investment portfolio shall be designed with the objective of attaining a rate of return throughout budgetary and economic cycles, commensurate with the investment risk constraints and the cash flow characteristics of the portfolio.

D. Risks

Further objectives of this policy are to minimize credit and concentration risk, interest rate risk, and foreign currency risk.

1. *Credit Risk (Custodial Credit Risk and Concentration Credit Risk):*
ISK will seek to minimize custodial credit risk, which is the risk of loss due to failure of the security issuer or backer, by limiting investments to the types listed in Section V. of this investment policy. ISK will seek to minimize the amount of Concentration Risk, which is the risk of loss attributed to the magnitude of investments in a single issuer, by diversifying the investment portfolio so that the impact of potential losses from any one type of security or issuer will be minimized.
2. *Investment Rate Risk:*
ISK will minimize Interest Rate Risk, which is the risk that the market value of securities in the portfolio will fall due to changes in market rate, by structuring the investment portfolio so that securities mature to meet cash flow requirements for ongoing operations, and investing operating funds primarily in shorter term securities, liquid assets, money market funds, or similar investments pools and limiting the average maturity in an effort to meet cash flow requirements.
3. *Foreign Currency Risk:*
ISK is not authorized and will not hold investments subject to this kind of risk.

III. DIVERSIFICATION

Investments shall be diversified by security type and institution. With the exception of U.S. Treasury securities and authorized investment pools as defined in Public Act 20 of 1943 as amended, no more than 60% of the total investment portfolio will be invested in a single security type or with a single financial institution with the exception of funds held in a Certificate of Deposit Account Registry Service (CDARS) account.

IV. DELEGATION OF AUTHORITY

Management responsibility for the Investment Policy is hereby delegated to the Chief Executive Officer (CEO), Chief Financial Officer (CFO), and the Finance Director (FD).

V. AUTHORIZED INVESTMENTS

The CEO, CFO and FD are authorized to invest in the following types of securities authorized by Public Act 20 of 1943, as amended:

- A. Bonds, securities, and other obligations of the United States or an agency or instrumentality of the United States.
- B. Certificates of deposit, savings accounts, deposit accounts or depository receipts of a financial institution as defined in Public Act 20 of 1943 as amended, no more than 60% of the total investment portfolio will be invested in a single security type or with a single financial institution with the exception of funds held in a CDARS account.
- C. Commercial paper rated at the time of purchase at the highest classification established by not less than 2 standard rating services and that matures not more than 270 days after the date of purchase.
- D. Repurchase agreements consisting of instruments in subdivision V.A.
- E. Banker's acceptances of United States banks.
- F. Obligations of this state or any of its political subdivisions that at the time of purchase are rated as investment grade by not less than 1 standard rating service.
- G. Obligations described in subdivision 6.1 through 6.6 if purchased through an interlocal agreement under the Urban Cooperation Act of 1967. 1967 (Ex Sess) PA 7, MCL 124.501 to 124.512.
- H. Investment pools organized under the Surplus Funds Investment Pool Act, 1982 PA 367, MCL 129.111 to 129.118.
- I. Investment pools organized under the Local Government Investment Pool Act, 1985 PA 121, MCL 129.141 to 129.150.

VI. SAFEKEEPING AND CUSTODY

It shall be the responsibility of the CEO, CFO and FD to determine which securities will be held by a third party custodian. Securities held in safekeeping by a third party custodian shall be evidenced by a safekeeping receipt

VII. PRUDENCE

The standard of prudence to be used by the CEO, CFO and FD shall be the "prudent person" standard and shall be applied in the context of managing an overall portfolio. Investments shall be made with judgement and care, under circumstances then prevailing, which persons of prudence, discretion and intelligence exercise in the management of their own affairs, not for speculation, but for investment, considering the probable safety of their capital as well as the probable income to be derived.

VIII. REPORTING

The CEO, CFO and FD shall provide a timely quarterly report to the ISK Board that provides a clear picture of the status and types of investments of the current investment portfolio. This report shall be prepared in a manner that will allow the Board to ascertain whether investment activities during the reporting period have conformed to the investment policy.

IX. ORDER EXECUTION

Before executing an order to purchase or trade the funds of ISK, a financial intermediary, broker or dealer shall be provided with a copy of ISK Investment policy regarding the buying or selling of securities and acknowledge receipt and agree to comply with the terms contained therein by executing the form attached as Appendix #1.

CHIEF EXECUTIVE OFFICER

Jeff Patton
Chief Executive Officer**APPROVED**

Erik Krogh
Board Chair

APPENDIX #1

I have read and fully understand Public Act 20 of 1943 as amended, and the investment policy of Kalamazoo County Community Mental Health Authority d/b/a: Integrated Services of Kalamazoo.

Any investment advice or recommendations on investments given by _____ (name) _____ representing (company) _____ to the Chief Executive Officer (CEO), Chief Financial Officer (CFO) and Finance Director (FD) or his/her designee shall comply with the requirements of Public Act 20 of 1943 as amended, and the Investment Policy of ISK. Any existing investment not conforming to the statute or policy will be disclosed promptly to the CEO, CFO and FD or his/her designee. Further, should a broker/dealer learn of a forthcoming downgrading of commercial paper that has been sold to ISK, I agree to notify the CEO, CFO and FD or his/her designee as soon as possible to determine if there is a need to trade that investment.

By: _____

Printed Name: _____

Title: _____

Name of Financial Company: _____

Date: _____

Please send the original Appendix #1 to:
Integrated Services of Kalamazoo
Attention: Chief Financial Officer
610 South Burdick Street
Kalamazoo MI 49007

INTEGRATED SERVICES OF KALAMAZOO

BOARD POLICY V.10

AREA: Governance	
SECTION: Executive Limitations	PAGE: 1 of 1
SUBJECT: COLLABORATION	SUPERSEDES: 06/27/2011 REVISED: 03/28/2016

PURPOSE/EXPLANATION

To establish limitations of means regarding the use of collaboration with stakeholders.

POLICY

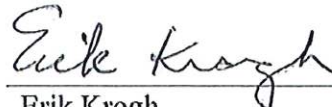
- I. The Chief Executive Officer (CEO) may not fail to initiate opportunities and/or take advantage of benefits resulting from collaboration in the development and implementation of services and activities of the ISK programs.
- II. This policy will be monitored through internal mechanisms and available external information on an annual basis.

CHIEF EXECUTIVE OFFICER



Jeff Patton
Chief Executive Officer

BOARD CHAIR



Erik Krogh
Board Chair



Community • Independence • Empowerment

POLICY V.10: COLLABORATION

Report of Collaboration Activities To the Board of Directors ~ February 2024 ~

Collaboration Activity Summary for January 1 - December 31, 2023



Policy Response:

Integrated Services of Kalamazoo (ISK) seeks out opportunities to collaborate with our community stakeholders. The purposes of such collaboration efforts are to take advantage of community expertise in the development and implementation of services for our customers. This report to the ISK Board of Directors is one monitoring tool used to review the key ISK collaborative activities implemented under the leadership of the Chief Executive Officer (CEO). New and continued collaboration efforts during this year may reflect changes in operation and/or means of collaboration.

Below is a summary of key Collaboration Activities by ISK during the year 2023:

ISK Program Services Providers:

Organizations contracting with ISK as a “DCO” (Designated Collaborating Organization) for identified services to support our Certified Community Behavioral Health Clinic (CCBHC) initiatives:

- **ASK Family Services**
 - ✓ Family Support and Training
 - ✓ Peer Delivered Services/Peer Mentoring
- **Community Healing Center – Elizabeth UpJohn Community Healing Center**
 - ✓ Targeted Case Management
 - ✓ Homebased
 - ✓ Outpatient Therapy
- **Community Living Options**
 - ✓ Skill Building Assistance
 - ✓ Supported Employment
- **Family & Children’s Services**
 - ✓ Targeted Case Management
 - ✓ Homebased
- **MRC Industries**
 - ✓ Targeted Case Management
 - ✓ Skill Building Assistance
 - ✓ Supported Employment
- **Recovery Institute of Southwest Michigan**
 - ✓ Peer Delivered Services
- **Milestone Senior Services**
 - ✓ Targeted Case Management
- **Western Michigan University Center for Disability Services**
 - ✓ Targeted Case Management
 - ✓ Community Living Supports/Senior Day Program
- **Western Michigan University Unified Clinics - Resiliency Center for Assessment and Treatment**
 - ✓ Individual/Family/Group Outpatient Therapy

Organizations contracting with ISK for the delivery of other community mental health services:

Applied Behavioral Analysis (ABA) Autism Benefit Services	
ABA Pathways	Centria Healthcare LLC
Autism Spectrum Therapies	Lighthouse Autism Center
Acorn Autism Health of Michigan	Synthesis ABA
WMU Autism Center of Excellence	ROI Great Lakes Autism Center
Specialized Residential Services (A combination of Personal Care and Community Living Support Services)	
Arnold AFC	Harmony Enterprises
Brookside AFC	Hope Network Behavioral Health/HN West Mich.
Beacon Specialized Living	Hudson's Country Manor
Burell AFC	Turning Leaf AFC
Cornerstone AFC	Good Samaritan
Ideal Treasure AFC	Moman AFC
CD Mended Hearts	Pine Rest
Colemanz AFC	Phillips AFC
Community Living Options	Prader Willi Homes of Oconomowoc
Cornerstone AFC	Residential Opportunities, inc
Eden Haven LLC	Sakshaug Group Homes
Flatrock Manors	South County Home Health Care
Golden Residential	Precious Care Assisted Living
Progressive Alternatives	Hernandez Homes AFC
Emergency/Crisis Intervention Service	
Gryphon Place	Pine Rest Christian Mental Health Services
Community Living Supports and/or Skill Building Assistance (offered at home residence, community, program site)	
Center for Growth and Independence	Progressive Alternatives
Housing Resources Inc.	Social Care Elite
Interface/Passages	Battle Buddies
Outpatient Therapy (MH)	
Community Healing Center	
Behavioral Support Services	
WMU Department of Psychology (PATS)	
Occupational Therapy	
The Therapy Place	
Nursing Services, Respite Services	
Advantage Private Duty Nursing	
Music Therapy	
Edgewater Music Therapy	
Financial Intermediary	
Stuart Wilson	
Nursing Home Monitoring, OBRA Screening	
Milestone Senior Services	
Independent Facilitation of Person-Centered Planning	
Allison Hammond	

Memorandums of Understanding for Supportive Services:

Augusta Police Department	LISC
Battle Creek VA Medical Center	Maryville University
Ascension Borgess / Borgess Hospital	Michigan Commission for the Blind
Bronson Healthcare Group / Bronson Hospital	MHSDA
CARES	Ministry with Community
Catholic Charities	Helping Hands
Climax Scotts Community Schools	OutFront Kalamazoo
Family Health Center	Parchment Public Schools
Galesburg Augusta Schools	Pediatrics, PC
Gull Lake Schools	Pine Grove Housing Services
Hospice Care of SW Michigan	Portage Police Department
Community Healing Center (Jim Gilmore)	Portage Public Schools
Kalamazoo County 8 th District MH Recovery Court	Comstock Public Schools
Kalamazoo County 9 th District Judicial Court	Richland Police Department
Kalamazoo County MDHHS: Child Welfare Division	River Church
Kalamazoo County Health/Community Services Depart.	Schoolcraft Community Schools
Kalamazoo County Sheriff	Schoolcraft Police Department
Kalamazoo Department of Public Safety	UpJohn Institute
Kalamazoo Gospel Mission	Vicksburg Community Schools
Kalamazoo Public Schools	Vicksburg Police Department
Kalamazoo Township Police	Victory Clinic
KRESA	WMU Police Department
KVCC Department of Public Safety	WMU School of Medicine
YWCA Domestic Assault Shelter	Kalamazoo County Collaborative
Kalamazoo County Fire Chief's Association	KalRecovery Project
The Salvation Army	Trestlewood Pediatrics

ISK Training Department Community Collaborations:

Aside from collaborations with the ISK service network to provide necessary staff training, ISK has been collaborating with a variety of community partners to provide Adult Mental Health First Aid. For the year 2022, ISK has trained approximately 525 in this evidenced-based educational program. Adult MHFA training was provided free of charge through ISK's Mental Health Awareness Training Grant from SAMSHA. Some of community partners in MHFA training this year include:

- ❖ Gryphon Place
- ❖ Kalamazoo Public Library
- ❖ Kalamazoo Valley Community College
- ❖ Kellogg's
- ❖ Kalamazoo County Fire Departments
- ❖ Life EMS
- ❖ Kalamazoo Psychiatric Hospital
- ❖ Loaves and Fishes
- ❖ Kalamazoo Loaves and Fishes
- ❖ Van Buren Road Commission
- ❖ Charles River Laboratories
- ❖ K College
- ❖ Milestone Senior Services
- ❖ Air National Guard Base
- ❖ Michigan Works
- ❖ Michigan State Navigators

- ❖ Fetzter Institute
- ❖ Western Michigan University, WMU School of Medicine and WMU College of Aviation,
- ❖ ISK is also partnering with KRESA to provide Youth-focused Mental Health First Aid classes

In addition to Mental Health First Aid training, ISK Training Department collaborated with the Kalamazoo Public Library offering Microaggression Training to some @60 staff and Cradle Kalamazoo offering Trauma Training to @40 of their staff.

The ISK Housing Recovery Center

Current organizations the HRC is collaborating with to promote and provide housing support in our community include:

- | | |
|--|----------------------------|
| ❖ Kalamazoo County Continuum of Care | ❖ Salvation Army |
| ❖ United Way of Battle Creek and Kalamazoo Region | ❖ Housing Resources, Inc |
| ❖ The Kalamazoo County Public Housing Commission | ❖ County of Kalamazoo |
| ❖ Kalamazoo Community Foundation | ❖ Full Circle Communities |
| ❖ Legal Aid | ❖ Lift Foundation |
| ❖ Michigan Department of Health and Human Services | ❖ Kalamazoo Public Schools |
| ❖ Michigan State Housing Development Authority | ❖ Kalamazoo Public Safety |
| ❖ The US Department of Housing and Urban Development | ❖ Open Doors |

Re-energized collaboration with Western Michigan University School of Medicine:

This collaboration started in fiscal year 2019-2020. Now, almost 4.5 years after inception, ISK and the Western Michigan University Homer Stryker M.D. School of Medicine Department of Psychiatry are working jointly on projects such as: rotations of first- and second-year residents along with medical students providing an opportunity to observe the real-time operations of ISK staff performing their day-to-day tasks in the community setting. Often, they can ride along with the Assertive Community Treatment team (ACT) or observe services in the Integrated Services Health Clinic. The rotations provide an early introduction of the vast number services that are offered from ISK.

Additionally, a W-Med psychiatrist is providing evidenced based lectures and best practice presentations, to the clinical team members in addition to other training opportunities on topics not limited to polypharmacy, quality improvement, best practice, and standards of care.

In autumn of 2023, Pediatrics residents from WMED also began a behavioral health mini-rotation, one afternoon a week in divided into four-week rotations, partnering with the Youth and Families teams, such as Targeted Case Management, Homebased, Wraparound, Intake, and Mobile Crisis Response.

Collaborations continuing into 2024:

- Adults with Mental Illness Department (MIA); partnering with the Family Health Center and Victory Clinic to provide improved care coordination for mutual clients receiving medication assisted treatment for opiate use disorders.

- MIA department is partnering with Bronson hospital on their “Emergency Department Medications for Opioid Use Disorder (ED-MOUD) Work Group”.
- Kalamazoo Protect and Connect – In 2021, local law enforcement leadership approached ISK to work on creating a more formalized partnership across all county law enforcement agencies. This resulted in the creation of a police mental health collaboration (PMHC) called Kalamazoo Connect and Protect (KPAC). This partnership, supported through funding from the Bureau of Justice Assistance, was established in 2022 and in January 2023, KPAC moved into implementation which includes: data collection efforts, the creation of a co-response model within the county, utilization of the new Behavioral Health Urgent Care Center by first responders, and the development of a case consultation work group to address individuals who are high utilizers of both the behavioral health and justice systems.

Community education/resources partnerships:

- Community Advocates
- Aradia Pharmacy – housed at the Integrated Services Health Clinic

ISK staff members participate on a variety of Boards, Coalitions and Groups:

ISK is a Member Organization of the Community Mental Health Association of Michigan (CMHAM). Staff participate in a variety of conferences and meetings as planners, featured speakers, and participants.

- CEO; Keynote Speaker @ WMU Homer Stryker, M.D. School of Medicine/MLK Day Celebration
- CEO; Recipient of the 2024 WMU Homer Stryker, M.D. School of Medicine, Dr. Martin Luther King, Jr., Service Award for honoring the dream through supplying Mental and Behavioral Health services for Kalamazoo County
- CEO; Member of the Irving S. Gilmore Foundation Board
- CEO; Member of Kalamazoo Valley Community College Board
- CEO; Member of Pokagon Band of Potawatomi Health Services Board
- CEO; Member of the Kalamazoo Foundation Funders Group
- CEO; Member of Coalition for Excellence in MH
- CEO; Member of the Kalamazoo Criminal Justice Council
- CEO or designee; continues to be Presenter/Speaker at the Wellness and Recovery Fair Activities
- Chief Human Resources Officer; member of Kalamazoo Human Resource Management Association
- Chief Project Officer; member of Kalamazoo Downtown Rotary
- Chief Project Officer; participant on Governance Board for Cradle Kalamazoo and Steering Team for Southwest Michigan Perinatal Quality Improvement Collaborative, both community initiatives to improve maternal and infant health and end infant mortality with a special focus on the racial disparities
- Chief Project Officer; coordinator with County Medical Director for Kalamazoo County Opioid Coalition
- Chief Project Officer; member of Executive Committee for Great Start Collaborative through KRESA to improve the early childhood system
- Corrections Program Supervisor; member Community Corrections Advisory Board for the Office of Community Corrections.
- Senior Executive Housing Recovery Center & Facilities Management; Kalamazoo City Commission
- Senior Executive Housing Recovery Center & Facilities Management; Kalamazoo County Public Housing Commission
- Senior Executive Housing Recovery Center & Facilities Management; LIFT
- Housing Manger; Kalamazoo County Continuum of Care Board
- Housing Manager; Housing Choices Board
- Housing Manager; Michigan Interagency Council on Homelessness
- Adults with Mental Illness Department (MIA); partnering with Bronson Hospital on their "Emergency Department Medications for Opioid Use Disorder (ED-MOUD)" Work Group
- Integrated Services of Kalamazoo (ISK) continues to partner with Kalamazoo County Law Enforcement agencies to develop and implement a cross system, comprehensive Kalamazoo Police-Mental Health Collaboration (PMHC).

Community Collaborations of the ISK Human Resources Department:

- Partnered with various universities to offer internships/shadowing/preceptors/residencies for students
- Hosted Bronson Nursing Students for a shadowing experience
- Respecting Differences – collaboration with City of Kalamazoo, City of Portage, Kalamazoo College, Kalamazoo County, Western Michigan University, and Kalamazoo Valley Community College to provide an annual diversity awareness program to our respective employees and to the community as a whole
- Participate on Ministry with Community HR Advisory Committee
- Maintained Bronze Certification as a Veteran friendly employer from Michigan Veterans Affairs Agency
- Participated in WMU Government and Nonprofit 2023 Career Fair
- Participated in the KVCC Career Fair
- Staffed recruitment table at GVSU to recruit for vacant clinical positions
- Participated in Michigan State University Social Work Career Fair
- Joined the NASW and participated in the NASW career fair
- Actively participate in a CMH HR networking community, collaborating on topics as necessary
- Membership in West Michigan Hispanic Chamber of Commerce
- Maintained a broad reach within the community and expanded pool of diverse candidates
- Partnered with local gyms to obtain membership discounts for employees
- “Ban the Box” – participate in a community initiative to not ask about criminal conviction history on the employment application
- Community Theatre volunteerism – collaboration with community members to bring affordable, quality live theatre to all members of Kalamazoo County – volunteers with Kalamazoo Civic Theatre and offers audio description services at Kalamazoo Civic Theatre

INTEGRATED
SERVICES OF
KALAMAZOO



Period Ended
January 31, 2024

Monthly Finance
Report

INTEGRATED SERVICES OF KALAMAZOO

Statement of Net Position

January 31, 2024

	January 2023 (unaudited)	January 2024
Assets		
Current assets		
Cash and investments	\$ 29,426,530	\$ 33,978,712
Accounts receivable	5,246,659	3,334,008
Due from other governments	1,795,132	2,441,740
Prepaid items	1,458,369	1,955,605
Total current assets	<u>37,926,690</u>	<u>41,710,065</u>
Non-current assets		
Capital assets, net of accumulated depreciation	10,750,331	13,214,612
Net pension asset, net of deferred outflows	5,722,229	7,214,053
Total non-current assets	<u>16,472,560</u>	<u>20,428,665</u>
Total assets	<u>\$ 54,399,250</u>	<u>\$ 62,138,730</u>
Liabilities		
Current liabilities		
Accounts payable	\$ 11,247,630	\$ 11,004,242
Due to other governments	1,258,606	1,288,368
Due to providers	108,898	995,498
Accrued payroll and payroll taxes	1,685,956	1,835,628
Unearned revenue	182,378	35,409
Total current liabilities	<u>14,483,468</u>	<u>15,159,145</u>
Net position		
Designated	13,747,779	9,171,891
Undesignated	18,360,519	25,729,038
Investment in fixed assets	4,858,748	13,470,135
Previous year close	-	-
Net gain (loss) for period	2,948,736	(1,391,480)
Net position	<u>\$ 39,915,782</u>	<u>\$ 46,979,585</u>

INTEGRATED SERVICES OF KALAMAZOO

Statement of Revenue, Expenses and Change in Net Position

October 1, 2023 through January 31, 2024

Percent of Year is 33.33%

	Original 2024 BUDGET	YTD Totals 1/31/24	Remaining Budget	Percent of Budget - YTD
Operating revenue				
Medicaid:				
Traditional Capitation	\$ 59,535,085	\$ 26,801,905	\$ 32,733,180	45.02%
Healthy Michigan Capitation	12,302,122	3,079,944	9,222,178	25.04%
Settlement	5,287,379	2,552,570	2,734,809	0.00%
State General Fund:				
Formula Fundings	3,705,491	1,300,172	2,405,319	35.09%
CCBHC Demonstration	27,297,101	3,648,527	23,648,574	0.00%
CCBHC Accrual	-	(110,830)	110,830	0.00%
County Allocation	1,550,400	516,800	1,033,600	33.33%
Client Fees	357,483	246,856	110,627	69.05%
SUD Block Grant	-	37,319	(37,319)	0.00%
Other grant revenue	7,071,254	2,398,551	4,672,703	33.92%
Other earned contracts	2,752,649	842,355	1,910,295	30.60%
Interest	1,000	60,118	(59,118)	0.00%
Local revenue	10,000	11,860	(1,860)	0.00%
Total operating revenue	\$ 119,869,964	\$ 41,386,147	\$ 78,483,818	34.53%
Operating expenses				
Salaries and wages	27,984,525	9,174,415	\$ 18,810,109	32.78%
Employee benefits	10,070,805	2,823,976	7,246,829	28.04%
Staff development	280,317	32,565	247,752	11.62%
Payments to providers	76,194,079	27,109,283	49,084,796	35.58%
Administrative contracts	7,781,913	2,722,996	5,058,917	34.99%
IT software and equipment	692,972	225,083	467,889	32.48%
Client transportation	41,100	9,082	32,018	22.10%
Staff travel	322,767	69,375	253,392	21.49%
Office expenses	515,667	125,274	390,393	24.29%
Insurance expense	128,035	62,729	65,306	48.99%
Depreciation expense	589,832	219,777	370,055	37.26%
Utilities	374,796	84,181	290,615	22.46%
Facilities	-	17,186	(17,186)	0.00%
Local match	617,788	101,703	516,085	0.00%
Total operating expenses	\$ 125,594,595	\$ 42,777,627	\$ 82,816,969	34.06%
Change in net position	(5,724,631)	(1,391,480)	\$ (4,333,151)	
Beginning net position	48,371,064	48,371,064		
Ending net position	\$ 42,646,433	\$ 46,979,585		

INTEGRATED SERVICES OF KALAMAZOO

Statement of Revenue, Expenses and Change in Net Position

October 1, 2023 through January 31, 2024
Percent of Year is 33.33%

	Specialty Services		Healthy Michigan		SUD Block Grant		Totals		Variance
	Budget	YTD Totals 1/31/24	Budget	YTD Totals 1/31/24	Budget	YTD Totals 1/31/24	Budget	YTD Totals 1/31/24	
Operating revenue									
Medicaid:									
Traditional Capitation	\$ 19,845,028	\$ 26,801,905	\$ -	\$ -	\$ -	\$ 37,319	\$ 19,845,028	\$ 26,839,224	\$ 6,994,196
Healthy Michigan Capitation	-	-	4,100,707	-	-	-	4,100,707	3,079,944	(1,020,763)
CCBHC Base Payment	-	(3,959,942)	-	(934,984)	-	-	-	(4,894,926)	(4,894,926)
Settlement Estimate	4,438,135	3,199,312	(2,675,676)	(609,423)	-	(37,319)	1,762,460	2,552,570	790,110
Client Fees	-	34,955	-	5,044	-	-	-	39,999	39,999
Total operating revenue	\$ 24,283,163	\$ 26,076,230	\$ 1,425,031	\$ 1,540,581	\$ -	\$ 0	\$ 25,708,196	\$ 27,616,811	\$ 1,908,616
Operating expenses									
Internal services	\$ 1,243,323	\$ 664,557	\$ 86,546	\$ 5,879	\$ -	\$ -	\$ 1,329,869	\$ 670,436	(\$ 659,433)
External services	21,487,821	23,304,152	1,247,407	1,410,190	-	-	22,735,228	24,714,342	1,979,114
Delegated managed care	1,552,020	2,107,520	91,079	124,512	-	-	1,643,098	2,232,032	588,934
Total operating expenses	\$ 24,283,164	\$ 26,076,229	\$ 1,425,032	\$ 1,540,581	\$ -	\$ -	\$ 25,708,195	\$ 27,616,810	\$ 1,908,615
Change in net position	(0)	0	(0)	0	-	0	0	1	

INTEGRATED SERVICES OF KALAMAZOO

Statement of Revenue, Expenses and Change in Net Position

October 1, 2023 through January 31, 2024
Percent of Year is 33.33%

	State General Fund		CCBHC		Other Funding Sources		Totals		Variance
	YTD Budget	YTD Totals 1/31/24	YTD Budget	YTD Totals 1/31/24	YTD Budget	YTD Totals 1/31/24	YTD Budget	YTD Totals 1/31/24	
Operating revenue									
General Fund	\$ 1,235,164	\$ 1,300,172	\$ -	\$ -	\$ -	\$ -	\$ 1,235,164	\$ 1,300,172	\$ 65,008
Projected GF Carryforward	-	-	-	-	-	-	9,099,034	8,639,331	(459,702)
CCBHC Demonstration	-	-	9,099,034	8,639,331	-	-	2,389,340	2,398,551	9,211
Other Federal and State Grants	-	-	-	-	2,389,340	2,398,551	879,694	842,355	(37,340)
Earned Revenue	-	-	-	-	879,694	842,355	5,600	-	(5,600)
COFR Revenue	-	-	-	-	5,600	-	333	60,118	59,784
Interest	-	-	-	-	333	60,118	516,800	516,800	-
County Allocation	-	-	-	-	516,800	516,800	3,333	12,009	8,676
Local Revenue	-	-	149	-	3,333	11,860	-	-	-
Transfer from GF	-	-	-	-	703,012	-	703,012	535,896	(167,116)
Settlement Revenue (Expense)	-	-	-	-	-	-	-	-	-
Total operating revenue	\$ 1,235,164	\$ 1,300,321	\$ 9,099,034	\$ 9,175,227	\$ 4,498,113	\$ 3,829,683	\$ 14,832,310	\$ 14,305,232	\$ (527,079)
Operating expenses									
Internal Programs	110,190	176,774	10,748,683	8,366,284	33,761	-	10,892,634	8,543,058	(2,349,576)
External Programs	387,950	527,733	-	1,423,116	-	238,494	387,950	2,189,343	1,801,393
Other Federal and State Grants	-	-	-	-	-	3,674,793	3,674,793	3,667,434	(7,359)
HUD Grants	-	-	-	-	426,608	430,135	426,608	430,135	3,527
Managed Care Administration	34,012	59,918	-	-	2,305	-	36,317	59,918	23,601
Homeless Shelter	-	-	-	-	176,375	127,902	176,375	127,902	(48,474)
Transfer from GF	703,012	535,896	-	-	-	-	703,012	535,896	(167,116)
Local match expense	-	-	-	-	434,867	101,703	434,867	101,703	(333,164)
Non-DCH Activity Expenditures	-	-	-	-	46,863	41,324	46,863	41,324	(5,539)
Total operating expenses	\$ 1,235,164	\$ 1,300,321	\$ 10,748,683	\$ 9,789,400	\$ 4,795,572	\$ 4,606,991	\$ 16,779,418	\$ 15,696,712	\$ (1,082,706)
Change in net position	0	(0)	(1,649,649)	(614,172)	(297,458)	(777,308)	(1,947,108)	(1,391,480)	555,627

This financial report is for internal use only. It has not been audited, and no assurance is provided.

INTEGRATED SERVICES OF KALAMAZOO

CCBHC

October 1, 2023 through January 31, 2024
 Percent of Year is 33.33%

	CCBHC Medicaid	CCBHC Healthy MI	CCBHC Non-Medicaid	CCBHC YTD Totals
Operating revenue				
Prepayment	\$ 2,548,122	\$ 1,100,405	\$ -	\$ 3,648,527
CCBHC Base Payment Reclass	3,959,942	934,984	-	4,894,926
Remaining CCBHC revenue due	123,616	(234,445)	-	(110,830)
Client fees	115,298	13,960	77,451	206,708
Total CCBHC Revenue (PPS-1 of \$287.35 x encounters)	\$ 6,746,978	\$ 1,814,903	\$ 77,451	\$ 8,639,331
Operating expenses				
Internal services	\$ 5,633,986	\$ 1,701,792	\$ 1,030,507	\$ 8,366,284
DCO Contracts	979,991	263,613	179,512	1,423,116
Total operating expenses	\$ 6,613,977	\$ 1,965,404	\$ 1,210,019	\$ 9,789,400
Operating change in net position	133,001	(150,502)	(1,132,568)	(1,150,068)
Reclassification to cover Non-Medicaid	-	-	535,896	535,896
Total change in net position	\$ 133,001	\$ (150,502)	\$ (596,672)	\$ (614,172)

CCBHC Cost per daily visit

	2023	Q1 2024	Jan 2024
Total CCBHC Cost	\$ 27,687,187	\$ 7,369,913	\$ 9,789,400
Daily Visits	99,802	24,829	34,097
Cost per daily visit	277.42	296.83	287.10

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YOUTH COMMUNITY INPATIENT SERVICES

Report Period: October 1st, 2023 through January 31st, 2024

UTILIZATION COMPARISONS FY 23/24									
MONTH	FY 22/23 Actual		FY 23/24 Budget		FY 23/24 Actual		Days Difference (Unfavorable)	Cost Difference (Unfavorable)	Cost YTD Favorable (Unfavorable)
	Days	Dollars	Days	Dollars	Days	Dollars			
OCTOBER	70	\$72,791	46	\$47,906	69	\$72,587	(23)	(\$24,681)	(\$24,681)
NOVEMBER	63	\$66,150	46	\$47,906	66	\$69,300	(20)	(\$21,394)	(\$21,394)
DECEMBER	37	\$38,735	46	\$47,906	57	\$59,892	(11)	(\$11,986)	(\$11,986)
JANUARY	53	\$55,661	46	\$47,906	31	\$32,550	15	\$15,356	\$15,356
FEBRUARY	55	\$57,939	46	\$47,906					
MARCH	78	\$81,900	46	\$47,906					
APRIL	90	\$94,500	46	\$47,906					
MAY	62	\$65,100	46	\$47,906					
JUNE	9	\$9,450	46	\$47,906					
JULY	41	\$43,050	46	\$47,906					
AUGUST	23	\$24,087	46	\$47,906					
SEPTEMBER	54	\$56,312	46	\$47,906					
TOTALS	635	\$665,675	549	\$574,872	223	\$234,329	(39)	(\$42,705)	
MONTHLY AVERAGES	53		137		56				
GROSS ANNUAL COST		\$665,675		574,872		\$234,329		(\$42,705)	

Favorable/(Unfavorable):

Total (42,705)

COMMUNITY INPATIENT SERVICES

Report Period: October 1st, 2023 through January 31st, 2024

MONTH	UTILIZATION COMPARISONS FY 23/24									
	FY 22/23 Actual		FY 23/24 Budget		FY 23/24 Actual		Days Difference (Unfavorable)	Cost Difference (Unfavorable)	Cost YTD Favorable (Unfavorable)	
	Days	Dollars	Days	Dollars	Days	Dollars				
OCTOBER	900	\$905,756	654	\$716,371	650	\$684,493	4	\$31,878	\$31,878	
NOVEMBER	686	\$714,410	654	\$716,371	406	\$427,750	248	\$288,621	\$288,621	
DECEMBER	704	\$732,356	654	\$716,371	771	\$811,010	(117)	(\$94,639)	(\$94,639)	
JANUARY	639	\$663,945	654	\$716,371	690	\$726,120	(36)	(\$9,748)	(\$9,748)	
FEBRUARY	656	\$683,828	654	\$716,371						
MARCH	635	\$660,537	654	\$716,371						
APRIL	543	\$565,345	654	\$716,371						
MAY	796	\$829,300	654	\$716,371						
JUNE	629	\$655,218	654	\$716,371						
JULY	757	\$789,744	654	\$716,371						
AUGUST	820	\$854,847	654	\$716,371						
SEPTEMBER	698	\$727,339	654	\$716,371						
TOTALS	8,463	\$8,782,625	7,848	\$8,596,454	2,517	\$2,649,373	99	\$216,112		
MONTHLY AVERAGES	705		654		629					
GROSS ANNUAL COST		\$8,782,625		8,596,454		\$2,649,373		\$216,112		

Favorable/(Unfavorable):

Total 216,112

**COMMUNITY LIVING SUPPORTS (CLS), PERSONAL CARE (PC) & CRISIS RESIDENTIAL
ALL POPULATIONS**

Report Period: October 1st, 2023 through January 31st, 2024

SERVICE	Month	Avg. Daily Rate	No. Served	Days of Service	FY 23/24 Budget		FY 22/23 Actual	
					Dollars		Dollars	Favorable / (Unfavorable)
PC/CLS	Jan	\$279	364	44,130	\$11,553,950	\$12,322,928	(\$768,978)	
CRISIS RES.	Jan	\$575	26	307	\$322,362	\$176,527	\$145,835	
CLS (SIP)	Jan	NA	305		\$4,354,550	\$4,529,288	(\$174,738)	
Annual Cost							(\$797,880)	

Personal Care (P.C.)-hands on of daily personal activities such as laundry, feeding, bathing, etc.

Community Living Supports (CLS)-services to increase or maintain personal self-sufficiency with a goal of community inclusion, independence and productivity.

Specialized Residential (S.R.)-Licensed setting where Personal Care and Community Living Supports occur.

Supported Independent Program (SIP)-more independent setting where Personal Care and Community Living Supports occur.



Community • Independence • Empowerment

Integrated Services of Kalamazoo MOTION

Subject:	January 2024 Disbursements	
Meeting Date:	February 26, 2024	Approval Date:
Prepared by:	Charlotte Bowser	February 26, 2024

Recommended Motion:

“Based on the Board Finance meeting review, I move that ISK approve the January 2024 vendor disbursements of \$10,311,467.11.”

Summary of Request:

As per the January 2024 Vendor Check Register Report dated 02/14/2024 that includes checks issued from 01/01/2024 to 01/31/2024.

I affirm that all payments identified in the monthly summary above are for previously appropriated amounts.

Staff: C. Bowser, Finance Director

Date of Board
Consideration: February 26, 2024