



Jeffrey W. Patton
Chief Executive Officer

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Administrative Services:
610 South Burdick Street
Kalamazoo, MI 49007

Community • Independence • Empowerment

24-HOUR CRISIS HOTLINE or NON-EMERGENCY CLINICAL SERVICES: (269) 373-6000

AGENDA

INTEGRATED Services of Kalamazoo Board of Directors HAS SCHEDULED ITS MEETING FOR MONDAY, August 26, 2024, BEGINNING @ 4:00PM via *Microsoft TEAMS* or in-person at 610 South Burdick Street/Kalamazoo, MI., / 2nd Floor – ISK Boardroom #220.

- I. CALL TO ORDER – CITY & COUNTY DECLARATION
- II. AGENDA
- III. CITIZEN TIME
- IV. RECIPIENT RIGHTS
 - a. Recipient Rights Monthly Report
 - b. Recipient Rights SEMI-ANNUAL Report
 - c. Recipient Rights Advisory Committee **MOTION**
- V. PROGRAM SERVICE REPORT
 - a. *Cheryl Nebedum & Dusty Jepkema*, JETT (Justice, Equity and Trauma Team)
 - b. *Beth Ann Meints*, Administrator of Clinical Services/CCBHC Report **VERBAL**
- VI. CONSENT CALENDAR **VERBAL MOTION**
 - a. Minutes July 22, 2024
 - i. July Monthly Meeting
 - ii. Annual Board Retreat
 - iii. Annual Public Hearing
 - b. Budgeting (Policy)
 - c. Asset Protection (Policy & Report)
- VII. MONITORING REPORTS **VERBAL MOTION**
- VIII. FINANCIAL REPORTS
 - a. Financial Condition Report
 - b. Utilization Report
 - c. July 2024 Disbursement **MOTION**
 - d. Budget Amendment #1 **MOTION**
- IX. ACTION ITEMS - NEW or REVISITED **VERBAL MOTION**
 - a. Finance (Policy)
 - b. ISK Quality Improvement Program Plan **MOTION**
- 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*
 - b. BOARD ELECTION DISCUSSION *Karen Longanecker*
- XIII. ADJOURNMENT

IV.a.

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

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

	July 2024	FY 23-24	July 2023	FY 22-23
Total # of Complaints Closed	39	318	34	319
Total # of Allegations Closed	58	553	60	554
Total # of Allegations Substantiated	19	163	12	168

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	July 2024		July 2023	
Category	TOTAL	SUBSTANTIATED	TOTAL	SUBSTANTIATED
Consumer Safety	7	2	5	1
Dignity/Respect of Consumer	11	3	17	4
Treatment Issues/Suitable Services (Including Person Centered Planning)	11	2	9	0
Abuse I	1	0	0	0
Abuse II	4	2	2	0
Abuse III	3	2	5	3
Neglect I	0	0	0	0
Neglect II	0	0	1	1
Neglect III	8	6	4	3
	45	17	43	12

APPEALS	July 2024	FY 23-24	July 2023	FY 22-23
Uphold Investigative Findings & Plan of Action	0	2	0	3
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

July 2024

Re: July 2024 Abuse/Neglect Violations

July

Abuse Violations

- There were two substantiated Abuse II violations in July 2024.
 - The remedial actions for these violations are Employee left agency but substantiated (2), Suspension (1), and Written Reprimand (1).

The 2 violations occurred at different agencies.

- There were two substantiated Abuse III violations in July 2024.
 - The remedial actions for these violations are Written Reprimand (1), Training (1), and Pending (1).

The 2 violations occurred at different agencies.

Neglect Violations

- There were six substantiated Neglect III violations in July 2024.
 - The remedial actions for this violation are Contract Action (1), Written Reprimand (5), and Training (6).

Four of the six violations occurred at the same agency but different program sites.

IV.b.

Office of Recipient Rights
Report to the Mental Health Board
On Semi-Annual Report

Office of Recipient Rights Demographic Data

Data Report Covering
October 1, 2023 through September 30, 2024

CMH/LPH Name

Integrated Services of Kalamazoo

Rights Office Director Name

Lisa Smith

Summary of Complaint Data by Category

Code	Category	Received	Investigation	Intervention	Substantiated
7221	Abuse Class I	3	3		1
72221	Abuse Class II - Nonaccidental Act	7	7		3
72222	Abuse Class II - Unreasonable Force	9	9		3
72223	Abuse Class II - Emotional Harm	0	0		0
72224	Abuse Class II - Treating as Incompetent	0	0		0
72225	Abuse Class II - Exploitation	10	10		7
7223	Abuse Class III	27	27		15
7224	Abuse Class I - Sexual Abuse	0	0		0
72251	Neglect Class I	1	1		0
72252	Neglect Class I - Failure to Report	0	0		0
72261	Neglect Class II	3	3		1
72262	Neglect Class II - Failure to Report	4	4		3
72271	Neglect Class III	48	48		28
72272	Neglect Class III - Failure to Report	13	13		12
7550	Rights Protection System	0	0	0	0
7555	Retaliation/Harassment	4	4		0
7040	Civil Rights	0	0	0	0
7044	Religious Practice	0	0	0	0
7045	Voting	0	0	0	0
7081	Mental Health Services Suited to Condition	52	42	10	10
7082	Safe, Sanitary, and Humane Treatment Environment	27	25	2	6
7083	Least Restrictive Setting	3	1	2	0
7084	Dignity and Respect	62	45	17	15
7100	Physical and Mental Exams	0	0	0	0
7110	Family Rights	10	10	0	1

Code	Category	Received	Investigation	Intervention	Substantiated
7120	Individual Written Plan of Service	2	2	0	2
7130	Choice of Physician/Mental Health Professional	0	0	0	0
7140	Notice of Clinical Status/Progress	0	0	0	0
7150	Services of a Mental Health Professional	0	0	0	0
7160	Surgery	0	0	0	0
7170	Electroconvulsive Therapy	0	0	0	0
7180	Psychotropic Drugs	0	0	0	0
7190	Medication Side Effects	0	0	0	0
7240	Fingerprints, Photographs, Audio Recordings, and Use of One-Way Glass	0	0	0	0
7249	Video Surveillance	0	0	0	0
7261	Communications - Visits	2	2	0	0
7262	Communications - Telephone	1	0	1	0
7263	Communications - Mail	1	1	0	0
7281	Personal Property - Possession and Use	8	7	1	1
7286	Personal Property - Limitations	0	0	0	0
7300	Safeguarding Money (State Hospitals Only)	0	0	0	0
7360	Labor and Compensation	0	0	0	0
7440	Freedom of Movement	2	1		0
7400	Restraint	0	0	0	0
7420	Seclusion	1	1	0	0
7460	Complete Record	0	0	0	0
7480	Disclosure of Confidential Information	8	7	1	2
7481	Withholding Confidential Information/Access Denial to Records	1	0	1	0
7490	Correction of Record	0	0	0	0
7500	Privileged Communication	0	0	0	0
0000	No Right Involved	10			
0001	Outside ORR Jurisdiction	10			

Substantiated Rights Violations and Remedial Action Taken

Complaint Category	Provider Type	Remedial Action	Remedial Action 2	SEDW	CWP	HSW
Abuse Class I	Contracted	Employment Termination				
Abuse Class II - Exploitation	Contracted	Employment Termination				1
Abuse Class II - Exploitation	Contracted	Written Reprimand				
Abuse Class II - Exploitation	Contracted	Employment Termination	Training			2
Abuse Class II - Exploitation	Contracted	Employment Termination				
Abuse Class II - Exploitation	Contracted	Employment Termination	Training			1
Abuse Class II - Exploitation	Contracted	Suspension	Written Reprimand			
Abuse Class II - Exploitation	Contracted	Employee left the agency, but substantiated				
Abuse Class II - Nonaccidental Act	Contracted	Employment Termination				
Abuse Class II - Nonaccidental Act	Contracted	Training				1
Abuse Class II - Nonaccidental Act	Contracted	Written Reprimand	Training			
Abuse Class II - Unreasonable Force	Contracted	Employment Termination				1
Abuse Class II - Unreasonable Force	Agency	Written Reprimand	Training			
Abuse Class II - Unreasonable Force	Contracted	Written Reprimand	Training			1
Abuse Class III	Contracted	Written Reprimand	Training			
Abuse Class III	Contracted	Staff Transfer	Written Reprimand			
Abuse Class III	Contracted	Employment Termination				1
Abuse Class III	Contracted	Suspension	Training			
Abuse Class III	Agency	Employment Termination				
Abuse Class III	Agency	Written Counseling	Training			

Complaint Category	Provider Type	Remedial Action	Remedial Action 2	SEDW	CWP	HSW
Abuse Class III	Contracted	Contract Action				
Abuse Class III	Contracted	Written Reprimand				
Abuse Class III	Contracted	Employment Termination				
Abuse Class III	Contracted	Employment Termination				
Abuse Class III	Contracted	Written Reprimand				
Abuse Class III	Contracted	Written Reprimand	Training			1
Abuse Class III	Contracted	Employment Termination	Written Reprimand			1
Abuse Class III	Contracted	Contract Action				
Abuse Class III	Contracted	Written Reprimand	Training			
Neglect Class II	Contracted	Employment Termination	Training			
Neglect Class II - Failure to Report	Contracted	Written Reprimand	Training			1
Neglect Class II - Failure to Report	Contracted	Written Counseling	Training			
Neglect Class II - Failure to Report	Contracted	Written Reprimand	Training			
Neglect Class III	Contracted	Written Reprimand	Suspension			
Neglect Class III	Contracted	Employee left the agency, but substantiated	Training			1
Neglect Class III	Contracted	Written Reprimand	Training			
Neglect Class III	Contracted	Verbal Counseling				
Neglect Class III	Contracted	Written Reprimand	Training			
Neglect Class III	Contracted	Written Reprimand	Training			
Neglect Class III	Contracted	Written Reprimand	Training			
Neglect Class III	Contracted	Written Reprimand	Training			
Neglect Class III	Contracted	Written Reprimand	Training			
Neglect Class III	Contracted	Written Reprimand	Training			
Neglect Class III	Agency	Written Reprimand	Training			

Complaint Category	Provider Type	Remedial Action	Remedial Action 2	SEDW	CWP	HSW
Neglect Class III	Contracted	Written Reprimand	Training			
Neglect Class III	Contracted	Written Reprimand	Training			
Neglect Class III	contracted	Written Reprimand	Training			
Neglect Class III	Contracted	Written Reprimand				1
Neglect Class III	Contracted	Written Reprimand				1
Neglect Class III	Contracted	Employee left the agency, but substantiated	Written Counseling			
Neglect Class III	Contracted	Written Reprimand	Training			
Neglect Class III	Contracted	Contract Action				
Neglect Class III	Contracted	Written Reprimand	Environmental Repair/Enhancement			
Neglect Class III	Contracted	Employment Termination	Written Reprimand			
Neglect Class III	Contracted	Written Reprimand	Training			
Neglect Class III	Contracted	Written Reprimand	Training			
Neglect Class III	Contracted	Written Counseling				
Neglect Class III	Contracted	Written Reprimand				
Neglect Class III	Contracted	Contract Action				
Neglect Class III	Contracted	Written Reprimand				1
Neglect Class III	Contracted	Written Reprimand	Training			1
Neglect Class III	Contracted	Written Reprimand	Training			
Neglect Class III	Contracted	Employment Termination				
Neglect Class III - Failure to Report	Contracted	Employee left the agency, but substantiated	Training			1
Neglect Class III - Failure to Report	Contracted	Written Reprimand				
Neglect Class III - Failure to Report	Contracted	Written Reprimand	Training			1

Complaint Category	Provider Type	Remedial Action	Remedial Action 2	SEDW	CWP	HSW
Neglect Class III - Failure to Report	Contracted	Written Reprimand				
Neglect Class III - Failure to Report	Contracted	Written Reprimand	Training			
Neglect Class III - Failure to Report	Contracted	Written Reprimand	Training			
Neglect Class III - Failure to Report	Contracted	Written Reprimand				
Neglect Class III - Failure to Report	Contracted	Written Reprimand				
Neglect Class III - Failure to Report	Contracted	Employment Termination	Written Reprimand			
Neglect Class III - Failure to Report	Contracted	Written Reprimand	Training			
Neglect Class III - Failure to Report	Contracted	Written Reprimand	Training			
Neglect Class III - Failure to Report	Contracted	Written Reprimand	Training			
Dignity and Respect	Agency	Verbal Counseling				
Dignity and Respect	Contracted	Verbal Counseling	Written Reprimand			
Dignity and Respect	Contracted	Verbal Counseling				1
Dignity and Respect	Contracted	Verbal Counseling	Training			
Dignity and Respect	Contracted	Training				
Dignity and Respect	Agency	Employee left the agency, but substantiated	Training			
Dignity and Respect	Contracted	Verbal Counseling				
Dignity and Respect	Agency	Employee left the agency, but substantiated				
Dignity and Respect	Contracted	Training				
Dignity and Respect	Agency	Verbal Counseling	Training			1
Dignity and Respect	Contracted	Training				
Dignity and Respect	Agency	Verbal Counseling				
Dignity and Respect	Contracted	Training				
Dignity and Respect	Contracted	Training				
Dignity and Respect	Agency	Verbal Counseling				
Dignity and Respect	Contracted	Training	Written Counseling			

Complaint Category	Provider Type	Remedial Action	Remedial Action 2	SEDW	CWP	HSW
Dignity and Respect	Contracted	Employment Termination				
Dignity and Respect	Contracted	Pending				
Disclosure of Confidential Information	Contracted	Policy Revision/Development				1
Disclosure of Confidential Information	Contracted	Written Reprimand	Training			
Family Rights	Contracted	Training				
Individual Written Plan of Service	Agency	Training				
Individual Written Plan of Service	Agency	Verbal Counseling	Training			
Mental Health Services Suited to Condition	Agency	Training				
Mental Health Services Suited to Condition	Contracted	Staff Transfer	Training			
Mental Health Services Suited to Condition	Contracted	Training				
Mental Health Services Suited to Condition	Contracted	Training	Policy Revision/Development			
Mental Health Services Suited to Condition	Contracted	Training				
Mental Health Services Suited to Condition	Contracted	Written Reprimand				
Mental Health Services Suited to Condition	Contracted	Employee left the agency, but substantiated	Policy Revision/Development			
Mental Health Services Suited to Condition	Contracted	Training				1
Mental Health Services Suited to Condition	Contracted	Written Reprimand				1
Mental Health Services Suited to Condition	Contracted	Training				
Personal Property - Possession and Use	Contracted	Policy Revision/Development				
Safe, Sanitary, and Humane Treatment Environment	Contracted	Training				
Safe, Sanitary, and Humane Treatment Environment	Contracted	Employee left the agency, but substantiated	Training			
Safe, Sanitary, and Humane Treatment Environment	Contracted	Employment Termination	Training			
Safe, Sanitary, and Humane Treatment Environment	contracted	Written Reprimand				

Data Summary

Demographic Information

Reporting CMH/LPH	Integrated Services of Kalamazoo
Recipient Rights Office Director Name	Lisa Smith
Reporting Period	October 1, 2023 through September 30, 2024

Complaint Data Summary

Complaints Received	329
Allegations	309
Investigations	273
Interventions	35
Complaints Substantiated	110
Percent of allegations substantiated	36%

Highlighted Complaint Categories	Received	Substantiated
Abuse I, II, III	56	29
Neglect I, II, III	69	44
Dignity and Respect	62	15
MH Services Suited to Condition	52	10
No Right Involved/Outside Jurisdiction	20	

Complaint Remediation

Remediation Type	Total	Waiver Type	Total
Verbal Counseling	9	SEDW	0
Written Counseling	5	CWP	0
Verbal Reprimand	0	HSW	24
Written Reprimand	52		
Suspension	3		
Demotion	0		
Staff Transfer	2		
Training	59		
Employment Termination	16		
Employee left the agency, but substantiated	8		
Contract Action	4		
Policy Revision/Development	4		
Environmental Repair/Enhancement	2		
Plan of Service Revision	0		
Recipient Transfer to Another Provider/Site	0		
Other	0		
Pending	1		
None	0		



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Integrated of Kalamazoo MOTION

Subject:	Recipient Rights Advisory Committee	
Meeting Date:	August 26, 2024	Approval Date: <u>August 26, 2024</u>
Prepared by:	Lisa Smith	

Recommended Motion:

Appointment:

“I MOVE TO APPOINT THE FOLLOWING INDIVIDUAL TO THE RECIPIENT RIGHTS ADVISORY COMMITTEE (RRAC): **TARA CYROCKI** FOR A TWO-YEAR TERM (**BEGINNING OCTOBER 22, 2024 – OCTOBER 22, 2026**).”

Summary of Request

Budget: _____
Staff: LS

Date of Board
Consideration: August 26, 2024

Purpose of JETT

Focus on the Following Issues:

1. Trauma Informed Practices and Care
2. Diversity, Equity, Inclusion, and Justice

Through a lens of SAMHSA's 5 Pathways to Mental Health Disparities

Racial/ethnic bias is hypothesized to contribute to disparities in health through five key pathways. These include increased exposure and susceptibility to:

1. economic and social deprivation;
2. toxic substances and hazardous conditions;
3. socially inflicted mental and physical trauma directly experienced or witnessed;
4. targeted marketing of potentially harmful commodities such as tobacco, alcohol and illicit drugs;
5. inadequate or degrading medical care.

Being Guided by:

Our Mission

We promote and provide mental health, intellectual/developmental disability and substance use disorder resources that empower people to succeed

Our Vision

We provide a welcoming and diverse community partnership which collaborates and shares effective resources that support individuals and families to be successful through all phases of life

Our Values

Community, Competence, Diversity, Effectiveness, Integrity, Leadership, Recovery and Self-Determination, Respect, Responsibility, Teamwork, Trust

By Providing within JETT, ISK and Kalamazoo County:

1. Education through trainings, presentations, discussions
2. Resources for growth to each other, coworkers, our provider network, and people served
3. Information on best practices, new understandings, changing needs
4. Leadership to have the difficult discussions and make the difficult changes
5. Accountability to each other and our community through analysis, inclusion, audits

TRAUMA INFORMED

- Working to secure more Trauma Coaches
- Discussion on Trauma informed Supervision Practices
- Discussion on Internal Crisis Response

EQUITY REVIEW

- Recently completed Equity Review on job postings and providing feedback to HR
- Completed Equity Review tool and process for entire agency

TRAINING

- Creating and hosting Culturally Inclusive Trainings
- Working to create an ISK TED Talk series to highlight skills and talents of staff

JETT SUBCOMMITTEES

ORGANIZAITONAL WELLNESS

- Created a definition of Organizational Wellness to drive committee work
- Partnering with Affinity Groups to discuss staff sense of belonging in the agency

DATA/RESEARCH

- Looking at ISK and Kalamazoo data to pull out trends focused on target populations
- Researching best practices to bring new innovations surrounding DEI work to the larger team

COMMUNICAITON

- Updating staff Portal to include Affinity Group Information and Trauma Coach Information
- Coordinating with other committees to send out event information



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

July 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	Kalamazoo/Kalamazoo	
Sarah Carman	X	Kalamazoo/Kalamazoo	
Patrick Dolly			X
Pat Guenther	X	Kalamazoo/Kalamazoo	
Ramona Lumpkin	X	Kalamazoo/Kalamazoo	
Michael Raphelson	X	Kalamazoo/Kalamazoo	
Sharon Spears	X	Kalamazoo/Kalamazoo	
Erik Krogh	X	Kalamazoo/Kalamazoo	
Melissa Woosley			X
John Taylor, <i>COMMISSIONER</i>			X

ISK - KCMHSAS Staff Present:

Jeff Patton, *CHIEF EXECUTIVE OFFICER*
 Sheila Hibbs
 Beth Ann Meints
 Charlotte Bowser
 Wanda Brown
 Amy Rottman
 Dianne Shaffer
 Lisa Smith
 Ed Sova
 Michael Schlack, *CORPORATE COUNSEL*
 Alecia Pollard
 Demeta Wallace, *BOARD LIAISON*
 Willa Burns
 David Anderson
 Tammie Natho
 Rosalind Adams
 Mitch Misiasz
 Juan Gonzalez

Providers/Guests:

Diane Marquess
 Chief Executive
 Officer
 Family &
 Children Services
Shenetta Coleman
 Chief Executive
 Officer
 ROI

Call to Order

The Board of Directors (Integrated Services of Kalamazoo) held their meeting on Monday, July 22, 2024. It began @ 3:03PM and was presided over by Chair, *Karen Longanecker*.

AgendaMOTION

Member Krogh, "I move to approve the agenda for the meeting." Supported by Member Spears and carried without dissent.

Citizen Time No citizens came forth.

Recipient Rights

Lisa Smith, ISK, Director of ORR, presented the complaints/allegations closed in May & June 2024.

MayAbuse Violations

- There was one substantiated Abuse I violation in May 2024.
 - The remedial action for this violation was Employment Termination (1).
- There were six substantiated Abuse II violations in May 2024.
 - The remedial actions for these violations were Employment Termination (2), Suspension (1), Written Reprimand (2), and Training (3).

The 6 violations occurred at 4 different agencies. One agency had 2 violations, and both occurred at different program sites.

- There were two substantiated Abuse III violations in May 2024.
 - The remedial actions for these violations were Employment Termination (1), and Written Reprimand (1).

Neglect Violations

- There were two substantiated Neglect II violations in May 2024. The two violations were Failures to Report.
 - The remedial actions for these violations were Written Reprimand (1), Written Counseling (2) and Training (3). There were two staff involved in one violation.
- There were eight substantiated Neglect III violations in May 2024. Two of the violations were Failures to Report.

JuneAbuse Violations

- There was one substantiated Abuse II violation in June 2024.
 - The remedial action for this violation was Written Reprimand (4).
- There were two substantiated Abuse III violations in June 2024.
 - The remedial actions for these violations were Written Reprimand (1), Training (1), and Contract Action (1).

The 2 violations occurred at different agencies.

Neglect Violations

- There were three substantiated Neglect III violations in June 2024. One was a Neglect II Failure to Report Violation.
 - The remedial actions for these violations were Written Reprimand (3), and Training (2).

The Neglect III Failure to Report violation and one of the Neglect III violations were at the same agency but occurred at different 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).

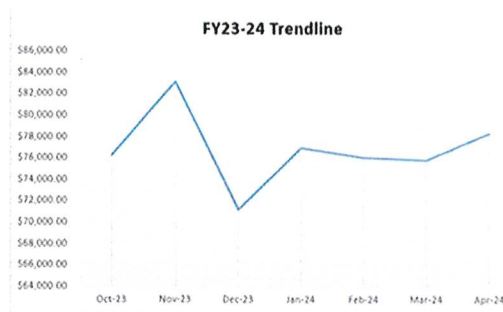
Program Service Reports

[David Anderson](#), Director of Facilities, [Tammie Natho](#), Housing Supervisor, [Rosalind Adams](#), Shelter Supervisor, [Mitch Misiasz](#), Housing Supervisor, presented the Housing Department Report. [Permanent Supportive Housing Program](#)

Our Permanent Supportive Housing Program is a voucher program funded by HUD that provides rental assistance to clients with Serious Mental Illness who are experiencing homelessness. In this program we have two supportive housing workers that help clients stay housed by ensuring that client's needs are being met and by being a liaison between the client and their landlord. Currently we have one hundred and twenty-four people housed on this voucher and are working hard to house more.

The graph below shows the spending trend of PSH since the beginning of this fiscal year. We have had a steady increase in the number of individuals housed on PSH Program since the start of the fiscal year. There was a sudden increase in the amount spent in November due to the amount of people being housed in that month, which then leveled out again with a steady increase in spending since. This upward trend is encouraging because it means we are that much closer to meeting our targeted spending amount which means housing more people who are experiencing homelessness. This is also exciting as it also means we are seeing less evictions and sustaining more of our clients. We soon

anticipate seeing our spending start to level out as we meet our targeted spending goal and will be working diligently to keep it there.



PATH Street Outreach

Our Projects for Assistance in Transitioning from Homelessness (PATH) Program consists of five street outreach workers who work between seven counties across Southwest Michigan. The goal of this program is to meet with clients who are staying in places not meant for human habitation and work with them to remove any barriers preventing them from housing. Our street outreach team works in all weather, all year long, meeting with clients wherever their encampments might be. They connect their clients to housing opportunities and walk alongside them through the whole housing process.

Our Outreach team has created a great rapport with the unhoused communities in each of the counties they work in and have established amazing partnerships with other community resources. Currently they are seeing more and more people outside, many from out of county or out of state. Housing is getting more difficult due to a lack of funding in most counties, making vouchers less available and housing opportunities more scarce.

Rise to Success (RTS)

A fast paced, goal-oriented program which people experiencing homelessness, or at risk of homelessness, to gain and maintain meaningful employment and stable housing. To be considered for the program, there is a screening process you must complete first. The screening process is a series of questions asked to better understand the client’s situation. From there, if accepted into the program, the client would be placed in one of our transitional housing units. Through one-on-one weekly meetings, we create goals with clients that help them create healthy living habits along with gaining stable income. The goal of this program is for clients to be able to support themselves by securing stable housing and gaining meaningful employment.

This program started late last year and has been increasing. We have grown from two households in our transitional units to 10 units being occupied by achieving families. One household, two parents and a one-year-old, are getting ready to graduate from the program in the next coming weeks! When they first started out in our program, they had literally nothing. Housing Navigators and the household have worked hard at gaining meaningful employment, helped them get furniture for their apartment, we even helped one client obtain their GED. We are looking for more available units to house more people in the Rise to Success program. Our goal for the people in the Rise to Success

program is that they are in a better position than when we first met them. That they have done the work and have created a healthy lifestyle by maintaining meaningful employment and by securing stable housing on their own.

Housing Support Team (HST)

On-site housing support services and supports agency referrals for tenants living at several affordable multi-family properties in Kalamazoo County. The program, funded by a portion of the Kalamazoo County's Housing Millage, began in December of 2022 and will continue through December of 2025. It provides on-going supportive case management to individuals at these properties, many of whom are unstably housed or are newly transitioned into permanent housing. The aim is to help these tenants maintain their housing while providing life skills and community events.

The program is going well. We continue to have a presence at properties where ISK was already established (Heather Gardens, Lodge House, etc.) and have developed relationships at properties where ISK previously had less presence (Maple Grove, Pinehurst). The level and type of need at each property varies wildly, and the sands are always shifting under our feet. We have had success with establishing regular groups activities (like bingo and trivia) and classes (art, cooking for one) at several of the properties. We have also been able help connect many tenants with regular physical and mental health providers, thereby (hopefully) reducing some of the strain on local emergency services.

Housing Navigation Through Schools (McKinney-Vento program)

The program provides a sort of alternative to traditional rapid rehousing funds for families with children in Kalamazoo County schools. Families who are deemed homeless (as defined by the McKinneyVento Act) are referred to our team by partners within the schools. We then work with them to find out what their current resources are and provide limited monetary support towards moving into a new unit (security deposit and potentially rent for the first few months).

The program has gone unbelievably well—almost to the point of being a victim of its own success. Much of the funding allocated toward directly housing clients has already been spent. Over 60 families have been directly housed by the program so far, and many others currently in the process of applying for housing. This program allows us to work with families who don't fall under HUD's traditional definition of homelessness but DO fall under other categories of homelessness (e.g., staying in a hotel that they pay for themselves or "doubled up" at a friend's house) who can benefit from these sorts of funds.

ISK Shelters

Integrated Services of Kalamazoo (ISK) runs and operates 4 shelters. Each of these shelters have several success stories that makes one proud to be a part of serving in a way that makes a difference in our community and in the lives of those we serve.

The Oakland House (OH) Homeless Shelter Program is based on the premise that everyone possesses the potential to recognize, define, and develop healthy living patterns. Services offered by Integrated Services of Kalamazoo's Oakland House Shelter Program include access to housing assistance, referrals, information, life skills training, and peer run support groups. Participation in this service can prove to be vital to success in this program.

In December of last year, OH sheltered a client who was in recovery and had no income. Prior to coming to OH he had experienced homelessness many years and stated often that Oakland House saved his life by keeping him off the streets and away from drugs. He stated that peer support groups at OH are extremely helpful with keeping him motivated and focused on getting housed and continued success with his recovery journey. He also attends groups at Recovery Institute and encouraged other residents to attend. Although he was worried about being able to find stable and affordable housing, our housing case managers were not. This client was successfully housed in April 2024 with an ISK subsidy paying a substantial portion of his rent while he works with his lawyer on obtaining disability benefits.

ISK's Step-Up family Shelter program is a program that supports families experiencing homelessness due to various reasons. Families entering the program can expect to be supported on their journey back to permanent housing. Support is provided through our intense weekly case management, to help families set goals, priorities, create a budget and connect to additional supportive services, should they choose to take advantage of those supports, that can prove to make a difference in the lives of the families we serve.

We had the pleasure of serving a family of 5, (dad, mom and 3 children) one child was autistic according to the parents but no formal diagnosis had been done. This 6-year-old child had not gone to the doctor, wasn't enrolled in school, had no speech, and feared bathrooms. The parents said they feared leaving the child with anyone because of all the above. After a few case management meetings, we were able to build trust with the parents and they allowed us to begin the process of moving past these fears. Mom set up a doctor visit and we went to the visit with them. We later went to the school administration building to enroll the child. We went to the IEP meeting which had everyone there necessary to support this family and assure them of positive outcomes and the benefits of their child attending school. When all was said and done, this child was eventually enrolled in Woodsedge Learning Center. The last time we checked on this family, the parents were happy with their decision and their child is doing well and goes into the bathroom unafraid.

The H.E.R.S (Homeless Emergency Response System) program designed to effectively address homelessness in the local community that typically involves Law Enforcement engagement. It is a preventive measure to reduce the number of individuals who seek temporary shelter through criminal activities like trespassing in an abandoned home or other unsafe environments considered dangerous for human habitation.

A client had been in the H.E.R.S program for a time and was still there when a new Housing Coordinator took over running this program. This client was awaiting to regain custody of her son and kept hitting walls. The new Coordinator was instrumental in helping this client regain full custody of her son, since this program accommodates single adults, mom and son were transferred to our Family Shelter where they are on target for being successfully housed as a family.

Our Veteran Shelter (VS) is a much-needed shelter in our community and provides supports to those who have served our county and are now in need of being served themselves. The Veteran Shelter supports consist of housing assistance, employment connections, connecting these individuals to the VA center and much more. Because of supports offered at the VS, a client was able to find suitable

employment, affordable housing and complete his associate degree. These successes came with a few minor challenges, nevertheless, the client showed resiliency and is now on the other side of these challenges and will be attending the NAACP bar-b-que at the VS on July 12, 2024, to help out and share his story. He says the VS was such a blessing to him and he wants to motivate others by helping and paying it forward.

That concludes our report.

Beth Ann Meints, Administrator of Clinical Services/CCBHC Report/VERBAL

The most recent 2023 Community Behavioral Health Clinics Certification (CCBHC) Criteria, that is in compliance with the statutory requirements outlined under Section 223 of Protecting Access to Medicare Act (PAMA), includes new federal and state requirements for CCBHCs to expand crisis services. To that end, CCBHC is supporting the expansion of crisis services in our community. The focus will be on providing rapid, home- and community-based responses to emergencies 24/7 for all populations, including youth, adults and individuals with intellectual/developmental disabilities. Crisis staff need to have the qualifications to respond and meet the needs of all of these populations.

That concludes my report.

Consent Calendar

MOTION

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 May 28, 2024
- b. Chief Executive Officer Performance (Policy)
- c. Chief Executive Officer Role (Policy)
- d. Delegation to the Chief Executive Officer (Policy)
- e. Board Finance Committee/INSURANCE (Report)

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

Monitoring Reports

- a. Finance **VERBAL MOTION**

The ISK Board of Directors was not ready to vote on the proposed changes to this Finance/ISK Board Policy V.04 due to lack of information.

Vice Chair Seals, “I MOVE TO TABLE THE APPROVAL OF PROPOSED RECOMMENDATIONS IN THE FINANCE/ISK BOARD POLICY V.04, UNTIL MONDAY, AUGUST 26, 2024. Member Bergan. MOTION PASSED.

Financial Reports/Financial Condition Reports

Amy Rottman, ISK, Chief Financial Officer, presented the Financial Condition Reports for June 30, 2024.

To review the financial reports, please use the following link: <https://iskzoo.org/about-us/board/>

Utilization Reports

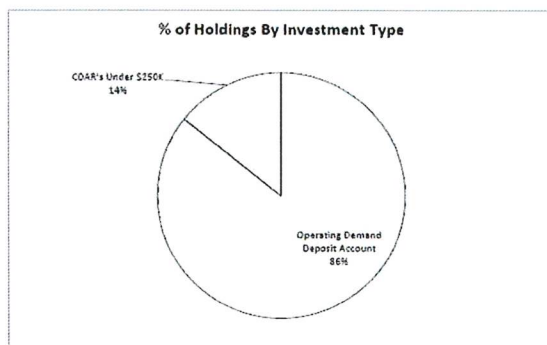
Charlotte Bowser, ISK, Director of Finance, presented the Utilization Report for the period ending June 30, 2024.

- Autism Services is at (113) days and is unfavorable at \$2,188,383
- Youth Community Inpatient Services is at (177) days and is unfavorable at \$188,966
- MI Adult Community Inpatient Services is at (540) days and is favorable at \$805,474
- Community Living Supports, Personal Care, and Crisis Residential is unfavorable at \$2,097,396

Investment Report

Charlotte Bowser, ISK, Director of Finance, presented the Investment Report for the period ending June 30, 2024.

Financial Institution	Type of Investment	Cost Basis	Maturity Date	% Yield
CASH				
FNC	Operating Demand Deposit Account	\$23,992,508	NA	0.05%
	Payroll Account	\$9,407		
	Accrued Leave Reserve	\$120,852		
	Pretax Reimbursement Account	\$65,646		
	Various Petty Cash Funds	\$780		
	Total Cash Accounts	\$24,189,189		
INVESTMENTS				
CDAR's (via Independent Bank)	CD's Issued Under FDIC Limit of \$250,000	\$4,017,702		4.55%
Total CDAR's		\$4,017,702		
	Total Investments	\$4,017,702		
TOTAL CASH AND INVESTMENTS		\$28,207,891		
<u>% of Holdings By Institution</u>		<u>% of Holdings By Investment Type</u>		
FNC - Cash	85.76%	Cash	85.76%	
CDAR's (via Independent Bank)	14.24%	CDAR's	14.24%	
	100.00%		100.00%	



May & June Disbursements/MOTION

Member Guenther, “BASED ON THE BOARD FINANCE MEETING REVIEW, I move that ISK approve the May 2024 vendor disbursements of \$11,315,364.92 and the June 2024 vendor disbursements of \$9,678,430.95.” MOTION PASSED.

ACTION ITEMS - NEW or REVISITED/MOTION

- a. RESOLUTION – Opposing MDHHS Approach to Meeting the Federal Conflict Free Access and Planning in Michigan

IX.a.
RESOLUTION OF THE
KALAMAZOO COUNTY COMMUNITY MENTAL HEALTH AUTHORITY (KCCMHA)
d/b/a INTEGRATED SERVICES OF KALAMAZOO
OPPOSING THE MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES (MDHHS)
DECISIONS TO IMPLEMENT
CONFLICT FREE ACCESS AND PLANNING IN MICHIGAN

WHEREAS (KCCMHSA) is a Participating Public Community Mental Health Services Program Authority of the Southwest Michigan Behavioral Health (SWMBH) Prepaid Inpatient Health Plan (PIHP) Region 4 Regional Entity comprised of eight counties.

WHEREAS MDHHS has announced its decision to require public Community Mental Health Services Programs (CMHSPs) to separate service assessment and planning from service delivery, requiring Medicaid beneficiaries to receive the assessment and planning services from one entity and ongoing direct services from another, separate entity effective October 1, 2024.

WHEREAS the interruption or loss of services for the 7,952 residents of Kalamazoo County with Serious Mental Illnesses, Serious Emotional Disturbances, co-occurring substance use disorders, and intellectual or developmental disabilities to whom KCCMHA d/b/a Integrated Services of Kalamazoo (ISK) provided services during the State Fiscal Year 2023 would be disastrous to many individuals that currently receive service assessments, planning, and service delivery from ISK.

WHEREAS after careful review the conclusions of the ISK Board of Directors are that the current MDHHS decision:

- Is in conflict with the statutory responsibilities of CMHSPs under Michigan law.
- Erroneously implies profit driven or undue enrichment motives on the part of governmental entities (i.e., CMHSPs and PIHPs) instead of recognizing what is actually a formal transfer of governmental responsibility from the State of Michigan to the counties for the delivery of public community mental health specialty supports and services.
- Ignores the unique Michigan Medicaid Managed Specialty Supports and Services shared risk based prepaid capitation financing system arrangement between PIHPs and MDHHS which militates against conflict-of-interest concerns.
- Is in conflict with the Certified Community Behavioral Health Clinic (CCBHC) state demonstration model currently implemented and expanded in the State of Michigan.
- Ignores, at best, and disregards, at worst, input from persons with lived experience that have consistently stated that the available procedural safeguards, including statutorily

required recipient rights protections, are preferable to systemic and structural upheaval inherent in the MDHHS announced decisions regarding implementation of Conflict Free Access and Planning federal requirements.

THEREFORE, BE IT UNANIMOUSLY RESOLVED THAT, in the strongest possible terms, and for the reasons stated herein, the KCCMHA Board of Directors opposes the MDHHS announced structural strategies for compliance with the federal Conflict Free Access and Planning rules.

BE IT FURTHER UNANIMOUSLY RESOLVED THAT, the KCCMHSA Board of Directors requests that MDHHS reconsider its current decisions and honor the federal Centers for Medicare and Medicaid Services (CMS) waiver approval of procedural mitigation of conflict-of-interest concerns and pursue CMS approval of strengthened procedural safeguards against conflict-of-interest concerns in Michigan.

ON BEHALF OF THE KALAMAZOO COUNTY COMMUNITY MENTAL HEALTH SERVICES
AUTHORITY
d/b/a INTEGRATED SERVICES OF KALAMAZOO BOARD OF DIRECTORS

Xx 
Karen Longanecker
KCCMHA Board of Directors, CHAIR

July 22, 2024
Board Resolution 2024-1

ISK Board of Directors unanimously approved the resolution without dissent.

RESOLUTION PASSED.

Chief Executive Officer Report

Jeff was appreciative to the ISK Board of Directors for taking action on the resolution that opposes the MDHHS approach to meeting the Federal Conflict Free Access and Planning in Michigan. He will share a copy of our resolution with MDHHS and others.

That concludes my report.

Citizen Time

No citizens came forth.

SWMBH (Southwest Michigan Behavioral Health) Updates/Erik Krogh

Erik reported that there is nothing to report!

Board Election Results/Karen Longanecker

Chair Longanecker, "I MOVE THAT THE ISK BOARD COMMITTEE APPOINTED TO CONSIDER A SLATE OF OFFICERS FOR THE BOARD'S REVIEW BE GIVEN ADDITIONAL TIME FOR FURTHER REVIEW AND DISCUSSION PRIOR TO CONSIDERATION BY THE FULL BOARD". Supported by Member Carmany. MOTION PASSED.

That concludes my report.

Meeting ended at [4:29PM](#).

Demeta J. Wallace

Administrative Coordinator & Board Liaison

Integrated Services of Kalamazoo Board of Directors





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

July 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	Kalamazoo/Kalamazoo	
Sarah Carmany	X	Kalamazoo/Kalamazoo	
Patrick Dolly			X
Pat Guenther	X	Kalamazoo/Kalamazoo	
Ramona Lumpkin	X	Kalamazoo/Kalamazoo	
Michael Raphelson	X	Kalamazoo/Kalamazoo	
Sharon Spears	X	Kalamazoo/Kalamazoo	
Erik Krogh	X	Kalamazoo/Kalamazoo	
Melissa Woosley			X
John Taylor, <i>COMMISSIONER</i>			X

ISK - KCMHSAS Staff Present:

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

Providers/Guests:

Laura Vredevelde,
 President, TBD
 Solutions
Tamera Collier,
 Organizational &
 Policy Consultant,
 TBD Solutions

Call to Order

The Board of Directors (Integrated Services of Kalamazoo) held their meeting on Monday, April 22, 2024.

It began @ 4:30pm and was presided over by Chair, *Karen Longanecker*.

Agenda**MOTION**

Member Krogh, “I move to approve the agenda for the meeting.” Supported by Member Guenther and carried without dissent.

Citizen Time

No citizens came forth.

Board Retreat

The Integrated Services of Kalamazoo, Board of Directors, held their Annual Board Retreat status meeting to keep them and the public informed and aligned on ISK projects and initiatives.

The following Team members and Consultants from TBD Solutions shared updates on their progress, highlights and work through blockers, and outcomes.

To review all of these presentations, please visit our website @ <https://iskzoo.org/about-us/board/>.

ISK Strategic Plan

Laura Vredevelde, President & *Tamera Collier*, Organizational & Policy Consultant, TBD Solutions

Quality Management/ENDS: ALL POPULATIONS Reports

Sheila Hibbs, ISK, Administrator of Operations

ISK Veterans Program

Juan Gonzales, ISK, Veterans Navigator

No board action was needed for any of these presentations.

Citizen Time

No citizens came forth.

Board Member Time

No comments were given by any of the ISK Board of Directors.

Meeting ended at 5:32PM.

Demeta J. Wallace

Administrative Coordinator & Board Liaison

Integrated Services of Kalamazoo Board of Directors





INTEGRATED Services of Kalamazoo
(ISK) Board of Director's
ANNUAL PUBLIC HEARING

INTEGRATED Services of Kalamazoo
610 South Burdick Street
Kalamazoo MI 49007

July 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	Kalamazoo/Kalamazoo	
Sarah Carmany			X
Patrick Dolly			X
Pat Guenther	X	Kalamazoo/Kalamazoo	
Ramona Lumpkin			X
Michael Raphelson	X	Kalamazoo/Kalamazoo	X
Sharon Spears	X	Kalamazoo/Kalamazoo	
Erik Krogh	X	Kalamazoo/Kalamazoo	
Melissa Woosley			X
John Taylor, <i>COMMISSIONER</i>			X

ISK - KCMHSAS Staff Present:

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

Providers/Guests:

Call to Order

The Board of Directors (Integrated Services of Kalamazoo) held their Annual Public Hearing on Monday, July 22, 2024.

It began @ 5:34PM and was presided over by Chair, *Karen Longanecker*.

Agenda/MOTION

Member Krogh, “I move to approve the agenda for the meeting.” Supported by Member Spears and carried without dissent.

OPENING COMMENTS

Karen Longanecker/ISK Board Chair/Opening Comments for the Public Hearing - July 22, 2024

Welcome All:

Thank you for attending this public hearing. I would like to introduce ISK Board of Directors to the audience:

- *Chair Karen Longanecker*
- *Vice Chair Michael Seals*
- Nkenge Bergan
- Sarah Carmany
- Patrick Dolly
- Patricia Guenther
- Erik Krogh
- Ramona Lumpkin
- John Taylor, Kalamazoo County Commissioner
- Michael Raphelson, M.D.
- Sharon Spears
- Melissa Woosley

Hearing Background:

- Integrated Services of Kalamazoo (ISK) Board of Directors is very interested in hearing the public’s assessment of our service delivery system. This public hearing is just one place where we hear from those we serve, their families and our community. Everyone is invited to attend and comment at any of our board meetings, which usually occur on the fourth Monday of each month.
- The Board is committed to providing quality services in response to community need. We are particularly seeking comments on ways to improve service quality and the need for new services.
- Tonight, we are interested in hearing your comments on services for children with serious emotional disturbances, adults with mental illness, children and adults with intellectual and developmental disabilities and individuals with co-occurring disorders.

Process:

- There will be two sign-up sheets available: One for those in attendance and one for those wishing to speak. Please complete both sheets if you plan on speaking. Make sure to include your full name and complete address with zip code.
- For those wishing to speak, please begin your comments/statements with your full name and address, including zip code.
- Please limit your remarks to **4 minutes**.
- The ISK Board of Directors will be **listening only this evening** and will therefore not be responding to your remarks. Please do not interpret this as a lack of interest. The goal of our public hearing is to allow you to share personally and uninterrupted. A written response will be provided to those who speak, which is why it is so important to make sure we have your full name and address on record.
- If you wish to speak with an ISK Staff Person about your ^[2]personal situation, someone will be available to talk with you after the meeting.
- Thank you for taking time to attend the 2024 ISK Public Hearing. Information gathered this evening will be used as we plan for the **FY24/25 ISK Budget**.

PUBLIC HEARING OPEN FOR COMMENTS/TESTIMONIALS

No citizens came forth or were in attendance.

CLOSE PUBLIC HEARING/VERBAL MOTION

Chair Longanecker, "I MOVE TO CLOSE THE ANNUAL PUBLIC HEARING @ 5:37PM DUE TO THERE WAS NO CITIZENS IN ATTENDANCE TO GIVE TESTIMONY INPERSON or ONLINE." Supported by Vice Chair Seals. MOTION PASSED.

BOARD MEMBER TIME & COMMENTS

No comments were given by any of the ISK Board of Directors.

ADJOURNMENT

Chair Longanecker, "I MOVE TO ADJOURN THE MEETING." Supported by Vice Chair Seals. MOTION PASSED.

Meeting ended at 5:40PM.

Demeta J. Wallace

Administrative Coordinator & Board Liaison

Integrated Services of Kalamazoo Board of Directors



Community • Independence • Empowerment

INTEGRATED SERVICES OF KALAMAZOO

BOARD POLICY V.03

AREA:	Governance	
SECTION:	Executive Limitations	PAGE: 1 of 2
SUBJECT: BUDGETING		SUPERSEDES: 08/22/2011 REVISED: 09/27/2021

PURPOSE/EXPLANATION

To establish limitations of means regarding the budgeting process.

POLICY

- I. Budgeting any fiscal year or the remaining part of any fiscal year shall not deviate materially from Board Ends priorities, or risk fiscal jeopardy. Accordingly, the Chief Executive Officer may not cause or allow budgeting which:
 - A. Does not provide for a Public Hearing prior to formally adopting the budget consistent with Michigan Compiled Law (MCL) Section 141.412.
 - B. Contains too little information to enable credible projection of revenues and expenses, cash flow, and disclosure of planning assumptions.
 - C. Plans the expenditure in any fiscal year of more funds than are conservatively projected to be received in that period.
 - D. Reduces the current assets at any time to less than a favorable relationship with current liabilities.
 - E. Does not provide for Board prerogatives such as Board development, and Board and committee meetings.
 - F. Endangers the fiscal soundness of future years or ignores the building of organizational capability sufficient to achieve ends in future years.

- II. This policy will be monitored through internal mechanisms on a quarterly basis, and external mechanisms on an annual basis.

EXHIBITS

- A. MCL Section 141.412.

CHIEF EXECUTIVE OFFICER



Jeff Patton
Chief Executive Officer

APPROVED



Karen Longanecker
Board Chair

INTEGRATED SERVICES OF KALAMAZOO

BOARD POLICY V.07

AREA: Governance	
SECTION: Executive Limitations	PAGE: 1 of 2
SUBJECT: ASSET PROTECTION	SUPERSEDES: 08/26/2013 REVISED: 09/27/2021

PURPOSE/EXPLANATION

To establish limitations of means regarding asset protection.

POLICY

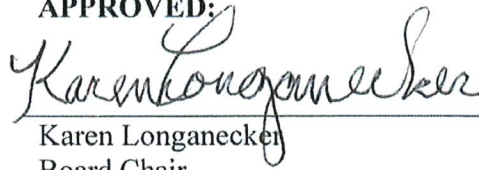
- I. The Chief Executive Officer (CEO) may not allow assets to be unprotected, inadequately maintained nor unnecessarily risked. Accordingly he/she may not:
 - A. Fail to insure against theft and casualty losses to at least 80 percent replacement value and against liability losses to Board members, staff or the organization itself in an amount comparable to other CMH's.
 - B. Allow un-bonded personnel access to material amounts of funds.
 - C. Subject plant and equipment to improper wear and tear or insufficient maintenance.
 - D. Unnecessarily expose the organization, its Board or staff to claims of liability.
 - E. Fail to protect intellectual property, information and files from loss or significant damage.
 - F. Receive, process or disburse funds under controls which are insufficient to meet the Board appointed auditor's standards.
 - G. Endanger the organization's public image or credibility, particularly in ways that would hinder its accomplishment of mission.
- II. This policy will be monitored through a report on an overview of ISK insurance coverage on an annual basis.

CHIEF EXECUTIVE OFFICER:



Jeff Patton
Chief Executive Officer

APPROVED:



Karen Longanecker
Board Chair

ASSET PROTECTION REPORT

August 26, 2024

- Our liability/property insurance is through the Michigan Municipal Risk Management Authority (“MMRMA”). MMRMA was created under the authority of the Michigan statutes to provide risk management and risk financing services to local governmental entities such as ISK.
- Liability coverage through MMRMA totals \$15,000,000 per occurrence.
- ISK board members are covered by MMRMA for their official duties performed on behalf of ISK.
- MMRMA pays for the costs of defending certain claims against ISK as well as any damages assessed.
- Workers compensation insurance is purchased through Accident Fund Co of America. We have limits of \$500,000 per accident and \$500,000 per disease claim.
- Our long term and short-term disability coverage is purchased through The Hartford Group. For long term coverage (LTD), employees will receive 60% of their income up to \$200,000 after a 180-day waiting period (maximum benefit of \$10,000 per month). For short-term disability (STD), employees will receive 60% of their covered salary up to \$200,000 beginning on the 15th day after the accident or 15th day after an illness that causes them to be off work (maximum benefit of \$2,400 per week). Maximum duration for STD is 23 weeks or the beginning of LTD benefits, whichever is earlier.
- Group life insurance is through The Hartford Group. Employees receive 0.5 times their salary rounded to the next higher \$1,000 subject to a minimum of \$10,000 and a maximum \$100,000.
- Group accidental death and dismemberment insurance is through The Hartford Group.
- Health care professional liability insurance is through Pro Assurance Casualty Company. Limits are \$3,000,000 per claim and \$3,000,000 aggregate. Our employed prescribers are covered.
- Medical insurance/prescriptions coverage is purchased through Blue Cross Blue Shield of Michigan for employees working at least 30 hours per week.
- Dental insurance is purchased through ADN for employees working at least 30 hours per week.
- Vision insurance is purchased through Blue Cross Blue Shield using the VSP network for employees working at least 30 hours per week.
- Employees working at least 20 and up to 29 hours per week may purchase ISK’s medical insurance/prescriptions coverage, dental insurance, or vision insurance at the full premium cost.

INTEGRATED
SERVICES OF
KALAMAZOO



Period Ended
July 31, 2024

Monthly Finance
Report

INTEGRATED SERVICES OF KALAMAZOO

Statement of Net Position

July 31, 2024

	July 2023 (unaudited)	July 2024
Assets		
Current assets		
Cash and investments	\$ 27,300,445	\$ 29,069,372
Accounts receivable	4,310,469	3,324,816
Due from other governments	8,077,033	8,072,203
Prepaid items	910,882	1,077,024
Total current assets	<u>40,598,829</u>	<u>41,543,416</u>
Non-current assets		
Capital assets, net of accumulated depreciation	13,552,787	13,463,851
Net pension asset, net of deferred outflows	7,339,625	7,214,053
Total non-current assets	<u>20,892,412</u>	<u>20,677,904</u>
Total assets	<u>\$ 61,491,241</u>	<u>\$ 62,221,320</u>
Liabilities		
Current liabilities		
Accounts payable	\$ 11,137,938	\$ 12,465,878
Due to other governments	1,693,752	891,432
Due to providers	-	195,240
Accrued payroll and payroll taxes	1,655,423	1,847,176
Unearned revenue	194,609	33,573
Total current liabilities	<u>14,681,722</u>	<u>15,433,299</u>
Net position		
Designated	8,671,891	8,654,636
Undesignated	28,194,833	22,342,389
Investment in fixed assets	9,471,053	17,276,260
Previous year close	-	-
Net gain (loss) for period	471,742	(1,485,265)
Net position	<u>\$ 46,809,519</u>	<u>\$ 46,788,020</u>

INTEGRATED SERVICES OF KALAMAZOO

Statement of Revenue, Expenses and Change in Net Position

October 1, 2023 through July 31, 2024

Percent of Year is 83.33%

	Original 2024 BUDGET	YTD Totals 7/31/24	Remaining Budget	Percent of Budget - YTD
Operating revenue				
Medicaid:				
Traditional Capitation	\$ 59,535,085	\$ 55,881,052	\$ 3,654,033	93.86%
Healthy Michigan Capitation	12,302,122	4,125,619	8,176,503	33.54%
Settlement	5,287,379	8,072,370	(2,784,991)	0.00%
State General Fund:				
Formula Fundings	3,705,491	3,250,430	455,061	87.72%
CCBHC Demonstration	27,297,101	22,867,623	4,429,478	83.77%
CCBHC Accrual	-	82,955	(82,955)	0.00%
County Allocation	1,550,400	1,292,000	258,400	83.33%
Client Fees	357,483	638,115	(280,632)	178.50%
SUD Block Grant	-	(0)	0	0.00%
Other grant revenue	7,071,254	7,861,483	(790,229)	111.18%
Other earned contracts	2,752,649	3,183,297	(430,648)	115.64%
COFR	-	391	(391)	0.00%
Interest	1,000	151,005	(150,005)	0.00%
Local revenue	10,000	807,010	(797,010)	0.00%
Total operating revenue	\$ 119,869,964	\$ 108,213,350	\$ 11,656,615	90.28%
Operating expenses				
Salaries and wages	27,984,525	22,626,348	\$ 5,358,177	80.85%
Employee benefits	10,070,805	7,279,086	2,791,719	72.28%
Staff development	280,317	160,305	120,012	57.19%
Payments to providers	76,194,079	69,308,598	6,885,481	90.96%
Administrative contracts	7,781,913	7,871,432	(89,519)	101.15%
IT software and equipment	692,972	560,945	132,027	80.95%
Client transportation	41,100	27,500	13,600	66.91%
Staff travel	322,767	226,150	96,617	70.07%
Office expenses	515,667	366,867	148,800	71.14%
Insurance expense	128,035	129,286	(1,251)	100.98%
Depreciation expense	589,832	566,783	23,049	96.09%
Utilities	374,796	284,526	90,270	75.91%
Facilities	-	36,530	(36,530)	0.00%
Local match	617,788	254,257	363,531	0.00%
Total operating expenses	\$ 125,594,595	\$ 109,698,615	\$ 15,895,981	87.34%
Change in net position	(5,724,631)	(1,485,265)	\$ (4,239,366)	
Beginning net position	48,273,285	48,273,285		
Ending net position	\$ 42,548,654	\$ 46,788,020		

INTEGRATED SERVICES OF KALAMAZOO

Statement of Revenue, Expenses and Change in Net Position

October 1, 2023 through July 31, 2024

Percent of Year is 83.33%

	Specialty Services		Healthy Michigan		SUD Block Grant		Totals		
	Budget	YTD Totals 7/31/24	YTD Budget	YTD Totals 7/31/24	YTD Budget	YTD Totals 7/31/24	YTD Budget	YTD Totals 7/31/24	Variance
Operating revenue									
Medicaid:									
Traditional Capitation	\$ 49,612,571	\$ 66,637,915	\$ -	\$ -	\$ -	\$ 93,298	\$ 49,612,571	\$ 66,731,213	\$ 17,118,642
Healthy Michigan Capitation	-	-	10,251,768	7,098,402	-	-	10,251,768	7,098,402	(3,153,366)
CCBHC Base Payment	-	(11,108,223)	-	(2,714,721)	-	-	-	(13,822,944)	(13,822,944)
Settlement Estimate	11,095,338	8,423,731	(6,689,189)	(258,063)	-	(93,298)	4,406,149	8,072,370	3,666,221
Client Fees	-	2,479	-	142	-	-	-	2,620	2,620
Total operating revenue	\$ 60,707,909	\$ 63,955,901	\$ 3,562,579	\$ 4,125,761	\$ -	\$ (0)	\$ 64,270,488	\$ 68,081,661	\$ 3,811,173
Operating expenses									
Internal services	\$ 3,108,308	\$ 1,584,713	\$ 216,364	\$ 16,913	\$ -	\$ -	\$ 3,324,672	\$ 1,601,627	(1,723,045)
External services	53,719,553	57,248,010	3,118,518	3,778,354	-	-	56,838,071	61,026,364	4,188,293
Delegated managed care	3,880,049	5,123,178	227,697	330,493	-	-	4,107,746	5,453,671	1,345,925
Total operating expenses	\$ 60,707,909	\$ 63,955,901	\$ 3,562,579	\$ 4,125,761	\$ -	\$ -	\$ 64,270,489	\$ 68,081,662	\$ 3,811,173
Change in net position		(1)	(0)	0	(0)	-	(0)	(1)	(1)

INTEGRATED SERVICES OF KALAMAZOO

Statement of Revenue, Expenses and Change in Net Position
 October 1, 2023 through July 31, 2024
 Percent of Year is 83.33%

	State General Fund		CCBHC		Other Funding Sources		Totals		
	YTD Budget	YTD Totals 7/31/24	YTD Budget	YTD Totals 7/31/24	YTD Budget	YTD Totals 7/31/24	YTD Budget	YTD Totals 7/31/24	Variance
Operating revenue									
General Fund	\$ 3,087,909	\$ 3,250,430	\$ -	\$ -	\$ -	\$ -	\$ 3,087,909	\$ 3,250,430	\$ 162,521
Projected GF Carryforward	-	-	-	-	-	-	-	-	-
CCBHC Demonstration	-	-	22,747,584	24,338,929	-	-	22,747,584	24,338,929	1,591,345
Other Federal and State Grants	-	-	-	-	5,973,350	7,086,594	5,973,350	7,086,594	1,113,244
Earned Revenue	-	-	-	-	2,199,236	2,263,777	2,199,236	2,263,777	64,542
COFR Revenue	-	-	-	-	14,000	391	14,000	391	(13,610)
Interest	-	-	-	-	833	151,005	833	151,005	150,172
County Allocation	-	-	-	-	1,292,000	1,292,000	1,292,000	1,292,000	-
Local Revenue	-	269	-	-	8,333	973,404	8,333	973,673	965,339
Transfer from GF	-	-	-	1,389,569	1,757,530	-	1,757,530	1,389,569	(367,961)
Settlement Revenue (Expense)	-	-	-	-	-	-	-	-	-
Total operating revenue	\$ 3,087,909	\$ 3,250,699	\$ 22,747,584	\$ 25,728,498	\$ 11,245,283	\$ 11,767,171	\$ 37,080,776	\$ 40,746,368	\$ 3,665,592
Operating expenses									
Internal Programs	275,474	\$ 225,707	\$ 26,871,707	\$ 21,222,898	\$ 84,403	\$ -	\$ 27,231,584	\$ 21,448,606	\$ (5,782,978)
External Programs	969,876	1,491,755	-	5,709,213	-	595,844	969,876	7,796,812	6,826,936
Other Federal and State Grants	-	-	-	-	9,186,981	9,455,021	9,186,981	9,455,021	268,040
HUD Grants	-	-	-	-	1,066,520	1,274,387	1,066,520	1,274,387	207,867
Managed Care Administration	85,029	143,667	-	-	5,763	-	90,792	143,667	52,875
Homeless Shelter	-	-	-	-	440,938	405,550	440,938	405,550	(35,388)
Transfer from GF	1,757,530	1,389,569	-	-	-	-	1,757,530	1,389,569	(367,961)
Local match expense	-	-	-	-	1,087,167	254,257	1,087,167	254,257	(832,910)
Non-DCH Activity Expenditures	-	-	-	-	117,158	63,764	117,158	63,764	(53,394)
Total operating expenses	\$ 3,087,909	\$ 3,250,699	\$ 26,871,707	\$ 26,932,111	\$ 11,988,929	\$ 12,048,823	\$ 41,948,545	\$ 42,231,633	283,088
Change in net position	0	0	(4,124,123)	(1,203,613)	(743,646)	(281,652)	\$ (4,867,769)	(1,485,265)	3,382,504

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 July 31, 2024

Percent of Year is 83.33%

	CCBHC Medicaid	CCBHC Healthy MI	CCBHC Non-Medicaid	CCBHC YTD Totals
Operating revenue				
Prepayment	\$ 5,603,295	\$ 3,107,136	\$ -	\$ 8,710,431
CCBHC SAMSHA Grant	-	-	919,520	919,520
CCBHC Base Payment Reclass	11,108,223	2,714,721	-	13,822,944
Remaining CCBHC revenue due	972,228	(1,055,183)	334,248	251,293
Client fees	300,053	44,715	289,973	634,742
Total CCBHC Revenue (PPS-1 of \$287.35 x encounters)	\$ 17,983,800	\$ 4,811,388	\$ 1,543,741	\$ 24,338,929
Operating expenses				
Internal services	\$ 14,526,299	\$ 4,049,543	\$ 2,647,056	\$ 21,222,898
DCO Contracts	3,922,013	1,049,296	737,904	5,709,213
Total operating expenses	\$ 18,448,312	\$ 5,098,839	\$ 3,384,960	\$ 26,932,111
Operating change in net position	(464,512)	(287,451)	(1,841,219)	(2,593,182)
Reclassification to cover Non-Medicaid	-	-	1,389,569	1,389,569
Total change in net position	\$ (464,512)	\$ (287,451)	\$ (451,650)	\$ (1,203,613)

CCBHC Cost per daily visit

	2023	Quarter 1	Quarter 2	July 2024
Total CCBHC Cost	\$ 27,687,187	\$ 7,369,913	\$ 15,384,690	\$ 26,932,111
Daily Visits	99,802	24,829	52,451	91,104
Cost per daily visit	277.42	296.83	293.32	295.62

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

AUTISM SERVICES

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

UTILIZATION COMPARISONS FY 23/24												
MONTH	FY 22/23 Actual		FY 23/24 Budget		FY 23/24 Actual		Clients Served Difference		Cost Difference		Cost YTD	
	Clients Served	Dollars	Clients Served	Dollars	Clients Served	Dollars	Favorable	(Unfavorable)	Favorable	(Unfavorable)	Favorable	(Unfavorable)
OCTOBER	131	\$608,106	165	\$617,350	167	\$789,944	(2)					(\$172,594)
NOVEMBER	143	\$608,105	165	\$617,350	167	\$785,423	(2)					(\$168,073)
DECEMBER	137	\$607,986	165	\$617,350	172	\$882,947	(7)					(\$265,597)
JANUARY	150	\$208,540	165	\$617,350	183	\$793,167	(18)					(\$175,817)
FEBRUARY	151	\$577,102	165	\$617,350	182	\$832,410	(17)					(\$215,060)
MARCH	149	\$646,448	165	\$617,350	182	\$802,870	(17)					(\$185,520)
APRIL	146	\$651,950	165	\$617,350	182	\$964,823	(17)					(347,473)
MAY	148	\$679,184	165	\$617,350	182	\$973,468	(17)					(356,118)
JUNE	149	\$781,874	165	\$617,350	181	\$919,481	(16)					(302,131)
JULY	150	\$712,098	165	\$617,350	180	\$1,020,346	(15)					(402,996)
AUGUST	156	\$734,675	165	\$617,350								
SEPTEMBER	158	\$986,689	165	\$617,350								
TOTALS	1,768	\$7,802,758	1,980	\$7,408,200	1,778	\$8,764,878	(128)					(\$2,591,379)
MONTHLY AVERAGES	147		165		178							
GROSS ANNUAL COST		\$7,802,758		574,872		\$8,764,878						(\$2,591,379)

Favorable/(Unfavorable):

Total **(2,591,379)**

YOUTH COMMUNITY INPATIENT SERVICES
Report Period: October 1st, 2023 through July 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 (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	101	\$105,966	(55)	(\$58,060)	(\$58,060)		
MARCH	78	\$81,900	46	\$47,906	16	\$16,275	30	\$31,631	\$31,631		
APRIL	90	\$94,500	46	\$47,906	153	\$160,650	(107)	(\$112,744)	(\$112,744)		
MAY	62	\$65,100	46	\$47,906	50	\$52,500	(4)	(\$4,594)	(\$4,594)		
JUNE	9	\$9,450	46	\$47,906	48	\$50,400	(2)	(\$2,494)	(\$2,494)		
JULY	41	\$43,050	46	\$47,906	143	\$150,056	(97)	(\$102,150)	(\$102,150)		
AUGUST	23	\$24,087	46	\$47,906							
SEPTEMBER	54	\$56,312	46	\$47,906							
TOTALS	635	\$665,675	549	\$574,872	734	\$770,175	(274)	(\$291,116)			
MONTHLY AVERAGES	53		46		73						
GROSS ANNUAL COST		\$665,675		574,872		\$770,175		(\$291,116)			

Favorable/(Unfavorable): Total (291,116)

COMMUNITY INPATIENT SERVICES
Report Period: October 1st, 2023 through July 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 (Unfavorable)	
	Days	Dollars	Days	Dollars	Days	Dollars				
OCTOBER	900	\$905,756	654	\$716,371	242	\$255,718	412	\$460,653	\$460,653	
NOVEMBER	686	\$714,410	654	\$716,371	361	\$382,224	293	\$334,147	\$334,147	
DECEMBER	704	\$732,356	654	\$716,371	673	\$710,132	(19)	\$6,239	\$6,239	
JANUARY	639	\$663,945	654	\$716,371	628	\$662,746	26	\$53,625	\$53,625	
FEBRUARY	656	\$683,828	654	\$716,371	693	\$731,020	(39)	(\$14,649)	(\$14,649)	
MARCH	635	\$660,537	654	\$716,371	870	\$918,128	(216)	(\$201,756)	(\$201,756)	
APRIL	543	\$565,345	654	\$716,371	610	\$643,506	44	\$72,865	\$72,865	
MAY	796	\$829,300	654	\$716,371	631	\$664,822	23	\$51,549	\$51,549	
JUNE	629	\$655,218	654	\$716,371	615	\$649,446	39	\$66,925	\$66,925	
JULY	757	\$789,744	654	\$716,371	709	\$746,405	(55)	(\$30,034)	(\$30,034)	
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	6,032	\$6,364,147	508	\$799,564		
MONTHLY AVERAGES	705		654		603					
GROSS ANNUAL COST		\$8,782,625		8,596,454		\$6,364,147		\$799,564		

Favorable/(Unfavorable):

Total **799,564**

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

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

SERVICE	AVG.			FY 23/24 Budget		FY 23/24 Actual	
	Month	Daily Rate	No. Served	Days of Service	Dollars	Dollars	Favorable / (Unfavorable)
PC/CLS	July	\$282	364	110,863	\$28,884,876	\$31,286,572	(\$2,401,696)
CRISIS RES.	July	\$577	55	710	\$805,906	\$409,948	\$395,958
CLS (SIP)	July	NA	375		\$10,886,375	\$11,259,721	(\$373,346)
Annual Cost							(\$2,379,084)

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.



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Integrated Services of Kalamazoo

MOTION

Subject:	<u>July 2024</u> Disbursements	Approval Date:
Meeting Date:	August 26, 2024	<u>August 26, 2024</u>
Prepared by:	Charlotte Bowser	

Recommended Motion:

“Based on the Board Finance meeting review, I move that ISK approve the July 2024 vendor disbursements of \$11,112,681.51.”

Summary of Request:

As per the July 2024 Vendor Check Register Report dated 07/10/2024 that includes checks issued from 07/01/2024 to 07/31/2024.

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: August 26, 2024



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Integrated Services of Kalamazoo

MOTION

Subject:	Budget Amendment (#1)	Approval Date:	
Meeting Date:	8/26/2024		
Prepared by:	Amy Rottman		8/26/2024

Recommended Motion:

"This amendment is to increase the expenditure budget by \$7,983,551 to \$133,265,466."

Summary of Request:

This budget amendment is necessary to increase expense to reflect the additional cost necessary to provide medically necessary services. In addition to increasing expenses, revenue will also increase \$10,007,336 and the impact on net position will improve by \$2,023,785.

INTEGRATED SERVICES OF KALAMAZOO

FY 2024 Budget Amendment Request

	Original 2024 BUDGET	YTD Totals 6/30/24	Amended 2024 Budget	Budget Change	Percent of Budget - YTD
Operating revenue					
<i>Medicaid:</i>					
Traditional Capitation	\$ 59,535,085	\$ 50,096,804	\$ 66,795,738	7,260,653	84.15%
Healthy Michigan Capitation	12,302,122	4,068,728	5,424,971	(6,877,151)	33.07%
Settlement	5,287,379	6,726,456	11,378,588	6,091,209	0.00%
<i>State General Fund:</i>					
Formula Fundings	3,705,491	2,925,387	3,705,491	-	78.95%
CCBHC Demonstration	27,297,101	20,279,769	27,297,101	-	0.00%
CCBHC Accrual	-	(165,677)	-	-	0.00%
County Allocation	1,550,400	1,162,800	1,550,400	-	75.00%
Client Fees	357,483	558,324	744,432	386,949	156.18%
Other grant revenue	7,071,254	7,078,677	8,674,664	1,603,410	100.10%
Other earned contracts	2,752,649	2,124,562	3,327,003	574,354	77.18%
Interest	1,000	135,743	181,991	180,991	0.00%
Local revenue	10,000	796,922	796,922	786,922	0.00%
Total operating revenue	\$ 119,869,964	\$ 95,872,853	\$ 129,877,300	\$ 10,007,336	79.98%
Operating expenses					
Salaries and wages	27,984,525	20,227,492	28,582,297	597,772	72.28%
Employee benefits	10,070,805	6,516,587	10,283,254	212,449	64.71%
Staff development	280,317	137,887	299,757	19,440	49.19%
Payments to providers	76,194,079	61,809,719	82,605,878	6,411,799	81.12%
Administrative contracts	7,781,913	7,103,358	8,453,610	671,697	91.28%
IT software and equipment	692,972	505,247	700,623	7,651	72.91%
Client transportation	41,100	23,253	42,600	1,500	56.58%
Staff travel	322,767	199,371	357,718	34,951	61.77%
Office expenses	515,667	326,242	527,139	11,472	63.27%
Insurance expense	128,035	127,543	128,035	-	99.62%
Depreciation expense	589,832	458,994	589,610	(222)	77.82%
Utilities	374,796	233,717	389,838	15,042	62.36%
Facilities	-	32,805	-	-	0.00%
Local match	617,788	228,831	305,108	-	0.00%
Total operating expenses	\$ 125,594,595	\$ 97,931,045	\$ 133,265,466	\$ 7,983,551	77.97%
Change in net position	(5,724,631)	(2,058,193)	(3,388,166)	\$ 2,023,785	
Beginning net position	48,273,285	48,273,285	48,273,285		
Ending net position	\$ 42,548,654	\$ 46,215,092	\$ 44,885,119		

Budget: FY2023/2024
Staff: Amy Rottman

Date of Board Consideration: 8/26/2024

~~KALAMAZOO COMMUNITY MENTAL HEALTH AND
SUBSTANCE ABUSE INTEGRATED SERVICES OF
KALAMAZOO~~

BOARD POLICY V.04

AREA: Governance	
SECTION: Executive Limitations	PAGE: 1 of 2
SUBJECT: FINANCE	SUPERSEDS: 09/27/2021 01/23/2006 08/26/2024 REVISED: 08/22/2011

PURPOSE/EXPLANATION

To establish limitations of means regarding the financial condition of the agency.

POLICY

- I. With respect to the actual, ongoing condition of the organization's financial health, the Chief Executive Officer (CEO) may not cause or allow the development of fiscal jeopardy or a material deviation of actual expenditures from Board priorities established in Ends policies. Accordingly, the CEO may not:

Expend more funds than have been received in the fiscal year to date, unless the debt guideline (below) is met.

- A. ~~Expenditures cannot be authorized that exceed the amount appropriated within the budget. Appropriated budgeted expenditures must be balanced with budgeted revenue or available net position. Expenditures cannot be authorized that exceed the amount appropriated within the budget except for more related to routine coverage of expected receivables or hold from an oversight fiduciary authority.~~
- B. ~~Enter into long term debt agreements, without board approval. Use any Long-Term Reserves, aside from their intended use, without Board approval.~~
- C. ~~Use any Long-Term Reserves, aside from their intended use, without Board approval.~~
- ~~C.D.~~ D. Fail to settle payroll and debts in a timely manner.
- ~~D.E.~~ E. Allow tax payments or other government-ordered payments or filings to be overdue or inaccurately filed.
- ~~E.F.~~ F. Acquire, encumber or dispose of real property without Board approval.

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~~F.G.~~ Operate without a set of administrative purchasing and procurement guidelines and procedures consistent with current law.

~~G.H.~~ Fail to adhere to generally accepted accounting principles (GAAP) in all accounting activities unless more restrictive requirements exist.

~~H.I.~~ Fail to use a legally defined procurement process to promote effective and equitable purchasing practices.

II. This policy will be monitored through internal mechanisms annually.

CHIEF EXECUTIVE OFFICER

APPROVED

Jeff Patton
Chief Executive Officer

Karen Longanecker
Board Chair



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Integrated Services of Kalamazoo MOTION

Subject:	ISK Quality Improvement Program Plan	Approval Date:
Meeting Date:	August 26, 2024	<u>August 26, 2024</u>
Prepared by:	Sheila Hibbs	

Recommended Motion:

“I MOVE APPROVAL OF THE ISK QUALITY IMPROVEMENT PROGRAM PLAN AS AMENDED FOR FISCAL YEAR 2023/2024 WITH THE NEW STANDARDS and PERFORMANCE MEASURES ADDED TO THE CCBHC HANDBOOK.”

Summary of Request:

Page 7:
The ISK Utilization Management department works in conjunction with the Quality Management department to review and evaluate level of care of individuals served at times of unexpected incidents and events occur to assure appropriate level of care and continuous quality improvement. Examples of these reviews include but are not limited to readmissions for psychiatric or substance use related reasons, the death of an individual served, and other reported events that would warrant a review of the individual's service level and care.

Page 8:
ISK will demonstrate an explicit focus on populations experiencing health disparities (including racial and ethnic groups and sexual and gender minorities) and utilize disaggregated data from the CCBHC quality measures and, as available, other data to track and improve outcomes for populations facing health disparities. The ISK QI Council will collaborate closely with the ISK Justice Equality and Trauma Team (JETT) to ensure that data is monitored and utilized to improve systems, access to care, and treatment of individuals served.

Page 10:
ISK, in accordance with the MDHHS CCBHC Handbook, will specifically review and addresses the following:

1. CCBHC individuals served suicide deaths or suicide attempts.
2. Fatal and non-fatal overdoses
3. All-cause mortality among people receiving CCBHC services.
4. CCBHC individuals served 30-day hospital readmissions for psychiatric, or substance use reasons.
5. Such other events the state or applicable accreditation bodies may deem appropriate for examination and remediation as part of the ISK QI plan.

Budget: _____
Staff: _____

Date of Board
Consideration: August 26, 2024