



Community • Independence • Empowerment

Jeffrey W. Patton
Chief Executive Officer

www.iskzoo.org
(269) 553-8000

Administrative Services:
610 South Burdick Street
Kalamazoo, MI 49007

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

AGENDA

ANNUAL BUDGET PUBLIC HEARING

INTEGRATED Services of Kalamazoo Board of Directors HAS SCHEDULED ITS MEETING FOR MONDAY, September 23, 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. BUDGET PUBLIC HEARING FY2024-2025 MOTION & ROLL CALL
- V. RECIPIENT RIGHTS
 - a. Recipient Rights Monthly Report
 - b. Recipient Rights Advisory Committee **MOTION**
- VI. CONSENT CALENDAR VERBAL MOTION
 - a. Minutes August 26, 2024
 - b. Staff Treatment (Policy & Report)
 - c. Compensation & Benefits (Policy & Report)
 - d. Monitoring Executive Performance (Policy)
- VII. FINANCIAL REPORTS
 - a. Financial Condition Report
 - b. Utilization Report
 - c. August 2024 Disbursement **MOTION**
- VIII. ACTION ITEMS - NEW or REVISITED
 - a. Board Nominating Committee
 - i. Board Nominating Committee Report
 - ii. Election of Officers **VERBAL MOTION**
 - b. RESOLUTION – Renaming of 615 after *Jeffrey Wilson Patton, Bronson Healthy Living, Integrated Health Services Clinic* read by Michael Seals
 - c. Appointment of Melissa Woosley to the ISK Board Representative to the UNHOUSED **MOTION**
- IX. CHIEF EXECUTIVE OFFICER VERBAL REPORT
 - a. CEO Report
- X. CITIZEN TIME
- XI. BOARD MEMBER TIME
 - a. SWMBH (Southwest Michigan Behavioral Health) Updates **Erik Krogh**
- XII. ADJOURNMENT



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2024 Budget Public Hearing Instructions

Public Hearing/Proposed FY 2024/2025 Budget

- a) Chair (Karen Longanecker) will say: “The Public Hearing on the *Integrated Services of Kalamazoo*, Proposed FY24/25 Budget is now open.” Call on Chief Executive Officer, Jeff Patton.
- b) The Chief Executive Officer (Jeff Patton) will say: “Act 43 of the 1963 Public Acts, as amended, requires the Authority to hold a public hearing on its proposed FY24/25 budget prior to its final adoption.”

“In accordance with the statues, notice of this public hearing was published in the Kalamazoo Gazette, a newspaper of general circulation within the community on **September 13, 2024**, and copies of the proposed budget have been available at the Administrative Offices and County Board of Commissioners Office for inspection by the public. Copies of the proposed budget are now available for any persons present who want to have a copy.”

- c) Chair (Karen Longanecker): Call on the Chief Financial Officer, Amy Rottman, to present the budget.
- d) The Chief Financial Officer presents the budget.
- e) Chair (Karen Longanecker) will say: “Is there anyone present who desires to ask any questions, or to make any comments?”
- f) Chair (Karen Longanecker) will say after comments (if any): “I hereby declare that the Public Hearing for *Integrated Services of Kalamazoo*, Proposed FY24/25 Budget closed.”
- g) Chair (Karen Longanecker) will call for MOTION.



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INTEGRATED SERVICES OF KALAMAZOO MOTION

Subject:	<u>ISK FY2024/2025 Budget</u>	Finance Department
Meeting Date:	September 23, 2024	<u>Approval Date:</u>
Prepared by:	Amy Rottman	<u>September 23, 2024</u>

Recommended Motion:

“I MOVE APPROVAL OF THE INTEGRATED SERVICES OF KALAMAZOO
FY2024/2025 BUDGET IN THE AMOUNT OF \$146,703,345.”

Summary of Request:

Attached is the budget document which includes the following budget adoption materials:

- 1) FY 2025 Budget Report
- 2) FY 25 Budget PPT that includes an executive summary, revenue and expense graphs, and narrative that provide background information on the recommended Fiscal Year 24/25 Budget.

ROLL CALL VOTE:

ISK Board Member	Yes	No
<i>Chair Karen Longanecker</i>		
<i>Vice Chair Michael Seals</i>		
<i>Member Nkenge Bergan</i>		
<i>Member Sarah Carmany</i>		
<i>Member Patrick Dolly</i>		
<i>Member Pat Guenther</i>		
<i>Member Erik Krogh</i>		
<i>Member Ramona Lumpkin</i>		
<i>Member Michael Raphelson</i>		
<i>Member Sharon Spears</i>		
<i>Member John Taylor</i>		
<i>Member Melissa Woosley</i>		
MOTION PASSED		

Need **8 yes** votes (2/3 of currently appointed board) no matter how many members are in attendance.

Budget: FY2024/2025
 Staff: A. Rottman

Date of Board
 Consideration: September 23, 2024

V.a.

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

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

	August 2024	FY 23-24	August 2023	FY 22-23
Total # of Complaints Closed	45	363	37	356
Total # of Allegations Closed	88	641	51	605
Total # of Allegations Substantiated	10	173	14	182

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	August 2024		August 2023	
Category	TOTAL	SUBSTANTIATED	TOTAL	SUBSTANTIATED
Consumer Safety	3	0	3	1
Dignity/Respect of Consumer	18	2	9	4
Treatment Issues/Suitable Services (Including Person Centered Planning)	12	1	10	2
Abuse I	0	0	0	0
Abuse II	5	0	5	1
Abuse III	5	1	4	0
Neglect I	0	0	0	0
Neglect II	0	0	0	0
Neglect III	6	3	9	7
	49	7	40	15

APPEALS	August 2024	FY 23-24	August 2023	FY 22-23
Uphold Investigative Findings & Plan of Action	3	6	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

September 2024

Re: August 2024 Abuse/Neglect Violations

August

Abuse Violations

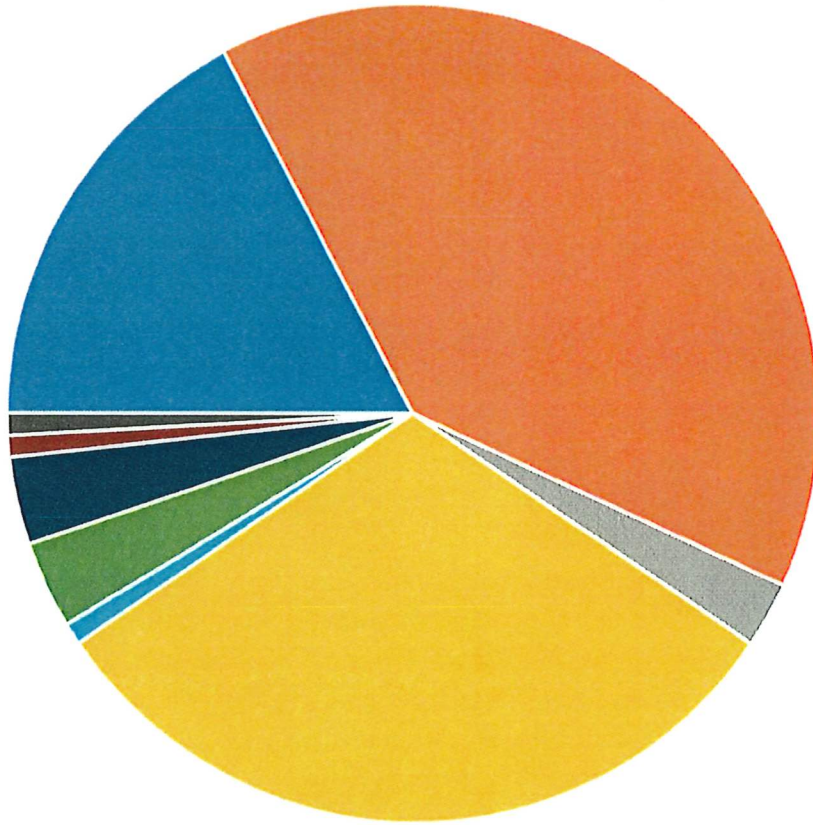
- There was one substantiated Abuse III violation in August 2024.
 - The remedial actions for these violations were Suspension (1), and Other (1).

Neglect Violations

- There were three substantiated Neglect III violations in August 2024.
 - The remedial actions for these violations were Employee left agency (1), Written Reprimand (2), and Training (3).

None of the violations occurred at the same agency.

Abuse/Neglect



- Employment Termination
- Training
- Contract Action
- Policy Revision/ Development
- Written Reprimand
- Staff Transfer
- Verbal Counseling
- Suspension
- Written Counseling
- Environmental Repair/ Enhancement



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Integrated Services of Kalamazoo

MOTION

Subject:	Recipient Rights Advisory Committee	
Meeting Date:	Sept 23, 2024	Approval Date: <u>Sept 23, 2024</u>
Prepared by:	Lisa Smith	

Recommended Motion:

Appointment:
"I MOVE TO APPOINT THE FOLLOWING INDIVIDUAL TO THE RECIPIENT RIGHTS ADVISORY COMMITTEE (RRAC): COREY DEAN FOR A TWO-YEAR TERM (BEGINNING OCTOBER 22, 2024 – OCTOBER 22, 2026)."

Summary of Request

Budget: _____
Staff: LS

Date of Board
Consideration: Sept 23, 2024



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

August 26, 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	Kalamazoo/Kalamazoo	
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*
 Dusty Jepkema
 Cheryl Nebedum
 Michelle Houtrow

Providers/Guests:

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

Call to Order

The Board of Directors (Integrated Services of Kalamazoo) held their meeting on Monday, August 26, 2024. It began @ 4:00PM and was presided over by Chair, *Karen Longanecker*.

AgendaMOTION

Member Krogh, “I move to approve the agenda and to rearrange the order of the agenda, allowing the Financial Reports to be presented before the Recipient Rights Reports.” Supported by Vice Chair Seals and carried without dissent.

Citizen Time No citizens came forth.

Financial Reports/Financial Condition Reports

Amy Rottman, ISK, Chief Financial Officer, presented the Financial Condition Reports for July 31, 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 July 31, 2024.

- Autism Services is at (128) days and is unfavorable at \$2,591,379
- Youth Community Inpatient Services is at (274) days and is unfavorable at \$291,116
- MI Adult Community Inpatient Services is at (508) days and is favorable at \$799,564
- Community Living Supports, Personal Care, and Crisis Residential is unfavorable at \$2,379,084

July DisbursementsMOTION

Member Guenther, “BASED ON THE BOARD FINANCE MEETING REVIEW, I move that ISK approve the July 2024 vendor disbursements of \$11,112,681.51.” Supported by Member Spears.
MOTION PASSED.

Budget Amendment #1

Member Krogh, “THIS AMENDMENT IS TO INCREASE THE EXPENDITURE BUDGET BY \$7,983,551 to \$133,265,466.” Supported by Vice Chair Seals.
MOTION PASSED.

Recipient Rights

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

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.

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 SEMI-ANNUAL Report

Lisa Smith, ISK, Director of ORR, presented the Recipient Rights SEMI-ANNUAL Report covering [October 1, 2023, through March 30, 2024](#).

This comprehensive report details the activities throughout the preceding year. Its purpose is to provide users, such as our ISK Board of Directors, with information about the operations of the Office of Recipient Rights about Abuse, Neglect, Dignity, Respect and other key indicators.

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

Recipient Rights Advisory Committee

MOTION

Member Krogh, “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 26, 2026](#)).” Supported by Vice Chair Seals.

MOTION PASSED.

Program Service Reports

Cheryl Nebedum, Community Outreach and Network Engagement Manager, Administration, and *Dusty Jepkema*, Supervisor Programs, Youth & Families, presented the JETT (Justice, Equity, and Trauma Team) presentation.

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

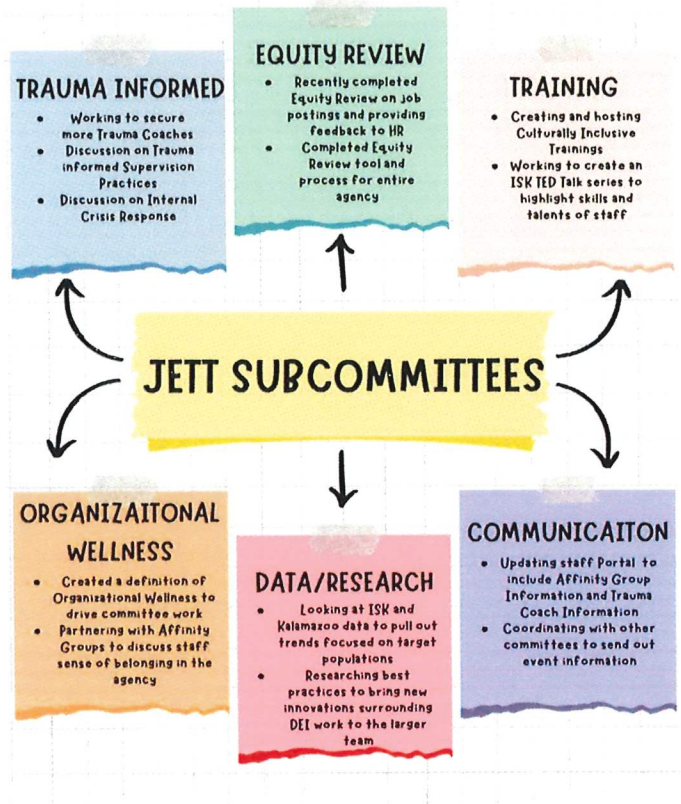
We provide a welcoming and diverse community partnership which collaborates and shares effective resources that support individuals and families to be successful through all phases of life

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



That concludes our report.

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

1. FY25 Draft CCBHC Michigan Demonstration Handbook is out for review, comments are due back to the state by September 11, 2024.
 - a. Changes in the Quality Measure Indicators have been updated to match the changes within the Federal CCBHC Quality Measure Indicators.
 - b. Quality Measures timeframe will change from Fiscal Year (FY) to Calendar year starting January 1, 2025. This will allow ISK 3-months to monitor and ensure that we are prepared to obtain the new measures.
2. CCBHC Certification – ISK is waiting for MDHHS to respond to our certification submitted.
3. PPS-1 – ISK sent information to the state to support the additional expansion of crisis services, including the ability to dispatch a mobile crisis response team. Waiting for MDHHS to respond with the impact this may have on our FY25 PPS-1 rate.

That concludes my report.

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 July 22, 2024
 - i. July Monthly Meeting
 - ii. Annual Board Retreat
 - iii. Annual Public Hearing
- b. Budgeting (Policy)
- c. Asset Protection (Policy & 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 ReportsNONEACTION ITEMS - NEW or REVISITEDMOTIONFinance (Policy)

Member Krogh, “I MOVE TO ACCEPT THE PROPOSED LANGUAGE CHANGES TO THE BOARD POLICY V.04/FINANCE.” Supported by Member Woosley.

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

MOTION PASSED.ISK Quality Improvement Program PlanMOTION

Member Krogh, “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.”

Supported by Member Spears.

MOTION PASSED.

Chief Executive Officer Report

SWMBH FY23/24 Budget has reported that with revenue, expenses, and projected deficits, Region #4 is projected to use nearly all its Internal Service Funds and enter the State's risk corridor for \$5.1 million dollars. All eight CMHSPs and SWMBH are implementing cost reductions. We continue to keep the lines of communication open with MDHHS and Milliman because ultimately it is the state's responsibility to cover the financial gaps.

Of the 10 PIHPs, 6 of them are showing deficits. One of the PIHPs has a significantly large windfall of over \$40 million dollars and the state is going to have to address that as well.

This is why your attendance at the Budget Public Hearing in September 2024 is so important. ISK is managing, but we don't know for how long and there are some encouraging rumors of a pending increase in the Medicaid rates.

That concludes my report.

Citizen Time

No citizens came forth.

SWMBH (Southwest Michigan Behavioral Health) Updates/Erik Krogh

Erik supported Jeff on the information shared about SWMBH and their projected deficits. SWMBH does well at keeping the board informed on the budget outcomes and how the low enrollments are affecting the bottom line.

That concludes my report.

Board Election Results/Karen Longanecker

Corporate Counsel reviewed ISK Board Bylaws regarding the process for nominations/elections for board officers. After discussion, the Board reconstituted the Nominating Committee, which will meet and provide a written statement of its work and nominations of officers at the September board meeting. Board members who are not part of that committee will also be able to make nominations at that meeting. The Board will then hold the election of officers for a term ending in May 2025.

Meeting ended at [5:23PM](#).

Demeta J. Wallace

Administrative Coordinator & Board Liaison

Integrated Services of Kalamazoo Board of Directors



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INTEGRATED SERVICES OF KALAMAZOO

BOARD POLICY V.02

AREA: Governance	
SECTION: Executive Limitations	PAGE: 1 of 2
SUBJECT: STAFF TREATMENT	SUPERSEDES: 09/24/2012 REVISED: 09/27/2021

PURPOSE/EXPLANATION

To define limitations of means regarding the treatment of staff.

POLICY

- I. With respect to treatment of paid and volunteer staff, the Chief Executive Officer (CEO) may not cause or allow conditions which are unfair and undignified. Accordingly, he/she may not:
 - A. Operate without written personnel related policies and procedures that:
 1. Clarify personnel rules for staff.
 2. Provide guidance in the case of an emergency or disaster.
 3. Outline clear expectations that employees and candidates for employment may not be judged on other than their own job-relevant qualifications and/or job performance.
 4. Protect the right to ethical job-related dissent of employees and provide for effective handling of grievances.
 5. Protect against wrongful conditions.
 6. Protect health and safety.
 - B. Fail to:
 1. Acquaint staff with personnel related policy and procedure, and their rights under this policy.
 2. Promote the recruitment and retention of personnel who reflect the cultural/ethnic diversity of the community/population served.
 3. Provide recognition of personnel, promote employee satisfaction and demonstrate employee involvement in organizational decision making.
 4. Ensure training and continuing development of all personnel to enhance individual and organizational performance.
- II. This policy will be monitored through internal mechanisms on an annual basis.

CHIEF EXECUTIVE OFFICER



Jeff Patton
Chief Executive Officer

APPROVED



Karen Longanecker
Board Chair

INTEGRATED SERVICES OF KALAMAZOO

Staff Treatment Report

September 23, 2024

Executive Limitation Policy:

With respect to treatment of paid and volunteer staff, the Chief Executive Officer may not cause or allow conditions which are unfair and undignified.

Accordingly, the Chief Executive Officer may not:

- A. Operate without written personnel related policies and procedures that:
1. Clarify personnel rules for staff.
 2. Provide guidance in the case of an emergency or disaster.
 3. Outline clear expectations that employees and candidates for employment may not be judged on other than their own job-relevant qualifications and/or job performance.
 4. Protect the right to ethical job-related dissent of employees and provide for effective handling of grievances.
 5. Protect against wrongful conditions.
 6. Protect health and safety.

Response: Policies and procedures exist and guide all formal personnel action processes. Department heads, supervisors and employees are aware of these policies. The Human Resource staff provides orientation for new employees, offers training on specific issues and meets with various staff groups. Personnel policies and procedures have been reviewed throughout the year and several have been revised where needed.

The agency experienced power outages in 2014 during which the Chief Executive Officer provided guidance and which led to additional disaster planning/preparedness within the organization. The agency's Organizational Continuity Plan was reviewed and revised by the Senior Executive Team in the fall of 2016. The plan was reviewed again in the spring of 2019. The Organizational Continuity Plan was again reviewed by senior Executive Team in summer of 2022.

With the transition of payroll and HR systems to UKG, ISK now uses the UKG performance appraisal tool which was modeled after the SilkRoad tool previously used. We have retained a core competency and value-based evaluation system in this transition.

The Employee Code of Ethics (formerly Ethical Code of Conduct) policy and procedure was originally approved in April 2000 and has been updated in March 2003, May 2004, March 2006, June 2006, January 2007, June 2007, April 2008, May 2010, November 2011, August 2012, November 2014, April 2016, June 2016, December 2018, November 2019, July 2021, December 2022 and July 2024 upholding employee dignity and allowing employees to express an ethical dissent. There have been no requests for ethical dissent over the past year.

There were no grievances submitted against the Chief Executive Officer this reporting period.

- B. Fail to:
1. Acquaint staff with personnel related policy and procedure and their rights under this policy.
 2. Promote the recruitment and retention of personnel who reflect the cultural/ethnic diversity of the community/population served.
 3. Provide recognition of personnel, promote employee satisfaction, and demonstrate employee involvement in organizational decision making.
 4. Ensure training and continuing development of all personnel to enhance individual and organizational performance.

Response: New employees receive orientation, which includes covering information on the personnel policies and procedures. Also, all personnel policies and procedures are provided to staff via the computer network (on-line) and updated as revisions are made. All employees are required to sign a document verifying that they are aware of these policies and procedures and have had an opportunity to read them. Annually employees review the Employee Code of Ethics policy and sign off that they have done so.

Language in job postings to encourage culturally diverse candidates to apply was revised in 2011 based on recommendations from the Manager of Cultural and Linguistic Competency. During the summer of 2016, we began running a regular ad in the New Opinion newspaper directing those interested in employment with ISK to view our current offerings on our application website ensuring that ISK would have continuous exposure in this publication. Language to encourage culturally diverse candidates to apply was also reviewed and revised in 2016. Job posting language was again reviewed and revised to attract a more diverse applicant pool in 2019. Historical and current demographic data is reviewed annually with ISK leadership.

The organization offers opportunities for not only employee recognition and satisfaction but also training and development. ISK established a Morale Leadership Team and a staff recognition program ("You Make a Difference" cards) in 2005. The staff recognition program has continued, and the Committee has morphed into a Boosting All Agency Morale (BAAM) Committee. Employee surveys have been completed annually since 2006, within these surveys employee satisfaction is garnered along with recommendations for improvement. In 2020 it was decided to begin conducting the employee surveys bi-annually rather than annually, the next survey was completed in 2021. In relation to training and development, a Competency & Training Needs assessment was conducted in November 2010. From the results of this data a training matrix was developed to identify various resources offered to staff to improve competency. In addition, the Regional Workforce Training Committee that was established in January 2012 has become an ISK focused Workforce Training Committee continuing to look at the most cost-effective as well as efficient ways to offer opportunities to staff. In April 2015 an employee development program was approved. The employee development program consists of two parts – beginning in June 2015 employees took the DiSC assessment and are encouraged to complete Comparison Reports with co-workers and department training on interpreting and using the results has been ongoing. The second phase is training staff in Crucial Conversations. Two ISK employees were trained as trainers and began to offer classes to agency employees beginning in December 2015. Crucial Conversations has been offered quarterly since its inception through 2019. With Covid, Crucial Conversation classes were put on hiatus, however, they started up again in spring 2022. There were two Leadership training opportunities offered throughout 2023, TBD Solutions held 3 classes for ISK Supervisors and Managers in the winter/spring and in April 2023 Clark Hill, ISK's legal counsel, presented a half day program on the legalities of hiring/supervising.

This policy will be monitored through internal and external mechanisms on an annual basis.

Response: The organization follows specific personnel policies pertaining to the treatment of staff. Through the employee survey and exit interviews conducted when an employee resigns, the organization is able to monitor staff opinion regarding their treatment.

INTEGRATED SERVICES OF KALAMAZOO

BOARD POLICY V.08

AREA:	Governance		
SECTION:	Executive Limitations	PAGE:	1 of 1
SUBJECT:	COMPENSATION AND BENEFITS	SUPERSEDES:	09/24/2012
		REVISED:	09/27/2021

PURPOSE/EXPLANATION


To establish limitations of means regarding compensation and benefits.

POLICY

- I. With respect to employment, compensation and benefits to employees, consultant, contract workers and volunteers, the Chief Executive Officer may not cause or allow jeopardy to fiscal integrity or public image. Accordingly:
 - A. He/she may not:
 1. Change his or her own compensation and benefits.
 2. Promise or imply permanent or guaranteed employment.
 3. Establish current compensation and benefits which deviate materially from the geographic or professional market for the skills employed.
 4. Establish or change pension benefits.
 - B. He/she may not fail to:


Ensure education is offered to all staff at least every five (5) years on the pros and cons of opting out of Social Security and conducting a Straw Vote after the completion of the education sessions. If the Straw Vote is greater than 50% to opt back into Social Security then an actual vote must be conducted.
- II. This policy will be monitored through internal and/or external mechanisms on an annual basis.

CHIEF EXECUTIVE OFFICER



 Jeff Patton
 Chief Executive Officer

APPROVED



 Erik Krogh
 Board Chair

INTEGRATED SERVICES OF KALAMAZOO
Compensation & Benefit Report
September 23, 2024

Executive Limitation Policy:

With respect to employment, compensation and benefits to employees, consultant, contract workers and volunteers, the Chief Executive Officer may not cause or allow jeopardy to fiscal integrity or public image.

Accordingly, the Chief Executive Officer may not:

- A. Change his or her own compensation and benefits.

Response: The Chief Executive Officer is compensated according to his negotiated contract with the Board. Further, he receives the same benefits as other employees of ISK. No change in the Executive Director's compensation outside of Board approval has occurred, nor has any benefit been changed except any that may have involved changes to all employees.

- B. Promise or imply permanent or guaranteed employment.

Response: Specific personnel policies and procedures have been implemented to ensure that all employees are treated equally. The policies clearly set forth the conditions of employment; these include initial offers of employment and continued employment. Supervisors, the Chief Executive Officer and the Human Resource Department all work together to enforce these policies. There have been no promises or implications of permanent or guaranteed employment.

- C. Establish current compensation and benefits that deviate materially from the geographic or professional market for the skills employed.

Response: In September 2016, a market survey was conducted in conjunction with a consultant which resulted in market adjustments for positions that were identified as greater than 10% below market as well as a 10% increase to the lower bands of the salary schedule and a 5% increase to the higher bands of the salary schedule and staff salaries were adjusted accordingly as needed. Also in 2016 a bonus program was developed for agency prescribers (Psychiatrists, Physician Assistants, Nurse Practitioners) and implemented in 2017. In 2017 ITS salaries were all reviewed and adjusted according to recommendations from a consultant. In FY 2018 identified positions were reviewed and resulting recommendations for salary adjustments were made for positions such as Registered Nurse and Supports Coordinator Assistant. In FY 2019 we evaluated Master's level clinician's in salary band C1, Clinical Supervisors and Contingent Direct Care Specialists. While we had some positions slated to be reviewed in FY 2020, the uncertainty that came with COVID-19 usurped that. The salary schedule was increased by 1% at the beginning of FY 2021. Salary ranges were again increased by 1% at the beginning of FY2022. In May 2021 Master's level clinicians and clinical supervisors received a 9-10% market increase to make our wages more competitive. Agency Peer Family Support Partners and Direct Care Specialists moved up one salary band as well. For FY 2023, we focused on getting salaries more competitive. For retention purposes, we implemented the FY 2023 changes in August, 2022. We were able to provide staff with an 11% increase and increased the salary schedule by 10%. In addition, we moved the following positions up one salary grade: Med Clinic Receptionist, Supports Coordinator Assistants, Community Health Worker, Employment Specialist, Housing Coordinator,

Nurse, clinical supervisors, some clinical and non-clinical managers and senior executives, Recipient Rights staff and some IT staff. For recruitment and retention, on January 1, 2023 we implemented additional pay for prescribers who see all ages (15% increase) or children aged 13 and above (7% increase). In February 2023, noting a need to address turnover and recruitment due to rapid market growth for Masters level clinicians, we gave a 7 – 10% increase to Masters level Clinicians doing face to face work and the supervisors and managers overseeing those clinical programs. During May through August 2023 a market survey was conducted in conjunction with a consultant which resulted in a new salary schedule and some positions being moved to a higher salary grade such as: Direct Care Specialists, Peer positions and Bachelors level clinical staff. Increases for FY 2024 were based on a 3% budgeted increase and will be allocated based on pay grade movement with some positions not being eligible for an increase due to the mid-year increases. FY 2025 increases are expected to be based on a 3% budget; we do not anticipate adjusting the pay grades this year.

D. Establish or change pension benefits.

Response: We participate in the Kalamazoo County Retirement System and as such are bound by its terms and conditions. Quarterly meetings are held with the County to discuss and review the retirement system. Our belief is that the current retirement system is financially very strong and of great benefit to our employees.

The Chief Executive Officer may not fail to:

A. Ensure education is offered to all staff at least every five (5) years on the pros and cons of opting out of Social Security and conducting a Straw vote after the completion of the education sessions. If the Straw Vote is greater than 50% to opt back into Social Security then an actual vote must be conducted.

Response: A Straw Vote was conducted on August 17, 2011. Only 17% of the eligible voters voted to go back into Social Security. Therefore, a sanctioned vote did not take place. A Straw Vote was conducted on August 11, 2016. Again, only 17% of the eligible voters voted to go back into Social Security. Therefore, a sanctioned vote did not take place. A Straw Vote was held on September 21, 2021. Only 6% of the eligible voters voted to go back into Social Security. Therefore, a sanctioned vote did not take place.

This policy will be monitored through internal and external mechanisms on an annual basis.

Response: The organization follows specific personnel policies pertaining to the status of employment and salary/benefit administration. Through annual bid solicitations on benefits and conducting periodic salary surveys, the organization strives to maintain a fair and competitive overall compensation and benefit package for all employees.

INTEGRATED SERVICES OF KALAMAZOO

BOARD POLICY III.04

AREA: Governance	
SECTION: Board – Executive Relationship	PAGE: 1 of 2
SUBJECT: MONITORING EXECUTIVE PERFORMANCE	SUPERSEDES: 06/22/2015 REVISED: 06/22/2019

PURPOSE/EXPLANATION

To establish the mechanisms for monitoring the performance of the Chief Executive Officer (CEO).

POLICY

- I. The Board's chief evaluation interest is whether the organization achieves the Board's ends and operates within the Board's executive limitations. The evaluation of the CEO's performance consists of comparing performance data against a reasonable interpretation of the degree to which the Board Ends and Executive Limitation policies are carried out.
 - A. The monitoring of executive performance will take place throughout the year during board meetings through the monitoring reports of the Board Ends and Executive Limitation policies and other mechanism established by the Board. A routine schedule and format will be utilized, requiring a minimum of Board time so that discussion will focus on the future rather than reviewing the past.
 - B. At the discretion of the Board, any ends and limitations policy may also be monitored by any of the following methods at any time:
 1. *Internal Report*
Periodic reports to the Board demonstrating compliance with Board Ends and Executive Limitation policies.
 2. *External Report*
Receipt and review of information having an impact on the Board Ends and Executive Limitation policies from federal, state or local regulatory bodies. Additionally, an external report may be received from an impartial third party selected by the Board to review a particular Board policy or set of circumstances.
 3. *Direct Inspection*
 - a. Monitoring executive performance may also be done through the complaint process (exhibits B & C)
 - b. When other information is brought to the Board's attention causing the Board to question the implementation of a policy, the Board may appoint a

member or committee to conduct a policy compliance review. The results shall be reported back to the Board.

4. *Performance Objectives*

The Board and Chief Executive Officer may establish performance objectives that aim to achieve specific targets for a Board Ends or Executive Limitation policy within a time frame and with available resources.

5. At the discretion of the Board, the results obtained through internal and external reports, direct inspection, or performance objectives may also be included in the CEO's annual evaluation.

- II. The Board Chairperson will appoint a committee to compile the information obtained throughout the year with respect to achievement of ends and limitations policies by the CEO. The Board will conduct a formal review of the CEO in November or as otherwise scheduled (Refer to Exhibit A).

EXHIBITS

- A. Process for Conducting Executive Evaluation
- B. Handling Complaints About the Chief Executive Officer's Non-Compliance with Board Policy
- C. Chief Executive Officer Board Policy Non-Compliance Complaint Form
- D. CEO Annual Evaluation
- E. CEO Monthly Board Monitoring Activities

CHIEF EXECUTIVE OFFICER:



Jeff Patton
Chief Executive Officer

APPROVED:



Karen Longanecker
Board Chair

INTEGRATED
SERVICES OF
KALAMAZOO



Period Ended
August 31, 2024

Monthly Finance
Report

INTEGRATED SERVICES OF KALAMAZOO

Statement of Net Position

August 31, 2024

	August 2023 (unaudited)	August 2024
Assets		
Current assets		
Cash and investments	\$ 39,313,078	\$ 23,782,849
Accounts receivable	2,060,349	3,440,723
Due from other governments	14,799	9,021,824
Prepaid items	930,730	1,059,153
Total current assets	<u>42,318,956</u>	<u>37,304,550</u>
Non-current assets		
Capital assets, net of accumulated depreciation	13,699,270	13,451,064
Net pension asset, net of deferred outflows	7,339,625	7,214,053
Total non-current assets	<u>21,038,895</u>	<u>20,665,117</u>
Total assets	<u>\$ 63,357,851</u>	<u>\$ 57,969,667</u>
Liabilities		
Current liabilities		
Accounts payable	\$ 13,069,392	\$ 8,535,857
Due to other governments	1,468,430	884,178
Due to providers	-	195,222
Accrued payroll and payroll taxes	1,710,323	1,999,220
Unearned revenue	187,316	19,737
Total current liabilities	<u>16,435,461</u>	<u>11,634,214</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	584,613	(1,937,832)
Net position	<u>\$ 46,922,390</u>	<u>\$ 46,335,453</u>

INTEGRATED SERVICES OF KALAMAZOO

Statement of Revenue, Expenses and Change in Net Position

October 1, 2023 through August 31, 2024

Percent of Year is 91.67%

	Original 2024 Budget	Amended 2024 Budget	YTD Totals 8/31/24	Remaining Budget	Percent of Budget - YTD
Operating revenue					
Medicaid:					
Traditional Capitation	\$ 59,535,085	\$ 66,795,738	\$ 61,183,503	\$ 5,612,235	91.60%
Healthy Michigan Capitation	12,302,122	5,424,971	4,605,664	819,307	84.90%
Settlement	5,287,379	11,378,588	9,021,991	2,356,597	79.29%
State General Fund:					
Formula Fundings	3,705,491	3,705,491	3,575,474	130,017	96.49%
CCBHC Demonstration	27,297,101	27,297,101	26,623,580	673,521	97.53%
CCBHC Accrual	-	-	(392,043)	392,043	0.00%
County Allocation	1,550,400	1,550,400	1,421,200	129,200	91.67%
Client Fees	357,483	744,432	730,225	14,207	98.09%
SUD Block Grant	-	-	15,516	(15,516)	0.00%
Other grant revenue	7,071,254	8,674,664	8,358,598	316,066	96.36%
Other earned contracts	2,752,649	3,327,003	2,424,642	902,361	72.88%
COFR	-	-	391	(391)	0.00%
Interest	1,000	181,991	167,435	14,556	92.00%
Local revenue	10,000	796,920	808,810	(11,890)	101.49%
Total operating revenue	\$ 119,869,964	\$ 129,877,300	\$ 118,544,984	\$ 11,332,316	91.27%
Operating expenses					
Salaries and wages	\$ 27,984,525	\$ 28,582,297	\$ 24,936,080	3,646,216	87.24%
Employee benefits	10,070,805	10,283,254	7,934,502	2,348,752	77.16%
Staff development	280,317	299,757	192,124	107,633	64.09%
Payments to providers	76,194,079	82,605,878	76,275,121	6,330,757	92.34%
Administrative contracts	7,781,913	8,453,610	8,456,795	(3,185)	100.04%
IT software and equipment	692,972	700,623	616,929	83,694	88.05%
Client transportation	41,100	42,600	31,292	11,308	73.45%
Staff travel	322,767	357,718	252,643	105,075	70.63%
Office expenses	515,667	527,139	407,056	120,083	77.22%
Insurance expense	128,035	128,035	131,030	(2,995)	102.34%
Depreciation expense	589,832	589,610	622,521	(32,911)	105.58%
Utilities	374,796	389,838	311,600	78,238	79.93%
Facilities	-	-	35,441	(35,441)	0.00%
Local match	617,788	305,108	279,682	25,426	91.67%
Total operating expenses	\$ 125,594,595	\$ 133,265,466	\$ 120,482,816	\$ 12,782,650	90.41%
Change in net position	(5,724,631)	(3,388,167)	(1,937,832)	\$ (1,450,335)	
Beginning net position	48,273,285	48,273,285	48,273,285		
Ending net position	\$ 42,548,654	\$ 44,885,118	\$ 46,335,453		

INTEGRATED SERVICES OF KALAMAZOO

Statement of Revenue, Expenses and Change in Net Position

October 1, 2023 through August 31, 2024

Percent of Year is 91.67%

	Specialty Services		Healthy Michigan		SUD Block Grant		Totals		
	Budget	YTD Totals 8/31/24	YTD Budget	YTD Totals 8/31/24	YTD Budget	YTD Totals 8/31/24	YTD Budget	YTD Totals 8/31/24	Variance
Operating revenue									
Medicaid:									
Traditional Capitation	\$ 61,229,427	\$ 73,303,612	\$ -	\$ -	\$ -	\$ 93,298	\$ 61,229,427	\$ 73,396,910	\$ 12,167,483
Healthy Michigan Capitation	-	-	4,972,890	7,724,676	-	-	4,972,890	7,724,676	2,751,786
CCBHC Base Payment	-	(12,297,004)	-	(3,029,229)	-	-	-	(15,326,233)	(15,326,233)
Settlement Estimate	10,520,155	9,198,886	(54,053)	(89,783)	-	(87,112)	10,466,102	9,021,991	(1,444,111)
Client Fees	-	2,968	-	142	-	-	-	3,109	3,109
Total operating revenue	\$ 71,749,582	\$ 70,208,461	\$ 4,918,837	\$ 4,605,806	\$ -	\$ 6,186	\$ 76,668,419	\$ 74,820,453	\$ (1,847,966)
Operating expenses									
Internal services	\$ 3,419,139	\$ 1,798,870	\$ 238,001	\$ 15,089	\$ -	\$ 6,186	\$ 3,657,139	\$ 1,820,146	(1,836,994)
External services	62,562,389	62,920,794	4,230,370	4,230,642	-	-	66,792,759	67,151,436	358,677
Delegated managed care	5,768,054	5,488,797	450,466	360,075	-	-	6,218,521	5,848,873	(369,648)
Total operating expenses	\$ 71,749,581	\$ 70,208,462	\$ 4,918,837	\$ 4,605,807	\$ -	\$ 6,186	\$ 76,668,419	\$ 74,820,455	\$ (1,847,965)
Change in net position	0	(0)	(0)	(0)	-	(0)	(0)	(1)	

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INTEGRATED SERVICES OF KALAMAZOO

Statement of Revenue, Expenses and Change in Net Position
 October 1, 2023 through August 31, 2024
 Percent of Year is 91.67%

	State General Fund		CCBHC		Other Funding Sources		Totals		
	YTD Budget	YTD Totals 8/31/24	YTD Budget	YTD Totals 8/31/24	YTD Budget	YTD Totals 8/31/24	YTD Budget	YTD Totals 8/31/24	Variance
Operating revenue									
General Fund	\$ 3,396,700	\$ 3,575,474	\$ -	\$ -	\$ -	\$ -	\$ 3,396,700	\$ 3,575,474	\$ 178,774
Projected GF Carryforward	-	-	-	-	-	-	-	-	-
CCBHC Demonstration	-	-	25,022,343	27,969,654	-	-	25,022,343	27,969,654	2,947,311
Other Federal and State Grants	-	-	-	-	8,167,604	7,347,126	8,167,604	7,347,126	(820,478)
Earned Revenue	-	-	-	-	2,419,159	1,599,093	2,419,159	1,599,093	(820,067)
COFR Revenue	-	-	-	-	15,400	391	15,400	391	(15,010)
Interest	-	-	-	-	917	167,435	917	167,435	166,518
County Allocation	-	-	-	-	1,421,200	1,421,200	1,421,200	1,421,200	-
Local Revenue	-	471	-	-	9,167	818,139	9,167	818,610	809,443
Transfer from GF	-	-	-	868,589	1,933,283	-	1,933,283	868,589	(1,064,694)
Settlement Revenue (Expense)	-	-	-	-	-	-	-	-	-
Total operating revenue	\$ 3,396,700	\$ 3,575,945	\$ 25,022,343	\$ 28,838,243	\$ 13,966,730	\$ 11,353,382	\$ 42,385,773	\$ 43,767,570	\$ 1,381,798
Operating expenses									
Internal Programs	303,022	\$ 772,796	\$ 29,558,878	\$ 22,366,045	\$ 92,843	\$ -	\$ 29,954,743	\$ 23,138,840	\$ (6,815,902)
External Programs	1,066,863	1,728,720	-	6,390,682	-	618,404	1,066,863	8,737,806	7,670,943
Other Federal and State Grants	-	-	-	-	9,453,872	10,522,283	9,453,872	10,522,283	1,068,410
HUD Grants	-	-	-	-	1,173,172	1,434,843	1,173,172	1,434,843	261,671
Managed Care Administration	93,532	205,841	-	-	6,339	-	99,871	205,841	105,970
Homeless Shelter	-	-	-	-	485,032	444,145	485,032	444,145	(40,887)
Transfer from GF	1,933,283	868,589	-	-	-	-	1,933,283	868,589	(1,064,694)
Local match expense	-	-	-	-	1,195,883	279,682	1,195,883	279,682	(916,201)
Non-DCH Activity Expenditures	-	-	-	-	128,873	73,374	128,873	73,374	(55,499)
Total operating expenses	\$ 3,396,700	\$ 3,575,945	\$ 29,558,878	\$ 28,756,727	\$ 12,536,015	\$ 13,372,731	\$ 45,491,593	\$ 45,705,402	213,810
Change in net position	0	(0)	(4,536,536)	81,516	1,430,715	(2,019,348)	\$ (3,105,820)	(1,937,832)	1,167,988

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INTEGRATED SERVICES OF KALAMAZOO

CCBHC

October 1, 2023 through August 31, 2024

Percent of Year is 91.67%

	CCBHC Medicaid	CCBHC Healthy MI	CCBHC Non-Medicaid	CCBHC YTD Totals
Operating revenue				
Prepayment	\$ 6,433,292	\$ 3,524,316	\$ -	\$ 9,957,608
CCBHC SAMSHA Grant	-	-	1,011,472	1,011,472
CCBHC QBP	-	-	1,005,491	1,005,491
CCBHC Base Payment Reclass	12,297,004	3,029,229	-	15,326,233
Remaining CCBHC revenue due	831,052	(1,223,095)	334,248	(57,795)
Client fees	350,857	52,478	323,310	726,645
Total CCBHC Revenue (PPS-1 of \$287.35 x encounters)	\$ 19,912,206	\$ 5,382,928	\$ 2,674,521	\$ 27,969,654
Operating expenses				
Internal services	\$ 15,402,943	\$ 4,187,439	\$ 2,775,663	\$ 22,366,045
DCO Contracts	4,375,716	1,182,901	832,065	6,390,682
Total operating expenses	\$ 19,778,659	\$ 5,370,339	\$ 3,607,729	\$ 28,756,727
Operating change in net position	133,547	12,588	(933,208)	(787,073)
Reclassification to cover Non-Medicaid	-	-	868,589	868,589
Total change in net position	\$ 133,547	\$ 12,588	\$ (64,619)	\$ 81,516

CCBHC Cost per daily visit

	2023	Quarter 1	Quarter 2	August 2024
Total CCBHC Cost	\$ 27,687,187	\$ 7,369,913	\$ 15,384,690	\$ 28,756,727
Daily Visits	99,802	24,829	52,451	101,206
Cost per daily visit	277.42	296.83	293.32	284.14

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AUTISM SERVICES
Report Period: October 1st, 2023 through August 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	Favorable	Favorable
							(Unfavorable)	(Unfavorable)	(Unfavorable)
OCTOBER	131	\$608,106	175	\$828,374	167	\$789,944	8	\$38,430	\$38,430
NOVEMBER	143	\$608,105	175	\$828,374	167	\$785,423	8	\$42,951	\$42,951
DECEMBER	137	\$607,986	175	\$828,374	172	\$882,947	3	(\$54,573)	(\$54,573)
JANUARY	150	\$208,540	175	\$828,374	183	\$793,167	(8)	\$35,207	\$35,207
FEBRUARY	151	\$577,102	175	\$828,374	182	\$832,410	(7)	(\$4,036)	(\$4,036)
MARCH	149	\$646,448	175	\$828,374	182	\$802,870	(7)	\$25,504	\$25,504
APRIL	146	\$651,950	175	\$828,374	182	\$964,823	(7)	(136,449)	(136,449)
MAY	148	\$679,184	175	\$828,374	182	\$973,468	(7)	(145,094)	(145,094)
JUNE	149	\$781,874	175	\$828,374	181	\$919,481	(6)	(91,107)	(91,107)
JULY	150	\$712,098	175	\$828,374	180	\$1,020,346	(5)	(191,972)	(191,972)
AUGUST	156	\$734,675	175	\$828,374	180	\$987,283	(5)	(158,909)	(158,909)
SEPTEMBER	158	\$986,689	175	\$828,374					
TOTALS	1,768	\$7,802,758	2,100	\$9,940,488	1,958	\$9,752,161	(33)	(\$640,048)	
MONTHLY AVERAGES	147		175		178				
GROSS ANNUAL COST		\$7,802,758		\$9,940,488		\$9,752,161		(\$640,048)	

Favorable/(Unfavorable):

Total (640,048)

YOUTH COMMUNITY INPATIENT SERVICES
Report Period: October 1st, 2023 through August 31st, 2024

UTILIZATION COMPARISONS FY 23/24									
MONTH	FY 22/23 Actual		FY 23/24 Budget		FY 23/24 Actual		Days Difference	Cost Difference	Cost YTD
	Days	Dollars	Days	Dollars	Days	Dollars	Favorable (Unfavorable)	Favorable (Unfavorable)	Favorable (Unfavorable)
	OCTOBER	70	\$72,791	46	\$47,906	92	\$85,533	(46)	(\$37,627)
NOVEMBER	63	\$66,150	46	\$47,906	78	\$72,462	(32)	(\$24,556)	(\$24,556)
DECEMBER	37	\$38,735	46	\$47,906	139	\$129,020	(93)	(\$81,114)	(\$81,114)
JANUARY	53	\$55,661	46	\$47,906	73	\$67,966	(27)	(\$20,060)	(\$20,060)
FEBRUARY	55	\$57,939	46	\$47,906	101	\$93,755	(55)	(\$45,849)	(\$45,849)
MARCH	78	\$81,900	46	\$47,906	16	\$14,400	30	\$33,507	\$33,507
APRIL	90	\$94,500	46	\$47,906	170	\$157,466	(124)	(\$109,560)	(\$109,560)
MAY	62	\$65,100	46	\$47,906	50	\$46,450	(4)	\$1,456	\$1,456
JUNE	9	\$9,450	46	\$47,906	69	\$64,101	(23)	(\$16,195)	(\$16,195)
JULY	41	\$43,050	46	\$47,906	143	\$132,763	(97)	(\$84,857)	(\$84,857)
AUGUST	23	\$24,087	46	\$47,906	76	\$70,558	(30)	(\$22,652)	(\$22,652)
SEPTEMBER	54	\$56,312	46	\$47,906					
TOTALS	635	\$665,675	549	\$574,872	1,006	\$934,472	(501)	(\$407,507)	
MONTHLY AVERAGES	53		46		91				
GROSS ANNUAL COST		\$665,675		\$574,872		\$934,472		(\$407,507)	

Favorable/(Unfavorable): Total (407,507)

COMMUNITY INPATIENT SERVICES
Report Period: October 1st, 2023 through August 31st, 2024

UTILIZATION COMPARISONS FY 23/24									
MONTH	FY 22/23 Actual		FY 23/24 Budget		FY 23/24 Actual		Days Difference	Cost Difference	Cost YTD
	Days	Dollars	Days	Dollars	Days	Dollars	Favorable (Unfavorable)	Favorable (Unfavorable)	Favorable (Unfavorable)
	OCTOBER	900	\$905,756	654	\$716,371	242	\$255,718	412	\$460,653
NOVEMBER	686	\$714,410	654	\$716,371	361	\$382,224	293	\$334,147	\$334,147
DECEMBER	704	\$732,356	654	\$716,371	627	\$661,307	27	\$55,064	\$55,064
JANUARY	639	\$663,945	654	\$716,371	597	\$629,933	57	\$86,438	\$86,438
FEBRUARY	656	\$683,828	654	\$716,371	693	\$731,020	(39)	(\$14,649)	(\$14,649)
MARCH	635	\$660,537	654	\$716,371	839	\$885,578	(185)	(\$169,206)	(\$169,206)
APRIL	543	\$565,345	654	\$716,371	631	\$665,556	23	\$50,815	\$50,815
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	596	\$626,317	58	\$90,054	\$90,054
SEPTEMBER	698	\$727,339	654	\$716,371					
TOTALS	8,463	\$8,782,625	7,848	\$8,596,454	6,540	\$6,898,326	653	\$981,756	
MONTHLY AVERAGES	705		654		595				
GROSS ANNUAL COST		\$8,782,625		8,596,454		\$6,898,326		\$981,756	

Favorable/(Unfavorable): Total 981,756

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

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

SERVICE	Month	Avg. Daily Rate	No. Served	Days of Service	FY 23/24 Budget	FY 23/24 Actual	
					Dollars	Dollars	Favorable / (Unfavorable)
PC/CLS	Aug	\$310	399	110,863	\$34,603,873	\$34,395,670	\$208,203
CRISIS RES.	Aug	\$576	64	758	\$886,496	\$436,847	\$449,649
CLS (SIP)	Aug	NA	380		\$12,568,688	\$12,391,058	\$177,630
Annual Cost							\$835,482

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>August 2024</u> Disbursements	Approval Date:
Meeting Date:	September 23, 2024	<u>September 23, 2024</u>
Prepared by:	Charlotte Bowser	

Recommended Motion:

“Based on the Board Finance meeting review, I move that ISK approve the August 2024 vendor disbursements of \$13,874,462.64.”

Summary of Request:

As per the August 2024 Vendor Check Register Report dated 09/10/2024 that includes checks issued from 08/01/2024 to 08/31/2024.

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: September 23, 2024

Integrated Services of Kalamazoo
Board Nominating Committee Report
September 13, 2024

At its August 26, 2024, meeting the ISK Board constituted this Nominating Committee, consisting of Sharon Spears, Erik Krogh, Nkenge Bergan, and Patricia Guenther. The committee held its first meeting on August 26. Corporate Counsel Michael Schlack also attended the meeting.

At that meeting, discussion included a desire to make the nominating process more transparent and the committee decided to request ISK Board members to contact the committee to express any interest in being nominated for Board chair/vice-chair. That was accomplished by an email from Michael Schlack on behalf of the Committee on August 27, 2024, which requested an expression of interest to Sharon Spears not later than September 10, 2024. An explanation of the chairperson's role as stated in ISK's Bylaws and Rules of Procedure was also provided. The Committee made plans to confer via telephone and/or email after September 10 to determine its next steps and finalize a report to the ISK Board.

Sharon Spears reported as of September 10 there was no expression of interest by any board members, other than those previously expressed by Karen Longanecker (chair) and Michael Seals (vice-chair). Thereafter, on September 11, the committee members unanimously agreed to recommend to the Board the following slate of officers:

- ✚ Karen Longanecker – Chair
- ✚ Michael Seals – Vice-chair

Respectfully submitted by:

ISK Board Nominating Committee
Nkenge Bergan
Erik Krogh
Patricia Guenther
Sharon Spears

INTEGRATED SERVICES OF KALAMAZOO

VIII.b.

Board Resolution Regarding ISK Building at 615 E Crosstown Parkway
September 23, 2024

WHEREAS Integrated Services of Kalamazoo's Mission, Vision and Values statement reflects our belief that every person served by our organization is an individual and has value, and that every human being has value; and

WHEREAS a well-run organization relies on its executive leadership to provide the foundational basis necessary to act in furtherance of the organization's mission, vision and values; and

WHEREAS the Board of Integrated Services of Kalamazoo recognizes and wishes to acknowledge that this organization is well-run, and further, that this organization is well-run due in large measure to the leadership and vision of Jeff Patton, its Chief Executive Officer; and

WHEREAS Jeff Patton has led Integrated Services of Kalamazoo as its chief executive since 2001; and

WHEREAS due to Jeff Patton's commitment to individuals served by Integrated Services of Kalamazoo as well as his commitment to Michigan's model of community mental health services, Integrated Services of Kalamazoo is recognized throughout the State of Michigan as a leader among Community Mental Health Services Providers (CMHSPs); and

WHEREAS among many examples, one example of Jeff Patton's leadership and vision for Integrated Services of Kalamazoo and the wider Kalamazoo area is the collaboration among Integrated Services of Kalamazoo, Kalamazoo Valley Community College and Bronson Healthcare Group that resulted in construction of the Bronson Healthy Living Campus, including an Integrated Health Services Clinic operated by Integrated Services of Kalamazoo, and a Culinary and Allied Health Building and Food Innovation Center operated by Kalamazoo Valley Community College; and

WHEREAS the Board of Integrated Services of Kalamazoo wishes to honor Jeff Patton's leadership and vision for this organization:

Now Therefore Be It Resolved as Follows:

Integrated Services of Kalamazoo's building located at 615 East Crosstown Parkway will be named the *Jeffrey Wilson Patton, Bronson Healthy Living, Integrated Health Services Clinic*.

Resolved by board motion on the 23rd day of September 2024.

Xx _____

Karen Longenecker/CHAIR

Integrated Services of Kalamazoo Board of Directors

September 2024
Board Resolution 2024-2



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Integrated Services of Kalamazoo MOTION

Subject:	Appointment of Melissa Woosley as the ISK Board's Representative for services to people that are unhoused	
Meeting Date:	September 23, 2024	Approval Date:
Prepared by:	David Anderson	<u>September 23, 2024</u>

Recommended Motion:

“I move that the ISK Board appoint Melissa Woosley as the Board’s representative for services to people that are houseless.

I further move that the ISK board recognize the value of including the perspectives of unhoused individuals as part of ISK’s services by amending Article III, Section 1 of ISK’s Bylaws and Rules of Procedure to include a statement that at least one member of the ISK Board will have personal experience with homelessness.”

Summary of Request

There were deficiencies noted in ISK’s recent HUD audit report regarding requirements in HUD’s policy manual ensuring representation and input by an individual who has personal unhoused experience. This appointment and amendment to the Bylaws will be in lieu of creating a separate Advisory Council and will address the audit deficiencies.

Budget: _____
 Staff: DA

Date of Board
 Consideration: Sept 23, 2024