



Jeffrey W. Patton
Chief Executive Officer

www.iskzoo.org
(269) 553-8000

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

January 27, 2025

Name: INTEGRATED Services of Kalamazoo Board of Directors
Location: 610 South Burdick Street/Kalamazoo, MI., /2nd Floor – ISK Boardroom #220
Commencement Time: 4:00PM

- I. CALL TO ORDER – CITY & COUNTY DECLARATION
- II. AGENDA
- III. CITIZEN TIME
- IV. RECIPIENT RIGHTS
 - a. Recipient Rights Monthly Report (*November & December 2024*)
 - b. Recipient Rights Annual Report
 - c. Recipient Rights Advisory Committee Appointment **MOTION**
- V. PROGRAM SERVICE REPORT
 - a. *Nancy McDonald*, Senior Executive/Adult Community Services
 - b. *Beth Ann Meints*, Administrator of Clinical Services/CCBHC Report **VERBAL**
- VI. CONSENT CALENDAR **VERBAL MOTION**
 - a. Minutes *November 25, 2024*
 - b. MISSION/VISION/VALUE STATEMENT (Policy)
 - c. BYLAWS and RULES OF PROCEDURE (Policy)
 - d. Annual Leave Reserve (Policy & Report)
 - e. Annual Board Planning Cycle (Report)
 - f. ENDS Developmental Process (Policy)
 - g. ENDS for Individuals Served (Policy)
- VII. MONITORING REPORTS
 - a. Quality Improvement Plan and Performance Measurement/Management Plan (Report) **MOTION**
- VIII. FINANCIAL REPORTS
 - a. Financial Condition Report
 - b. Utilization Report
 - c. Investment Report
 - d. *November & December 2024* Disbursement **MOTION**
- IX. ACTION ITEMS - NEW or REVISITED
 - a. Conflict of Interest Form Waiver for the appointment of Michael Seals to the RE4 Board (SWMBH) **MOTION**
- X. CHIEF EXECUTIVE OFFICER VERBAL REPORT
 - a. CEO Report
- XI. CITIZEN TIME
- XII. BOARD MEMBER TIME
 - a. SWMBH (Southwest Michigan Behavioral Health) Updates **Michael Seals**
- XIII. ADJOURNMENT

IV.a.

Office of Recipient Rights
Report to the Mental Health Board
Closed in: November & December

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

	November 2024	FY 24-25	November 2023	FY 23-24
Total # of Complaints Closed	41	71	26	59
Total # of Allegations Closed	72	130	62	113
Total # of Allegations Substantiated	20	37	13	28

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 Category	November 2024		November 2023	
	TOTAL	SUBSTANTIATED	TOTAL	SUBSTANTIATED
Consumer Safety	6	3	3	2
Dignity/Respect of Consumer	11	4	9	1
Treatment Issues/Suitable Services (Including Person Centered Planning)	14	3	10	2
Abuse I	0	0	0	0
Abuse II	4	1	2	2
Abuse III	5	2	3	2
Neglect I	0	0	0	0
Neglect II	0	0	1	1
Neglect III	9	5	4	2
	49	18	32	12

APPEALS	November 2024	FY 24-25	November 2023	FY 23-24
Uphold Investigative Findings & Plan of Action	0	0	0	0
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

January 2025

Re: November 2024 Abuse/Neglect Violations

November

Abuse Violations

- There was one substantiated Abuse II violation in November 2024.
 - The remedial action for this violation was Employment Termination (1).
- There were two substantiated Abuse III violations in November 2024.
 - The remedial actions for these violations were Employee left agency but substantiated (1), Verbal Counseling (1), Written Reprimand (1), and Training (1).

The 2 violations occurred at different agencies.

Neglect Violations

- There were five substantiated Neglect III violations in November 2024.
 - The remedial actions for these violations were Employment Termination (1), Employee left agency but substantiated (2), Written Reprimand (2), Written Counseling (3), Training (6), and Policy Revision/Development(3).

Three violations occurred at the same agency but different program sites. There were 3 staff involved in one violation.

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

	December 2024	FY 24-25	December 2023	FY 23-24
Total # of Complaints Closed	35	106	33	92
Total # of Allegations Closed	50	180	61	174
Total # of Allegations Substantiated	19	56	13	41

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	December 2023		December 2023	
Category	TOTAL	SUBSTANTIATED	TOTAL	SUBSTANTIATED
Consumer Safety	3	0	6	1
Dignity/Respect of Consumer	9	2	13	0
Treatment Issues/Suitable Services (Including Person Centered Planning)	11	3	10	0
Abuse I	0	0	0	0
Abuse II	3	0	9	2
Abuse III	6	2	6	3
Neglect I	2	1	0	0
Neglect II	1	1	0	0
Neglect III	8	7	8	7
	43	16	52	13

APPEALS	December 2024	FY 24-25	December 2023	FY 23-24
Uphold Investigative Findings & Plan of Action	0	0	0	0
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

January 2025

Re: December 2024 Abuse/Neglect Violations

December

Abuse Violations

- There were two substantiated Abuse III violations in December 2024.
 - The remedial actions for these violations were Written Reprimand (2), and Training (1).

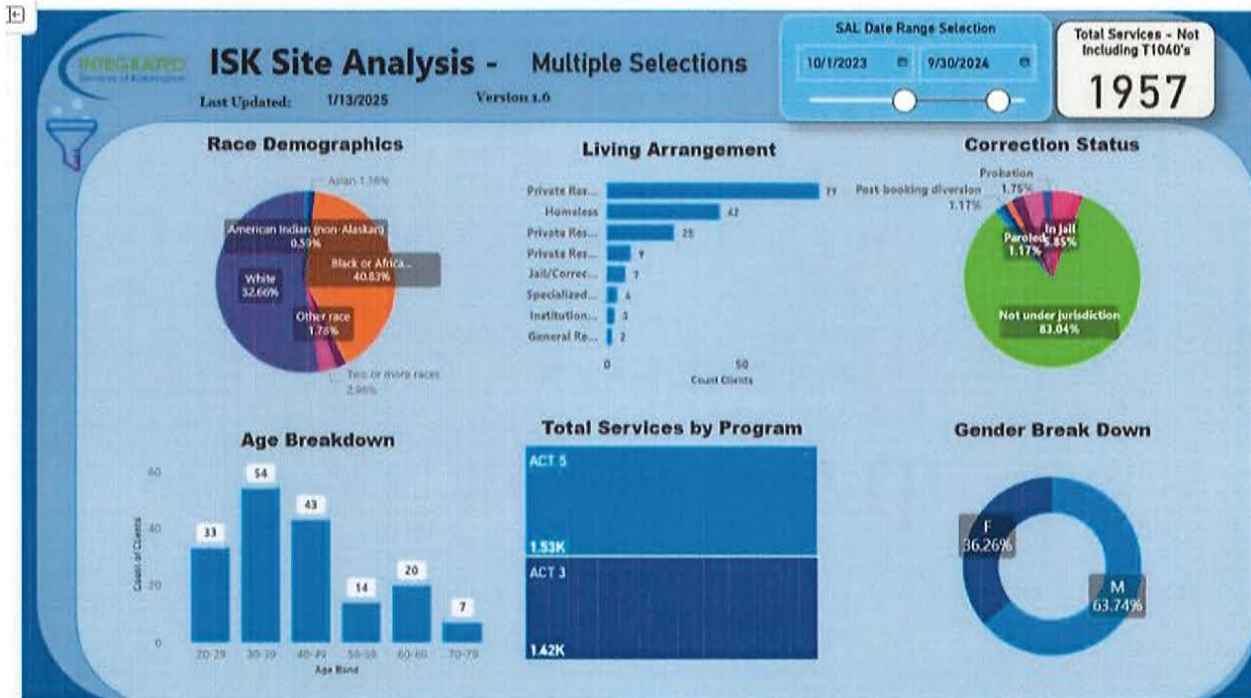
The 2 violations occurred at different agencies.

Neglect Violations

- There was one substantiated Neglect I violation in December 2024, and it was a Failure to Report.
 - The remedial action for this violation was Written Counseling (1).
- There was one substantiated Neglect II violation in December 2024, and it was a Failure to Report.
 - The remedial action for this violation was Written Reprimand (1).
- There were seven substantiated Neglect III violations in December 2024.
 - The remedial actions for these violations were Written Counseling (2), Written Reprimand (5), Suspension (1), Training (6), and Pending (2).

The 7 violations occurred at the 5 different agencies. Two different agencies each had 2 violations but at different program sites. Two of the five agencies had 2 staff members cited.

Program Service Report ASSERTIVE COMMUNITY TREATMENT at ISK



The Assertive Community Treatment (ACT) program offers treatment, rehabilitation, and support services using a person-centered, recovery-based approach to individuals who have been diagnosed with severe and persistent mental illness. Individuals receive ACT services, including; assertive outreach, mental health treatment, health, vocational, integrated dual disorder treatment, family education, wellness skills, community linkages, and peer support. These services are all provided by a mobile, multidisciplinary team in community settings.

ACT was first developed in the 1970's, pioneered in Wisconsin. ACT was first brought to Michigan in 1992 and implemented in Grand Rapids.

Integrated Services of Kalamazoo has been direct operating 2 ACT teams since the closure of InterAct in 2021 (ACT team 3 and ACT team 5). Dr. Valrie Honablue is the ACT medical director, Margot Chadwick is her nurse practitioner. Our ACT teams have 2 supervisors: Christine Clark (team 3) and Lindsey Cady (team 5). Both teams are interdisciplinary and have a mix of masters and bachelor's level clinicians. Each team has their own RN (although they work closely together) and their own peer/recovery coach staff.

In FY 24, our ACT programs provided services to 180 individuals. Of the 180 people served, the most common diagnosis was Schizophrenia (80). The next most common diagnosis was schizoaffective disorder (42). 108 of the 180 ACT clients were listed as having a co-occurring substance use disorder. 61 current ACT clients are also on Assisted Outpatient Treatment court orders (AOT's).

TEAM 3 data:

In FY 24, ACT 3 served 96 individuals. During the last fiscal year, ACT team 3 helped 3 clients who were unhoused find permanent housing. 7 individuals successfully completed the ACT program and were stepped down to case management services.

TEAM 5 data:

In FY 24, ACT 5 served 84 clients. During the last fiscal year, ACT team 5 helped 9 clients who were unhoused find permanent housing. They were able to help 4 individuals move into specialized residential placements that met their needs. 6 individuals successfully completed the ACT program and were stepped down to case management services.



Community • Independence • Empowerment

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

November 25, 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	Kalamazoo/Kalamazoo	
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 - Staff Present:

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

Providers/Guests:

Shenetta Coleman
 Chief Executive
 Officer
 ROI
Fi Spalvieri
 Chief Executive
 Officer
 CLO

ISK - Staff Absent:

Wanda Brown

Call to Order

The Board of Directors (Integrated Services of Kalamazoo) held their meeting on Monday, November 25, 2024. It began @ 3:31PM and was presided over by Chair, *Karen Longanecker*.

Closed Session

ROLL CALL

Member Spears,

“I move that the ISK Board of Directors go into CLOSED SESSION pursuant to Section 8(1)(a) of the Open Meetings Act to conduct the Chief Executive Officer’s Evaluation.” Supported by Member Guenther

ROLL CALL VOTE:

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

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

MOTION PASSED.

The ISK Board convened the CLOSED SESSION at 3:31PM.

The ISK Board adjourned the CLOSED SESSION at 3:45PM.

Agenda

MOTION

Member Guenther,

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

MOTION PASSED.

Citizen Time No citizens came forth.

Recipient Rights

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

Abuse Violations

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

The 3 violations occurred at 2 different agencies. The 2 violations occurring at the same agency occurred at different program sites. There were 2 employees for 1 violation.

Neglect Violations

- There were four substantiated Neglect III violations in October 2024. One of the four was Neglect III, Failure to Report.
 - The remedial actions for these violations were Employee Termination (1), Employee left agency (1), Written Reprimand (1), Policy Revision/Development (1), and Training (1)

The 4 violations occurred at 2 different agencies. The 3 violations occurring at the same agency occurred at 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).

Appointments to the ORR Appeals CommitteeMOTION

Member Woolsey,

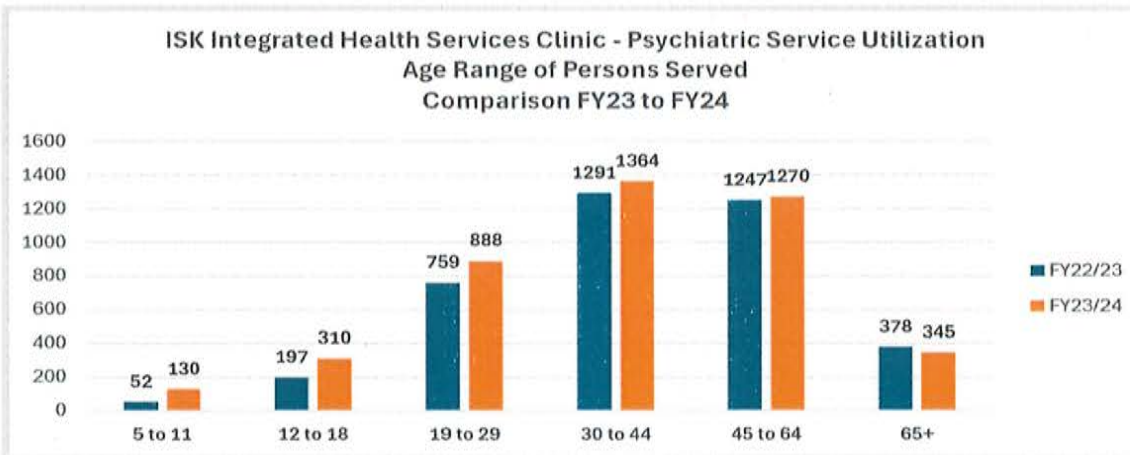
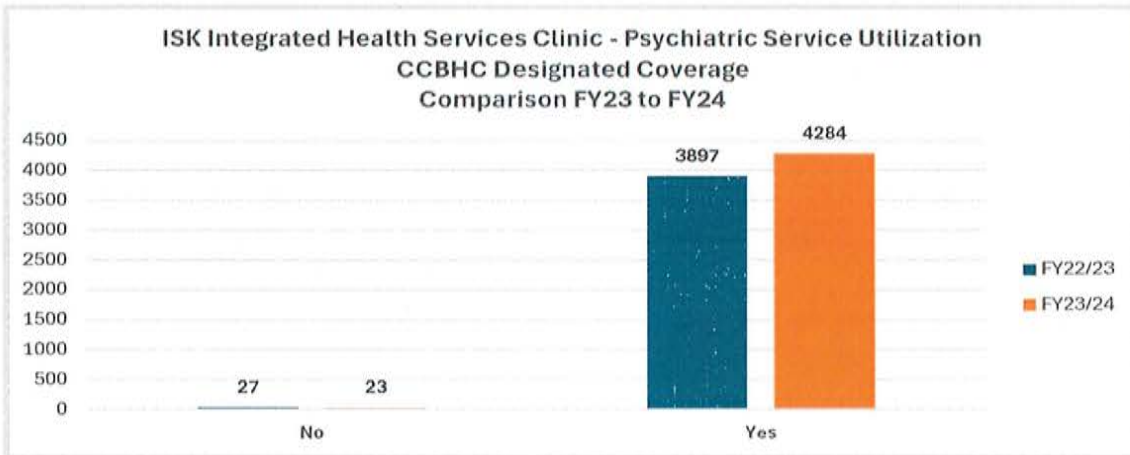
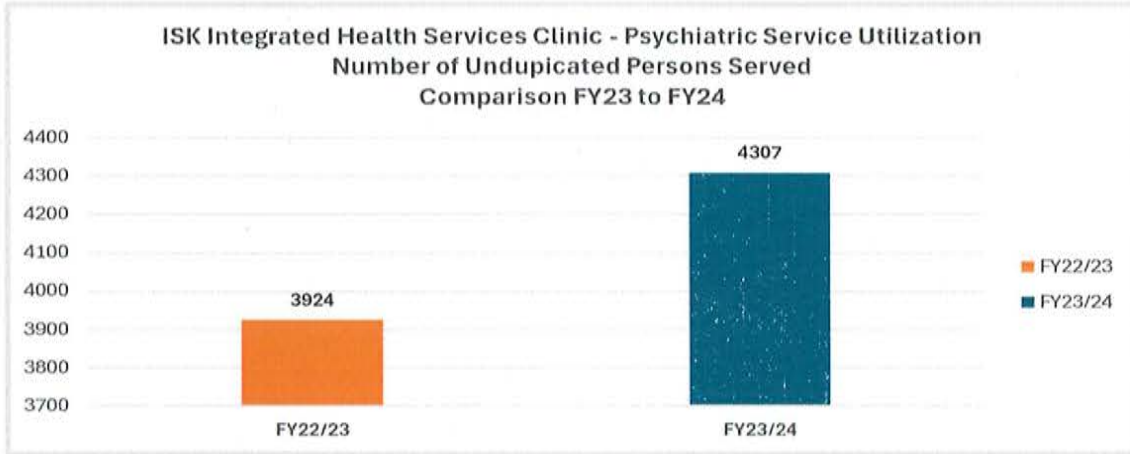
“I MOVE TO APPOINT THE FOLLOWING INDIVIDUAL TO THE RECIPIENT RIGHTS APPEALS COMMITTEE: Jennifer Leigh FOR A ONE YEAR TERM (BEGINNING NOVEMBER 25, 2024 – NOVEMBER 25, 2025).” Supported by Member Krogh.

MOTION PASSED.

CCBHC Report

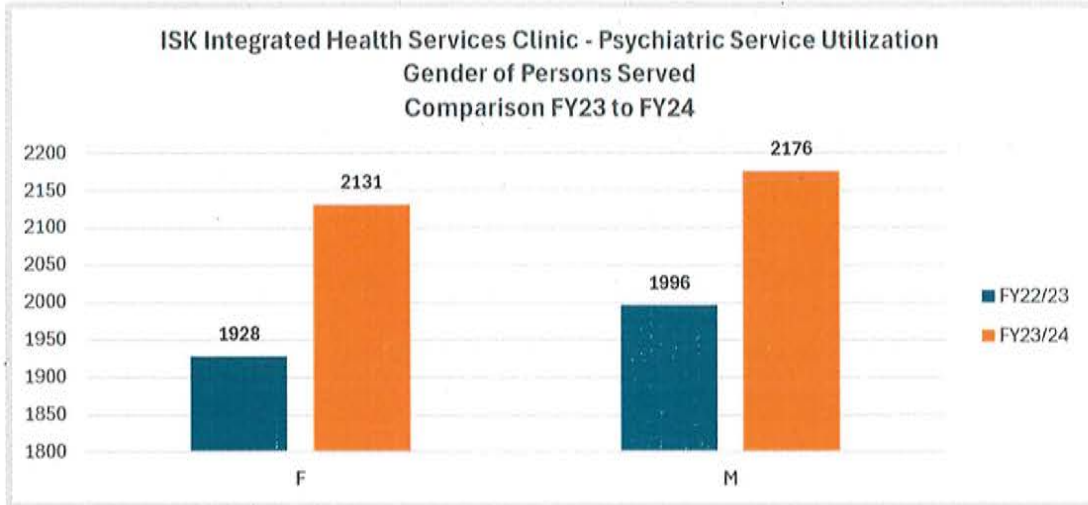
Beth Ann Meints, ISK, Administrator of Clinical Services, presented the November CCBHC Report.

**ISK Integrated Health Services Clinic
Service Utilization FY22/23 to FY23/24**



Data Source: Site Analysis Dashboard -- Completed SALS Psychiatric Services_ACT - MH (11/22/2024)

ISK Integrated Health Services Clinic
Service Utilization FY22/23 to FY23/24



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 October 28, 2024
- b. Communication & Counsel to the Board (Policy)
- c. Governing Style (Policy)
- d. Emergency Executive Succession (Policy)
- e. Endowment Fund (Policy & Report)
- f. FSAC/Family Support Advisory Council (Report)
- g. Corporate Compliance and Risk Management (Policy)

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

Monitoring Reports

Ashley Esterline, Director of Network Compliance, presented the Compliance & Risk, FY25 Annual Report

PURPOSE

ISK is committed to identifying and complying with local, state, and federal laws and regulations as they apply to health care delivery. The Annual Corporate Compliance Plan provides stakeholders, the Board of Directors, Network Providers and other interested parties with a summary of the effectiveness of the Compliance Program during FY24 (October 1, 2023 through September 30, 2024) and the proposed Compliance Plan and Goals for FY25 (October 1, 2024 through September 30, 2025).

PROGRAM PURPOSE

The ISK Compliance Program is designed to provide safeguards to ensure that ISK and the Provider Network are in compliance with laws and regulations related to regulatory compliance, including fraud, waste, and abuse.

The purposes of the Corporate Compliance Program are as follows:

- To prevent noncompliance with applicable laws, whether accidental or intentional;
- To detect any noncompliance which may occur;
- To ensure discipline is implemented for individuals and entities when involved in noncompliance, including the sanctions and/or disbarment when warranted; and
- To prevent the reoccurrence of noncompliance in health care delivery

The scope of the Compliance Program extends to all activities funded by federal healthcare dollars. Each Board Member, Officer, employee, Provider, contractor, subcontractor and/or agent operating within the Provider Network is expected, through its direct employment or contractual involvement in the Provider Network, to comply with ISK compliance activities.

PROGRAM DESIGN

ISK's Compliance Program is structured around technical guidance issued by the Michigan Department of Health and Human Services (MDHHS), the Office of Inspector General (OIG), and the Department of Justice (DOJ). The ISK Compliance Program operates with core management centralized within the ISK Compliance Committee.

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

Financial Reports/Financial Condition Reports

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

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

Utilization Reports

Amy Rottman, ISK, Chief Financial Officer, presented the Utilization Report for the period ending October 31, 2024.

- Autism Services is at (180) clients and is unfavorable at \$77,911.
- Youth Community Inpatient Services is at (34) days and is favorable at \$31,443.
- MI Adult Community Inpatient Services is at (95) days and is unfavorable at \$67,381.
- Community Living Supports, Personal Care, and Crisis Residential is favorable at \$45,767.

October DisbursementsMOTION

Member Guenther, “BASED ON THE BOARD FINANCE MEETING REVIEW, I move that ISK approve the October 2024 vendor disbursements of \$10,462,574.51.”

Supported by Member Krogh. MOTION PASSED.

Action Items - New or Revisited2025 Medical Plan Coverage YearMOTION

Member Krogh

“I move that the ISK BOARD elects to comply with the requirements of 2011 Public Act 152, the Publicly Funded Health Insurance Contribution Act, by adopting the annual Exemption option for the medical benefit plan coverage year January 1, 2025 through December 31, 2025.”

Supported by Vice Chair Seals.

SUMMARY OF REQUEST:

During Open Enrollment premium co-pays are developed based on PA 152 and staff elect their insurance coverage and agree to pay their share of the premium. For 2025 PA 152 only increased by .2%. In order to keep healthcare coverage affordable for ISK staff we intend to increase the 2025 PA 152 hard cap employer contribution amount by 3% which aligns with the 3% fringe benefit increase for all staff which requires a board exemption from PA 152.

In order to still comply with PA 152, the Board may elect the “Exemption” Option and exempt itself from the requirements of the Act by an annual 2/3 vote.

MOTION PASSED.

Rule of 80MOTION

Member Krogh

“I move to approve and submit to the Kalamazoo County Board of Commissioners the resolution to amend the Kalamazoo County Employees’ Retirement System to align the ISK retirement eligibility with changes made by Kalamazoo County, including the Rule of 80 effective January 1, 2025.” Supported by Member Raphelson.

- The Rule of 80 allows a staff member to retire without financial penalty who is age 50 or older and has acquired enough Credited Service so that the sum of the member’s age and the member’s actual Credited Service equals or exceeds 80.
- ISK employees participate in the Kalamazoo County Employees’ Retirement System, a defined benefit retirement plan, which is qualified under section 401(a) of the Internal Revenue Code.
- The Kalamazoo County Board of Commissioners similarly amended the Retirement Resolution for certain Kalamazoo County employees to be effective January 1, 2025.
- The proposed change will add another option for ISK staff to meet the requirements for retirement without being subjected to the early retirement reduction factor.
- An Actuarial Valuation was completed and reviewed by the ISK CFO
- This recommendation is proposed to:
 - It is less expensive to allow staff to retire earlier
 - Most benefit enhancements are geared towards new hires, very few are geared towards senior staff as well as those who start with the agency under 30 years old
 - Align ISK with Kalamazoo County retirement options

MOTION PASSED.Chief Executive Officer Report

The Southwest Michigan Behavioral Health Board estimates that there was \$24M in revenues and \$23.5M in expenses, Administration cost of \$2.6M and a \$2.1M deficit, with a projected \$25.8M year-end deficit. The remaining ISF as of now is \$1.283M.

SWMBH is weekly reproducing Milliman’s data to see if the geographical factors are correct and will provide a future analysis to the SWMBH region. It was once projected that revenues would be \$36M. However, SWMBH will also be taking a thorough look into what caused the usage of those projected revenues.

As we begin this process, I believe the greatest impact of our revenues is the low Medicaid rates.

The SWMBH CEOs have decided to do a deep dive and a thorough analysis as to why these increases are occurring by looking at DQA data, use patterns and psychiatric services. I applaud SWMBH Ops Committee for their efforts to begin sharing monthly progress reports. The SWMBH CEOs approved the letter of agreement to contract with Rehmann Accounting Analysis to assess Medicaid rates, loss revenues, eligibility categories and encounter data.

That concludes my report.

Citizen Time No citizens came forth.

SWMBH (Southwest Michigan Behavioral Health) Updates/Erik Krogh

This report was combined with the Chief Executive Officer report. He also announced that effective immediately, he will be retiring from the SWMBH Board, and that Michael Seals has agreed to be appointed as his replacement.

That concludes my report.

Appointment of Michael Seals to the Southwest Michigan Behavioral Health Board

MOTION

Member Guenther, "I move to appointment Michael Seals to the Southwest Michigan Behavioral Health Board as the ISK Representative." Supported by Member Bergan.

MOTION PASSED.

Decision to hold or cancel the December 2024 Board Meeting

MOTION

Member Spears, "I move to cancel the December 23, 2024, ISK Board of Directors meeting." Supported by Vice Chair Seals.

MOTION PASSED.

Meeting adjourned by voice vote @ 5:38PM.

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





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.

MISSION

We promote and provide mental health, intellectual and developmental disability and substance use disorder supports and services that empower people to succeed.

GUIDING VALUES

Community

Competence

Diversity

Effectiveness

Integrity

Leadership

Recovery and Self-Determination

Respect

Responsibility

Teamwork

Trust

Community • Independence • Empowerment

GUIDING VALUE STATEMENTS

Community

- We respect the diversity of communities and the people we serve.
- We partner with persons served, providers and other organizations to foster continued growth and success.
- We will make decisions that consider the strengths, resources and needs of our community.

Competence

- We constantly evaluate our own performance and look for opportunities to improve more effectively.
- We are committed to ensuring that the ISK workforce is diverse, qualified, continuously trained, multi-skilled, culturally competent, adaptable and empowered.

Diversity

- We will maintain an inclusive work environment that actively attracts, develops and retains a diverse and talented workforce.
- We are committed to valuing similarities while respecting and incorporating thoughts, experiences and cultural differences of our employees and the people we serve.
- We recognize that successful outcomes depend upon services that are adapted to the diverse needs and cultural experiences of the individuals we serve.

Effectiveness

- We will ensure that ISK's supports and services are person centered and produce the desired results on a consistent basis.
- We will use our time wisely to help all persons served meet their goals.

Integrity

- We will be truthful and fair to each other and all persons served.
- We will keep the best interest of all persons served foremost in everything we do.

Leadership

- We paint an inspiring vision that motivates others.
- We will lead by setting an example. A good leader gives and shows everyone possibilities.
- We communicate goals and objectives clearly.
- We invite creative approaches that are driven by the needs and desires of all persons served and are person/family-centered and strength based.

Recovery and Self-Determination

- We believe in the full potential of all persons to live lives of recovery and self-determination, regardless of their life circumstances and challenges. Individuals seeking services have strengths and abilities, and will be treated with dignity, respect and an expectation of hope.
- We will always use a person centered planning approach in partnership with each person served.
- We will ensure that ISK demonstrates an ongoing commitment to promote and implement trauma-informed care.

Respect

- We practice fairness, consideration and understanding with each other, recognizing that everyone has intrinsic worth and equal value.
- We have high regard for the diversity and uniqueness of those served and those serving.

Responsibility

- We will make informed decisions and if we make mistakes, we will correct them and learn from them.
- We are accountable and individually responsible to all persons served by ISK, co-workers and our community.

Teamwork

- We will build and nurture community partnerships and networks to achieve creative, efficient and flexible outcomes for all persons served and their families.
- We rely on everyone's strengths to get the job done and meet goals.
- We will foster productive relationships among staff members, units, departments and functions to achieve creative, efficient and flexible outcomes.

Trust

- We respect and maintain confidentiality at all times.
- We earn the respect and confidence of co-workers and persons served through consistent honesty.
- We follow-through with appropriate actions.

Community • Independence • Empowerment

10/30/17;07/27/2015; 01/26/2015; 01/28/2013; 01/12/2010; 10/21/2009; 09/30/2009; 1.01 Mission_Vision_Value Statement

INTEGRATED SERVICES OF KALAMAZOO

BOARD POLICY I.02

AREA:	Governance		
SECTION:	Mission/Vision/Values and Bylaws	PAGE:	1 of 1
SUBJECT:	BYLAWS AND RULES OF PROCEDURE	SUPERSEDES:	02/24/2014
		REVISED:	01/22/2018

PURPOSE/EXPLANATION

To establish and maintain Bylaws for the Board and advisory groups to the Board.

POLICY

The Bylaws will provide the rules and basic framework necessary to each group's operation and management. The Bylaws may include the specification of member qualifications, rights and liabilities of membership, and the powers, duties and grounds for dissolution of a group.

The Board will annually review the Bylaws of the Board and its advisory groups. All changes in Bylaws must be approved by the Board.

The recognized advisory groups to the ISK Board and/or Chief Executive Officer include:

1. The Family Support Advisory Council for Children with Serious Emotional Disturbances
2. Customer Advisory Council
3. Recipient Rights Advisory Committee

EXHIBITS

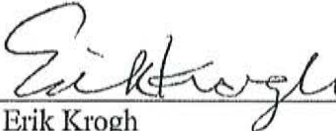
- A. ISK Board Bylaws and Rules of Procedure
- B. Family Support Advisory Council (FSAC) Bylaws
- C. Office of Recipient Rights (ORR) Bylaws

CHIEF EXECUTIVE OFFICER



 Jeff Patton
 Chief Executive Officer

APPROVED



 Erik Krogh
 Board Chair

Kalamazoo Community Mental Health and Substance Abuse Services Authority Board
January 23, 2012
Bylaws and Rules of Procedure

ARTICLE I – NAME

The name of this body is the Kalamazoo Community Mental Health and Substance Abuse Services Board (hereinafter called the “Board”).

ARTICLE II – PURPOSE

The Board, created by Kalamazoo County pursuant to Public Act 258 of 1974 as amended, has the full governance responsibility and authority to operate the Kalamazoo Community Mental Health and Substance Abuse Services Authority, doing business as Kalamazoo Community Mental Health and Substance Abuse Services. The standards and rules as authorized by Public Act 272 of 1974 as revised guide all services and programs.

The mandates on the Michigan Mental Health Code prescribe the governance authority and mental health services purposes. Those mandates are adopted into these Bylaws. In addition the DCH required annual plan and budget establish the essential scope of service plans governed by the Board.

The Board has identified its mission, vision, values and annual goals. These policy documents provide specific structure to the purposes for which the Board operates.

ARTICLE III – BOARD ORGANIZATION

Section 1: Board Membership

The Board shall consist of twelve (12) members who are appointed or removed by the Kalamazoo County Board of Commissioners. Board members shall have their primary place of residence in Kalamazoo County. “The composition of the Board shall be representative of providers of mental health services, recipients or primary consumers of mental health services, agencies and occupations having a working involvement with mental health services, and the general public. At least one-third (1/3) of the membership shall be primary consumers or family members, and of that one-third (1/3) at least two members shall be primary consumers. Not more than four (4) members of the Board may be County Commissioners and not more than one-half (1/2) maybe public officials, as defined by the Michigan Mental Health Code. All board members shall be 18 years of age or older.”

Reference: MCLA 330.1222

Section 2: Terms of Membership

The term of office of a Board member shall be three years from April 1 of the year of appointment.

Reference: MCLA 330.1224

Kalamazoo Community Mental Health and Substance Abuse Services Authority Board
January 23, 2012
Bylaws and Rules of Procedure

Section 3: Vacancies in Office

When a vacancy occurs on the Board, either by resignation, completion of term, removal, or death, the vacancy shall be filled by the County Commission for the unexpired term, or new term in the same manner as original appointment.

Section 4: Neglect of Duties

If any board member has missed 50% of the regularly scheduled Board meetings or committee of the whole in any continuous twelve (12) month period without providing information to the Board chairperson regarding the reasons for those absences, that board member shall be presumed to have neglected his/her duties and the Board chairperson (or vice-chairperson, if chairperson has neglected his/her duties) shall investigate the reasons for such absences. If the Board chairperson determines that the reasons for such absences are not sufficient to rebut the presumption of neglect of duties, upon concurrence of a majority of the KCMHSAS Board, the Board chairperson shall notify the chairperson of the County Board of Commissioners in writing of the Board's determination and request that the County Board of Commissioners institute removal procedures pursuant to the Michigan Mental Health Code.

Reference: MCLA 330.1224

Section 5: Officers

During the month of May, the Board shall elect a chairperson and vice chairperson. The chairperson, with Board concurrence, will appoint a nominating committee in the month of April, which shall nominate at least one (1) candidate for each office. At the May meeting the nominating committee shall report a recommended slate of officers. Nominations may be made from the membership of the Board at this meeting. Upon election, the chairperson and vice-chairperson will assume leadership responsibilities beginning in the month of June.

Section 6: Duties of Officers

Governance policies: The Board shall develop or establish expectations for Board member activities, Board Code of Conduct and other similar areas as determined by the Board.

Section 7: Committees

The Board, pursuant to its policies, may establish committees to accomplish its purposes and tasks.

Section 8: Powers and duties

The Board shall have such powers and duties that shall from time to time be provided by law.

Kalamazoo Community Mental Health and Substance Abuse Services Authority Board
January 23, 2012
Bylaws and Rules of Procedure

Section 9: Indemnification

Kalamazoo Community Mental Health and Substance Abuse Services shall indemnify and hold harmless all Board members against expenses actually and necessarily incurred by them in connection with the defense of any action, lawsuit, or proceeding in which they are made parties by reason of being or having been a Board member, except in relation to matters as to which any such member shall be adjudged in such action, lawsuit or proceeding to be liable for negligence or misconduct in the performance of duty and to such matters as shall be settled by agreement predicated on the existence of such liability. The foregoing right to indemnification shall not be exclusive of other rights to which a member may be entitled.

ARTICLE IV – MEETINGS

Section 1: Regular meetings

The Board shall conduct a minimum of twelve (12) regular meetings per year. Unique circumstances may require additional or fewer Board meetings.

Section 2: Public meetings

Every meeting of the Board shall be open to the public and shall be held in a place available to the general public. A meeting shall mean a convening of a quorum of the Board for the purpose of deliberating to render a decision on a public policy. Every meeting of the Board's standing committees, advisory councils, and temporary deliberative bodies constituted by the Board (e.g. task forces) shall also be open to the public and shall be held in a place available to the general public.

Section 3: Special board meetings

A special meeting may be called by the Chairperson of the Board or any two members thereof by written notice served on each member or left at his/her designated mailing address at least 18 hours prior to such meeting. Members may waive notice of any special meeting either before or after the holding thereof, said waiver to be in writing and filed as a permanent part of the record. A public notice stating the date, time, and place of a special meeting shall be posted in the Community Mental Health Office and the Kalamazoo County Board of Commissioners' Office in the County Administration Building at least 18 hours before the meeting.

Section 4: Order of Business for regular meetings

Board meetings shall be conducted by way of an established agenda. The agenda shall identify time for citizen input.

Kalamazoo Community Mental Health and Substance Abuse Services Authority Board
January 23, 2012
Bylaws and Rules of Procedure

- Section 5: Roberts Rule of Order:
Meetings shall be conducted within the protocol of Roberts Rule of Order unless modified by these Bylaws or rules or any specific governance policies adopted by the board.
- Section 6: Quorum
A simple majority of the members of the Board shall constitute a quorum for the transaction of ordinary business of the Board. A committee of the Board may transact business if at least one-half (1/2) of the members duly appointed and serving are present. However, without a quorum, no formal motion or action can be authorized until such motions or actions are later approved by the quorum of the Board.
- Section 7: Voting
Except as otherwise provided by statute, all questions shall be determined by the vote of the majority of the members present. Only twelve (12) members appointed to the Board by the County Commission shall be voting members.
- Section 8: Citizen Participation
Any citizen may comment on agenda items prior to taking a vote thereon. Citizens, after being recognized, shall identify themselves by name and address, and shall ordinarily limit their comments to four (4) minutes, unless the time is otherwise extended by the chairperson or by a vote of the Board.
- Section 9: Distribution of Minutes
Proposed minutes shall be available for public inspection not more than eight (8) business days after each meeting of Board. Approved minutes shall be available for public inspection not later than five (5) business days after the meeting in which the minutes are approved. Corrections in the minutes shall be made no later than the next meeting after the meeting to which the minutes refer. Corrected minutes shall be available no later than the next subsequent meeting after correction. The corrected minutes shall show both the original entry and the correction. Copies of the minutes shall be mailed to individuals upon request without charge.
Reference: MCLA 15.269
- Section 10: Board Order, Records
Every order, resolution, motion and determination of the Board shall be recorded in the approved Board minutes and/or record of the Board. The record of the Board activities shall be maintained under file at the central administrative office of the mental health services program.

Kalamazoo Community Mental Health and Substance Abuse Services Authority Board

January 23, 2012
Bylaws and Rules of Procedure

RECEIVED

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ARTICLE V – BOARD COMPENSATION

KCMHSAS


Section 1: Compensation

Board members may adopt a Board Policy regarding their compensation which conforms to the resolution of the Kalamazoo County Board. Board members may also receive the per mile mileage reimbursement set for State officers as determined by the State Officers Compensation Commission.

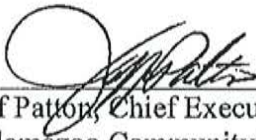
ARTICLE VI – AMENDMENT OF BYLAWS

These Bylaws and rules may be amended, altered, changed, added to, or repealed by the affirmative vote of a majority of the members of the entire Board at any regular or special meeting, provided notice of the intention to amend has been included in the call. A two-thirds' vote of the entire Board shall be required when a motion to amend, alter, change, add to, or repeal these Bylaws is not included in the regular call.

The forgoing Bylaws and rules of procedure were adopted by the Kalamazoo Community Mental Health and Substance Abuse Services Board at its regularly scheduled meeting March 27, 2006.



Moses L. Walker, Board Chair
Kalamazoo Community Mental Health and
Substance Abuse Services Board



Jeff Patton, Chief Executive Officer
Kalamazoo Community Mental Health and
Substance Abuse Services

**INTEGRATED SERVICES OF KALAMAZOO
FAMILY SUPPORT ADVISORY COUNCIL BY-LAWS FOR
YOUTH WITH SERIOUS EMOTIONAL DISTURBANCE**

ARTICLE I

NAME

The name of this body is the Integrated Services of Kalamazoo (ISK) Family Support Advisory Council for Youth with Serious Emotional Disturbance.

ARTICLE II

PURPOSE

The Family Support Advisory Council members will represent the population served in terms of diversity and shall serve/advise the Integrated Services of Kalamazoo Board (hereafter called the Board). Diversity is defined by such factors as geographic area, race, ethnicity, gender identity, disability, age, or sexual orientation. The Council shall serve to advise the Board in areas relating to the planning, delivery and operation of services for families of children with serious emotional disturbance. More specifically, the Council shall:

1. Serve/advise the Board in examining and evaluating the family support needs of the county and the public/non-public services necessary to meet those needs.
2. Serve/advise the Board in reviewing and evaluating the quality, effectiveness and efficiency of services provided through the Department.
3. Serve/advise the Board in developing an annual program plan and budget that reflects the mental health service needs of the County.
4. Make recommendations to the Board on conceptual/procedural issues.
5. Make recommendations to the Board in relation to proposed Federal, State, Departmental rules, laws and policies.
6. Serve as an advocate for persons receiving community mental health services and assist the Board in educating the general community in relation to mental health services.
7. The Council shall perform the above duties and communicate its findings to the Board. The Council shall not act independent of the Board.

**INTEGRATED SERVICES OF KALAMAZOO
FAMILY SUPPORT ADVISORY COUNCIL BY-LAWS FOR
YOUTH WITH SERIOUS EMOTIONAL DISTURBANCE**

ARTICLE III

COUNCIL ORGANIZATION

Section I - COUNCIL MEMBERSHIP

1. FSAC members or potential members are appointed by the Board to serve on the Council.
2. The Family Support Advisory Council shall consist of up to fifteen (15) diverse members that represent the population served.
3. Members must attend at least fifty (50) percent of all meetings held throughout the year.
4. Exceptions will be made for prearranged/excused absences.

Section II - VACANCIES IN OFFICE

There is a formal application process (attachment A). The Council shall interview applicants and make recommendations to the Board.

Section III - THE OFFICERS

Each Council shall elect a Chairperson and Vice-chairperson. The Chairperson shall preside at all meetings of the Council and make periodic reports as required/desired to the Board. The Vice-chairperson shall preside in the absence of the Chairperson.

ARTICLE IV

BOARD/COUNCIL RELATIONSHIPS

The Council will have the opportunity to make a formal report to the Board at least annually.

Section I - COMMUNICATIONS/GENERAL RELATIONSHIPS

The Council shall operate to serve/advise the Board. No Council member may act independent of the Council and the Council shall not act independent of the Board. It is recognized however that Council members may belong to other advocacy or advisory groups that may express views to the Board.

**INTEGRATED SERVICES OF KALAMAZOO
FAMILY SUPPORT ADVISORY COUNCIL BY-LAWS FOR
YOUTH WITH SERIOUS EMOTIONAL DISTURBANCE**

Section II – PERFORMANCE OF DUTIES

The Council shall perform its duties by assisting and advising the Board. The Executive Director shall assign a member of the staff to serve/advise the Council in the performance of its duties. All reports from the Council to the Board shall be processed through the Board Chair or Vice Chair.

Section III – SPECIAL COMMITTEE/TASK FORCE

The Council, through prior approval of the Board, may establish time limited task forces or special committees to serve/advise in the completion of specific assignments.

ARTICLE V

COUNCIL/STAFF RELATIONS

Section I – GENERAL RELATIONSHIPS

The ISK management staff is responsible to the ISK Executive Director.

Section II – RESPONSIBILITIES

The Council is an advisory body charged with assisting and advising the Board in relation to service areas. The Chair of each Family Support Advisory Council shall prepare recommendations for ISK action. In such situations where the recommendations of the Executive Director and the Council differ, both recommendations will be presented.

ARTICLE VI

AMENDMENT OF BY-LAWS

These by-laws are created and placed into effect by the Board and may be amended, altered, changed, added to or repealed by the affirmative vote of a majority of the members of the entire Board at any regular or special meeting provided notice of the intention to amend has been included in the call. A 2/3 vote of the entire Board shall be required when a motion to amend, alter, change, add to or repeal these by-laws has not been included in the regular call.

**INTEGRATED SERVICES OF KALAMAZOO
RECIPIENT RIGHTS ADVISORY COMMITTEE
BYLAWS**

ARTICLE I

Name

The name of this body is the INTEGRATED SERVICES OF KALAMAZOO / RECIPIENT RIGHTS ADVISORY COMMITTEE.

ARTICLE II

Purpose

The Recipient Rights Advisory Committee (RRAC) shall be established by the Integrated Services of Kalamazoo (ISK) Board. The RRAC shall serve to advise the ISK Board, ISK Executive Director and the Recipient Rights Director in areas relating to recipient rights. More specifically, the RRAC shall:

1. Protect the Recipient Rights Office from pressures which could interfere with impartial, evenhanded and thorough performance of its duties.
2. Recommend candidates to head the Office of Recipient Rights.
3. Consult with the ISK Executive Director prior to the dismissal of the Director of the Recipient Rights Office. If the Committee is in disagreement concerning the proposed dismissal, the Committee may appeal to the ISK Board.
4. Serve as an advocate for the Recipient Rights system to ensure protection of the rights of all recipients.
5. Ensure that the Recipient Rights Office carries out its duties concerning prevention, education and investigations by reviewing bi-monthly the activities of the Recipient Rights staff.
6. Advise the Board concerning unmet policy needs.

ARTICLE III

Committee Organization

Section I – COMMITTEE MEMBERSHIP

The Committee shall consist of not less than 10 members and up to 22 members.

Candidates shall be reviewed by the RRAC Nomination Subcommittee and be recommended to the ISK Board. The Nomination Subcommittee composition is referenced in Article III section VII.

The membership of the committee shall be broadly based so as to best represent the varied perspectives of the CMH services program's geographic area. At least 1/3 of the membership shall be primary consumers or family members, and of that 1/3, at least 1/2 shall be primary consumers. A current list of Committee members' names

**INTEGRATED SERVICES OF KALAMAZOO
RECIPIENT RIGHTS ADVISORY COMMITTEE
BYLAWS**

interests they represent, history of their term(s) and attendance history shall be maintained.

Section II – TERMS OF MEMBERS

The term of office of a Committee member shall be three (3) years from January of the year of appointment. Upon completion of terms, the ISK Board Nominating Committee referred to in Article III, Section I will recommend to the Board a reappointment or appoint a new member.

Section III – ATTENDANCE OF MEMBERS

Attendance is expected for all meetings. If a member has three (3) unexcused consecutive absences, the member will be contacted to determine if the member wishes to continue on the RRAC. The ISK Executive Director shall be informed by the Chairs of all such absences and of the need for any new appointment.

Section IV – VACANCIES

When a term expires or a vacancy occurs on the RRAC, the ISK Nominating Committee shall be informed and will take the appropriate actions to ensure an appointment is recommended to the ISK Board.

Section V – OFFICERS

The RRAC will elect two (2) co-chairs of equal status for a two (2) year term. One co-Chair will be elected during February of each term, causing staggering terms. Co-chairs will alternate Chair duties each meeting.

Section VI – Appeals

The Appeals Committee shall review appeals filed by a person who has filed a complaint with the Office of Recipient Rights, or who is the recipient or guardian to the recipient about whom the complaint was filed. The appeals will follow established procedure set forth in Chapter 7a of the Michigan Mental Health Code.

The RRAC has recommended Appeals Committee membership. The Appeals Committee is a 7-member committee appointed by the ISK Mental Health Board (MHB), the composition of which complies with Michigan Mental Health Code statutory composition requirements for an Appeals Committee.

Three members will be from the RRAC, at least 2 members from the CMHSP board and 2 primary consumers. Members can represent more than one of these categories. None shall be employed by the CMHSP or by MDHHS.

Section VII – SUBCOMMITTEES

Ad hoc committees of the RRAC will be established through the Senior Co-Chair on an as-needed basis. During February of each year, the Senior Co-Chair will appoint members to each sub-committee for a one-year term, except that of the Research Review Subcommittee. The term of office of a Research Review Subcommittee member shall be two (2) years.

**INTEGRATED SERVICES OF KALAMAZOO
RECIPIENT RIGHTS ADVISORY COMMITTEE
BYLAWS**

Standing subcommittees will be:

Nomination

The nomination committee shall consist of two (2) ISK MHB members and two (2) RRAC members. As needed, the nomination committee will personally interview applicants for appointment to the RRAC and make recommendations for appointment to the ISK MHB.

Research Review

The Research Review Subcommittee reviews all proposed research targeted for implementation in the ISK system to determine compliance with Federal and State regulations and to determine whether any identified risk to recipients is present. If risk is determined to be present, the RRAC will decide whether or not the potential benefits outweigh the risks. Recommendation is then made to the ISK Executive Director.

Meetings

Section I – REGULAR MEETINGS

Meetings shall be held bi-monthly (odd numbered months). The RRAC shall conduct a minimum of five (5) regular meetings per year.

Section II – SPECIAL MEETINGS

A special meeting of the RRAC may be called by either of the Co-chairs, the Director of the Office of Recipient Rights, the ISK Executive Director or the ISK Board.

Section III – ORDER OF BUSINESS

Committee meetings shall be conducted by way of an established agenda.

Section IV – QUORUM

One more than one-half of the established minimum number (10) for committee membership.

Section V – VOTING

All questions shall be determined by the vote of the majority of the Committee members present. Only the Committee members appointed to the Committee by the ISK Board shall be voting members.

Conflict of Interest

A member who is directly involved with a matter to be voted upon must abstain from voting or may be disqualified from voting by a two-thirds vote of the Committee present.

**INTEGRATED SERVICES OF KALAMAZOO
RECIPIENT RIGHTS ADVISORY COMMITTEE
BYLAWS**

ARTICLE IV

Board / Committee Relationships

Section I – COMMUNICATIONS

Committee Co-chairs and/or their designee shall serve to represent the Committee when interacting with the Board. No committee member may act independently to represent the Committee.

Section II – PERFORMANCE OF DUTIES

The ISK Executive Director will assign the Director of the Recipient Rights Office to assist the committee in the performance of its duties.

ARTICLE V

Committee / Staff Relationships

Section I – ADMINISTRATION STAFF RELATIONSHIPS

The Director of the Recipients Rights Office is responsible to the ISK Executive Director. As such, task assignments to the Director of the Recipient Rights Office shall be made by the ISK Executive Director. These assignments shall not be in conflict with the basic purpose of the Rights Office.

ARTICLE VI

Amendment of By-Laws

The ISK Board may amend, alter, change, add to or repeal the by-laws by the affirmative vote of a majority of the members of the entire Board at any regular or special meeting, provided the Recipient Rights Advisory Committee has been advised and given an opportunity to comment prior to action taken. The Committee may make recommendations to the ISK Board concerning amendments, alterations, changes, additions to or repeal of by-laws by the affirmative vote of a majority of members of the entire Committee.

The foregoing by-laws were developed and recommended for appointment by the Recipient Rights Advisory Committee to the ISK Board.

INTEGRATED SERVICES OF KALAMAZOO

BOARD POLICY VI.01

AREA:	Governance	PAGE:	1 of 1
SECTION:	System Governance	SUPERSEDES:	01/24/2011
SUBJECT:	ANNUAL LEAVE RESERVE	REVISED:	01/26/2015

PURPOSE/EXPLANATION

To formally document an Annual Leave Reserve policy that will provide a uniform and systematic process of maintaining an annual leave reserve to fund the liability for each staff member's vested annual leave and sick leave cost as determined at the end of each fiscal year.


The establishment of the annual leave reserve fund improves efficiencies and provides method of funding a significant liability in a manner that is not disruptive to the service delivery system and which provides a mechanism for ensuring that funds are available to cover the vested benefits of staff.

The Annual Leave Reserve policy applies to all programs and activities operated under the auspices of the Integrated Services of Kalamazoo (ISK) Board which are eligible for such reimbursement. The Chief Executive Officer (CEO) will annually report to the Board the status of the liability account.

POLICY


It is the policy of the ISK Board to establish and fund a reserve for vested staff members' annual and sick leave in accordance with generally accepted accounting principles and consistent with the appropriate government accounting standards and board.

CHIEF EXECUTIVE OFFICER



 Jeff Patton
 Chief Executive Officer

APPROVED



 Erik Krogh
 Board Chair

**ISK Board Report
Board Policy VI.01
Annual Leave Reserve Status**

ISK maintains an Annual Leave Reserve as a reserve within the equity section of the balance sheet for employee accrued leave. Annually, the finance staff calculate the amount required to be reserved per board policy. The change is reflected in the current year expenditures. Below is a historical review of the changes to that reserve account balance.

**Historical Sick and Annual Reserve Changes
615 Liability Account**

Fiscal Year	Beginning Balance	Additions/ (Usage)	Ending Balance
	623,828		
99/00		(68,849)	554,979
00/01	554,979	(34,270)	520,709
01/02 *	520,709	102,222	622,931
02/03 *	622,931	20,766	643,697
03/04 **	643,697	(191,044)	452,653
04/05	452,653	78,677	531,330
05/06	531,330	31,186	562,516
06/07	562,516	25,592	588,108
07/08	588,108	67,725	655,833
08/09	655,833	32,903	688,736
09/10	688,736	25,606	714,342
10/11	714,342	83,062	797,404
11/12	797,404	76,871	874,275
12/13	874,275	106,564	980,839
13/14	980,839	(128,714)	852,125
14/15	852,125	87,345	939,470
15/16	939,470	74,445	1,013,915
16/17	1,013,915	55,020	1,068,935
17/18	1,068,935	4,910	1,073,845
18/19	1,073,845	89,901	1,163,746
19/20	1,163,746	213,620	1,377,366
20/21	1,377,366	14,952	1,392,318
21/22	1,392,318	246,850	1,639,168
22/23	1,639,168	133,482	1,772,650
22/24	1,772,650	333,540	2,106,190

* Note: Change in policy regarding use of reserve, allowed bonus payout of accrued leave on anniversary date. Also payouts for employees terminated @ 9/30/03

** Note: Adjusted for reversing JE to 615, error in posting.

INTEGRATED SERVICES OF KALAMAZOO

BOARD POLICY II.08

AREA:	Governance	
SECTION:	Board Governance Process	PAGE: 1 of 2
SUBJECT:	ANNUAL BOARD PLANNING CYCLE	SUPERSEDES: 01/25/2005 REVISED: 01/25/2010

PURPOSE/EXPLANATION

To define the annual board planning cycle.

POLICY**I. ANNUAL PLANNING CYCLE COMPONENTS**

To accomplish its business outcomes with a governance style consistent with Integrated Services of Kalamazoo (ISK) Board policies. The ISK Board will follow an annual agenda that provides scheduled opportunities to:

- A. Review overall planning documents such as mission, vision, values, and goals.
- B. Complete a review of all governance policies at least annually.
- C. Monitor all "Ends" and "Executive Limitations" policies.
- D. Review and approve an overall budget and attending documents with funding sources as needed.

II. ANNUAL BOARD PLANNING SCHEDULE

- A. The schedule will represent each calendar year's planned events.
- B. The current year's schedule will be reviewed at the ISK Board meeting in January to determine the need for modifications in the schedule.
- C. The schedule will include established ISK Board policy monitoring, and monitoring reports in the areas of "Ends" and "Executive Limitations".
- D. To the extent feasible, the ISK Board will identify those areas of education and input needed to increase the level of wisdom and forethought it can give to subsequent choices.

- E. Other items will be added to the schedule as needed by a majority vote of the ISK Board.

EXHIBITS

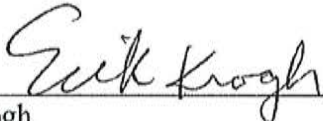
- A. Annual Board Planning Schedule
- B. Annual Board Monitoring Activities

CHIEF EXECUTIVE OFFICER



Jeff Patton
Chief Executive Officer

APPROVED



Erik Krogh
Board Chair

INTEGRATED SERVICES OF KALAMAZOO
2025 ANNUAL BOARD PLANNING CYCLE

January 27			February 24			March 24		
	Monitoring Report	Policy Review		Monitoring Report	Policy Review		Monitoring Report	Policy Review
MISSION, BYLAWS & APPOINTMENTS: MISSION/VISION/VALUE STATEMENT (I.01)		X	LIMITS: QUALITY MANAGEMENT (V.09)	(at Board Retreat)	X	BOARD GOV: BOARD COMPENSATION (II.07)		X
MISSION, BYLAWS & APPOINTMENTS: BYLAWS AND RULES OF PROCEDURE (I.02)		X	SYSTEM GOV: INVESTMENT POLICY (VI.02)		X	BOARD GOV: BOARD MEMBERS' CODE OF CONDUCT (II.09)		X
SYSTEM GOV: ANNUAL LEAVE RESERVE (VI.01)	X	X	BOARD GOV: BOARD TRAVEL (II.14)		X	BOARD GOV: DEPRECIATION (VI.04)		X
BOARD GOV: ANNUAL BOARD PLANNING CYCLE (II.08)	X	X	LIMITS: COLLABORATION (V.10)	X	X	BOARD GOV: CONFLICT OF INTEREST (II.11)		X
BOARD GOV: ENDS DEVELOPMENT PROCESS (II.06)		X	(Discussion on Board Retreat)			Utilization Management (UM) Plan	X	
BOARD GOV: ENDS FOR INDIVIDUALS SERVED (IV.01)		X						
INVESTMENT REPORT	X							
LIMITS: QUALITY IMPROVEMENT PLAN	X							
LIMITS: PERFORMANCE MEASUREMENT AND MANAGEMENT PLAN	X							
RECIPIENT RIGHTS ANNUAL REPORT	X							
Strategic Plan	X							
April 28			May 26			June 23		
	Monitoring Report	Policy Review		Monitoring Report	Policy Review		Monitoring Report	Policy Review
BOARD GOV: BOARD COMMITTEE PRINCIPLES (II.05)		X	BOARD ELECTIONS			Annual Public Hearing		
BOARD GOV: CHAIRPERSON'S ROLE (II.04)		X	BOARD GOV: BOARD MEMBER RESPONSIBILITIES (II.12)		X			
TREATMENT OF PERSONS SERVED SUBSTANTIATED COMPLAINTS REPORT	X		BOARD GOV: INPUT FROM STAKEHOLDERS (II.13)	X	X			
BOARD GOV: RESERVES MANAGEMENT (VI.05)	X	X	BOARD GOV: ACCESSIBILITY (II.15)		X			
INVESTMENT REPORT	X							
NOMINATING COMMITTEE FOR BOARD OFFICERS								
YEAR-END REPORT & ENDS (ALL POPULATIONS)	(at Board Retreat)							
COMPLIANCE & RISK: BOARD TRAINING	X							
COMPLIANCE & RISK: STATUS REPORT	X							
CUSTOMER SERVICES REPORT	X							
July 28			August 25			September 22		
	Monitoring Report	Policy Review		Monitoring Report	Policy Review		Monitoring Report	Policy Review
BOARD EXEC: CHIEF EXECUTIVE OFFICER PERFORMANCE (III.03)		X	LIMITS: BUDGETING (V.03)		X	LIMITS: STAFF TREATMENT (V.02)	X	X
BOARD EXEC: MONITORING EXECUTIVE PERFORMANCE (III.04)		X	LIMITS: FINANCE (V.04)		X	LIMITS: COMPENSATION & BENEFITS (V.08)	X	X
BOARD EXEC: CHIEF EXECUTIVE OFFICER ROLE (III.01)		X	LIMITS: ASSET PROTECTION (V.07)	X	X	Annual Budget Public Hearing		
BOARD EXEC: DELEGATION TO THE CHIEF EXECUTIVE OFFICER (III.02)		X						
BOARD GOV: BOARD FINANCE COMMITTEE (II.10) (Insurance)	X	X						
INVESTMENT REPORT	X							
ENDS: ALL POPULATIONS	X							
RECIPIENT RIGHTS SEMI-ANNUAL	X							
Strategic Plan	X							
October 27			November 24			December 22		
	Monitoring Report	Policy Review		Monitoring Report	Policy Review		Monitoring Report	Policy Review
BOARD GOV: BOARD PURPOSE AND BUSINESS DESCRIPTION (II.01)		X	CHIEF EXECUTIVE OFFICER EVALUATION (Jeff Patton)			To Be Determined...		
LIMITS: TREATMENT OF PERSONS SERVED (V.01) (include Substantiated Complaints)	X	X	LIMITS: COMMUNICATION & COUNSEL TO THE BOARD (V.06)		X			
MISSION, BYLAWS & APPOINTMENTS: GUIDELINES FOR INVESTMENT REPORT	X	X	BOARD GOV: GOVERNING STYLE (II.02)		X			
CUSTOMER SERVICES REPORT	X		LIMITS: EMERGENCY EXECUTIVE SUCCESSION (V.05)		X			
Family Support Advisory Council (FSAC) Annual Report	X		SYSTEM GOV: ENDOWMENT FUND (VI.03)	X	X			
Customer Advisory Council (CAC) Annual Report	X		LIMITS: CORPORATE COMPLIANCE AND RISK MANAGEMENT (V.11)		X			
			COMPLIANCE & RISK: FY ANNUAL PLAN	X				
			COMPLIANCE & RISK: FY STATUS REPORT	X				

LIMITS: Financial Condition - presented monthly
Program Services report monthly

NOTE: Bylaws and Rules of Procedure do not necessarily need to be reviewed on an annual basis, but should be revised as needed.

INTEGRATED SERVICES OF KALAMAZOO

BOARD POLICY II.06

AREA:	Governance		
SECTION:	Board Governance Process	PAGE:	1 of 1
SUBJECT:	ENDS DEVELOPMENT PROCESS	SUPERSEDES:	10/22/2012
		REVISED:	10/28/2019

PURPOSE/EXPLANATION


To define the Board's process for the development of Ends.

POLICY

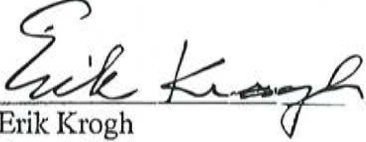
The Board is responsible to develop Ends policies that define the needs that the organization will satisfy, for who and within the budget. In order to promote the development of appropriate and meaningful Ends policies, the following steps will be taken:

- A. Gather information and build knowledge regarding an identified topic through research and the exploration of current and state of the art practices, trends, etc.
- B. Gather input from the community and stakeholders, including:
 1. ownership (citizens)
 2. persons served and their families
 3. advocates
 4. providers
- C. Board discussion, development and approval of the Ends for each population.
- D. Request the Chief Executive Officer (CEO) and their staff to develop and propose to the Board a means to measure each of the Ends statements for each of the populations. The proposed means to measure will be presented to the Board for their approval.
- E. Review and assess current information regarding the population and stakeholder expectation on outcomes input and update the ends statements when needed.

CHIEF EXECUTIVE OFFICER


 Jeff Patton
 Chief Executive Officer

APPROVED


 Erik Krogh
 Board Chair

INTEGRATED SERVICES OF KALAMAZOO

BOARD POLICY IV.01

AREA: Governance	
SECTION: System Governance	PAGE: 1 of 2
SUBJECT: ENDS FOR INDIVIDUALS SERVED	SUPERSEDES: 05/23/2016 REVISED: 10/29/2018

PURPOSE/EXPLANATION

To identify the ends which the Board desires to achieve for Integrated Services of Kalamazoo (ISK) populations served, which include:

- Children with Serious Emotional Disturbances
- Children with Intellectual/Developmental Disabilities
- Adults with Mental Illness
- Adults with Intellectual/Developmental Disabilities
- Individuals with Substance Use Disorders

These ends consist of *what benefits* for *what people* at *what cost*. Achievement of these ends will promote an effective service delivery system, which fulfills the mission of the agency and is consistent with the requirements of the Michigan Department of Health and Human Services (MDHHS) and Certified Community Behavioral Health Clinic (CCBHC).

POLICY

- I. Individuals will receive services and supports which enables them to be healthy, safe, and to reach their full potential. Each individual will experience services and supports that are individualized, strength-based, culturally & linguistically competent, home, community and school based, effective, sustainable, and continuously improving in quality. Services and supports will be delivered in the least restrictive, most natural settings possible.
- II. To accomplish these ends, goals and objectives will be set in the following domain areas for each population listed above:
 - A. Employment and Education
 - B. Living Arrangements
 - C. Recovery / Self-Determination
 - D. Health and Wellness

E. Family and Community Life

III. The Board established ends will be monitored on an ongoing basis by ISK staff and through semi-annual reports from the "Dashboard and Outcomes Reporting System".

REFERENCES

A. Public Act 258 of 1974 (Mental Health Code) supplemented through ACT 152 of 1996: Sections 206 and 208

CHIEF EXECUTIVE OFFICER



Jeff Patton
Chief Executive Officer

APPROVED



Erik Krogh
Board Chair