



Mission: To promote hope, recovery, resilience, quality of life and wellness in Washtenaw County by providing high quality, integrated services to eligible individuals.

**WASHTENAW COUNTY COMMUNITY MENTAL HEALTH (WCCMH)
PROGRAM-QUALITY COMMITTEE MEETING
AGENDA**

<https://zoom.us/j/96641888417>

July 12, 2021

3:00-4:00pm

- I. Roll Call (5 minutes)
- II. Introductions (5 minutes)
- III. Audience Participation (see guidelines below) (5 minutes)
- IV. Budget-Finance and Program-Quality Combined Committee meeting minutes (5 minutes)
 - Budget-Finance and Program-Quality Combined Committee Meeting Minutes and Actions from 6/14/21 (Attachment #1) **ACTION**
- V. Discussion Items (15 minutes)
 - Provider Presentation Follow-up from 6/14/21 Combined Meeting **H. Linky** (Attachment #2)
- VI. Old Business (10 minutes)
 - CCBHC Update **M. Harding**
- VII. New Business (10 minutes)
 - Programmatic updates **T. Cortes**
- VIII. Items for Future Discussions (5 minutes)
 - Important data points on CARES implementation impact on hospitals-return rates to hospitals and what the impact on caseloads is as well as other Millage Investments
 - Looking at call data and how it affects the CARES Team
- IX. Adjournment of Public Meeting

Please click this URL to join. <https://zoom.us/j/96641888417>

Or One tap mobile:

**+19292056099, 96641888417# US (New York)
+12678310333, 96641888417# US (Philadelphia)**

Or join by phone:

**Dial(for higher quality, dial a number based on your current location):
US: +1 929 205 6099 or +1 267 831 0333 or +1 312 626 6799 or +1 646 518 9805**

Webinar ID: 966 4188 8417

International numbers available: <https://zoom.us/j/adeDpkRbRb>

Audience Participation Guidelines:

- Three (3) minutes are allowed per speaker
- Speakers are asked to bring a copy of their concerns/comments in writing
- Resolutions on issues will be brought to the appropriate committee as necessary



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Effective March 17, 2021 the Washtenaw County Board of Commissioners has approved the continuation of all public meetings to be held virtually until December 31, 2021, per resolution #21-050.

Audience Participation Guidelines:

- Three (3) minutes are allowed per speaker
- Speakers are asked to bring a copy of their concerns/comments in writing
- Resolutions on issues will be brought to the appropriate committee as necessary

**WASHTENAW COUNTY COMMUNITY MENTAL HEALTH AGENCY (WCCMH)
WCCMH BUDGET-FINANCE AND PROGRAM-QUALITY COMBINED COMMITTEE MEETING
MINUTES DRAFT**

<https://zoom.us/j/99427595657>

June 14, 2021

1:00 pm

ROLL CALL: S. Antonow attending remotely from Ann Arbor, Washtenaw County, MI
A. Dusbiber attending remotely from Ann Arbor, Washtenaw County, MI
N. Graebner attending remotely from Chelsea, Washtenaw County, MI
B. Higman attending remotely from Ann Arbor, Washtenaw County, MI
R. Jefferson attending remotely from Ypsilanti Twp, Washtenaw County MI
B. King attending remotely from Ann Arbor, Washtenaw County, MI
D. Strong attending remotely from Scio Twp, Washtenaw County, MI
M Udow-Phillips attending remotely from Superior Twp, MI
K. Walker attending remotely from Pittsfield Twp, Washtenaw County, MI

MEMBERS ABSENT: K. Scott

STAFF PRESENT: T. Cortes, M. Harding, H. Linky, R. Dornbos, N. Phelps, L. Hagle, L. Gentz,
M. Taylor. S. Amos O'Neal, T. Florence, S. Ray

OTHERS PRESENT: L. Lutomski, J. Martin, K. Belknap

S. Antonow called the meeting to order at 1:03 pm.

- I. Introductions
 - H. Linky introduced S. Brown from Renaissance Community Homes and L Lutomski from Synod Community Services who will be presenting later in the meeting.
- II. Audience Participation
 - None
- III. Board Response to Audience Participation
 - None
- IV. Budget- Committee Meeting Minutes and Actions from 5/10/21
 - The Budget-Finance Committee Meeting Minutes and Actions from 5/10/21 were reviewed. (Attachment #1A)

MOTION BY B. KING, SUPPORTED BY M. UDOW-PHILLIPS TO APPROVE THE MINUTES AND ACTIONS FROM THE MAY 10, 2021 BUDGET-FINANCE COMMITTEE MEETING.

ROLL CALL VOTE:

ANTONOW	NOT ON BUDGET-FINANCE COMMITTEE	DUSBIBER	NOT ON BUDGET-FINANCE COMMITTEE
GRAEBNER	Y	HIGMAN	NOT ON BUDGET-FINANCE COMMITTEE
JEFFERSON	Y	KING	Y
SCOTT	N/A	STRONG	Y

UDOW-PHILLIPS	Y	WALKER	NOT ON BUDGET-FINANCE COMMITTEE
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MOTION CARRIED

- V. Program-Quality Committee Meeting Minutes and Actions-5/10/21
- The Program-Quality Committee Meeting Minutes and Actions from 5/10/21 were reviewed. (Attachment #1B)

MOTION BY K. WALKER, SUPPORTED BY A. DUSBIBER TO APPROVE THE MINUTES AND ACTIONS FROM THE MAY 10, 2021 PROGRAM-QUALITY COMMITTEE MEETING.

ROLL CALL VOTE:

ANTONOW	Y	DUSBIBER	Y
GRAEBNER	NOT ON PROGRAM-QUALITY COMMITTEE	HIGMAN	Y
JEFFERSON	Y	KING	NOT ON PROGRAM-QUALITY COMMITTEE
SCOTT	N/A	STRONG	NOT ON PROGRAM-QUALITY COMMITTEE
UDOW-PHILLIPS	NOT ON PROGRAM-QUALITY COMMITTEE	WALKER	Y

MOTION CARRIED

- VI. Financial Status Reports (Attachment #2)
- N. Phelps reviewed the Financial Status Report for the month ending April 30, 2021.

MOTION BY D. STRONG, SUPPORTED BY M. UDOW-PHILLIPS TO APPROVE THE FINANCIAL STATUS REPORT THROUGH APRIL 30, 2021 AS PRESENTED.

ROLL CALL VOTE:

ANTONOW	NOT ON BUDGET-FINANCE COMMITTEE	DUSBIBER	NOT ON BUDGET-FINANCE COMMITTEE
GRAEBNER	Y	HIGMAN	NOT ON BUDGET-FINANCE COMMITTEE
JEFFERSON	Y	KING	Y
SCOTT	N/A	STRONG	Y
UDOW-PHILLIPS	Y	WALKER	NOT ON BUDGET-FINANCE COMMITTEE

MOTION CARRIED

- VII. Contracts and Leases
- There were no contracts and leases for this month.

VIII. Regional Finance Update

- N. Phelps and T. Cortes presented the Regional Finance Update to the committee.
- IX. Old Business
- CCBHC Update
 - o M. Harding presented an update on the CCBHC.
 - o Workgroups are being formed to discuss billing, clinical service delivery, etc.
 - o No rates details have been shared.
- X. New Business
- Program Committee Dashboard FY21 Qtr. (Attachment #3)
 - o T. Florence and L. Higl presented the Program Committee Dashboard for the 1st Qtr. of FY21.
 - o There were no sentinel events in the first quarter of fiscal year 2021.
 - o Staffing levels continue to be a challenge. WCCMH is working with the County Human Resources Department on recruiting and retaining entry level positions.

MOTION BY M. UDOW-PHILLIPS, SUPPORTED BY K. WALKER TO ACCEPT THE PROGRAM COMMITTEE DASHBOARD FOR THE 1ST QUARTER OF FISCAL YEAR 2021 AS PRESENTED.

ROLL CALL VOTE:

ANTONOW	Y	DUSBIBER	Y
GRAEBNER	NOT ON PROGRAM-QUALITY COMMITTEE	HIGMAN	Y
JEFFERSON	Y	KING	NOT ON PROGRAM-QUALITY COMMITTEE
SCOTT	N/A	STRONG	NOT ON PROGRAM-QUALITY COMMITTEE
UDOW-PHILLIPS	NOT ON PROGRAM-QUALITY COMMITTEE	WALKER	Y

MOTION CARRIED

- Provider Presentation (Attachment #4)
 - o S. Brown from Renaissance Community Homes and L. Lutomski from Synod Community Services presented the provider presentation to the committee.
- XI. Items for Future Discussions
- Integrated Planning (Millage/CCBHC/CMH service provider funding)-Strategic Planning category (Program-Quality Committee)
 - Important data points on CARES implementation impact on hospitals-return rates to hospitals and what the impact on caseloads is as well as other Millage Investments (Program-Quality Committee)
 - Looking at call data and how it affects the CARES Team (Program-Quality Committee)

MOTION TO ADJOURN THE BUDGET-FINANCE AND PROGRAM-QUALITY COMBINED COMMITTEE MEETING.

- XII. Meeting adjourned at 2:35 pm.

Residential Services for Individuals in the Public Mental Health System

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WASHTENAW COUNTY COMMUNITY MENTAL
HEALTH SERVICE PROVIDERS

MONDAY, JUNE 14, 2021

Scott Brown
Renaissance Community Homes
517-403-7699
scott@rchi.org

Laurie Lutomski
Synod Community Services
734-340-5706
laurie@synodhelps.org

Overview of Residential Services and the Role of Direct Support Professionals

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Job Duties

- Provide & Support all aspects of the Social Determinants of Health
 - ❖ Food assistance
 - ❖ SSI/SSB benefit applications
 - ❖ Medicaid/Medicare paperwork
 - ❖ Transportation benefits
 - ❖ Housing assistance
 - ❖ Medical appts and follow-ups
 - ❖ Mental Health Service appts. & follow-up care
 - ❖ Pharmacy benefits and needs
 - ❖ Work Rehab & supports
 - ❖ Social Supports
 - ❖ Recovery (Substance Use & Mental Health)Resources & Supports
 - ❖ Secure Legal ID and other documents
 - ❖ Navigation with the Court System
- Provide Monitoring & assistance as outlined in the IPOS
- Provide support for all aspects of life including self care, goals and activities

Overview of Residential Services and the Role of Direct Support Professionals cont...

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- Administer Medications
- Provide Transportation
- Ensure a clean, healthy living environment
- Monitor and encourage healthy food choices and good nutrition
- Encourage adherence to dietary restrictions
- Accompany individuals on all Medical appts. And manage treatment as outlined
- Follow all Policies and procedures in addressing unusual occurrences and problems as they arise
- Respond to health and environmental emergencies
- Document all services provided in an accurate manner
- Be aware of all individuals whereabouts and actions throughout shift
- Manage the Confidentiality of all written & verbal communication while adhering to the strict, limited disclosure regulations
- Manage the signing and updating of specific releases

Categories of Service

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Specialized Licensed Residential:

An operation that provides **personal care, supervision and protection** in addition to **room and board** to 3 to 20 unrelated persons who are aged, mentally ill, developmentally disabled, or physically disabled, for 24 hours a day, 5 or more days a week, for 2 or more consecutive weeks. These services are billed based on per diem rates.

Unlicensed Congregate Settings:

An unlicensed home with a capacity of 4 or less persons that only serves community mental health (CMH) served individuals that CMH monitors through contracted provider services. These services are billed in 15 minute increments with modifiers based on the service provided & who is present.

Community Living Services:

These services are outlined in the IPOS and administered in short prescribed time frames in individual homes/apartments. Staff come and go from the site and persons served tend to navigate the community independently. These services are billed in 15 minute increments with modifiers based on the service provided & who is present.

Elements that Constitute Direct Service:

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Personal care means personal assistance with dressing, personal hygiene, grooming, maintenance of a medication schedule, or the development of those personal and social skills required to live in the least restrictive environment.

Supervision means guidance of a person in the activities of daily living, including reminders of important activities and appointments and to take medication, and being aware of a person's general whereabouts even if the person may travel independently in the community.

Protection means actions taken to insure the health, safety, and well-being of a person, including protection from physical harm, humiliation, intimidation, and social, moral, financial, and personal exploitation.

Supervised personal care means guidance (cuing, prompting, reminding) or assistance with eating, toileting, bathing, grooming, dressing, transferring, mobility, medication management, reminders of important activities to be carried out, assisting with keeping appointments, supporting a person's personal and social needs, and being aware of general whereabouts even if the person is capable of independent travel about the community.

Transportation means the direct provision of or securing required transportation in the community as outlined in the IPOS.

Room and board means the provision of housing and meals. Under this definition, a "room" could be a bedroom, an apartment, a suite, etc. Board means any involvement in the purchase or preparation of meals.

Provider Examples

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Washtenaw County Overall

Total Number of consumers who received any of the following;
H0043, H2015, H2016, T1020, T2025, T2027 in a given month.

							Fiscal Quarter	Retention rate (Staff)
							FY18 Q2	70%
2017	2017	2018	2019	2020	Jan-21	2021	FY18 Q3	73%
Provider	10	10	10	10	1	Provider	FY18 Q4	80%
CHS 9%	68	58	48	47	42	CHS 6%	FY19 Q1	83%
INI 8%	62	74	77	65	60	INI 9%	FY19 Q2	85%
Renaissance 10%	81	71	70	64	61	Renaissance 9%	FY19 Q3	85%
Spectrum 5%	40	41	31	30	31	Spectrum 5%	FY19 Q4	82%
Synod 6%	45	46	41	36	36	Synod 5%	FY20 Q1	88%
Other 62%	479	510	535	453	450	Other 66%	FY20 Q2	89%
Grand Total	775	800	802	695	680	Grand Total	FY20 Q3	87%
			High		Low		FY20 Q4	81%
Notes:							FY21 Q1	79%

* 122 less consumers served in last two years

* As you see in the slides, even as employee counts drop, retention stabilizes.

* Meaning that for the most part, only the core staff remain.

Spectrum Human Services

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Agency: Spectrum Human Services

	2017	2018	2019	2020	2021 so far
Employee Count 894	895	925	821	647	
Individuals Served	902	911	982	963	996
Starting Wage* \$10.00	\$10.15	\$10.25	\$11.00*	\$11.00*	
Retention	46%				
Turnover	44%				
Sites Closed	1	3	2	3	1

Notes:

- Starting wage data does not include Michigan Premium Pay
- Spectrum has a 28% drop in employee count from 2017 to present
- Spectrum has a 10% increase in consumers served from 2017 to present
- Spectrum has closed 10 sites since 2017

Synod Community Services

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Agency: Synod Community Services:

	2017	2018	2019	2020	2021 so far
Employee Count	151	146	141	121	120
Individuals Served all categories	380	373	317	319	219
Individuals Served less payee services	213	212	175	188	128
Individuals Served less payee & CRS	97	91	90	88	77
Starting Wage	\$10.00	\$10.00	\$10.50	\$12.50*	\$12.75*
after training completion	\$10.50	\$10.50	\$11.00	\$13.00*	\$13.25*
Rétention	93.79%	96.69%	96.58%	85.82%	99.17%
Turnover	27.10%	20.50%	34.75%	39.60%	9.16%
Sites Closed	0	0	0	2	0

* Includes premium pay

Synod Community Services, cont...

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Notes:

- **Synod has a 21% drop in employee count from 2017 to present**
- **Synod has a 21% drop in Residential consumers served count from 2017 to present**
- **Synod closed two sites in 2020**
- **Average pay rate DCW-Manager = \$15.36 - this is current with the \$2.25 added to DCW wages**
- **Deficit as of 3/31 (6 months) - Total (\$140,550.62); Residential includes NFC = (\$125,477.96); Co-Op & Silo = (\$15,072.67)**
- **Increased signing/referral Bonus**
- **Synod has always contributed 2% to employee 401K & matches an additional 1 % if employee contributes**
- **Overtime hours are 11% of all hours paid in Washtenaw**
- **Occupancy rate as of 3/31 for the FY21= 80%**

Renaissance Community Homes

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Renaissance Community Homes

	Employee Count	Starting Wage
2017	437	\$9.00/hr (untrained) \$9.50/hr (Trained)
2018	372	\$9.50/hr (untrained) \$10.50/hr (Trained)
2019	346	\$10.25/hr (untrained) \$10.75/hr (Trained)
2020	340	\$10.25/hr (untrained) \$10.75/hr (Trained) Plus 15% COVID Hero Pay, plus \$2/hr premium pay (all factored into hourly rate or purposes) comes to \$14.36/ hour Trained rate.
2021	327	\$11.00/ (untrained) \$11.50/hr (Trained) plus \$2.25/hr premium pay (factored into hourly rate or OT purposes) comes to \$13.75/hr Trained rate

*** Overall Renaissance payroll has increased by \$100K every two-weeks since the beginning of COVID Pandemic**

*** Renaissance now spends almost \$40,000 annually in recruitment advertising. (Indeed, Facebook, etc..)**

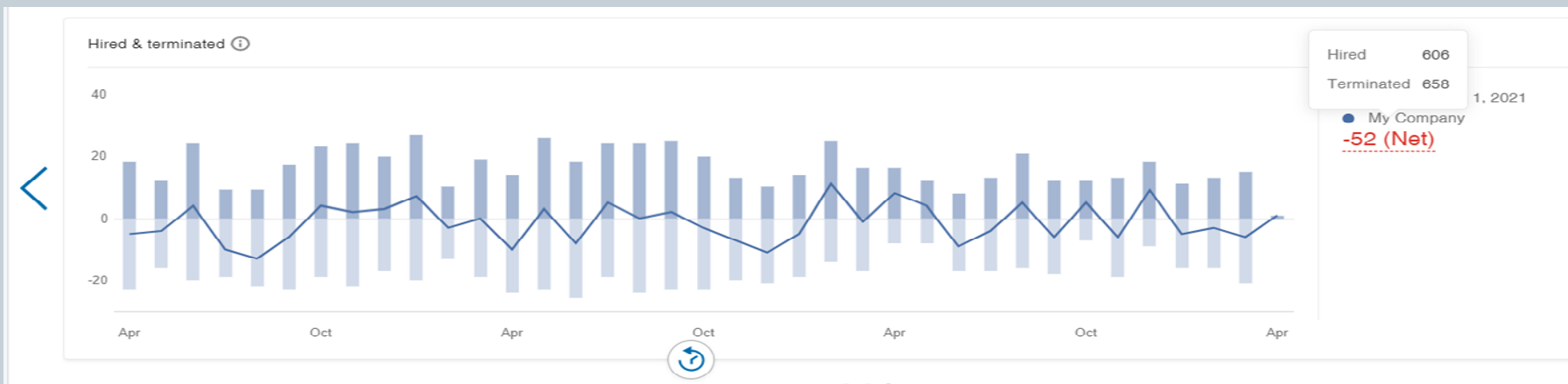
Renaissance Community Homes, cont...

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4/2018 to 4/2021



*** Only 1 out of every 10 employees that leave Renaissance are initiated by Renaissance**



Renaissance Community Homes, cont...

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Notes for Renaissance Washtenaw Programs:

- **Current average pay rate for scheduled caregivers is \$15.38/hour**
- **Overtime rate (average \$23.07/hour)**
- **Started employer match 401K on 1/1/2021**
- **Increased employee referral and sign on Bonuses to \$500**
- **Closed out three 24 hour CLS sites since 2017**
- **Closed out several low intensity CLS sites since 2017**
- **At six month point our Washtenaw programs are in a deficit of (\$264,055.00); Group Homes (\$119,371); CLS (\$144,680)**
- **12% of hours staffed in Washtenaw County are paid at the Overtime Rate.**
 - * This OT rate is consistent with Lenawee and Livingston County.
 - * ***Our Jackson/Hillsdale programs run at 7.5%***

Recruiting Challenges

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Issues/Struggles

- Reimbursement Rates
- Scheduling Challenges
- Overtime costs
- Training/Supervision Issues
- Individuals served have a higher level of acuity
- Staff burnout

What we have tried

- Flexible Scheduling
- Job Share
- Signing Bonus/referral pay
- Contributions to 401k
- Increase contribution to Health Insurance

Premium Pay Impact

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- Has allowed us to maintain a percentage of our core staff
- Does not cover overtime cost
- Has not increased recruiting/job interest
- can't advertise Premium Pay rate due to temporary nature of revenue

Administrative Burdens

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- Increase in compliance requirements
- Increase burden on provider's with other agencies working remotely (must scan in all documents for submission)
- Increase cost to cover HIPPA compliant virtual systems
- Had to cut middle mgt. positions to cover increase cost of Direct Support due to overtime – insufficient reimbursement rates
- Admin staff covering Direct Service Shifts
- Inability to offer Living Wage due to reimbursement rates

Observations?

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- Fundamental Design of System of Care is flawed
- Individuals who require complex high levels of supervision/care end up in jail
- Problem is multifaceted and complex
- Intervention/restructuring is often related to a crisis
- Impact of Covid-19
 - Further reduced the ability to hire
 - Reduced the prospective employee pool
 - ✦ Schools closed
 - ✦ Encouraged people to stay home
 - ✦ Increased unemployment eligibility
 - ✦ Reduced restrictions on FMLA leave
 - ✦ Drew attention to the profession but is not being followed up with support in line with inflation.
 - ✦ Tele Health
 - ✦ Virtual audits

What has helped?

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- ❖ More online trainings available
- ❖ Movement with Training reciprocity across the State
- ❖ \$2.25/hour premium pay
- ❖ More attention to the work we do and the populations we serve
- ❖ DSP premium pay **must be** permanent



Any
Questions