

## AGENDA

**OnPoint Board**  
**Tuesday, December 20, 2022**  
**5:30 pm**

County Services Building, 3283 122<sup>nd</sup> Avenue, Allegan  
Allegan County Commission Board Room

Also available virtually at the link or phone number below:

### Microsoft Teams meeting

**Join on your computer or mobile app**

[Click here to join the meeting](#)

**Or call in (audio only)**

[+1 616-327-2708,896969400#](tel:+16163272708,896969400#) United States, Grand Rapids

Phone Conference ID: 896 969 400#

**NOTE: At this time, in-person attendance capacity is limited. Social distancing is required.**

1. Call to Order – Commissioner Gale Dugan
2. Pledge of Allegiance
3. Provision for Public Comment – Agenda items only, subject to 5” limit per speaker
4. Approval of Agenda
5. Consent Agenda – *All items listed are considered to be routine and will be enacted by one motion. There will not be separate discussion of these items. If discussion is desired, that item will be removed from the Consent Agenda upon request of any board member and will be considered separately.*
  - a. **Motion** – Approval of prior minutes:
    - i. RRAC Meeting (10.18.2022)
    - ii. Executive Committee Meeting (11.14.2022)
    - iii. Board Meeting (11.15.2022)
    - iv. Building Committee Meeting (11.15.2022)
    - v. Finance Committee Meeting (11.15.2022)
    - vi. Program Committee Meeting (11.15.2022)
6. Building Committee – Commissioner Gale Dugan
7. Program Committee – Commissioner Jim Storey
8. Finance Committee Report – Beth Johnston
  - a. **Motion** – Approval of Voucher Disbursements November 2022
9. Recipient Rights Advisory Committee (Feb/Apr/Jun/Sept/Oct/Dec) – Glen Brookhouse
10. Chairperson’s/Executive Committee Report – Commissioner Gale Dugan
  - a. **Motion** – Approval of 2023 Board Schedule
11. LRE updates – Stephanie VanderKooi
12. OnPoint Executive Director’s Report – Mark Witte
13. Provision for Public Comment (any topic, subject to 5” limit per speaker) – Commissioner Dugan
14. Board Member Comments
15. Adjournment

Future meetings (tentative):

January 13, 2023 – 2:30 pm – Executive Committee

January 17, 2023 – 3:30 pm – Building Committee

January 17, 2023 – 4:00 pm – Finance Committee

January 17, 2023 – 4:15 pm – Program Committee

January 17, 2023 – 5:30 pm – Full Board

OnPoint

**Building Committee**

December 20 2022 – 3:30 pm

Location: OnPoint, 3282-122<sup>nd</sup> Street, Allegan, MI 49010

**Board Members:** [ ] Gale Dugan      [ ] Mark DeYoung      [ ] Beth Johnston      [ ] John Weerstra

**Staff Members:** [ ] Nan Lawrence      [ ] Erinn Trask      [ ] Mark Witte

Proposed Agenda:

- Review/Approval of Agenda
- Review/Approval of Prior Minutes
- Construction Report
- Financial Report
- Other
- Next Meeting Date
- Adjournment

OnPoint  
**Draft Board Building Committee Minutes**  
November 15, 2022

**Board Members:**     Gale Dugan         Mark DeYoung     Beth Johnston     John Weerstra

**Staff Members:**     Nan Lawrence     Erinn Trask         Mark Witte

- Meeting Called to Order at 3:32 pm
- Review/Approval of Agenda – Motion by Comm. DeYoung, supported by Comm. Dugan, to approve the agenda as presented. All in favor. Approved.
- Review/Approval of Prior Minutes – Minutes of October 18, 2022 meeting reviewed. Motion by Comm. DeYoung, supported by Comm. Dugan, to approve the minutes as presented. All in favor. Approved.
- Construction Report – Mark Witte provide various updates on construction progress to date. Substantial work is happening relative to painting, low voltage cabling, reconfiguration of the front entrance. All is on course for the revised schedule of construction completion around the end of February, with furniture installation in March and occupancy in April. Staff noted that the generator will not be installed until long after occupancy occurs due to lead times for that particular piece of equipment.
- Financial Report – Staff reported that all is in order on the financing front. There is a slight overage of approximately \$150,000 but noted that this may come into line once certain items in the budget are completed ... possibly at lower than projected costs.
- Other – Staff noted preliminary plans to host a number of ceremonial opening events, including for staff/families, clients, and community stakeholders and dignitaries. Much depends on a firmer construction completion date.
- Next Committee Meeting Date – Tuesday, 12/20/2022 at 3:30 pm.
- Adjournment – Motion made by Comm. Dugan, supported by Johnston, to adjourn the meeting. All in favor. Approved.
- Meeting adjourned at 3:51 pm.

Submitted by Mark Witte



## AGENDA

**OnPoint  
Recipient Rights Advisory Committee (RRAC)  
Tuesday, December 20, 2022  
3:30 pm**

County Services Building, 3283 122<sup>nd</sup> Avenue, Allegan,  
Board Conference Room

1. Call to Order – Glen Brookhouse, Chairperson
2. Public Comment – Agenda Items Only, Subject to 5-Minute Limit Per Person
3. Approval of/Additions to Agenda
4. Approval of Prior Meeting Minutes – October 2022
5. Review ORR Status Report – Kelsey Newsome
6. Review Annual Report
7. Other Business
8. Public Comment – Any Topic, Subject to 5-Minute Limit Per Person
9. Adjournment, Next Meeting

RRAC members are:

Glen Brookhouse, Chair; Stacy Engelsman, Vice Chair;  
Amy Clugston, John Weerstra, Richard Wiley, and Craig VanBeek

**2022 Meeting Dates:** February 15, April 19, June 21, August 16, October 18, December 20

**RRAC. (Excerpt from Board Bylaws, Art. VII. Section 1d (page 5) approved by ACCMHS Board 2021.)**

*Pursuant to MCL 330.1757, the board of each community mental health services program shall appoint a recipient rights advisory committee consisting of at least 6 members. The membership of the committee shall be broadly based so as to best represent the varied perspectives of the community mental health 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. The recipient rights advisory committee shall do all of the following:*

- (a) Meet at least semiannually or as necessary to carry out its responsibilities.*
- (b) Maintain a current list of members' names to be made available to individuals upon request.*
- (c) Maintain a current list of categories represented to be made available to individuals upon request.*
- (d) Protect the office of recipient rights from pressures that could interfere with the impartial, even-handed, and thorough performance of its functions.*
- (e) Recommend candidates for Director of the Office of Recipient Rights to the Executive Director, and consult with the Executive Director regarding any proposed dismissal of the Director of the Office of Recipient Rights.*
- (f) Serve in an advisory capacity to the Executive Director and the Director of the Office of Recipient Rights.*
- (g) Annually review the funding of the ORR during the budgetary process in accordance with 755(2) of the Code (MCL 330.1755(2)). Review and provide comments on the report submitted by the Executive Director to the community mental health services program board under section 755 (MCL 330.1755).*
- (h) Serve as the appeals committee for a recipient's appeal under section 774 (MCL 330.1774).*
- (i) Meetings of the recipient rights advisory committee, except when meeting as Appeals Committee, are subject to the open meetings act, Act No. 267 of the Public Acts of 1976, MCL 15.261 to 15.275. Minutes shall be maintained and made available to individuals upon request.*

OnPoint  
County Services Building (CSB) ~ 3283 122<sup>nd</sup> Avenue, Allegan, MI 269-673-3384

**MINUTES**  
**RECIPIENT RIGHTS ADVISORY COMMITTEE (RRAC)**  
**October 18, 2022**  
**3:30 pm-3:52pm**

**Committee Members Present:**

Glen Brookhouse, Chairperson  
Stacy Engelsman, Vice Chairperson  
John Weerstra, Board Member  
Amy Clugston, Board Member

**Committee Members Not Present:**

Richard Wiley, Community Member  
Craig VanBeek, Board Member

**Staff Present:**

Kelsey Newsome, Recipient Rights Director  
Allison Kridler, Recipient Rights Officer

**Staff Not Present:**

Samantha Dereski, Recipient Rights Officer  
Melisse Hughes, ORR Specialist

**Members of the Public Present:**

1. **CALL TO ORDER** ~Chairperson Glen Brookhouse called the meeting to order at 3:31pm.
2. **PUBLIC COMMENT** ~ Chairperson Glen Brookhouse opened an opportunity for public comment. No public comment. Chairperson Glen Brookhouse closed the opportunity for public comment.
3. **APPROVAL OF/ADDITIONS TO AGENDA** ~ Chairperson Glen Brookhouse proposed to approve agenda as written. Board Member John Weersta supported to approve, 2<sup>nd</sup> by Vice Chairperson Stacy Engelsman. Unanimously approved by a voice vote.
4. **Approval of Prior Meeting Minutes** ~ Chairperson Glen Brookhouse motioned to approve the September 27, 2022 meeting minutes. Vice Chairperson Stacy Engelsman supported the motion, 2<sup>nd</sup> by Board Member John Weerstra. Unanimously approved by a voice vote.
5. **Review of ORR Status Report** ~ Recipient Rights Director Kelsey Newsome went over the ORR Status Report. Allegation numbers are holding steady on average. There has been an increase in exploitation allegations that are largely related to one provider who has since been removed from those arrangements. Incident Report follow ups are still continuing but none resulted in an investigation this month. ORR is working with Quality to continue tracking trends in order to understand what kind of support providers need for proper incident report documentation. Vice Chairperson Stacy Engelsman suggested supervisor training for incident reports. ORR is considering revising the emergency use of physical management form in order to be more appropriate for recording other physical management techniques as the current document revolves around MANDT, specifically. Regarding Cumulative Timeliness, August and September data will be added to the next report due to an error on this report. ORR discussed the update on their annual goals and the plan for engaging recipients in the Recipient Rights training. Vice Chairperson Stacy Engelsman supported the ideas.
6. **RRAC Education** ~ RRAC Education/Policy Review – ORR Director Kelsey Newsome confirmed the committee has been educated on all policies. ORR Director Kelsey Newsome educated RRAC on MCL 330.1757 (b), (d), (e), (f), (g), (h), (i). ORR Director Kelsey Newsome suggested a refresher on Robert's Rules and offered the committee to view ORR's Initial Recipient Rights Training in lieu of policy education. ORR Director Kelsey Newsome explained that audit standard dictate that RRAC would be informed of policy changes, and the only one that will be coming up for discussion is death reporting.

7. **OTHER BUSINESS** ~ Chairperson Glen Brookhouse opened the floor for Other Business. No comments.
8. **Public Comment** ~ No public comment.
9. **ADJOURNMENT** – Motion to adjourn made by Chairperson Glen Brookhouse supported by Board Member John Weerstra and 2<sup>nd</sup> by Board Member Amy Clugston approved unanimously by voice vote. Adjourned at 3:52 pm.

Respectfully Submitted by

A handwritten signature in black ink that reads "Allison Kridler". The signature is written in a cursive style with a prominent loop at the end of the last name.

Allison Kridler  
Recipient Rights Officer



**RECIPIENT RIGHTS ADVISORY COMMITTEE (RRAC)  
October 2022 STATUS REPORT**

Reporting Period: October & November 2022

Submitted by Kelsey Newsome, LMSW, Recipient Rights Director  
ORR Direct Line: 269-628-5715; email [knewsome@onpointallegan.org](mailto:knewsome@onpointallegan.org)

**October & November 2022 Allegations**

Abuse II – Unreasonable Force	1
Abuse II – Exploitation	4
Abuse II – Non-Accidental Act	2
Neglect II	3
Dignity & Respect	8
Mental Health Services Suited to Condition	9
Access to Rights System	1
Freedom of Movement	1
Out of Jurisdiction	1
Safe Treatment Environment	1
<b>Total Allegations</b>	<b>31</b>

**Incident Report Follow Ups:**

ORR and Corporate Compliance sent a joint email in November 2022 with updated policy and directions for internal staff to complete IRs in accordance with state standards. ORR scheduled to review standards at January 2023 Provider Network Meeting. ORR and CC working collaboratively to determine data and training needs for FY 2023 – for both internal and provider staff.

**FY 22 Timeliness Report:**

	No Right Involved/ Out of Jurisdiction (Acknowledgement Letter Only)	≤ 30 days	≤ 60 days	≤ 90 days	> 90 days	Total
<b>Closed FY 22 Allegations</b>	<b>19</b>	<b>0</b>	<b>0</b>	<b>208</b>	<b>10</b>	<b>237</b>
<b>Open Allegations</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>10</b>	<b>0</b>	<b>10</b>
<b>Total</b>						<b>247</b>

All allegations extended past 90 days have since been closed.

**FY 23 Timeliness Report:**

	No Right Involved/ Out of Jurisdiction (Acknowledgement Letter Only)	≤ 30 days	≤60 days	≤90 days	>90 days	Total
October & November 2022 Closed Allegations	1	0	0	0	0	1
Open Allegations	0	12	17	0	0	30
<b>Total</b>						<b>31</b>

**FY 21 Allegations extended past 90 days:**

Closed this reporting period: 11

Remaining open: 6 Allegations

**Progress Updates on FY 22 Annual Report Goals:**

Goal	Updates/Current Status
OnPoint ORR will assess current Incident Reporting trends and needs for targeted training and will create a plan to address deficiencies in Provider Incident Reporting. A plan will be proposed by the end of FY 22.	This has transitioned to Melisse Hughes in her CC/ORR Specialist Role. Data Collection Continues.
OnPoint ORR will update the online "annual update" training used for OnPoint employees (Relias Training) by March 31, 2022.	Complete! Updated training send to training coordinator to be uploaded to Relias 03/31/2022.
OnPoint ORR will develop a plan for engaging recipients in the creation of RR training activities (videos, examples to share, etc.) A Plan and budget will be proposed by the end of FY 22.	Early plans to survey recipients and/provider staff for their input to include in RR training. Goal will carry over into FY 2023.

OnPoint Management Team has approved the request for a shared Corporate Compliance and Office of Recipient Rights full time staff. OnPoint ORR and RRAC support the addition of this position to ORR and recommend that OnPoint ORR continues to review the adequacy of ORR's staffing and workload capacity with OnPoint Management Team.

Melisse Hughes fully transitioned to CC/ORR Specialist Role

## AGENDA

### OnPoint Finance Committee December 20, 2022

4:00 pm – immediately following the Building and RRAC Committees

County Services Building, 3283 122<sup>nd</sup> Avenue, Allegan  
Nederveld Room

**NOTE: At this time, in-person attendance capacity is limited. Social distancing is required.**

1. Call to Order – Beth Johnston, Chairperson
2. Public Comment – Agenda Items Only, Subject to 5-Minute Limit Per Person
3. Approval of Agenda
4. Approval of Minutes
5. Review of Written Reports
  - a. Administrative Services Report – Erinn Trask, Chief Financial Officer
  - b. Facilities & Human Resources – Nan Lawrence, Director of Human Resources
6. Action Items
  - a. Voucher Disbursements November 2022
7. Informational Items
  - a. November 2022 Financial Reports
8. Finance Committee Member Comments
9. Public Comment – Any Topic, Subject to 5-Minute Limit Per Person
10. Adjournment until next meeting: January 17, at 4:00 pm.

Finance Committee: Beth Johnston, Chair; Glen Brookhouse, Vice Chair;  
Mark DeYoung, John Weerstra and Karen Stratton.

Finance Committee. (Excerpt from Board Bylaws, Art. VII. Section 1b (page 5) approved by ACCMHS Board May 2021.) *The Finance Committee shall consist of not less than 4 and not more than 6 Board members, and shall include the Authority's chief financial officer as an advisor. The Committee shall review the financial position of the Authority in relation to state, county, federal and other funding sources; the budget and allocations and third party payments; address audit issues when appropriate; analyze financial reporting requests/ requirements and Authority expenditures; and consider such other financial matters as the Board or the Chairperson of the Board may refer to the Committee. The Chairperson of the Finance Committee shall be the Board Treasurer. The Finance Committee shall meet monthly, on a regular basis, at a date and time determined by the Chairperson. A finance committee will typically be responsible for monitoring and communicating to the board about the organization's overall financial health. Its core duties are likely to include participating in and overseeing: the development of the organization's budgeting and financial planning, the creation of the organization's internal controls, the preparation and distribution to the board of timely, accurate, user-friendly financial reports, and the implementation of safeguards to protect the organization's assets.*

Allegan County Community Mental Health Services  
**DRAFT Finance Committee Minutes**  
November 15, 2022 – 4:00 pm  
Location: County Services Building in the Nederveld Room

**Board Members Present:** Glen Brookhouse, Mark DeYoung, Beth Johnston, Gale Dugan

**Board Members Absent:** John Weerstra, Karen Stratton

**Staff Members:** Mark Witte, Nikki McLaughlin, Nan Lawrence

**Public Present:** None

1. **Call to Order** – Beth Johnston, Chairperson, called the meeting to order at 4:16 pm.

2. **Public Comment** – None

3. **Approval of Agenda**

Moved: Mr. Brookhouse

Supported: Mr. DeYoung

Motion carried.

**Approval of Minutes**

Moved: Mr. Dugan

Supported: Mr. Brookhouse

Motion carried.

4. **Review of Written Reports:**

a. Administrative Services Report

Ms. McLaughlin reviewed the report and was available for questions.

b. Facilities & Human Resources

Ms. Lawrence reviewed her report and was available for questions.

5. **Action Items:**

a. The Finance Committee recommends that the OnPoint Board approve the October 2022 disbursements totaling \$3,708,325.70.

Moved: Mr. Dugan

Supported: Mr. DeYoung

Motion carried.

b. The Finance Committee recommends that the OnPoint Board approve the following list of provider contracts for fiscal year 2023. Henry Ford Health Systems and A Mother's Touch.

Moved: Mr. Brookhouse

Supported: Mr. DeYoung

Motion carried.

6. **Informational Items**

a. October 2022 Financial Reports reviewed with Administrative Report.

7. **Finance Committee Member Comments**

No comments.

8. **Public Comment**

None

9. **Next Meeting** – December 20, 2022 at 4:00 pm.

10. **Adjournment**

Moved: Mr. Brookhouse

Supported: Mr. Dugan

Motion carried.

Meeting adjourned at 4:54 pm.



**Administrative Services Board Report December 2022**

Submitted by Erinn A. Trask, CPA, Chief Financial Officer

269.303.8945 – [ETrask@OnPointAllegan.org](mailto:ETrask@OnPointAllegan.org)

Construction on the building project is expected to be completed in late winter. We have submitted the tenth construction draw totaling \$653,891.66, which will be funded through both the Michigan Economic Development Corporation (MEDC) grant and the United States Department of Agriculture (USDA) loan. We have approved one new change order since last month, for some exterior work, additional cabinets and a light fixture, and power work in the new furniture walls. We continue to meet with Cornerstone Construction and Schley Nelson Architects to review change orders, requests for information, and project status.

On November 29, 2022, we received the final revenue accounting and retro payment for fiscal year 2022 from the Lakeshore Regional Entity (LRE). Here is a comparison between the projected revenue numbers included in the preliminary September report to the final payment amounts:

	Prepayments	Final Actual	Difference
Medicaid-MH	\$ 22,237,336.00	\$ 21,901,460.03	\$ (335,875.97)
Medicaid-Autism	\$ 3,275,786.00	\$ 3,938,506.22	\$ 662,720.22
Healthy MI Plan	\$ 2,362,862.00	\$ 2,683,106.13	\$ 320,244.13
Medicaid-SUD	\$ 628,416.00	\$ 683,295.14	\$ 54,879.14
Healthy MI Plan-SUD	\$ 1,336,925.00	\$ 1,585,734.71	\$ 248,809.71
Total	\$ 29,841,325.00	\$ 30,792,102.23	\$ 950,777.23

This month’s packet includes the monthly financial report for October 2022. This is the first month under the agency’s new chart of accounts after implementing Standard Cost Allocation. We are required to track staff time and costs at a greater level of detail than in the past, and to change the methodology we use to allocate costs. Overall, this change in methodology has not resulted in a significant change in cost by funding source. The Summary Schedule of Revenues and Expenses by Fund Source shows the difference between the revenue received from the Lakeshore Regional Entity (LRE) and the State of Michigan Department of Health and Human Services (MDHHS) and the eligible expenses incurred by OnPoint. These fund sources are cost settled at the end of each year, and any unspent funds are required to be returned to the LRE or MDHHS. We are projecting to return approximately \$248,000 (MH Medicaid and SUD Medicaid combined) to the LRE and carry forward/lapse approximately \$104,000 in General Funds back to MDHHS.

Due to the change in the chart of accounts, and as we are still finalizing the September 2022 balances to carryforward, no balance sheet has been included in the October monthly report.



As of October 31, 2022, OnPoint has received revenue close to budget in almost category. Grant revenue is recognized based on expenses incurred to date. Most expenses are reasonable in comparison to the budget.

- Salaries and Wages, along with Fringes, are less than year-to-date budget due to the number of vacancies and new positions added for the year.
- Supplies are purchased periodically, and therefore it is not expected that the amount spent will align with the year-to-date budget.
- Professional development activities also occur periodically, and therefore the amount spent is not expected to align with the year-to-date budget. Significant professional development costs for the month of October included the CMHAM Fall Board Conference.
- Occupancy includes certain costs budget for once the new building is placed in use.

Following the statements are several charts showing the trending of capitation revenue from the LRE for the past three fiscal years.

Below is a high-level summary of the total cost, number of clients served, total minutes of service provided, and average cost per client by internal program for the month of October 2022.

Internal Program Name	Total Cost of Services	Number of Clients Served	Total Minutes of Service	Average Cost per Client
Career Concepts	\$ 9,150	10	330	\$ 915.00
Case Management	\$ 255,370	408	18,417	\$ 625.91
Outpatient Therapy	\$ 208,829	238	15,533	\$ 877.43
Occupational Therapy	\$ 18,677	11	757	\$ 1,697.91
ACT Program	\$ 46,631	30	3,062	\$ 1,554.37
Home Based Services	\$ 76,347	52	8,555	\$ 1,468.21
Med Clinic Services	\$ 51,869	211	7,507	\$ 245.82
CCBHC Program	\$ 29,128	152	13,030	\$ 191.63
SUD Services	\$ 22,347	27	4,879	\$ 827.67
<b>Grand Total</b>	<b>\$ 718,348</b>	<b>878</b>	<b>72,070</b>	<b>\$ 818.16</b>

Sincerely,

Erinn A. Trask, Chief Financial Officer  
Monday, December 12, 2022





<b>Full Board ACTION REQUEST</b>	<b>Subject:</b>	<b>Voucher Disbursements</b>		
	<b>Meeting Date:</b>	December 20, 2022		
	<b>Requested By:</b>	Beth Johnston, Finance Committee Chairperson		
<b><u>RECOMMENDED MOTION:</u></b>				
<b><u>The Finance Committee recommends that the OnPoint Board approve the October, 2022 disbursements totaling \$3,099,964.69.</u></b>				
<b><u>SUMMARY OF REQUEST/INFORMATION:</u></b>				
<u>Date Issued:</u>	<u>Voucher Number:</u>	<u>Type:</u>	<u>Amount:</u>	
November 1, 2022	N/A	Loan Payment	\$21,334.00	
November 11, 2022	P1685	Payroll	\$410,572.07	
November 15, 2022	V0890	Vendor	\$1,652,610.17	
November 25, 2022	P1686	Payroll	\$417,083.30	
November 30, 2022	V0892	Vendor	\$598,365.15	
<b><u>BUDGET/FINANCIAL IMPACT</u></b>				
<ul style="list-style-type: none"> <li>• These disbursements are part of the approved fiscal year 2023 operating budget for OnPoint.</li> </ul>				
<b>BY:</b> Erinn Trask, Chief Financial Officer			<b>DATE:</b> December 20, 2022	

ONPOINT



Period Ended  
October 31, 2022

Monthly Finance  
Report

## ONPOINT

### Summary Schedule of Revenues and Expenses by Fund Source

October 1, 2022 through October 31, 2022

Mental Health Services	Medicaid	Autism	Healthy MI Plan	Medicaid Combined	General Fund
Revenue	\$ 2,016,181	\$ 300,627	\$ 222,243	\$ 2,539,051	\$ 142,311
Expense	1,991,263	136,114	246,393	2,373,770	37,938
<b>Revenue over/(under) expenses</b>	<b>\$ 24,918</b>	<b>\$ 164,513</b>	<b>\$ (24,150)</b>	<b>\$ 165,281</b>	<b>\$ 104,373</b>

Substance Use Disorder Services	Medicaid	Healthy MI Plan	Medicaid Combined	SUD Block Grant	Public Act 2
Revenue	\$ 55,589	\$ 108,974	\$ 164,563	\$ 22,609	\$ -
Expense	38,733	42,965	81,698	22,609	-
<b>Revenue over/(under) expenses</b>	<b>\$ 16,856</b>	<b>\$ 66,009</b>	<b>\$ 82,865</b>	<b>\$ -</b>	<b>\$ -</b>

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

# ONPOINT

## Statement of Revenue, Expenses and Change in Net Position

October 1, 2022 through October 31, 2022

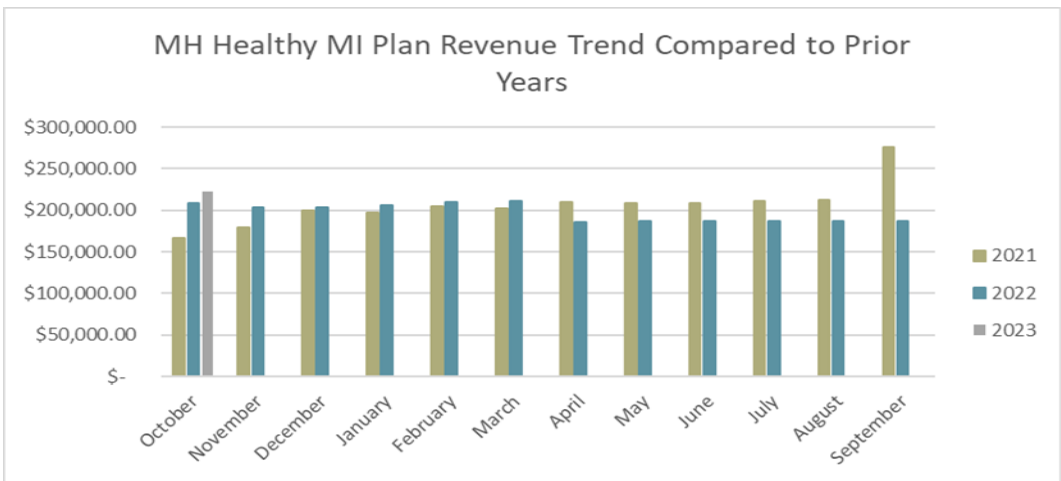
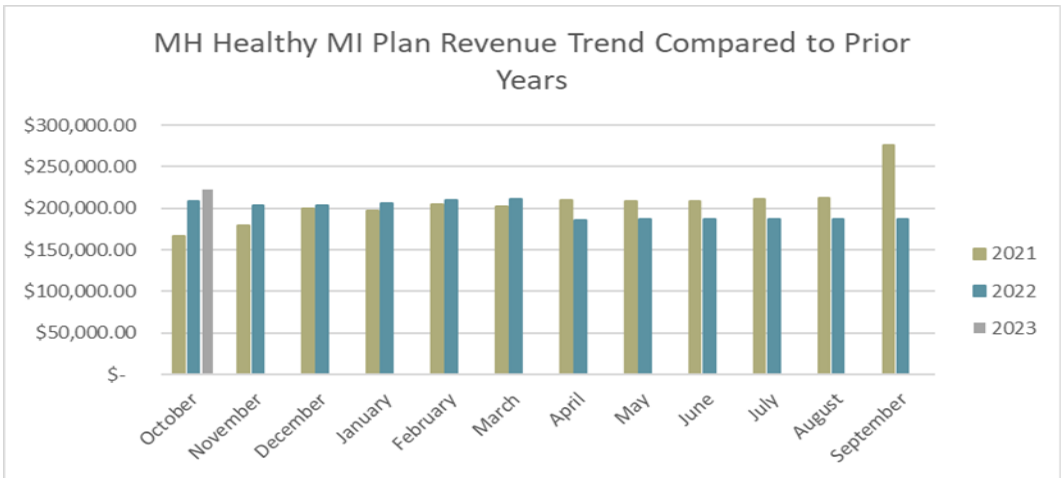
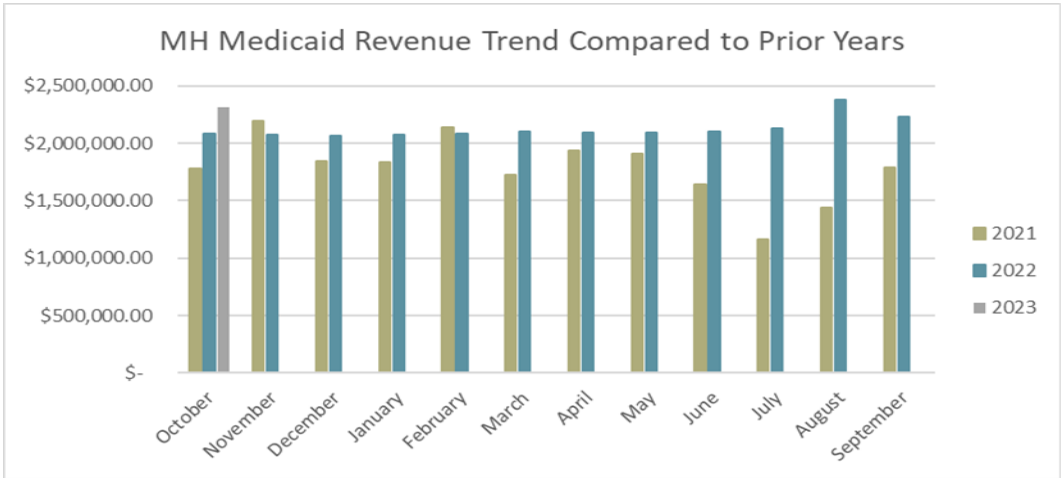
Percent of Year is 8.33%

	Total FY 2023 Budget	YTD Totals 10/31/22	Under/(Over) Budget	Percent of Budget - YTD
<b>Operating revenue</b>				
Medicaid:				
Traditional Capitation	\$ 25,193,969	\$ 2,016,181	\$ 23,177,788	8.00%
Traditional Capitation-Autism	3,937,779	300,627	3,637,152	7.63%
Traditional Settlement	(619,666)	(189,431)	(430,235)	
Healthy Michigan Capitation	2,697,512	222,243	2,475,269	8.24%
Healthy Michigan Settlement	(274,727)	24,150	(298,877)	
Substance use disorder revenue:				
Traditional Capitation	730,726	55,589	675,137	7.61%
Traditional Settlement	(465,390)	(16,856)	(448,534)	
Healthy Michigan Capitation	1,541,824	108,974	1,432,850	7.07%
Healthy Michigan Settlement	(983,316)	(66,009)	(917,307)	
State General Fund:				
Formula Fundings	1,707,737	142,311	1,565,426	8.33%
Settlement	(110,377)	(104,373)	(6,004)	
Grants and earned contracts	5,109,145	255,003	4,854,142	4.99%
Local funding	346,095	28,841	317,254	8.33%
Other reimbursements and revenue	268,262	45,929	222,333	17.12%
<b>Total operating revenue</b>	<b>\$ 39,079,574</b>	<b>\$ 2,823,179</b>	<b>\$ 36,256,395</b>	<b>7.22%</b>
<b>Operating expenses</b>				
Salaries and wages	\$ 11,496,279	\$ 758,826	\$ 10,737,453	6.60%
Fringe benefits	3,818,274	205,053	3,613,221	5.37%
Supplies and materials	409,807	17,104	392,703	4.17%
Provider Network services	20,980,022	1,648,538	19,331,484	7.86%
Contractual Services	1,642,209	152,835	1,489,374	9.31%
Professional development	98,941	12,636	86,305	12.77%
Occupancy	186,154	11,037	175,117	5.93%
Miscellaneous expenses	356,194	12,173	344,021	3.42%
Depreciation	14,423	-	14,423	0.00%
<b>Total operating expenses</b>	<b>\$ 39,002,303</b>	<b>\$ 2,818,202</b>	<b>\$ 36,184,101</b>	<b>7.23%</b>
<b>Change in net position</b>	<b>77,271</b>	<b>4,977</b>	<b>\$ 72,294</b>	

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

# ONPOINT

## Key Indicators October 31, 2022



## AGENDA

**OnPoint  
Program Committee  
Tuesday, December 20, 2022  
4:15 pm**

County Services Building, 3283 122<sup>nd</sup> Avenue, Allegan  
Allegan County Commission Board Room

Also available virtually at the link or phone number below:

### Microsoft Teams meeting

**Join on your computer or mobile app**

[Click here to join the meeting](#)

**Or call in (audio only)**

[+1 616-327-2708](tel:+16163272708),[896969400#](tel:+1896969400) United States, Grand Rapids

Phone Conference ID: 896 969 400#

**NOTE: At this time, in-person attendance capacity is limited. Social distancing is required.**

1. Call to Order – Jim Storey, Chair
2. Public Comment – Agenda Items Only, Subject to 5-Minute Limit Per Person
3. Approval of Agenda
4. Approval of Minutes
5. Program Presentation: Supported Employment – Joshua Behymer
6. Written Reports to Program Committee
  - a. Integrated Health – Leanne Kellogg
  - b. Clinical Services – Dr. Geniene Gersh
  - c. Quality Improvement/Performance Management – Mandy Padgett
  - d. Customer Service – Cathy Potter (Feb/May/Aug/Nov)
7. Program Committee Member Comments
8. Public Comment – Any Topic, Subject to 5-Minute Limit Per Person
9. Adjournment – Next meeting January 17, 2023

Program Committee: Jim Storey, Chair; Alice Kelsey, Vice Chair;  
Kim Bartnick, Amy Clugston, Emily Schwartz

**Program Committee. (Excerpt from Board Bylaws, Art. VII. Section 1c (page 5) approved by OnPoint Board May 2021.)**

*The Program Committee shall consist of not less than 4 and not more than 6 Board members and shall include the Authority's chief program officer as an advisor. It shall review data and narrative information provided by Authority staff regarding services delivered by community-based service providers and hospital providers; review proposed new programs and existing programs and make recommendations relating thereto; make recommendations which encourage improvement in quality of services; review information with a view towards policy which encourages accountability in areas of programmatic, fiscal, compliance and clinical performance; and review compliance program issues and initiatives and make recommendations relating thereto. The Program Committee shall meet monthly, on a regular basis, at a date and time determined by the committee chairperson.*

**Program Committee Minutes  
November 15, 2022 – 4:15 pm**

**Board Members Present:** Kimberly Bartnick, Alice Kelsey, Emily Schwartz (virtual) and Commissioner Jim Storey

**Board Members Absent:** Amy Clugston

**ACCMHS Staff Present:** Geniene Gersh, Brenda Holquist, Brooke Hickman, Leanne Kellogg, Brenda Polmanteer, Cathy Potter and Lauren Tordaro

**Others:** Inna Mason (Rehmann)

**1. Call to Order**

Commissioner Storey called the meeting to order at 4:17 pm.

**2. Public Comment**

None.

**3. Approval of Agenda**

Moved: Ms. Kelsey

Supported: Ms. Bartnick

Motion carried.

**4. Approval of Minutes of October 18, 2022**

Moved: Ms. Bartnick

Supported: Ms. Kelsey

Motion carried.

**6. Program Presentation – SUD Services**

Ms. Tordaro and Ms. Hickman presented and were available for questions.

**7. Program Committee Reports**

a. Integrated Health

Ms. Kellogg reviewed her report and was available for questions.

b. Clinical Services

Dr. Gersh reviewed her report and was available for questions.

c. Quality Improvement/Performance Management – written only.

d. Customer Service

Ms. Potter reviewed her report and was available for questions.

**7. Program Committee Member Comments**

None.

**8. Public Comment**

None.

**9. Adjournment**

Meeting adjourned at 5:24 pm.



# Supported Employment

December 2022

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**Joshua Behymer**  
*Employment Services Coordinator*

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# Supported Employment Process

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## 8 Core Principles of SE

**Zero-Exclusion**

**Systematic Development**

**Integrated Treatment**

**Time-Unlimited**

**Competitive Jobs**

**Consumer Preference**

**Rapid Job-Search**

**Benefits Planning**

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# OnPoint Impact

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## Consumers served

**30 consumers**

worked with

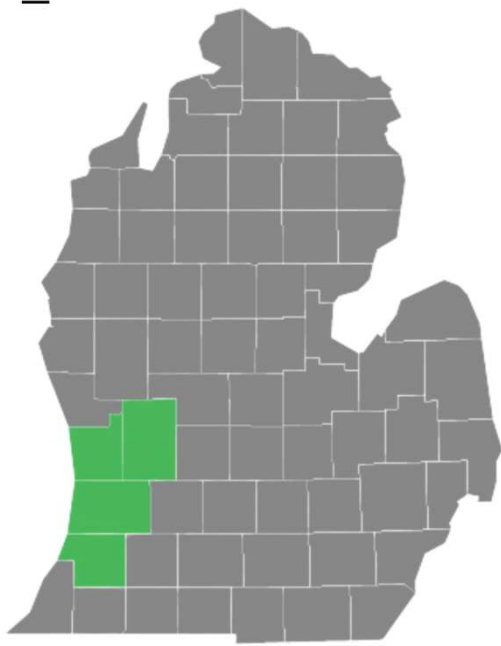
**20 consumers**

currently on caseload

**15 placements**

in competitive and integrated sites

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## Provided services in

**Allegan**

**Dorr**

**Fennville**

**Grand Rapids**

**Hamilton**

**Holland**

**Otsego**

**Plainwell**

**Saugatuck**

**South Haven**

**Wayland**

**Zeeland**

*Developed and worked within four Michigan counties:  
Allegan, Kent, Ottawa, and Van Buren County.*

## Community Partnerships

**Michigan Rehabilitation Services**

**Allegan Area ESA**

**Allegan County Transportation**

**Beyond26**

**Youth/Transition Services**

**Disability Network**

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## Job Types

Manufacturing

Maintenance

Customer Service

Bagging

Housekeeping

Janitorial

Food Service

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## Consumer impact

**\$13/hour**

average hourly wage

**19 hours**

Average number of hours each week

**5 miles**

12 jobs are within 5 miles of consumer

*(5 jobs within 2 miles)*

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# OnPoint Integrated Health and SUD Board Report

## December 2022 BOARD REPORT

Leanne Kellogg, MS, BSN, RN, Director of Integrated Health and Substance Use Services  
269-673-6617 ext. 4868 email: lkellogg@onpointallegan.org

### **CCBHC (Certified Community Behavioral Health Clinic) Grant**

Progress for the implementation of the CCBHC continues. Some of the highlights throughout the month of November include the following:

1. Efforts on continued use and implementation of data monitoring occurring throughout clinical program areas, more definition yet to come with ongoing dashboard efforts
2. NOMs collection continues regularly across the clinical programs as well with data monitoring efforts supporting the background
3. Updated NOMs tool to be implemented in the middle of December, training and testing within Streamline continues to ensure which modality of tool we utilize in the interim or moving forward
4. Continued progress on efforts underway with Rubix for data supports to enhance reporting and auditing options, progress on some data elements for reporting

Ongoing project management efforts have also completed the following:

1. Met all grant required deadlines:
  - a. Ongoing Grant Project Officer Meeting
    - i. Working through budget and sustainability options
2. Data evaluation efforts continue in the background to ensure appropriate “build” of any Streamline enhancements or use of internal data sets as well as clinical-based reports to track processes. Continued tweaks to our dashboards for more effective understanding of metrics from our clinical leadership is occurring.

**Angel Hopkins RN**, Clinic Practice Manager

### **Outpatient Psychiatric Medical Clinic**

Our outpatient psychiatric medical clinic team staff continue to be flexible in our remote working arrangement to accommodate our consumer needs.

The medical clinic continues to strive for high quality of care for our consumers and the community.

#### Staffing

1. We will be welcoming a full-time psychiatric nurse practitioner in the middle of November.

2. Our community nurse care coordinator has submitted her resignation and her last day will be November 9, 2022.
3. We are in the process of contracting with a telehealth contractor to fill our appointment needs in the meantime. Hoping to interview a psychiatrist soon and beginning the onboarding process so they can begin to see patients from our waitlist.

Information Technology

1. Continuing discussions regarding various ticket issues involving prescriptions differences with pharmacies, coordination of care report still not working, slowness of Streamline system, patient portal, ongoing continued evaluation and updates to our vendor EMR.
2. The clinic staff have been working closely with the county IT department on our office IT needs and updates, finding their services to be quick and helpful.
3. Working with Streamline to set up new prescriber EMR training due to not having a staff member that can show them the prescribing side of the EMR.

Community/Residential Nursing will be on hold until the position can be filled.

**OnPoint Substance Use Disorder (SUD) Services November 2022 Board Report**

Department Report by Lauren Todaro, MSW, LMSW, CAADC, CCJP-M  
 SUD Services Manager, 269-249-7288; [ltodaro@accmhs.org](mailto:ltodaro@accmhs.org)

**Current OnPoint SUD Services Enrollment, November 2022:**

<b>Program</b>	<b>Individuals Enrolled</b>
OnPoint SUD Services	16
OnPoint Corrections – SUD Services*	20

\*Corrections enrollment designates the referral source coming from Allegan County Probation & Parole.

**OnPoint SUD Provider Network:**

Continued efforts are being made to onboard new higher level of care (HLOC) providers such as detox, short-term residential, and long-term residential providers. With the support of Amy Ketting, OnPoint SUD Services is scheduling onboarding meetings with Meridian Health Services to begin utilizing their services for clients in Allegan County.

**Michigan State Police (MSP) Overdose Fatality Review (OFR) Grant:**

The first anticipated Allegan County Overdose Fatality Review (OFR) Meeting is planned to occur Wednesday, February 1st, 2023. This will be an informational session for individuals and agencies that may be interested in participation. We invite members of the community who are stakeholders in the prevention, support, resource, or involvement in the lives of individuals experiencing opiate use disorder (OUD). Please utilize the following survey link to express interest in involvement if you are a community stakeholder as mentioned above, and assist in

choosing a time for February 1<sup>st</sup>, 2023: [Allegan County Overdose Fatality Review Interest Survey \(surveymonkey.com\)](https://www.surveymonkey.com/r/9VVS97J) www.surveymonkey.com/r/9VVS97J

**State Opioid Response (SOR) Grant 3; Treatment Overdose & Education, Naloxone Distribution:**

The *OnPoint Overdose Response Kit* have been created for community and staff distribution, alongside support from the Grand Rapids Red Project for Narcan Administration training. The *OnPoint Overdose Response Kit* is designed to be an overdose “first-aid kit” to be carried and kept in case of recognition of overdose. The kit contains two nasal-administration doses of Narcan (naloxone), “opioid antagonist” used to counter the effects of opioid overdose, for example morphine and heroin overdose. The kit also contains a disposable CPR face shield, non-latex gloves, fentanyl test strips, informational cards for post-administration, and contact cards for further aftercare. The OnPoint goal for distribution is approximately 500 kits within the community and staff. Please contact Lauren at [ltodaro@onpointallegan.org](mailto:ltodaro@onpointallegan.org) or (260)249-7288 if you are interested in obtaining an *OnPoint Overdose Response Kit*.

**SUD Services: Prevention Services**

Report Submitted by Heidi Denton, MSW, CPS-M  
SUD Prevention Supervisor, [hdenton@onpointallegan.org](mailto:hdenton@onpointallegan.org)

**Allegan County Substance Abuse Prevention Coalition (ASAP):**

No update this month.

**Prime for Life:**

**Adult:** Next class is scheduled for January.

**Youth:** 5 youth completed the class in November from 3 middle and high schools.

**Suicide Prevention Coalition:**

Next meeting has not been scheduled yet.

**Covid funds:** New plan submitted to the LRE for additional funds for this year.

**LARA funds:** Application is in process for funding that would begin in February.

**SUD Services: Treatment Services**

Report Submitted by Brooke Hickman, LMSW-C, CAADC, DP-CCS, JD  
SUD Program Supervisor, 269-512-2594; [bhickman@onpointallegan.org](mailto:bhickman@onpointallegan.org)

**SUD Services Internal Staff Credentialing:**

SUD Program Supervisor has confirmed the following MCBAP (Michigan Certification Board of Addiction Professionals) CAADC (Certified Advanced Alcohol and Drug Counselor) staff within the agency, achieving a CCBHC goal of having 8 CAADC's or CAADC DP's (Development Plan) staff within the agency.

Full CAADC in Clinical Direct-Care Role: 4 staff

Full CAADC in Agency-Total: 6 staff

CAADC Development Plan Approved: 18 staff

CADC Development Plan Actively Pending: 2 staff

CAADC Development Plan Being Applied For: 3 staff

### **SUD Services Internal Program Development:**

The OnPoint SUD Intensive Outpatient Program (IOP) provides ASAM Level 2.1 Services to Allegan County. The IOP runs three times weekly for 3 hours each group for 10 weeks. Additionally, each participant is engaged in SUD individual therapy. This is being achieved through the combined efforts of the OnPoint Outpatient Clinic and OnPoint SUD Services Department. ASAM (American Society of Addiction Medicine) CONTINUUM Assessments are being completed by Integrated Health Teams and Access/Crisis staff to evaluate level of care and treatment recommendations.

### **State Opioid Response (SOR) Grant 3; Peer Outreach & Linkage:**

The SUD Peer Recovery Coach is actively providing services to two clients who were referred by Outpatient clinicians. The SUD Program Supervisor is providing the SUD Peer Recovery Coach with additional training and support, in preparation for him to begin to work with individuals who have been authorized for SUD Higher Levels of Care (detoxification and residential treatment) and who have been wait listed due to bed availability.

With this new service, the SUD Peer Recovery Coach will focus on engagement and support of these individuals with the goal of increasing the number of individuals who are admitted to the authorized SUD Higher Level of Care. Additionally, the Peer Recovery Coach will continue to engage with these individuals while they are in residential treatment and up through their second aftercare appointment. Further, the SUD Program Supervisor has collaborated with the Housing Supervisor, and the GBHI Peer Recovery Coach will be joining SUD Services for 6-8 hours weekly to offer these services to individuals who prefer to work with a female Peer Recovery Coach. We are excited to begin this new and important service!

### **OnPoint SUD Treatment & Allegan County Probation & Parole Department:**

Additionally, the SUD Services Department is continuing to build our relationship and referral base with Allegan County Probation and Parole Department. During the month of November, they referred 8 individuals for SUD services at OnPoint. At present, they have referred 22 individuals for SUD services at OnPoint since the end of September. These clients have either been scheduled for an SUD Intake (ASAM Continuum assessment) or are currently receiving SUD services at an Outpatient level (ASAM level 1) or through IOP (ASAM level 2.1).



**CLINICAL SERVICES BOARD REPORT ~ December 2022**  
**by Geniene Gersh, PhD, Director of Evidence Based Services**  
**269-673-6617, email [ggersh@onpointallegan.org](mailto:ggersh@onpointallegan.org)**

**Michigan Care Access Referral Exchange (MiCARE) Project Update**

In September this Director presented information regarding the MiCARE project. The Michigan Departments of Health and Human Services (MDHHS) and Licensing and Regulatory Affairs (LARA) have been working together to develop and implement the Michigan Care Access Referral Exchange project, also known as MiCARE. The goal of MiCARE is to create a statewide, comprehensive network of treatment, referring, and social support services that will provide the capability to link those in need of treatment to appropriate, available care through a registry platform.

During a recent meeting, the Lakeshore Regional Entity provided an update regarding this project and indicated the state is waiting for some of the area psychiatric hospitals and crisis residential facilities to complete the necessary information to be included in the registry system. Implementation of the MiCARE was supposed to begin on January 1, 2023, there was no information provided as to whether this would delay the implementation date. This Clinical Director and Dreka Payne, LLPC, Program Supervisor for Crisis and Mobile Crisis Services continue to be involved in the regional meetings focused on this project. This Director will provide further updates as they become available.

**New Grants Awarded to Expand Clinical Services Programming at OnPoint**

This Director is pleased to announce that OnPoint has been awarded two state grants. The first of these grants is the Infant and Early Childhood Mental Health Consultation (IECMHC) grant. IECMHC is a prevention-based intervention that teams a mental health professional with childcare providers and preschools to improve the social, emotional, and behavioral health of children.

The Consultant's work with the childcare providers, directors, staff and families through skilled observations, group and individualized strategies, and early identification of children with challenging behavior which may place them at risk. Additionally, consultants will serve as a social and emotional resource to community partners, provide trainings on social emotional topics, and connect families and childcare providers to other services and supports. OnPoint is actively recruiting for the clinician consultant position. This grant is effective January 1, 2023.

This Director would like to acknowledge and thank Tara Poore, LMSW, Program Manager for Children's Services for her work on obtaining this grant.

The second grant is the MI Kids Now Mobile Response Grant. The grant focuses on access to treatment to all youth or young adults under the age of twenty-one regardless of their insurance status. The Michigan Department of Health and Human Services (MDHHS) is providing grant funding for the expansion of Intensive Crisis Stabilization Services (ICSS) for Children. The purpose of the MI Kids Now Mobile Response Grant Program is to expand our existing children's mobile crisis programming to provide crisis stabilization services for young people who are experiencing emotional symptoms, behaviors, or traumatic circumstances that have impacted their ability to function within their family, living situation, school, or community. This grant becomes effective January 1, 2023.

This Director would like to acknowledge and thank Melissa Potvin, LPC, Program Manager of High Intensity Services for her work on obtaining this grant.

**Clinical Program Data for the Month of November**

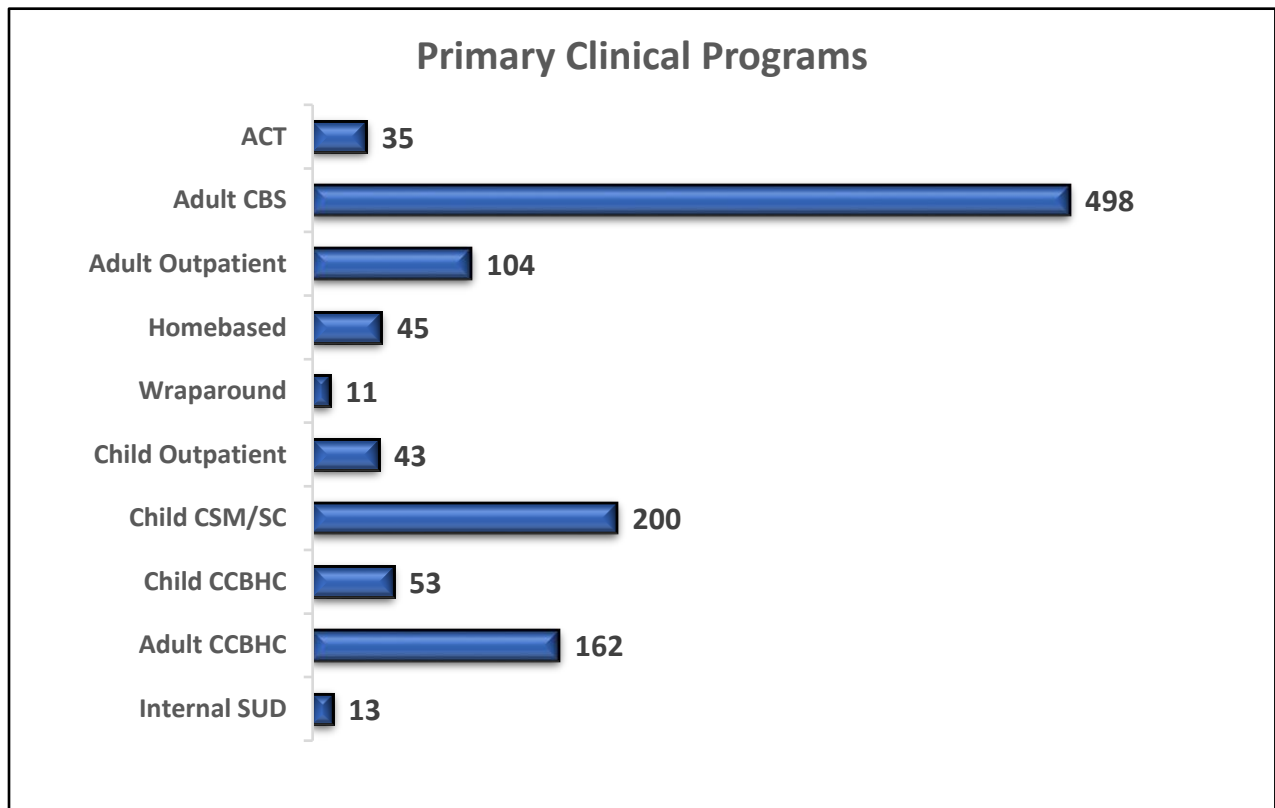
## Primary Clinical Programs

The graph and table below illustrate the number of individuals who are receiving services within each of the clinical programs for the month of November. There was a total of 1164 clients served across clinical programs during the month of November as compared to 1121 during the month of October. There was an increase in those adults who were enrolled in Certified Community Behavioral Health Clinic (CCBHC) Services during the month of November. There was a total of 162 adults enrolled for the month of November as compared to 152 in the month of October. There was also an increase in the number of children and adolescents that were enrolled in CCBHC during November with 53 as compared to 44 in October.

There was an increase in internal Substance Use Disorder (SUD) Services during the month of November with 13 individuals who received Outpatient Counseling and/or Intensive Outpatient Group treatment compared to 4 people in the month of October.

The Children's Services team experienced an increase in the number of children receiving Case Management and Supports Coordination Services with 200 during the month of November as compared to 188 in October. There was slight increase in the number of children receiving Outpatient Counseling. In addition, there was a small decrease in those children and families receiving Homebased and Wraparound Services in November.

In Adult Services, there was a small decrease in the number of individuals receiving Case Management Services. The Assertive Community Treatment (ACT) team provided treatment for 35 people in the month of November as compared to 34 in October. There was no change in the number of individuals receiving Outpatient Counseling during November with a total of 104 receiving treatment.



Primary Clinical Programs	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Six-Month Average
Child Outpatient	37	35	34	33	40	43	37
Child CSM/SC	162	164	172	173	188	200	177
Wraparound	22	23	27	27	14	11	21
Homebased	45	51	47	51	49	45	48
Adult Outpatient	102	107	108	112	104	104	106
Adult CBS	495	500	499	503	492	498	498
ACT	33	33	33	32	34	35	33
Child CCBHC	-	-	-	42	44	53	-
Adult CCBHC	-	-	-	114	152	162	-
Internal SUD	-	-	-	-	4	13	-
<b>Total</b>	<b>896</b>	<b>913</b>	<b>920</b>	<b>1087</b>	<b>1121</b>	<b>1164</b>	<b>-</b>

### Intakes Conducted During the Month of November

The table below illustrates the number of intakes conducted by the Access Team during the month of October. There was a total of 63 intakes completed in November as compared to 70 intakes for the month October. 62 individuals who received an intake were admitted to services and one person was referred to resources within the community.

Intake Disposition	Count
Admit/Refer to Funded Services	62
Referred to Community Resources	1
<b>Grand Total</b>	<b>63</b>

### Discharges During the Month of November

The table below illustrates the number of discharges with a total of 62 during the month of November. A total of 19 of these discharges were planned and 43 were unplanned.

Discharges	Count
Planned	19
Unplanned	43
<b>Grand Total</b>	<b>62</b>

The following reports summarize what is occurring in each of the programs within Clinical Services.

### **High Intensity Services – Melissa Potvin MA, LPC – Manager**

#### **Access**

For the month of November, the Access Department scheduled 97 intake assessment appointments for mental health and SUD internal services. Of those numbers scheduled, 66 assessments were completed with 31 no shows or rescheduled appointments. Overall, our numbers continue to increase each month in what appears to be a new normal of increased requests for services.

#### **Mental Health Treatment Court**

Mental health treatment court in Allegan continues to operate with a low caseload count and 5 active cases at this time.

#### **Crisis**

The Crisis Department screened 43 consumers (29 adults/14 minors) for a higher level of care in the month of November. Sixty percent of those screened met the criteria for a higher level of care such as partial hospitalization, crisis residential or inpatient. The department continues to have one position open for a crisis clinician which has been open for several months.

### **Adult Community-Based Services – John Eagle LLMSW, QIDP, QMHP & Laura Furey BS, QIDP, QMHP**

#### **Adult Clinical Services**

**Certified Community Behavioral Health Center (CCBHC)**- The Adult Clinical Leadership and identified staff continue to improve workflows and processes as we implement the CCBHC Grant. With the implementation of the CCBHD Grant we hope to increase access to mental health and substance use disorder treatment, expand established relationships with community partners, and reduce recidivism and prevent hospital readmission.

**Intellectual and Developmental Disability (IDD) and Mental Health Case Managers/Case Manager Assistants:** Staff continue to complete a hybrid model of telehealth and face-to-face contacts. Our new Peer Support Specialist has begun to receive referrals and has started meeting with individuals to provide additional supports along with Case Management to bolster individuals' skills in managing mental health symptoms. 3 CMs continue to move forward with SUD development plans training and supervision.

**Omnibus Budget Reconciliation ACT (OBRA)**- Program used to assist in determining if a nursing facility is the most appropriate place for an individual with a serious mental illness and/or an intellectual/developmental disability to receive services and whether they require specialized behavioral/mental health services. This is completed through a comprehensive assessment process that is completed to determine initial eligibility as well as annually or if there is a significant change in condition to ensure whether they continue to require the current level of service and support. OnPoint continues work on systemic change within the Adult Team to provide support to the OBRA Coordinator.

## **Supported Employment Services-** December Presentation

**Support Intensity Scale (SIS)-** The SIS is an assessment tool that measures practical supports that a person with an intellectual disability needs to be successful in the community. The SIS is a nationally recognized, valid, and reliable assessment tool developed by the American Association on Intellectual Disabilities (AAIDD). The SIS Assessor is a trained interviewer that can help identify a person's support needs and wants. The SIS Assessment is used to inform the person-centered planning process. Corie has completed 24 SIS assessments since the start of Fiscal Year 2023.

**Behavioral Services-** Behavioral services such as Positive Support Plans, Functional Behavioral Analysis, and Behavior Treatment Plans, are determined using the person-centered planning process. The behavior treatment committee provides oversight and reviews all behavior treatment plans. According to the Michigan Medicaid Provider Manual, "any behavior treatment plan that proposes aversive, restrictive or intrusive techniques, or psycho-active medication for behavioral control purposes and where the target behavior is not due to an active substantiated psychotic process, must be reviewed and approved by specially constituted body comprised of at least three individuals, one of whom shall be a fully- or limited licensed psychologist and one of whom shall be a licensed physician/psychiatrist. The psychiatrist or physician must be present during the review and approval process. At least one of the committee members shall not be the developer or implementer of the behavior treatment plan. OnPoint's BTC meets bi-weekly to review all behavior plans. These meeting have moved to the 2<sup>nd</sup> and 4<sup>th</sup> Wednesday of each month.

**Outpatient Clinicians-** The OnPoint Outpatient Clinicians continue to provide Allegan County residents with research and recovery based mental health treatment, which is both effective and efficient. The Adult Outpatient Program makes use of ongoing assessments and provides therapy and behavioral services for adults who suffer from symptoms of a chronic mental illness. Our staff provide evidence-based treatments with proven results in symptom reduction, positive management of emotions, community participation and integration. The Outpatient therapists continue to use a hybrid model to provide therapy services to the consumers of Allegan County. Adult Outpatient along with the SUD department continues the process of incorporating services for people with primary substance use diagnosis by way of starting an Intensive Outpatient (IOP) group therapy that meets 3 times a week for 3 hours. This is the first in-person group therapy to be provided at the OnPoint clinic since the pandemic. Providing primary substance use services is a landmark accomplishment for OnPoint, which has historically been provided by contract agencies. The Outpatient Team continues to offer more opportunities for people receiving services to have face-to-face appointments and are playing an interictal role in expanding our service array. This includes being available after traditional hours of operation. We currently have 4 clinicians with their Certified Advanced Alcohol and Drug Counselor credentials (CAADC) and 3 more outpatient therapist on a development plan to obtain the credentials.

*Geniene Gersh, Ph.D.*

Director of Evidence Based Services



Caring for Allegan County

## Quality Improvement and Compliance Board Report December 2022

Submitted by Mandy Padget, Director of Quality and Compliance

[mpadget@onpointallegan.org](mailto:mpadget@onpointallegan.org) (269) 673-6617 ext. 2718

### OnPoint LRE Site Review

OnPoint's Corrective Action Plan (CAP) has been accepted, and proof documentation has been submitted to the region. A big thank you to Kim Bectel, Michell Truax, Janice August, and Jennifer Taylor for their coordination efforts with the LRE.

### NCI Survey

Preliminary work has begun on the National Core Indicators Survey ("NCI"). The NCI survey is a voluntary collaboration of the National Association of State Directors of Developmental Disabilities Services (NASDDDS) and the Human Services Research Institute (HSRI) to measure and track state's performance through multiple surveys with persons with disabilities, family members and direct support professionals. The National Core Indicators are standard measures used to assess the outcome of services provided to individuals and families. The key indicators address employment, rights, service planning, community inclusion, choice, and health and safety.

### Explanation of Benefits Distribution

As part of a Federal anti-fraud initiative, Explanation of Benefits ("EOB") Statements are required to be sent out each fall to a minimum of 5% of individuals served via Medicaid funding. The LRE extracted a random sample of individuals served by OnPoint resulting in 110 EOBs. The EOBs will be mailed out to individuals served by OnPoint during the month of December.

### Corporate Compliance Activities

Mandy Padget who acts as OnPoint's Corporate Compliance Officer attended the Health Care Compliance Association compliance academy in November and is now certified in health care compliance.

A root cause analysis meeting was conducted on 11/30/2022.

OnPoint Corporate Compliance Officer continues to meet with the LRE/OIG regarding a historical issue with a provider who is no longer contracted with OnPoint.

3 compliance cases opened in September 2022 remain under investigation, 2 additional cases were opened in November of 2022.

Respectfully submitted,

Mandy Padget, BSW, LLBSW, QIDP, QMHP, CHC  
Director of Quality and Compliance  
OnPoint



## Provider Network Board Report

**Provider Network Manager** – Amy Kettring, LMSW, QIDP, QMHP

**New providers added** – these have all been presented to the board previously.

- FY22
  - Enriched Living, LLC                      Specialized Residential
  - Above & Beyond Care                      Specialized Residential
- FY23
  - Locum Tenens.com                      Psychiatric Telehealth
  - Iris Telehealth                      Psychiatric Telehealth
  - Genoa Telepsychiatry                      Psychiatric Telehealth
  - No One Lives Alone                      SUD Recovery Housing
  - Meridian Health Services                      SUD Residential
  - A Mother's Touch                      SUD Recovery Housing

**Network Adequacy Reporting** –OnPoint staff are working collaboratively with the lakeshore regional entity (LRE) to identify areas within the community which are met by the provider network and which areas may need further exploration. Below are the service areas initially identified in which further review and exploration will take place within Allegan County.

- Infant mental health – exploring OnPoint directly providing this service.
- Skill Building and Supported Employment
- SUD Residential and Recovery Housing – we have been adding providers to our network.
- Crisis Intervention services –This is an area we are internally working to increase staffing support and strengthen the service delivery and exploring new providers of service.
- Clubhouse – Provider Network Manager has begun to explore the potential need as well as ways in which this service could be provided in Allegan County.

**Audit Findings** – We recently had audits performed by the LRE and MDHHS. A pattern was identified in the area of credentialing of organizations and individual staff working at the provider agencies. In FY23 OnPoint staff will begin reviewing a random sample of records from our provider network. Process and Procedure will also be an area of focus.

**Policy and Procedure** – we are reviewing our policies and plan to revise.

**Provider Network Meetings** – An invite was recently sent out to all providers in the OnPoint Network to meet virtually on January 10, 2023. This meeting includes all providers regardless of the population served. The purpose is to increase collaboration and communication with the provider network. This meeting will take place quarterly.

Just OnPoint  
**Executive Committee Meeting Minutes (Draft)**  
November 14, 2022 – 2:30 pm  
*Location: OnPoint, 3283-122<sup>nd</sup> Street, Allegan, MI 49010*

Board Members    [ X ] Commissioner Gale Dugan, OnPoint Board Chairperson  
                          [ X ] Alice Kelsey, OnPoint Board Vice-Chairperson  
                          [ X ] Elizabeth Johnston, OnPoint Board Treasurer  
                          [ X ] Commissioner Jim Storey, OnPoint Board Secretary  
OnPoint Staff     [ X ] Mark Witte, OnPoint Executive Director

1. **Call to Order:** 2:41pm
2. **Members Present/Excused:** All members present
3. **Review of Agenda:** Chairman asked to add 3 agenda items under discussion; Member Johnston asked to add finance committee matters; election results. Moved by Johnston, 2<sup>nd</sup> by Kelsey to approve the agenda as amended. Passed voice vote.
4. **Review/Approval of Minutes of Prior Meeting:** Moved by Kelsey, 2<sup>nd</sup> by Johnston. Passed voice vote.
5. **Updates on Prior Meeting Topics**
  - a. Building Updates
    - i. Change Order 12: Witte brought change order for information, mostly underground and paving issues. Members asked questions on the components of the change order. Kelsey asked whether the changes would affect move-in date; Witte: shouldn't.
    - ii. Last construction update meeting cancelled.
    - iii. Some finishes starting to appear.
  - b. CMHA Matters
    - i. Thanks to Comm. Dugan for accepting nomination for CMHA Treasurer position; Witte thanked Chairman for running. Chairman said that he appreciated opportunity.
  - c. Board Meeting Packet Review/Opportunity for Clarifications.
  - d. Arc Allegan – Stacey Engelsmann to speak at November 15 board meeting; Witte briefed the committee on expected remarks from Engelsman.
6. **Discussion Items Requested by Members**
  - a. Recipient rights handbook; Chairman asked that copies be given to the full board.
  - b. Chairman asked that Section 904 report be distributed to exec committee members. Recd.
  - c. Chairman brought copy of Farm Future magazine cover story on Farm Mental Health. Discussion ensued on whether to purchase additional copies. Motion to authorize Witte to purchase more copies.
  - d. Johnston initiated discussion of reporting costs in a manner that associates expenditures with specific services. Witte explained that current reporting mechanism would allow for it to happen without great difficulty. Storey asked whether revenue figures could also be shared in like manner.
  - e. LRE reconciliation with December 2021 is still pending, per Johnston. She asked that the board urge the LRE to correct the record of no balance.
  - f. Johnston asked that the executive committee receive the LRE reports.
7. **Executive Director Items (Witte)**
  - a. Proposed 2023 calendar schedule was shown. Will be up for board consideration in December
  - b. Witte presented memo from Atty. Bregge on whether the Open Meetings Act bans three commissioners total from serving on the agency board.
  - c. Witte shared a map of the legislative districts with the members who were elected.
8. **Next Meeting Date/Time**
  - a. Proposed: Friday, December 16, 2022 at 2:30 pm
9. **Adjournment**



## MINUTES

### ONPOINT BOARD

Tuesday, November 15, 2022, at 5:30 P.M.

COUNTY SERVICES BUILDING, 3283 122ND AVENUE, ALLEGAN  
Allegan County Commission Board Room

**Present:** Kim Bartnick, Glen Brookhouse, Commissioner Mark DeYoung, Commissioner Gale Dugan, Beth Johnston, Alice Kelsey, Emily Schwarz, Commissioner Jim Storey  
Pastor Craig Van Beek and John Weerstra (virtual)

**Absent:** Amy Clugston, Emily Schwartz and Karen Stratton

**Staff:** Geniene Gersh, Brenda Holquist, Nan Lawrence, Nikki McLaughlin, Kelsey Newsome, Brenda Polmanteer, Cathy Potter, Lauren Tordaro and Mark Witte

**Visitors:** Stacy Engelsman (Arc Allegan County), Inna Mason (Rehmann) and Jim McCormick (LRE)

#### 1. Call to Order

Commissioner Dugan called the meeting to order at 5:31 pm. Roll call was taken and a quorum was reached.

#### 2. Pledge of Allegiance

Recited.

#### 3. Provision for Public Comment

Stacy Engelsman from the Arc of Allegan County. The Arc of Allegan County advocates for the rights and full participation of all children and adults with intellectual and other related developmental disabilities. We exist "to advocate for persons with developmental disabilities so they may live, learn, work, and play with dignity, respect, and meaningful involvement in their communities." [https://www.arcallegan.org/about\\_us](https://www.arcallegan.org/about_us)

#### 4. Approval of Agenda

Moved: Ms. Kelsey

Supported: Ms. Bartnick

Motion carried by roll call.

#### 5. Consent Agenda – *All items listed are routine and to be enacted by one motion.*

a. **Recommended Motion:** Approval of prior minutes for the following:

- i. Executive Committee Meeting (10.14.2022)
- ii. Board Meeting (10.18.2022)
- iii. Building Committee Meeting (10.18.2022)
- iv. Finance Committee Meeting (10.18.2022)
- v. Program Committee Meeting (10.18.2022)

Moved: Mr. Brookhouse

Supported: Pastor Van Beek

Motion carried by roll call.

#### 6. Building Committee

Commissioner Dugan gave a report on the most recent meeting and was available for questions.

#### 7. Program Committee Report

Commissioner Storey briefly reviewed the activities of the Program Committee, highlighting reports of interest and was available for questions.

## 8. Finance Committee Report

Ms. McLaughlin gave an overview of the October financials and was available for questions.

- a. The Finance Committee recommends that the OnPoint Board approve the October 2022 disbursements totaling \$3,708,325.70.

Moved: Ms. Johnston

Supported: Ms. Bartnick

Motion carried by roll call.

- b. The Finance Committee recommends that the OnPoint Board approve the following provider contracts for fiscal year 2023. Henry Ford Health Systems and A Mother's Touch.

Moved: Ms. Johnston

Supported: Ms. Kelsey

Motion carried by roll call.

## 9. Recipient Rights Advisory Committee (Feb/Apr/Jun/Aug/Oct/Dec)

None

## 10. Chairperson's/Executive Committee Report

Commissioner Dugan reported on the Executive Committee meeting and was available for questions. Board of Commissioners will no longer receive a per diem for meetings as it is already included in their new salary.

## 11. LRE Update

Jim McCormick gave an update on the LRE and was available for questions.

## 12. OnPoint Executive Director's Report

Mr. Witte reviewed his report and was available for questions.

## 13. Provision for Public Comment

None.

## 14. Board Member Comments

Ms. Johnston reports that she was able to attend the fall conference. She also attended the seminar that Lauren Tordaro and Susan Conrad on integrating SUD and Housing.

Mr. Brookhouse wishes Ms. Bartnick a happy birthday.

Commissioner DeYoung also attended the same seminar at the conference and was very impressed.

Commissioner Dugan reports that he made the trip to the conference and attend the board chairman's meeting and was able to start building relationships with peers and legislators.

## 15. Motion to Adjourn:

Moved: Ms. Johnston

Supported: Ms. Bartnick

Motion carried by roll call.

Meeting adjourned at 6:30 pm.

Respectfully submitted,

Brenda Holquist  
Executive Assistant

Gale Dugan  
Board Chair

**Executive Director Board Report – November 2022**  
Submitted by Mark A. Witte, MSW, LMSW, Executive Director  
Cell/Text: 269-615-4893 – mwitte@onpointallegan.org

**1. Agency**

**Structural Change** – From time to time, we have made changes in our administrative and clinical structure to adapt to needs and prepare for what we see coming in the future. I made another such change that became effective on 12/5/2022. The three macro changes behind need to make these changes are (a) supporting CCBHC as the prevailing system design, (b) fiscal accountability pressures resulting from Standard Cost Allocation, and (c) performance accountability to achieve the “triple aim” - cost, quality, satisfaction.

The most notable changes are the appointment of Leanne Kellogg to the new position of Chief Operating Officer and Geniene Gersh to the position of Director of Evidence Based Programs. Leanne will oversee all OnPoint programs and services administratively, including Quality, Innovation and Compliance. Geniene will help us to adopt and refine new clinical systems which will include integrated health, behavioral health care, and integrated co-occurring substance use disorder treatment.

With other changes, I will increase my attention to the board, our county/community, our region and the state, and so have structured this report along that outline – we’ll see how it works. I intend to strengthen partnerships and increase opportunities for benefit to the county in our area of responsibility. More details about these changes in our internal structure with the Executive Committee and in my verbal report to the board at our December board meeting.

**Building** – Our next building construction review meeting is scheduled for 12/8/22, the day this report is submitted. We hope to have a firmer understanding of the completion schedule so that plans for open houses and ribbon-cuttings can be planned. As of the date of this report, there have been no unexpected developments or bad surprises in the past month.

**Compliance** – I will be processing a recommendation this month with the board Executive Committee to specify the Executive Committee as the OnPoint board’s compliance review committee. This comes from Mandy Padget, our agency’s compliance officer following her attendance at a conference held by the Health Care Compliance Association in Chicago in November. She gained a lot of information for this aspect of her work in which she supports us as agency staff, you as the board, and external stakeholders.

**Electronic Medical Record (EMR)** – We currently use a product called Streamline as our EMR. As with all EMR’s, we have had some issues and challenges from time to time but nothing to the level that we’d say we absolutely must make a change. However, we’ve had some questions about how well it will meet our future needs if (or when) OnPoint is added to the state’s CCBHC demonstration grant. If a change is warranted or even simply strategic, timing is important as will solicate the input of staff who use EMR’s all day long. If we decide to make a change, we need to consider the time needed for training and transition of historical data. If we do not, then we need to further develop and test Streamline to assure it meets the future need.

The responsible place to start is a demonstration of an alternative product. PCE, a system that is used by 43 of the state’s 46 CMH’s and 9 of 10 PIHPs, is the only

realistic alternative EMR. For that preliminary purpose, we will host a 2-hour demonstration of PCE on 12/13/2022.

## 2. Board

**Mental Health Media Coverage** – Last month, Commissioner Dugan informed us that Farm Futures had devoted an entire special issue to the topic of mental health. We asked the publisher for permission to make copies for each board member but were told that each article required separate permission, and that we could only order additional copies in multiples of 100. They suggested instead that we provide you this link (<https://tinyurl.com/4ksr2a9t>) to the online publication. That seemed like the overall most expedient option. So, we encourage you to take a look at this resource. And thank you, Gale, for bringing it to our attention and for raising our awareness.



**Student and Family Support** – You will likely read this update in the Program Committee packet, but it is significant to note that our team met the goal of successfully transitioning the County’s pre-established Student and Family Assistance Program to OnPoint as of 12/1/2022.

This service, begun out of a need to support the mental well-being of students and families during the COVID-19 pandemic, was determined by the county to have revealed behavioral health needs that almost exclusively had surpassed concerns about the pandemic. We were pleased to adopt the program and worked to transition it seamlessly from the County’s prior contractor. This did, however, require a change in telephone numbers on the posters used by schools. A copy of that document is attached to this report.

Our thanks go out to the County’s Information Services department in assisting with the acquisition of that new number. We have used that opportunity to also promote the use of myStrength.

**Strategic Plan** – It has been a while since we have provided a report to the board on the status of goals and accomplishments (or barriers) related to our strategic plan. I intend to discuss this with the Executive Committee at its December meeting as a prelude to further dialogue with the board that I hope to have on 12/20/2022.

For those of you who were around when we adopted the current strategic plan, the wise words of our board at that time were not to put it on a shelf and ignore it, but to use it and to keep it active. I have personally heeded that advice, and we had several quarters of reports to the board on our progress and I have personally had the four goals of the plan on my office whiteboard ever since it was adopted. However, the past three years has also been filled with unanticipated twists and turns – regional issues, the building program and the pandemic – just to name a few.

I would like to turn our attention to at least refreshing the plan and returning to the process of reviewing our progress. This could take the form of new strategic objectives under each of the goals of the current plan. I am interested in your perspectives and believe you to be the ultimate owners of the plan, and so we will go in the directions you ultimately determine. I look forward to that conversation.

**Chief Financial Officer Position Posting** – In our communication with staff regarding the agency’s administrative restructuring, I also relayed the announcement that we now are proceeding with posting

. for the permanent CFO position. The timing on this is per the original Rehmann contract timeline which called for us to begin the process of recruitment, selection and orientation with continuing support from Rehmann after the end of the fiscal year (10/1).

We are on schedule with that and wanted to inform you of this step forward in plan phases. After only a few days of the posting being up, we do know that there are some qualified candidates who have applied. If we do not select anyone at this time, we are in a good position with Rehmann’s support to extend our timelines if needed.

### **3. Community**

**myStrength Scorecard** – I’ve attached October’s scorecard from Livongo, the owner of myStrength product. In it you will see that we have a number of active users in the County, though it is obvious that further marketing efforts will be needed to grow that number to the level that would be desired. We have asked for the outreach materials to be redone with the OnPoint branding and will make the effort to push awareness once that has been completed.

**Ascension Borgess Allegan** – Between the time this report is written and the date of our board meeting, we expect to have two meetings with Ascension Borgess Allegan about potential areas for increased collaboration. Our desired future state includes the provision or tight coordination of physical health services for individuals served by OnPoint.

**Multi-Agency Collaborative Council** – Changes are in process for Allegan County’s MACC. MACC is a voluntary organization of human service and related organizations, formed in response to a 1995 request from what is now MDHHS that asked “*each community designate a current or new multi-purpose collaborative body*”, or MPCB. MDHHS went on to say, “[MDHHS] fully support[s] inclusive collaboration and decision-making. We believe that effective collaborative policymaking structures involve at a minimum: a) agency directors of the department of social services..., community mental health, local public health, intermediate school districts (ISD), area agency on aging or senior volunteer agencies, b) consumers and family members, c) private agency and community representatives, d) prosecutors, e) probate judges, and f) service delivery area/private industry council representatives.”

A few years ago, MACC members endorsed a plan to obtain part-time staffing to assist MACC members in their agree-upon efforts. The current MACC coordinator is an employee of the Ottawa-Allegan United Way, and funded by contributions from OnPoint, Allegan County (through OnPoint), and United Way’s own funds – as the work of MACC was deemed in line with United Way’s interests.

This fall, the United Way announced that it was no longer able to support the MACC Coordinator with its own funds and that the funds provided by OnPoint (and the County through OnPoint) were insufficient to continue the arrangement past 12/31/2022. As a result, we are engaged with ongoing discussions among MACC members about ways to preserve MACC’s leadership as originally envisioned, and to strengthen MACC’s capacity to support the benefits of human service organizations in Allegan County well into the future. Stay tuned.

#### 4. Region

**Revenue Projections Reconciliation** – It took some time, but the combined efforts of our leadership and the leadership of the LRE has resulted in a completion of the issue that has been discussed in the past couple of board meetings regarding reconciliation of revenue estimates with actuals going back several months. I will defer to the comments of our Erinn Trask, Interim CFO, on the matter of what those statements mean to our financial situation.

**LRE Board Meetings** – Starting in January 2023, the LRE’s monthly board meeting will change from its present date to the 4th Wednesday of each month at 1 pm. I usually attend in person, but these are also public meetings with pre-published agenda packets ([www.lsre.org](http://www.lsre.org)) that you are welcome to attend as well. There is a virtual option too. Let me know if you’d like to participate but want some assistance with the particulars.

#### 5. State

**“Shirkey Bills”** – Though quite unexpected, a number of political circumstances opened the door to activity during the week of 11/28/22 by the MI legislature in lame duck relative to our major bills of interest, Senate Bills 597/598. We learned that the Governor and legislators began some “horse trading” discussions involving the location of Michigan’s presidential primary date on the calendar for 2024. The Governor, with the apparent support of MDHHS, was willing to move the responsibility for Medicaid funded mental health care for children in foster care to the contracts of Medicaid Health Plans. The deal also allowed the bundling of that provision with the inclusion of “dual eligibles” (people with Medicaid and Medicare) and would require a layer of oversight for Recipient Rights and other structures within PIHPs/boards.

Ultimately, those bills were voted on by the Senate and were defeated. All of this happened very quickly, in an apparent effort to move 597/598 over to the House in time to meet legislative procedures that require a 5-day bill layover when bills move between chambers.

We were interested to see if Sen. Shirkey might look to attach his legislation into other Senate-approved bills that have already been passed over to the House for consideration. But Chapter 4, Section 24 of the Michigan constitution states: *“No law shall embrace more than one object, which shall be expressed in its title.”* Thus, bills with multiple unrelated purposes are not allowed. This made insertion into another bill tricky for Sen. Shirkey, though CMHA was ready to respond had it emerged in the House during the week of 12/5/22.

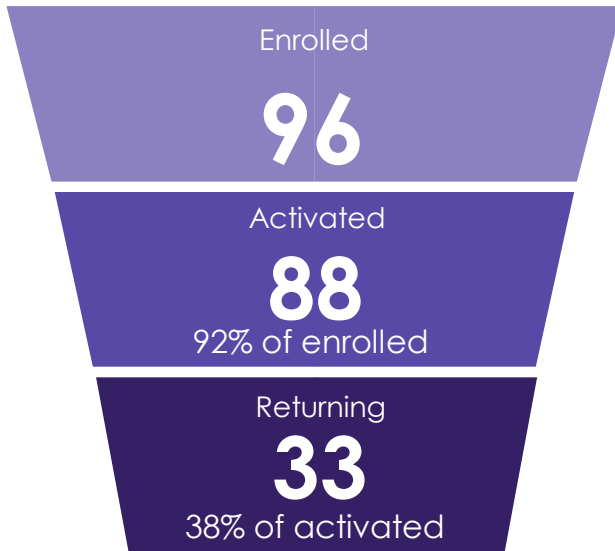
In the end, as was reported just yesterday (12/7), there was no further action and Sen. Shirkey gave a farewell speech to the legislature. They will meet once more to end the session, and SB 597/598 will die for lack of approval. Even with a change in legislative makeup for the next two years, we do not expect this issue to go away. We need to push for adoption of CCBHC to put to rest the perception that CMH’s represent “broken systems”.

Mark Witte  
12/7/2022

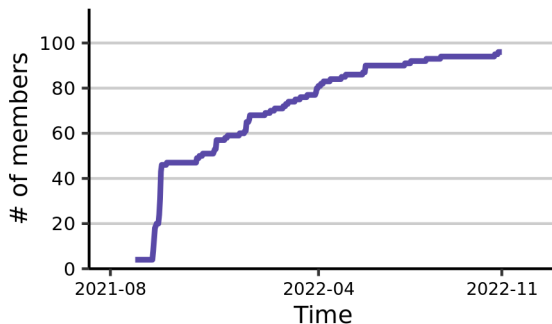
# Allegheny County Community Mental Health

Program launch: 2021-08-30 Data thru: 2022-10-31

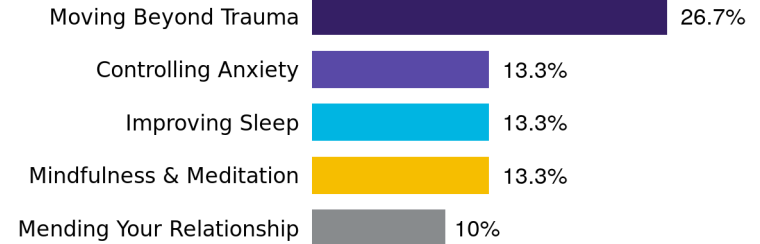
## Members enrolled



## Enrollment trends



## Top 5 digital recommendations

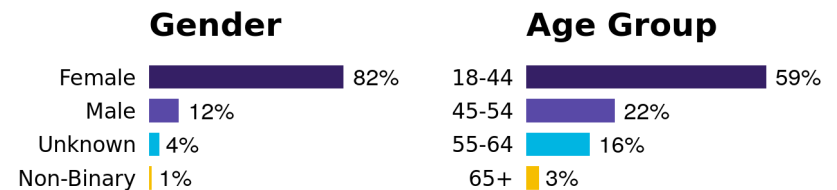


## Program engagement

Average 90 day member engagement rates (% of returning)



## Member demographics (% of enrolled)



# Allegan County Community Mental Health

Program launch: 2021-08-30 Data thru: 2022-10-31

## Depression outcomes

### Clinical and subclinical population

Scored 5 or more in the PHQ-9 assessment

**1** more members meeting clinical criteria need to complete a follow-up PHQ-9 assessment before this chart will be displayed.

**NA%**

Maintained or improved

**NA%**

**Clinically Improved**

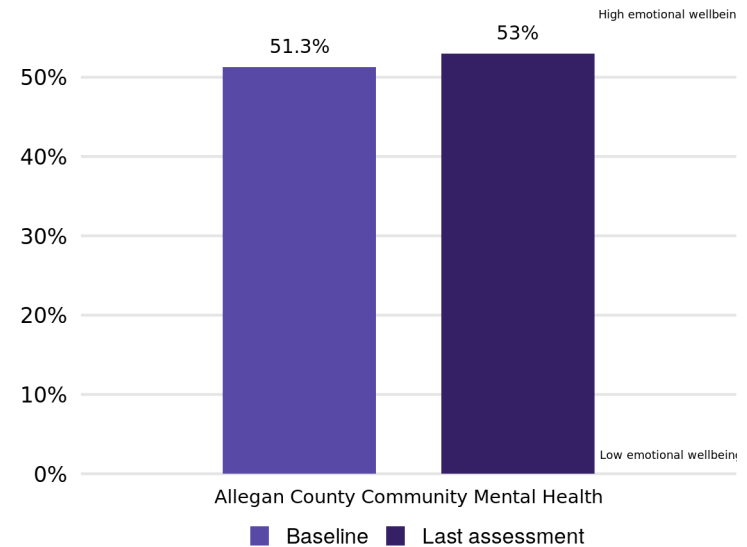
Started with scores  $\geq 15$  and decreased their score by at least 5 points

A PHQ-9 score indicates the severity level of a member's symptoms, where a score of 0-4 is nonclinical, 5-14 is subclinical, and 15+ is clinical.

## Wellbeing outcomes

**25%**

Of members' wellbeing improved at least 10% (Clinical definition of improvement)



A WHO-5 score below 52% (13 points) indicates poor well-being.

## Anxiety outcomes

### Clinical and subclinical population

Scored 5 or more in the GAD-7 assessment

**4** more members meeting clinical criteria need to complete a follow-up GAD-7 assessment before the chart will be displayed.

**NA%**

Maintained or improved

**NA%**

**Clinically Improved**

Started with scores  $\geq 15$  and decreased their score by at least 5 points

A GAD-7 score indicates the severity level of a member's symptoms, where a score of 0-4 is nonclinical, 5-14 is subclinical, and 15+ is clinical.



## Allegan County Community Mental Health

## DATA DEFINITIONS



## Members enrolled

**Enrolled:** Number of members who registered and successfully enrolled

**Activated:** Number of members who completed the onboarding assessment

**Returning:** Number of activated members who have logged into the myStrength program at least once after onboarding assessment completion

**Enrollment trends:** Number of members who have enrolled (current enrolled) over time since the program launch date

## Top 5 digital recommendations

The percentage of returning members that were recommended "Just for You" content or digital courses and programs.

## Program engagement



**Logged in:** The percentage of returning members that logged into the myStrength application via the mobile app or the myStrength website at least once in the last 90 days.



**Completed activity:** The percentage of returning members that completed at least one activity in the last 90 days. Members must click the "Finish" button after going through all the steps in order to be counted.



**Engagement guidance:** The percentage of returning members that have sent at least one message to a guide in the last 90 days.

\*N/A will display if engagement guidance is not a part of the program that was purchased

## Clinical outcomes

**PHQ-9** is a validated depression screening tool. Total score is between 0 and 27 with higher scores meaning more symptoms. Metrics show % of members who have taken the PHQ-9 assessment at least twice – once at baseline and at least once more after baseline.

**GAD-7** is a validated anxiety screening tool. Total score is between 0 and 21 with higher scores meaning more symptoms. Metrics show % of members who have taken the GAD-7 assessment at least twice – once at baseline and at least once more after baseline.

**WHO-5** is a validated measure of general wellbeing (not a specific diagnosis or problem). Total score is between 0 and 25 with lower scores showing lower quality of life and higher scores showing higher quality of life. Raw scores are multiplied by 4 to get a percentage score. Metrics show % of members who have taken the WHO-5 assessment at least twice – once at baseline and at least once more after baseline.

\*For each clinical outcome, the reported population has at least 10 members in the program and completed at least two assessments.



As we move into the end of 2022 and look to the opportunities of 2023, OnPoint (formerly Allegan County Comm. Mental Health) is continually looking for ways to increase our outreach efforts to the community and diversify the ways individuals can access services. We would like to take a moment and highlight two of these behavioral health resources that are available for students and families in the county.

## Student and Family Assistance Program (SFAP) 1-888-354-0595

One of the ways the county has sought to address the behavioral health needs of our students and their families at our area schools over this past year is by establishing a Student and Family Assistance Program (SFAP) as a hotline for students and their families. The hotline is a toll-free, 24 hour/7 days a week phone line that offers a confidential, short-term, counseling service created to provide assistance for students and their families struggling with any issues causing stress or anxiety in their lives. This hotline was run previously by a private firm and has as of December 1<sup>st</sup>, 2022, been transferred to OnPoint (formerly Allegan County Community Mental Health).

Beginning December 1<sup>st</sup> to access the SFAP toll-free line, students and families should call 1-888-354-0595, reference Allegan County and the name of the school. Calls after business hours will be transferred to our after-hours line, where callers can identify themselves as calling on the hotline and be transferred to one of our behavioral health clinicians.



Another tool OnPoint can offer as a behavioral health resource is a web and mobile based app called my Strength. my Strength offers personalized tools to help you improve your mood and help you overcome any challenges you face. It is a safe and secure platform available to you free of charge through OnPoint.

Please promote these behavioral health resources to students & their families today!

### SIGN UP TODAY

1. Visit [www.mystrength.com](http://www.mystrength.com) and click on "Sign Up."
2. Enter the **Access Code** marked below.
3. Complete the myStrength sign-up process and personal profile.

**ALLEGAN**