

AGENDA

OnPoint Board
Tuesday, March 21, 2023
5:30 pm

County Services Building, 3283 122nd 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. Executive Committee Meeting (02.17.2023)
 - ii. Board Meeting (02.21.2023)
 - iii. Building Committee Meeting (02.21.2023)
 - iv. Finance Committee Meeting (02.21.2023)
 - v. Program Committee Meeting (02.21.2023)
6. Building Committee – Commissioner Gale Dugan
7. Program Committee – Alice Kelsey
8. Finance Committee Report – Beth Johnston
 - a. **Motion** – Approval of Voucher Disbursements February 2023
9. Recipient Rights Advisory Committee (Feb/May/Aug/Nov) – Glen Brookhouse
10. Chairperson’s/Executive Committee Report – Commissioner Gale Dugan
 - a. Board Conflict of Interest
 - b. Board Bylaws and Policies
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:

April 14, 2023 – 2:30 pm – Executive Committee

April 18, 2023 – 3:30 pm – Building Committee

April 18, 2023 – 4:00 pm – Finance Committee

April 18, 2023 – 4:15 pm – Program Committee

April 18, 2023 – 5:30 pm – Full Board

OnPoint
Building Committee
March 21, 2023 – 3:30 pm
Location: OnPoint, 3282-122nd Street, Allegan, MI 49010

Board Members: [] Gale Dugan [] Mark DeYoung [] Beth Johnston [] John Weerstra
Staff Members: [] Nan Lawrence [] Erinn Trask [] Mark Witte

Proposed Agenda:

1. Review/Approval of Agenda
2. Review/Approval of Prior Minutes
3. Construction Report
4. Financial Report
5. Other
6. Next Meeting Date
7. Adjournment

OnPoint
Building Committee Minutes DRAFT
February 21, 2023 – 3:30 pm
Location: OnPoint, 3282-122nd Street, Allegan, MI 49010

Board Members: Gale Dugan Mark DeYoung Beth Johnston John Weerstra
Staff Members: Nan Lawrence Erinn Trask Mark Witte

1. John Weerstra was excused to attend the Recipient Rights Advisory Committee today.
2. **Review/Approval of Agenda** – Reviewed. Moved by Beth Johnston, seconded by Commissioner DeYoung, to approve the agenda as presented. All in favor. Adopted. Agenda approved.
3. **Review/Approval of Prior Minutes** – Reviewed. Moved by Commissioner DeYoung, seconded by Beth Johnston, to approve the agenda as presented. All in favor. Adopted. Minutes approved.
4. **Construction Report** – Passed out pictures. Verbal report. Finishes continue. Wallpaper, paint, flooring. Cleaning next. March 1 Haworth coming. Reviewed notes from 3/16 construction meeting. Gale reported on status of orders for 4x6 flags (US & MI) on a 9-foot staff. Delivery in a couple of weeks. Will look into ceremonies for installing flags (MW).
5. **Financial Report** – Erinn reported on 12th draw request for about 379,000. Change Order 14 for downspouts processed. Operational funds for smaller needs to be used. No significant changes from last time. We won't have to purchase additional phones, saving an additional \$6,250.
6. **Other** – Gavel was made/completed by George Washburn, former Otsego cabinet factory owner.
7. **Next Meeting Date** – Tuesday, March 21, 2023 at 3:30 pm.
8. **Adjournment** – Motion by Beth Johnston, seconded by Commissioner DeYoung, to adjourn the meeting. All in favor. Adopted. Meeting adjourned.

Submitted by Mark Witte

AGENDA

OnPoint Finance Committee March 21, 2023

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

County Services Building, 3283 122nd 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 February 2023
7. Informational Items
 - a. January 2023 Financial Reports
 - b. LRE Bucket Report and FSR
8. Finance Committee Member Comments
9. Public Comment – Any Topic, Subject to 5-Minute Limit Per Person
10. Adjournment until next meeting: April 18, 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
February 21, 2023 – 4:00 pm
Location: County Services Building in the Nederveld Room

Board Members Present: Glen Brookhouse, Mark DeYoung, Beth Johnston, Gale Dugan, Karen Stratton, John Weerstra,

Board Members Absent: None

Staff Members: Mark Witte, Nikki McLaughlin, Nan Lawrence

Public Present: None

- **Call to Order** – Beth Johnston, Chairperson, called the meeting to order at 4:01 pm.

- **Public Comment** – None

- **Approval of Agenda**

Moved: Mr. Dugan

Supported: Mr. Brookhouse

Motion carried.

Approval of Minutes

Moved: Mr. Brookhouse

Supported: Mr. Weerstra

Motion carried.

- **Review of Written Reports:**

- Administrative Services Report

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

- Facilities & Human Resources

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

- **Action Items:**

- The Finance Committee recommends that the OnPoint Board approve the January 2023 disbursements totaling \$4,108,579.12.

Moved: Mr. Weerstra

Supported: Ms. Stratton

Motion carried.

The Finance Committee recommends that the OnPoint Board approve the following list of provider contracts for fiscal year 2023. Sacred Heart Rehabilitation Center, LLC

Moved: Mr. Weerstra

Supported: Ms. Stratton

Motion carried.

- **Informational Items**

- December 2022 Financial Reports reviewed with Administrative Report.

- **Finance Committee Member Comments**

Mr. Dugan appreciated Ms. Trask sharing the LRE Combined FSR Summary report. Ms. Johnston feels that the all CMHds should offer parity of services. Concerned about the inequity in spending amongst CMH's within the region.

- **Public Comment**

None

- **Next Meeting** – March 21, 2023 at 4:00 pm.

- **Adjournment**

Moved: Mr. Dugan

Supported: Mr. Brookhouse

Motion carried.

Meeting adjourned at 4:53 pm.



Administrative Services Board Report March 2023

Submitted by Erinn A. Trask, CPA, former Interim Chief Financial Officer
269.303.8945 – ETrask@OnPointAllegan.org

Construction on the building project is expected to be completed in early spring. We are processing the twelfth construction draw totaling \$405,021.41, which will be funded through the United States Department of Agriculture (USDA) loan and Michigan Economic Development Corporation (MEDC) grant. We have no new change orders. We continue to meet with Cornerstone Construction and Schley Nelson Architects to review change orders, requests for information, and project status.

This month's packet includes the monthly financial report for January 2023. This is the fourth 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 \$772,000 (MH Medicaid and SUD Medicaid combined) to the LRE and carry forward/lapse approximately \$179,000 in General Funds back to MDHHS.

As of December 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. Explanations for significant variances are as follows:

- 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.
- 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. Additionally, there are several charts comparing the revenue and expense by funding category for each month of this fiscal year. Finally, there are key indicators tables showing summary service data for each month of the fiscal year to date.

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 December monthly report. We are in the process of wrapping up the fiscal year 2022 financial audit, which will allow us to finalize those totals. A copy of the issued audit report will be included in the April board packet, and the auditors will be present the results to the Board.



OnPoint's new Chief Financial Officer, Andre Pierre Jr., has been with the agency for a month. We have been working together to begin training and transition responsibilities. Due to the complex nature of Community Mental Health Service Program (CMHSP) finances and reporting requirements, I will continue to work with Andre over the next several months and support him as he continues to step into this role. On the items we are working on together, is reviewing the agency's annual budget and updating our projected expenses through the end of the year. We anticipate bringing a budget amendment to the Board in April for review and approval.

Sincerely,

Erinn A. Trask, former Interim Chief Financial Officer
Tuesday, March 14, 2022

OnPoint

Human Resources Board Report ~ March 2023

Submitted by Nan Lawrence
269-673-6617, ext. 2731; nlawrence@onpointallegan.org

NEW HIRES

| Last Name | First Name | Position | Date of Hire |
|-----------|------------|--------------------------------|--------------|
| Lugo | Mahana | IMH Consultant | 2/21/23 |
| Kramer | Mallory | Self Determination Coordinator | 2/21/23 |
| DeMann | Tara | Secretary | 3/13/23 |
| Hall | Denise | SUD Clinician | 3/13/23 |
| Troutman | Nichole | SUD Peer Recovery Coach | 3/20/23 |

SEPARATIONS

| Last Name | First Name | Position | Date of Separation |
|-----------|------------|----------------------|--------------------|
| Veldman | Jeff | Nurse Practitioner | 2/21/23 |
| Chapuran | Robert | Outpatient Clinician | 3/31/23 |

CURRENT OPEN POSTIONS

| Position | Department | Current Status |
|--------------------------------|---|-----------------|
| Adult Case Manager | Community Based Services | Making an Offer |
| Adult Outpatient Supervisor | Outpatient Services | Open |
| Children's Services Supervisor | Children's Home Based/Outpatient Services | Making an Offer |
| Crisis Clinician | Crisis Services | Open |
| Health Data Project Manager | Quality Improvement | Interviewing |
| Psychiatric Provider | Medical Clinic | Open |

Employee Engagement Committee: The Committee met last week to finalize the charter and 2023 events. We will be sharing these items at the March All Staff meeting. The "Hot Cocoa Bar" was a huge success.

Building: HR continues to work on several different aspects of the building.

1. Move Prep – meeting with last vendor this week. Hoping to select a moving company within the week.
2. Developing a moving plan for staff – meeting with Leadership on 3/16/23 to discuss the plan.
3. Furniture – the furniture is looking great! All furniture should be installed and/or delivered by the end of March.
4. Custodial Services – looking for vendors to clean the new building.



| | | | |
|---|------------------------|--|----------------|
| Full Board ACTION REQUEST | Subject: | Voucher Disbursements | |
| | Meeting Date: | March 21, 2023 | |
| | Requested By: | Beth Johnston, Finance Committee Chairperson | |
| <u>RECOMMENDED MOTION:</u> | | | |
| <u>The Finance Committee recommends that the OnPoint Board approve the February 2023 disbursements totaling \$3,620,926.01.</u> | | | |
| <u>SUMMARY OF REQUEST/INFORMATION:</u> | | | |
| <u>Date Issued:</u> | <u>Voucher Number:</u> | <u>Type:</u> | <u>Amount:</u> |
| February 3, 2023 | P1691 | Payroll | \$418,499.25 |
| February 6, 2023 | N/A | Loan Payment | \$21,334.00 |
| February 15, 2023 | V0899 | Vendor | \$1,659,464.47 |
| February 17, 2023 | P1692 | Payroll | \$410,587.64 |
| February 23, 2023 | V0900 | Construction | \$309,375.64 |
| February 28, 2023 | V0901 | Vendor | \$801,665.01 |
| <u>BUDGET/FINANCIAL IMPACT</u> | | | |
| <ul style="list-style-type: none"> • These disbursements are part of the approved fiscal year 2023 operating budget for OnPoint. | | | |
| BY: Erinn Trask, former Interim Chief Financial Officer | | DATE: March 14, 2023 | |

ONPOINT



Period Ended
January 31, 2023

Monthly Finance
Report

ONPOINT

Summary Schedule of Revenues and Expenses by Fund Source

October 1, 2022 through January 31, 2023

| Mental Health Services | Medicaid | Autism | Healthy MI Plan | Medicaid Combined | General Fund |
|--------------------------------------|---------------------|-------------------|---------------------|-------------------|-------------------|
| Revenue | \$ 8,127,435 | \$ 1,340,039 | \$ 956,111 | \$ 10,423,585 | \$ 569,245 |
| Expense | 8,326,464 | 608,242 | 1,074,210 | 10,008,916 | 389,781 |
| Revenue over/(under) expenses | \$ (199,029) | \$ 731,797 | \$ (118,099) | \$ 414,669 | \$ 179,464 |

| Substance Use Disorder Services | Medicaid | Healthy MI Plan | Medicaid Combined | SUD Block Grant | Public Act 2 |
|--------------------------------------|-------------------|-------------------|-------------------|-----------------|--------------|
| Revenue | \$ 250,965 | \$ 500,850 | \$ 751,815 | \$ 81,675 | \$ - |
| Expense | 138,439 | 255,659 | 394,098 | 81,675 | - |
| Revenue over/(under) expenses | \$ 112,526 | \$ 245,191 | \$ 357,717 | \$ - | \$ - |

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 January 31, 2023

Percent of Year is 33.33%

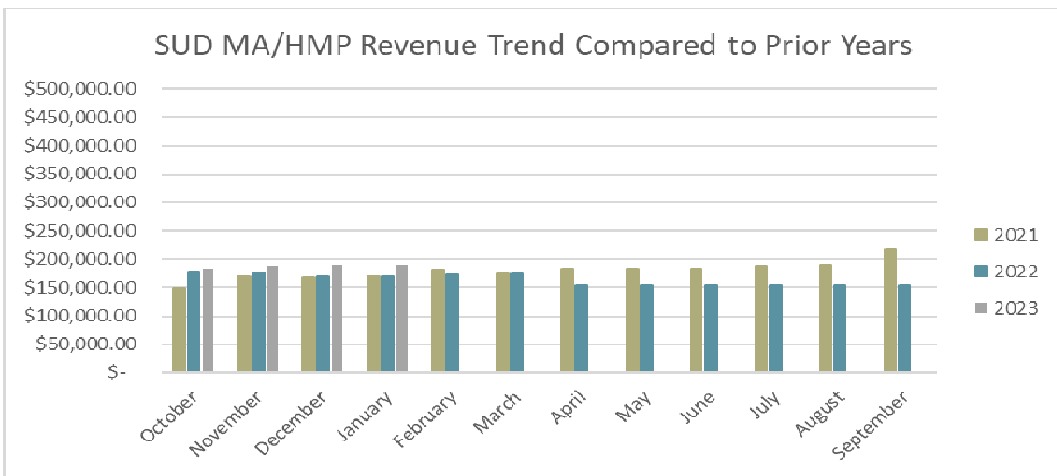
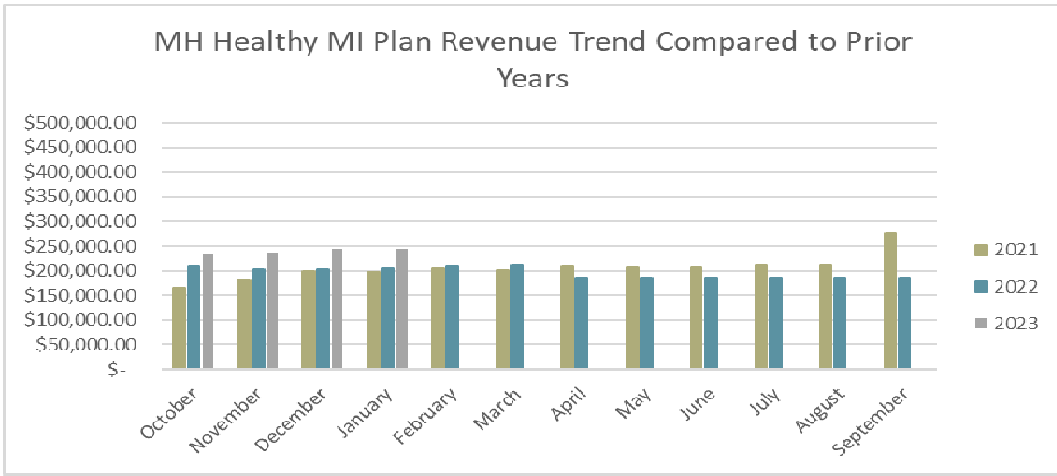
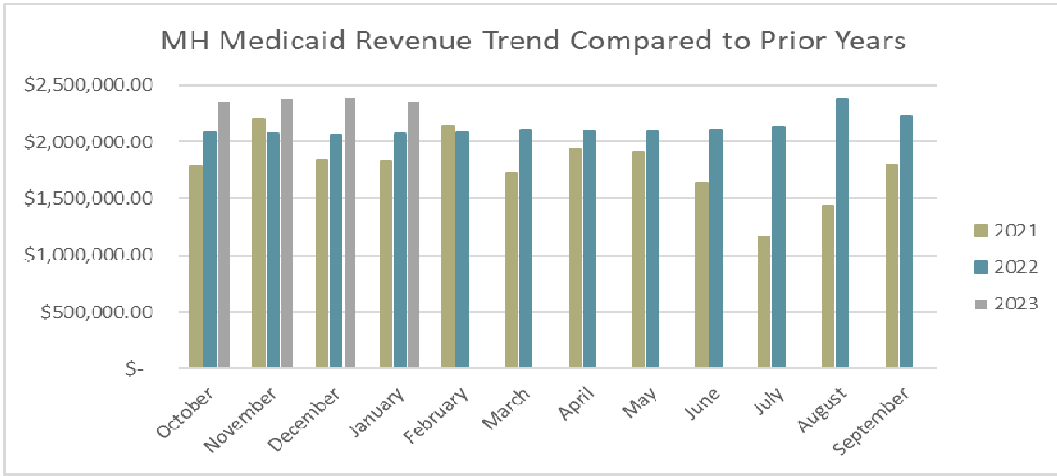
| | Total FY 2023 Budget | YTD Totals 1/31/23 | Under/(Over) Budget | Percent of Budget - YTD |
|----------------------------------|-------------------------|-----------------------|------------------------|----------------------------|
| Operating revenue | | | | |
| Medicaid: | | | | |
| Traditional Capitation | \$ 25,193,969 | \$ 8,127,435 | \$ 17,066,534 | 32.26% |
| Traditional Capitation-Autism | 3,937,779 | 1,340,039 | 2,597,740 | 34.03% |
| Traditional Settlement | (619,666) | (532,768) | (86,898) | |
| Healthy Michigan Capitation | 2,697,512 | 956,111 | 1,741,401 | 35.44% |
| Healthy Michigan Settlement | (274,727) | 118,099 | (392,826) | |
| Substance use disorder revenue: | | | | |
| Traditional Capitation | 730,726 | 250,965 | 479,761 | 34.34% |
| Traditional Settlement | (465,390) | (112,526) | (352,864) | |
| Healthy Michigan Capitation | 1,541,824 | 500,850 | 1,040,974 | 32.48% |
| Healthy Michigan Settlement | (983,316) | (245,191) | (738,125) | |
| State General Fund: | | | | |
| Formula Fundings | 1,707,737 | 569,245 | 1,138,492 | 33.33% |
| Settlement | (110,377) | (179,464) | 69,087 | |
| Grants and earned contracts | 5,109,145 | 1,235,255 | 3,873,890 | 24.18% |
| Local funding | 346,095 | 115,365 | 230,730 | 33.33% |
| Other reimbursements and revenue | 268,262 | 120,140 | 148,122 | 44.78% |
| Total operating revenue | \$ 39,079,574 | \$ 12,263,555 | \$ 26,816,019 | 31.38% |
| Operating expenses | | | | |
| Salaries and wages | \$ 11,496,279 | \$ 3,116,762 | \$ 8,379,517 | 27.11% |
| Fringe benefits | 3,818,274 | 1,106,305 | 2,711,969 | 28.97% |
| Supplies and materials | 409,807 | 65,013 | 344,794 | 15.86% |
| Provider Network services | 20,980,022 | 6,906,026 | 14,073,996 | 32.92% |
| Contractual Services | 1,642,209 | 851,722 | 790,487 | 51.86% |
| Professional development | 98,941 | 32,328 | 66,613 | 32.67% |
| Occupancy | 186,154 | 28,590 | 157,564 | 15.36% |
| Miscellaneous expenses | 356,194 | 92,289 | 263,905 | 25.91% |
| Depreciation | 14,423 | 8,215 | 6,208 | 56.96% |
| Total operating expenses | \$ 39,002,303 | \$ 12,207,250 | \$ 26,795,053 | 31.30% |
| Change in net position | 77,271 | 56,305 | \$ 20,966 | |

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ONPOINT

Key Indicators

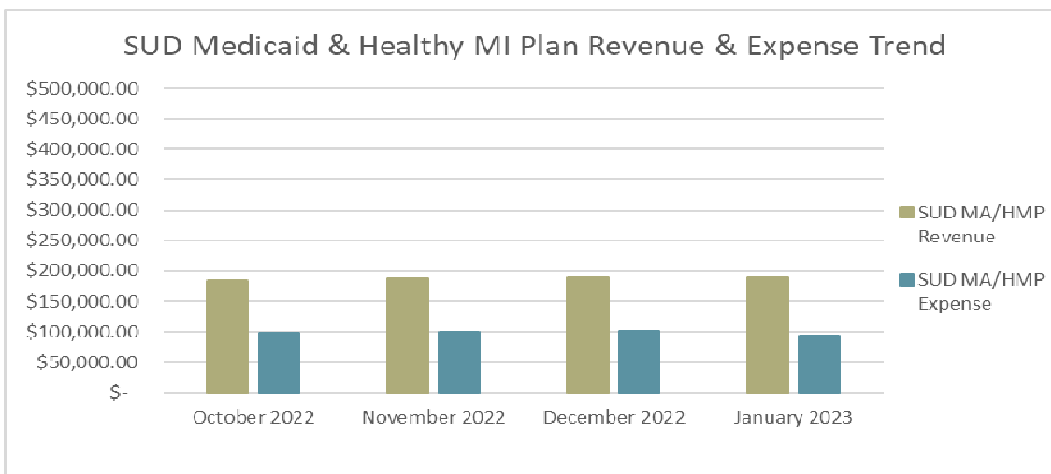
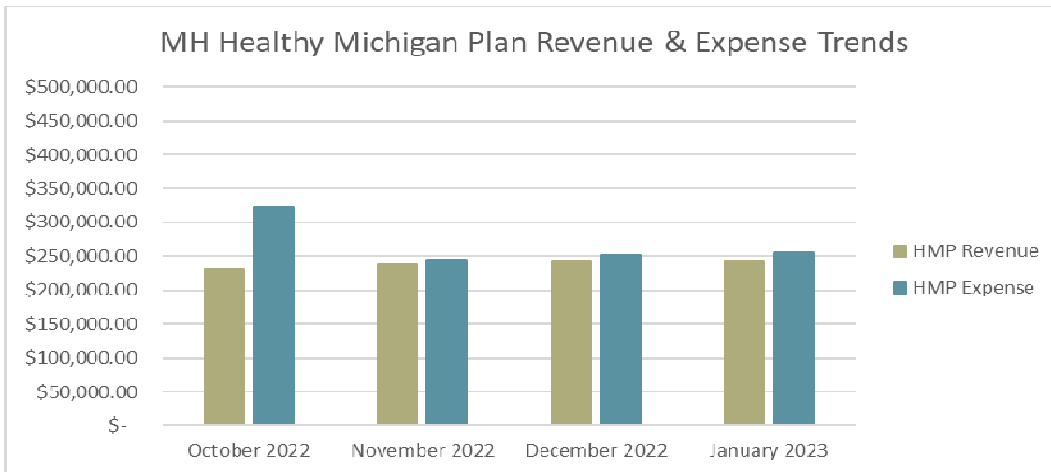
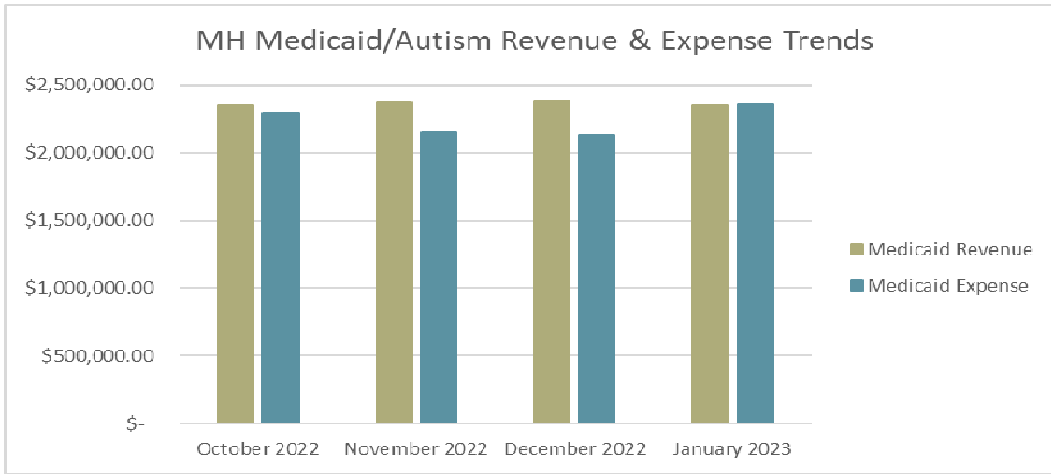
January 31, 2023



ONPOINT

Key Indicators

January 31, 2023



ONPOINT

Key Indicators

January 31, 2023

| Internal Program Name | October 2022 | | | |
|-----------------------|------------------------|--------------------------|--------------------------|-------------------------|
| | Total Cost of Services | Number of Clients Served | Total Minutes of Service | Average Cost per Client |
| Career Concepts | \$ 6,229 | 10 | 330 | \$ 623 |
| Case Management | \$ 244,456 | 415 | 19,012 | \$ 589 |
| Outpatient Therapy | \$ 243,309 | 244 | 22,121 | \$ 997 |
| Occupational Therapy | \$ 11,732 | 11 | 787 | \$ 1,067 |
| ACT Program | \$ 42,747 | 32 | 3,569 | \$ 1,336 |
| Home Based Services | \$ 86,770 | 54 | 8,786 | \$ 1,607 |
| Med Clinic Services | \$ 114,685 | 213 | 10,698 | \$ 538 |
| CCBHC Program | \$ 94,263 | 167 | 21,522 | \$ 564 |
| SUD Services | \$ 45,235 | 26 | 5,342 | \$ 1,740 |
| Grand Total | \$ 889,426 | 902 | 92,167 | \$ 986 |

| Internal Program Name | November 2022 | | | |
|-----------------------|------------------------|--------------------------|--------------------------|-------------------------|
| | Total Cost of Services | Number of Clients Served | Total Minutes of Service | Average Cost per Client |
| Career Concepts | \$ 20,743 | 12 | 1,099 | \$ 1,729 |
| Case Management | \$ 244,693 | 450 | 19,584 | \$ 544 |
| Outpatient Therapy | \$ 228,466 | 256 | 23,486 | \$ 892 |
| Occupational Therapy | \$ 11,891 | 10 | 685 | \$ 1,189 |
| ACT Program | \$ 50,601 | 32 | 4,388 | \$ 1,581 |
| Home Based Services | \$ 91,212 | 51 | 9,189 | \$ 1,788 |
| Med Clinic Services | \$ 93,033 | 187 | 9,253 | \$ 498 |
| CCBHC Program | \$ 85,728 | 169 | 21,040 | \$ 507 |
| SUD Services | \$ 54,143 | 28 | 6,352 | \$ 1,934 |
| Grand Total | \$ 880,510 | 923 | 95,076 | \$ 954 |

| Internal Program Name | December 2022 | | | |
|-----------------------|------------------------|--------------------------|--------------------------|-------------------------|
| | Total Cost of Services | Number of Clients Served | Total Minutes of Service | Average Cost per Client |
| Career Concepts | \$ 5,719 | 10 | 303 | \$ 572 |
| Case Management | \$ 246,292 | 403 | 19,431 | \$ 611 |
| Outpatient Therapy | \$ 162,889 | 237 | 18,161 | \$ 687 |
| Occupational Therapy | \$ 20,921 | 14 | 1,070 | \$ 1,494 |
| ACT Program | \$ 52,229 | 31 | 4,468 | \$ 1,685 |
| Home Based Services | \$ 61,608 | 47 | 6,123 | \$ 1,311 |
| Med Clinic Services | \$ 52,281 | 163 | 5,757 | \$ 321 |
| CCBHC Program | \$ 58,844 | 171 | 16,355 | \$ 344 |
| SUD Services | \$ 43,396 | 38 | 4,739 | \$ 1,142 |
| Grand Total | \$ 698,538 | 873 | 68,532 | \$ 800 |

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ONPOINT

Key Indicators

January 31, 2023

| Internal Program Name | January 2023 | | | |
|-----------------------|------------------------|--------------------------|--------------------------|-------------------------|
| | Total Cost of Services | Number of Clients Served | Total Minutes of Service | Average Cost per Client |
| Career Concepts | \$ 8,036 | 4 | 450 | \$ 2,009 |
| Case Management | \$ 325,600 | 511 | 26,283 | \$ 637 |
| Outpatient Therapy | \$ 256,683 | 274 | 18,118 | \$ 937 |
| Occupational Therapy | \$ 45,773 | 25 | 2,389 | \$ 1,831 |
| ACT Program | \$ 58,027 | 32 | 5,026 | \$ 1,813 |
| Home Based Services | \$ 87,928 | 48 | 8,799 | \$ 1,832 |
| Med Clinic Services | \$ 54,172 | 231 | 7,094 | \$ 235 |
| CCBHC Program | \$ 33,921 | 179 | 13,603 | \$ 190 |
| SUD Services | \$ 42,780 | 44 | 5,232 | \$ 972 |
| Grand Total | \$ 912,920 | 1,030 | 86,994 | \$ 886 |

Lakeshore Regional Entity Combined Monthly FSR Summary
 FY 2023
 December 2022 Reporting Month
 Reporting Date: 2/15/2023

| ACTUAL: | HealthWest | Network180 | OnPoint | Ottawa | West Michigan | LRE | Total |
|--|---|---|---|---|--|-------------------------------------|--------------------|
| Distributed Medicaid/HMP Revenue | | | | | | | |
| Medicaid | 11,804,893 | 33,218,845 | 6,321,867 | 9,381,911 | 3,773,910 | 1,059,647 | 65,561,072 |
| Autism | 2,311,403 | 5,661,607 | 1,004,980 | 1,650,630 | 665,345 | 127,688 | 11,421,652 |
| Healthy Michigan | 1,985,765 | 7,279,741 | 1,086,968 | 2,026,187 | 619,772 | 162,890 | 13,161,323 |
| Total Distributed Medicaid/HMP Revenue | 16,102,061 | 46,160,193 | 8,413,815 | 13,058,728 | 5,059,027 | 1,350,225 | 90,144,048 |
| Capitated Expense | | | | | | | |
| Medicaid | 8,553,659 | 35,398,742 | 6,256,173 | 6,521,318 | 3,938,743 | 1,059,647 | 61,728,281 |
| Autism | 453,374 | 5,376,242 | 431,050 | 867,191 | 182,767 | 127,688 | 7,438,312 |
| Healthy Michigan | 1,487,126 | 5,754,275 | 1,058,542 | 666,998 | 359,103 | 162,890 | 9,488,934 |
| Total Capitated Expense | 10,494,159 | 46,529,259 | 7,745,765 | 8,055,507 | 4,480,613 | 1,350,225 | 78,655,528 |
| Actual Surplus (Deficit) | 5,607,901 | (369,066) | 668,050 | 5,003,221 | 578,414 | - | 11,488,520 |
| % Variance | 34.83% | -0.80% | 7.94% | 38.31% | 11.43% | 0.00% | |
| Information regarding Actual (Threshold: Surplus of 5% and deficit of 1%) | The 3% increase, per the spending plan, does not go into effect until January 1st. HW is anticipating some provider stability payments for the first quarter of the fiscal year. HW also has not budgeted the use of their surplus funds yet; which will occur in 60 days due to a change in | N180 calculates capitated expenses using actual claims submitted at the time of FSR prep + an estimate for IBNR based on experience. YTD, N180 expects a receivable from the LRE to cover the difference. | Actual based on known expenses, plus IBNR for provider network claims, as of date of submission. | 1st quarter claims processing focused more on FY22 payables. 3% Increase effective in January. A couple big 1/1/23 contracts. | Expenditures are under budget due to the delay in hiring for vacant positions. May need to be adjusted based on CCBHC. | Less than threshold for explanation | |
| PROJECTION: | | | | | | | |
| LRE Revenue Projections as of: | | | | | | | |
| December | | | | | | | |
| Medicaid | 50,575,186 | 138,761,817 | 26,188,256 | 39,350,554 | 15,657,274 | 14,747,398 | 285,280,484 |
| Autism | 8,931,905 | 21,827,673 | 3,892,353 | 6,375,027 | 2,549,985 | 1,772,313 | 45,349,256 |
| Healthy Michigan | 9,835,879 | 29,165,058 | 4,361,894 | 8,147,970 | 2,460,938 | 2,353,762 | 56,325,500 |
| Total Projected Medicaid/HMP Revenue | 69,342,970 | 189,754,548 | 34,442,502 | 53,873,550 | 20,668,197 | 18,873,472 | 386,955,239 |
| | (0) | - | - | - | - | - | - |
| Expense Projections | | | | | | | |
| Medicaid | 52,832,547 | 144,235,853 | 28,190,094 | 39,188,982 | 16,399,959 | 14,747,398 | 295,594,833 |
| Autism | 2,409,549 | 21,988,828 | 2,123,161 | 6,016,974 | 1,213,176 | 1,772,313 | 35,524,001 |
| Healthy Michigan | 8,177,941 | 24,034,986 | 3,763,373 | 7,489,239 | 1,359,177 | 2,353,762 | 47,178,477 |
| Total Capitated Expense Projections | 63,420,037 | 190,259,667 | 34,076,628 | 52,695,195 | 18,972,312 | 18,873,472 | 378,297,312 |
| Projected Surplus (Deficit) | 5,922,933 | (505,119) | 365,874 | 1,178,355 | 1,695,885 | - | 8,657,928 |
| % Variance | 8.54% | -0.27% | 1.06% | 2.19% | 8.21% | 0.00% | |
| Information regarding Projections (Threshold: Surplus of 5% and deficit of 1%) | The 3% increase, per the spending plan, does not go into effect until January 1st and is not yet included in the projected expenses. HW is anticipating some provider stability payments for the first quarter of the fiscal year but that is not yet included in the projected expenses. HW also has not budgeted the use of their surplus funds yet; which will occur in 60 days due to a change in leadership. | Less than threshold for explanation | Expense projections have been updated based on expected utilization changes, all known rate increases (i.e. SUD rates effective 1/1/23, H0020 rate increase, Autism increases), and projected staffing and pay grade changes. | Less than threshold for explanation | Three months into the fiscal year, WM's expenditure projection is based on the spending plan. Projection information will be updated as we move further into the fiscal year. WM has added 5 new FTEs to support operational needs currently not built into the projection. SUD Contract rate increases 1/1/23. MH provider rate increases effective 2/1/23. | Less than threshold for explanation | |
| PROPOSED SPENDING PLAN: | | | | | | | |
| Submitted to the LRE as of: | | | | | | | |
| 12/8/2022 | | | | | | | |
| Medicaid/HMP Revenue | | | | | | | |
| Medicaid | 50,592,580 | 138,477,148 | 26,226,787 | 39,308,314 | 15,685,856 | 14,637,966 | 284,928,652 |
| Autism | 8,877,222 | 21,807,343 | 3,848,342 | 6,357,597 | 2,567,623 | 1,962,200 | 45,420,327 |
| Healthy Michigan | 9,801,631 | 28,885,568 | 4,320,883 | 8,034,599 | 2,412,467 | 2,239,706 | 55,694,855 |
| Total Budgeted Medicaid/HMP Revenue | 69,271,433 | 189,170,059 | 34,396,012 | 53,700,511 | 20,665,946 | 18,839,873 | 386,043,834 |
| Capitated Expense | | | | | | | |
| Medicaid | 52,832,547 | 136,680,342 | 26,869,897 | 39,188,982 | 16,524,118 | 14,637,966 | 286,733,852 |
| Autism | 2,409,949 | 22,686,387 | 1,961,305 | 6,016,974 | 1,213,176 | 1,962,200 | 36,249,991 |
| Healthy Michigan | 8,177,941 | 27,916,973 | 3,063,222 | 7,489,239 | 1,403,241 | 2,239,706 | 50,290,323 |
| Total Budgeted Capitated Expense | 63,420,437 | 187,283,702 | 31,894,424 | 52,695,195 | 19,140,535 | 18,839,873 | 373,274,165 |
| Budgeted Surplus (Deficit) | 5,850,996 | 1,886,358 | 2,501,588 | 1,005,316 | 1,525,411 | - | 12,769,668 |
| % Variance | 8.45% | 1.00% | 7.27% | 1.87% | 7.38% | 0.00% | |
| Information regarding Spending Plans (Threshold: Surplus of 5% and deficit of 1%) | Due to change in leadership, HealthWest has postponed an update to the spending plan for 60 days. | Spending Plan expenses match N180 FY23 Board Approved Budget on 9/19/22, plus increase for H0020 to \$19 per unit and 3% SUD Rate increase | Matches OnPoint board approved budget, plus increase for H0020 to \$19 per unit and 3% SUD Rate increase | Less than threshold for explanation | Typically matches WM board approved budget unless significant changes, changes due to CCBHC haven't been WM board approved yet. | Less than threshold for explanation | |
| Variance between Projected and Proposed Spending Plan | 71,937 | (2,391,477) | (2,135,714) | 173,039 | 170,474 | - | (4,111,741) |
| % Variance | 0.10% | -1.26% | -6.21% | 0.32% | 0.82% | 0.00% | |
| Explanation of variances between Projected and Proposed Spending Plan (Threshold: Surplus of 5% and deficit of 1%) | Less than threshold for explanation | Projection matches LRE revenue projection, which was finalized after the N180 Board approved budget | Spending Plan matches OnPoint Board approved budget. | Less than threshold for explanation | State change for MAT rate changes. | Less than threshold for explanation | |

Lakeshore Regional Entity Combined Monthly FSR Summary
 FY 2023
 December 2022 Reporting Month
 Reporting Date: 2/15/2023

| CCBHC ACTIVITY | | | | | | | |
|--|---|------------|------------|-----------|---|----------|-------------------|
| ACTUAL: | HealthWest | Network180 | OnPoint | Ottawa | West Michigan | LRE | Total |
| Distributed Medicaid/HMP CCBHC Revenue | | | | | | | |
| Medicaid CCBHC Base Capitation | 2,525,589 | | | | 1,099,042 | | 3,624,631 |
| Medicaid CCBHC Supplemental | 1,010,452 | | | | 1,315,014 | | 2,325,466 |
| Healthy Michigan CCBHC Base Capitation | 607,241 | | | | 396,597 | | 1,003,837 |
| Healthy Michigan CCBHC Supplemental | 307,411 | | | | 479,420 | | 786,831 |
| Total Distributed Medicaid/HMP CCBHC Revenue | 4,450,692 | - | - | - | 3,290,073 | - | 7,740,765 |
| Capitated CCBHC Expense | | | | | | | |
| Medicaid CCBHC | 3,536,041 | | | | 2,375,536 | | 5,911,577 |
| Healthy Michigan CCBHC | 914,652 | | | | 870,796 | | 1,785,448 |
| Total Capitated CCBHC Expense | 4,450,692 | - | - | - | 3,246,332 | - | 7,697,024 |
| Actual CCBHC Surplus (Deficit) | - | - | - | - | 43,741 | - | 43,741 |
| % Variance | 0.00% | | | | 1.33% | | |
| Information regarding CCBHC Actual (Threshold: Surplus of 5% and deficit of 1%) | Less than threshold for explanation | | | | Less than threshold for explanation | | |
| PROJECTION: | HealthWest | Network180 | OnPoint | Ottawa | West Michigan | LRE | Total |
| LRE CCBHC Revenue Projections * | | | | | | | |
| Medicaid CCBHC Base Capitation | 9,235,815 | | | | 4,802,256 | | 14,038,070 |
| Medicaid CCBHC Supplemental | 4,547,160 | | | | 5,080,846 | | 9,628,006 |
| Healthy Michigan CCBHC Base Capitation | 1,746,766 | | | | 1,610,877 | | 3,357,643 |
| Healthy Michigan CCBHC Supplemental | 1,467,538 | | | | 1,925,039 | | 3,392,576 |
| Total Projected Medicaid/HMP CCBHC Revenue | 16,997,279 | - | - | - | 13,419,017 | - | 30,416,296 |
| Capitated CCBHC Expense Projections | | | | | | | |
| Medicaid CCBHC | 14,144,163 | | | | 9,502,144 | | 23,646,307 |
| Healthy Michigan CCBHC | 3,658,607 | | | | 3,483,184 | | 7,141,791 |
| Total Capitated CCBHC Expense Projections | 17,802,770 | - | - | - | 12,985,328 | - | 30,788,098 |
| Projected CCBHC Surplus (Deficit) | (805,491) | - | - | - | 433,689 | - | (371,802) |
| % Variance | -4.74% | | | | 3.23% | | |
| Information regarding CCBHC Projections (Threshold: Surplus of 5% and deficit of 1%) | Revenue Projections are based on the State's FY22 Rate Certification Letter. After FY22 Cost Settlement, it will be determined if updated projections are needed. | | | | Less than threshold for explanation | | |
| PROPOSED SPENDING PLAN: | HealthWest | Network180 | OnPoint | Ottawa | West Michigan | LRE | Total |
| Submitted to the LRE as of: | 12/8/2022 | 8/6/2022 | 10/18/2022 | 12/6/2022 | 12/6/2022 | | |
| Medicaid/HMP Revenue | | | | | | | |
| Medicaid CCBHC Base Capitation | 9,235,815 | | | | 4,802,256 | | 14,038,070 |
| Medicaid CCBHC Supplemental | 4,547,160 | | | | 5,080,846 | | 9,628,006 |
| Healthy Michigan CCBHC Base Capitation | 1,746,766 | | | | 1,610,877 | | 3,357,643 |
| Healthy Michigan CCBHC Supplemental | 1,467,538 | | | | 1,925,039 | | 3,392,576 |
| Total Budgeted Medicaid/HMP CCBHC Revenue | 16,997,279 | - | - | - | 13,419,017 | - | 30,416,296 |
| Capitated Expense | | | | | | | |
| Medicaid CCBHC | 13,782,975 | | | | 9,883,101 | | 23,666,076 |
| Healthy Michigan CCBHC | 3,214,304 | | | | 3,535,916 | | 6,750,220 |
| Total Budgeted Capitated CCBHC Expense | 16,997,279 | - | - | - | 13,419,017 | - | 30,416,296 |
| Budgeted Surplus (Deficit) | - | - | - | - | - | - | - |
| % Variance | 0.00% | | | | 0.00% | | |
| Information regarding CCBHC Spending Plans (Threshold: Surplus of 5% and deficit of 1%) | Less than threshold for explanation | | | | Less than threshold for explanation | | |
| Variance between CCBHC Projected and Proposed Spending Plan | 805,491 | - | - | - | (433,689) | - | (371,802) |
| % Variance | 4.74% | | | | -3.23% | | |
| Explanation of variances between CCBHC Projected and Proposed Spending Plan (Threshold: Surplus of 5% and deficit of 1%) | Revenue Projections are based on the State's FY22 Rate Certification Letter. After FY22 Cost Settlement, it will be determined if updated projections are needed. | | | | Revenue Projections are based on the State's FY22 Rate Certification Letter. After FY22 Cost Settlement, it will be determined if updated projections are needed. | | |

*CCBHC Projected Revenue is based on the State's projections in the FY22 Rate Certification Letter.

AGENDA

**OnPoint
Program Committee
Tuesday, March 21, 2023
4:15 pm**

County Services Building, 3283 122nd 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 – Alice Kelsey, 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: Access and Crisis/Mobile Crisis – Melissa Potvin & Dreka Payne
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 April 18, 2023

Program Committee: Alice Kelsey, Chair; Vacant, Vice Chair;
Kim Bartnick, Robin Klay, 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
February 21, 2023 – 4:15 pm**

Board Members Present: Alice Kelsey, Robin Klay and Emily Schwartz (virtual)

Board Members Absent: Kimberly Bartnick, and Amy Clugston

OnPoint Staff Present: John Eagle, Laura Furey, Geniene Gersh, Brenda Holquist, Leanne Kellogg, Cathy Potter and Lauren Tordaro

Others: None

1. Call to Order

Ms. Kelsey called the meeting to order at 4:19 pm.

2. Public Comment

None.

3. Approval of Agenda – tabled – no quorum

4. Approval of Minutes of January 17, 2023 – tabled – no quorum

6. Program Presentation – Adult Services

Mr. Eagle and Ms. Furey 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

Ms. Kelsey requests that next month's presentation be around SUD services.

8. Public Comment

None.

9. Adjournment

Meeting adjourned at 5:28 pm.

OnPoint Integrated Health and SUD Board Report

March 2023 BOARD REPORT

Submitted by: Leanne Kellogg, Chief Operating Officer, MS, BSN, RN,
269-673-6617 ext. 4868 email: lkelllogg@onpointallegan.org

Chief Operating Officer

We have successfully hired Susan Conrad as our new Director of Program Operations, congratulations to Susan! Susan is our current housing services supervisor and comes with many years of experience, systems knowledge and a passion to serve our communities and provide better outcomes for the individuals that we serve. We are excited to partner with her skill set and move change in a positive direction for all our programs. We will look to transition her in the coming weeks.

Continued preparations take place for our new building. Workflows, EMR changes, room capacity, identification of processes continue to be prioritized until we have successfully moved.

Support and preparation for strategic planning have also been prioritized in the month of February and March.

CCBHC (Certified Community Behavioral Health Clinic) Grant

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

- Efforts on continued use and implementation of data monitoring occurring throughout clinical program areas, more definition yet to come with ongoing dashboard efforts
 - Clarification on workflows and processes continue with clinical managers
- Identification and prioritization of reassessment NOMs collection
- Continued progress on efforts underway with Rubix for data supports to enhance reporting and auditing options, progress on some data elements for reporting
- Meeting set with MDHHS to explore sustainability conversations in late March

Ongoing project management efforts have also completed the following:

- Met all grant required deadlines:
 - Ongoing Grant Project Officer Meeting
 - Postponed until next month
- Quarterly narrative report is due at end of March, prioritization to complete this report will occur within the month

OnPoint Substance Use Disorder (SUD) Services March 2023 Board Report

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

Current OnPoint SUD Services Enrollment as of March 8, 2023:

| Program | Individuals Enrolled* |
|-------------------------------------|------------------------------|
| OnPoint SUD Services | 32 (+18.5%) |
| OnPoint Corrections – SUD Services* | 42 (+23.5%) |

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

Health Resources and Services Administration (HRSA) Medication-Assisted Treatment (MAT) Grant:

Recommitment to the submission of the 2022 RCORP-MAT occurred in late February. Currently, there is no announcement date provided by HRSA. This grant would support the renovation of the 540 Jenner Drive MAT Clinic identified space, as well as staffing and material cost support for MAT initiation at OnPoint. For further information, the Notice of Funding Opportunity can be viewed at the following link: <https://www.hrsa.gov/grants/find-funding/hrsa-22-165>

Jail-Based Medication-Assisted Treatment (MAT):

SUD Services is initiating the implementation of jail-based MAT for inmates within Allegan County Correctional Center (ACCC), with the support of Allegan County Correctional Center staff. Current status is as follows;

- 1) MAT medication trainings are scheduled, so ACCC medical staff are able receive clinical training on administration.
- 2) Policy and procedures for MAT administration are being created within ACCC for medication provision.

Ongoing updates will be provided as this project moves forward. This implementation follows the evidence-based model of MAT in corrections settings and will be supported by State Opioid Response Grant 3 (SOR 3).

Grand Rapids Red Project Mobile Unit:

The Grand Rapids Red Project Mobile Unit has been successful in implementation in downtown Allegan, located centrally in in the parking lot of River and Cutler. The Mobile Unit is currently under review for location, as a location that provides more privacy would be desired. For more information on the Grand Rapids Red Project Mobile Unit, please review the following website: <https://redproject.org/services/overdose-education/allegan-county/>

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

First Allegan County OFR Welcome and Introduction Meeting is scheduled for April 11th/12th with the first mock session occurring in early May. Overdose Fatality Review (OFR) teams are multidisciplinary and include individuals who can share information about a decedent or contribute to the analysis of available data to make recommendations that will prevent future overdose deaths. To receive the link and survey, or forward to a community member who could benefit from membership, please contact ltodaro@onpointallegan.org

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. As of March 1, 79 kits have been distributed within the community. Please contact Lauren at 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

Allegan County Substance Abuse Prevention Coalition (ASAP):

Save the date was sent out for an event on August 15th with a national drug trends presenter- "Tall Cop". This will be an in-person event hosted in Grand Rapids.

Prime for Life:

Adult: Next class is scheduled for May.

Youth: 11 youth completed the class in February from 4 middle and high schools. We continue to see an increase in youth using vape products containing THC in schools. This is the majority of our referrals.

Suicide Prevention Coalition:

Meeting was held March 1st. Sherrie Chase will be sending out the meeting minutes.

Covid funds: No update this month.

LARA funds: Application was approved by the state for funding of marijuana related education.

Stop act funds: Go Media is in the beginning stages of planning a spring campaign focused on safe celebrating for prom and graduation season.

SUD Services: Treatment Services

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

SUD Services Internal Staff Credentialing:

The 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: 22 staff

CADC Development Plan Approved: 1 staff

Total: 33 staff

SUD Services Internal Program Development:

At the time of writing this report, there are a total of 74 clients (42 Corrections-OnPoint SUD and 32 ACCMHS SUD Services) who have a primary diagnosis of a substance use disorder and who are enrolled in treatment at OnPoint. Overall, this is a 21.3% increase from last month.

The OnPoint SUD Intensive Outpatient Program (IOP) provides ASAM Level 2.1 Services to Allegan County. Currently, there are 6 clients who are participating in this program, which is a 100% increase since last month. The IOP runs three times weekly for 3 hours each group over 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 has 8 clients on his caseload, who were referred by Outpatient clinicians. This is a 14.2% increase from last month. 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 January, they referred 16 individuals for SUD services at OnPoint. At present, they have referred 55 individuals for SUD services at OnPoint since the end of September 2022. 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).

Outpatient Psychiatric Medical Clinic - Angel Hopkins, BSN, RN, Clinic Practice Manager

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.

- Rob Griffith our Community RN has begun services in the community for individuals and is working closely with the outpatient care team to identify individual needs to be assessed.
- Jeffrey Veldman. NP last day with OnPoint was February 21, 2023.
- Career posting for a fulltime psychiatric provider currently.
- We are contracting 16 hours for a psychiatric provider with IRIS Telehealth to help fill our appointment needs. Dr. Jamison began his training March 8 and 9th and will begin to see individuals starting March 15th.

CLINICAL SERVICES BOARD REPORT ~ March 2023

Geniene Gersh, PhD, Director of Evidence Based Services

Michigan Telehealth Data

In October of 2022, this Director reported that OnPoint participated in gathering data regarding the utilization of telehealth services provided since the beginning of the pandemic. The results demonstrated that OnPoint provided over 32,000 telehealth services from March 2020 through the 2022 fiscal year. In addition, the OnPoint Clinical team engaged staff requesting their input by encouraging them to share stories about the positive impact of providing telehealth services. These stories demonstrated that telehealth has been an effective method of providing care for individuals.

Earlier this month, this Director attended a webinar, *Behavioral Telehealth: Michigan Medicaid Experience*, presented by Robert Sheehan, CEO, of the Community Mental Health Association of Michigan. This presentation focused on the following areas regarding telehealth services: 1) telehealth utilization patterns; 2) perspectives of persons served who received telehealth services; and 3) the perspectives of clinicians providing telehealth services.

Regarding the perspectives of the person served, 75% of individuals reported said they used telehealth after the start of the COVID-19 pandemic. 59% of clients reported they used phone-based (audio-only) telehealth and 57% had used video-based telehealth. Additionally, 58% of people said they or a person in their care used telehealth services because telehealth is more convenient. Of the individuals surveyed, 76% said they would prefer to receive some behavioral health services via telehealth even if COVID-19 was not a factor. Most importantly, Consumer satisfaction with behavioral health telehealth services was reported as good, regardless of the services delivery method with either video or phone-based services.

Clinicians providing services to adults with mental illness, substance use disorders or children with a serious emotional disturbance reported providing more than half of those services via telehealth during the pandemic. In addition, 3/4 of mental health providers reported they plan to provide a mix of telehealth and face-to-face services after the COVID-19 pandemic. The most utilized telehealth methods were video conferencing and phone calls. Overall, providers reported feeling comfortable using telehealth and said they are knowledgeable about telehealth best practices. Lastly, clinicians reported they believe they can provide quality care to patients via telehealth, and that providing telehealth services is important to the success of their organization delivering care to patients.

Clinical Program Data for the Month of February

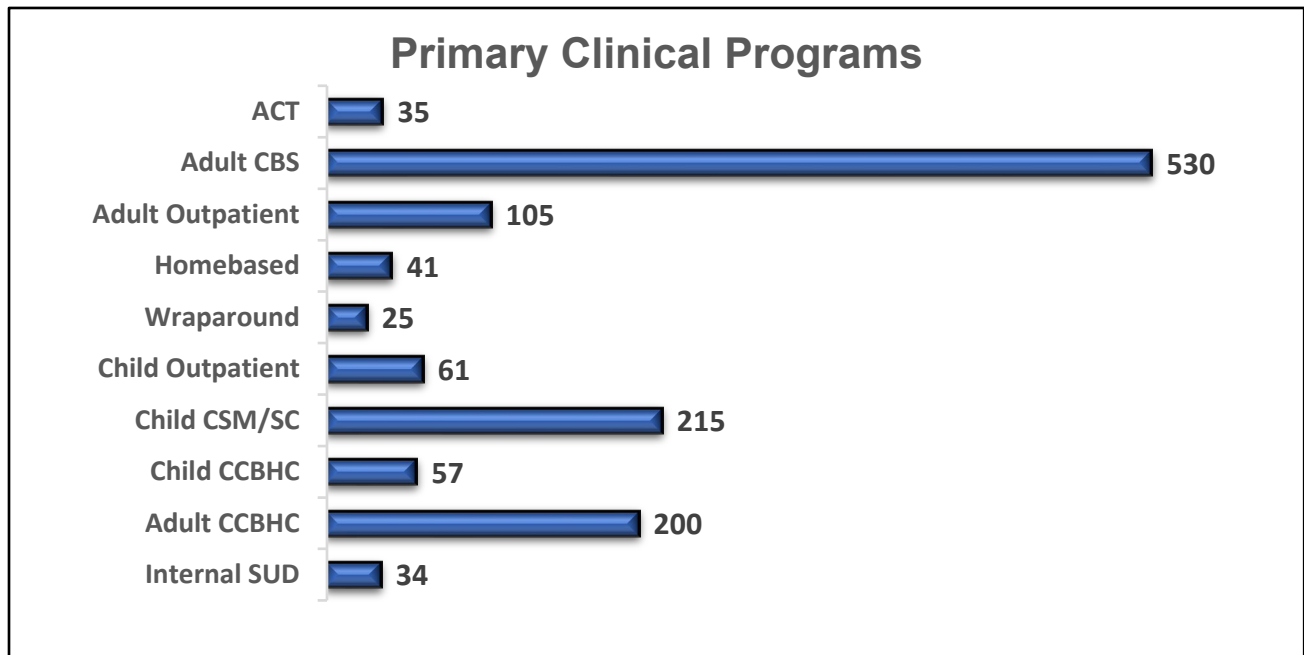
Primary Clinical Programs

The graph and table below illustrate the number of individuals who are receiving services within each of the clinical programs for the month of February. There was a total 1303 of clients served across clinical programs during the month of February as compared to 1244 during the month of January. There was an increase in those adults who were enrolled in Certified Community Behavioral Health Clinic (CCBHC) Services during the month of February. A total of 200 adults were enrolled in February as compared to 184 in the month of January. The number of children and adolescents that were enrolled in CCBHC during February was 57 as compared to 54 in January.

There was an increase in internal Substance Use Disorder (SUD) Services during the month of February with 34 individuals who received Outpatient Counseling and/or Intensive Outpatient Group treatment compared to 29 people in the month of January.

The Children’s Services team experienced an increase in the number of children receiving Outpatient Counseling with 61 during the month of February as compared to 53 in January. There was also an increase in the number of children receiving Case Management and Supports Coordination Services with 215 during the month of February as compared to 204 in January.

In Adult Services, there was a total of 513 individuals receiving Case Management Services in February compared to 504 during the month of January. There was a slight decrease in the number of individuals receiving Outpatient Counseling with 105 people in February compared to 107 in January. The Assertive Community Treatment (ACT) team provided treatment for 35 people in the month of February compared to 34 in January.



| Primary Clinical Programs | Sep-22 | Oct-22 | Nov-22 | Dec-22 | Jan-23 | Feb-23 | Six-Month Average |
|---------------------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------------|
| Child Outpatient | 33 | 40 | 43 | 49 | 53 | 61 | 47 |
| Child CM/SC | 173 | 188 | 200 | 201 | 204 | 215 | 197 |
| Wraparound | 27 | 14 | 11 | 13 | 24 | 25 | 19 |
| Homebased | 51 | 49 | 45 | 44 | 42 | 41 | 45 |
| Adult Outpatient | 112 | 104 | 104 | 106 | 107 | 105 | 106 |
| Adult CBS | 503 | 492 | 498 | 504 | 513 | 530 | 507 |
| ACT | 32 | 34 | 35 | 34 | 34 | 35 | 34 |
| Child CCBHC | 42 | 44 | 53 | 57 | 54 | 57 | 51 |
| Adult CCBHC | 114 | 152 | 162 | 171 | 184 | 200 | 164 |
| Internal SUD | - | 4 | 13 | 19 | 29 | 34 | - |
| Total | 1087 | 1121 | 1164 | 1198 | 1244 | 1303 | - |

Intakes Conducted During the Month of February

The table below illustrates the number of intakes conducted by the Access Team during the month of February. There was a total of 77 intakes completed in February with 76 of

the individuals admitted to services and 1 person who was referred to resources within the community.

| Intake Disposition | Count |
|---------------------------------|--------------|
| Admit/Refer to Funded OnPoint | 76 |
| Referred to Community Resources | 1 |
| Grand Total | 77 |

Discharges During the Month of February

The table below illustrates the number of discharges with a total of 35 during the month of February. A total of 7 of these discharges were planned and 28 were unplanned.

| Discharges | Count |
|--------------------|--------------|
| Planned | 7 |
| Unplanned | 28 |
| Grand Total | 35 |

Respectfully submitted by,

Geniene Gersh, Ph.D.

Director of Evidence Based Services

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

Melissa Potvin MA, LPC – Manager of High Intensity Services

Access

For the month of February, the Access Department had 135 inquiries with 115 being set up for intake appointments that month from those initial phone calls. Access made 42 referrals to adult mental health services, 10 referrals to SUD outpatient/IOP, 20 referrals to children’s mental health services, 9 referrals to the autism benefit/supports coordination, and 2 referrals to I/DD services. There were 32 no shows/cancellations.

Mental Health Treatment Court

There are currently 8 people active in the program, one is in Phase 2 and the other 7 are in Phase 1. There are two people currently waiting to plea into the program, and there are two people who have active warrants out for their arrest.

Crisis

For the month of February, the Crisis team screened 35 adults and 8 minors. The team authorized a higher level of care for 80 percent of those screened and 20 percent were safety

planned home for further follow-up and care. Inpatient hospitalization was authorized for 70% of the screens and 30% were authorized for crisis residential or partial hospitalization level of care.

There were less than 10 mobile crisis calls for the month of February.

ACT

We had two enrollments for February and three discharges. There are currently 30 enrolled consumers and a prospective client slated for enrollment early next week. The ACT team was able to successfully submit show proofs for CARF. Both the ACT case manager and clinician attended the CMHAM virtual training on MBCT and brought back useful tools to the team including demonstrating breathing exercises. ACT team has been intentional about improving fidelity measures related to engagement with clients during contact visits and so we are entertaining different approaches and modalities.



Quality Improvement, Utilization Management and Compliance Board Report March 2023

Submitted by Mandy Padget, Director of Quality Innovation and Compliance
mpadget@onpointallegan.org (269) 673-6617 ext. 2718

Quality Innovation Activities

CARF preparation is in full swing at OnPoint. The entire organization been diligently working to gather show proofs and examples of the amazing work that OnPoint staff do on a daily basis. The CARF survey will take place digitally on March 23 and March 24, 2023.

Corporate Compliance Activities

The 2023 Risk Plan was submitted to the executive committee and approved at the February 2023 board meeting. The Corporate Compliance Committee will review the risk plan on a quarterly basis beginning in April of 2023.

A total of 2 open internal and external investigations remain open and under active investigation.

Utilization Management Activities

- Over 400 authorizations entered during the month of February. This does not include concurrent reviews completed by Utilization Management.
- ISPA applications are being entered in the state system. During the month of February 30 applications were entered. The volume of applications is expected to increase as OnPoint works to meet the stat goal of 50% of ISPA applications being entered by April 1st. A plan is in place to assure that OnPoint will exceed this goal.
- The Biannual Utilization Stakeholder Report is attached.

Respectfully submitted,

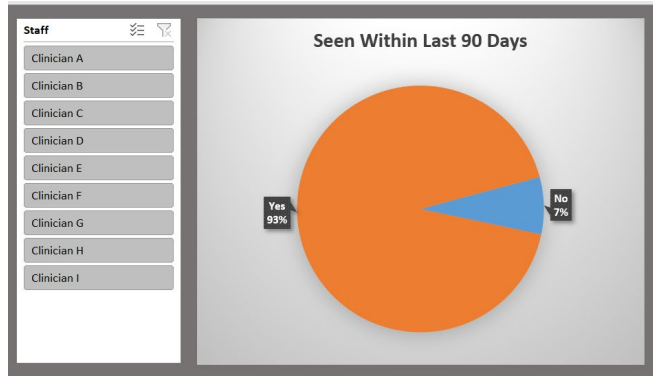
Mandy Padget, BSW, LLBSW, QIDP, QMHP, CHC
Director of Quality Innovation and Compliance
OnPoint

UTILIZATION MANAGEMENT UPDATE

Utilization Management (UM): The process by which a behavioral health organization ensures that individuals receive timely, quality, cost-effective services in the most appropriate and least restrictive treatment setting and ensures that the organization has an effective mechanism to manage the utilization of clinical resources.

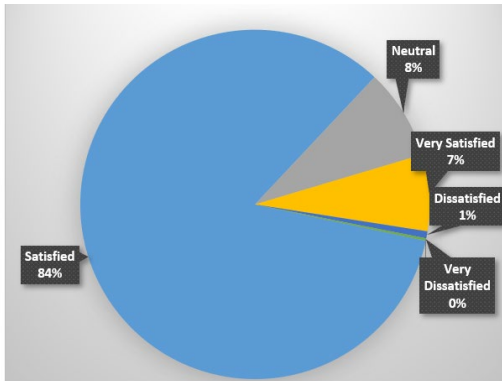
ENSURING SERVICES DELIVERED

Team Dashboards are reviewed by the Utilization Management Committee on every other month, with individual level details shared with supervisory staff. The dashboards were recently updated to include a monitoring tool for ensuring that billable service has been completed within the last 90 days. An example of one department's tool is shown to the right. This allows the supervisory staff to monitor services for the department as a whole and also drill down in to any variability between clinicians. By using another tab in the reporting, supervisory staff can further determine the individuals that have not been served and develop strategies for engagement with clinicians.



ENSURING QUALITY OF SERVICES

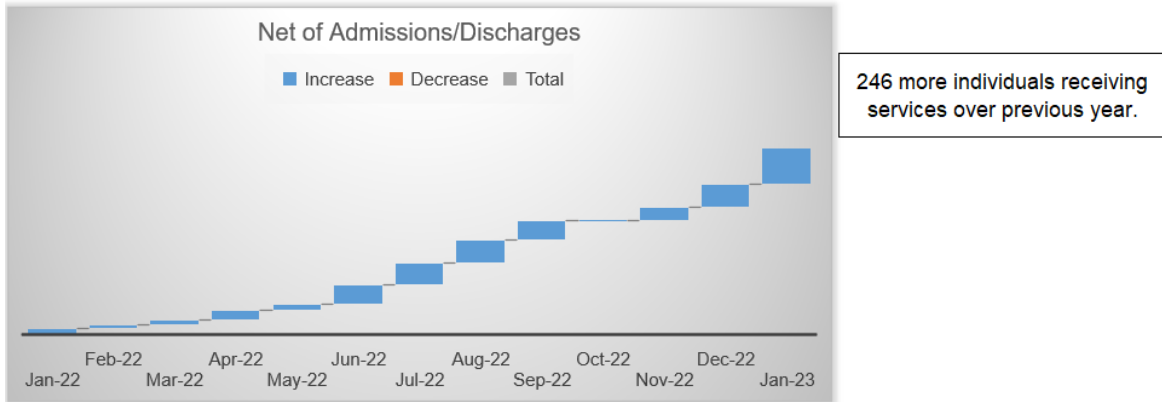
Service Satisfaction is monitored on a quarterly basis by the Utilization Management Committee. Indications of individuals' satisfaction with the services delivered at OnPoint is gathered from each service note. The recent reporting showed 2,769 reports of service satisfaction. The majority of people receiving services from OnPoint indicate being either "Very Satisfied" or "Satisfied" with the services (91%). The reporting also summarizes satisfaction by teams. Details of the reporting is shared with supervisory staff. Through the details, supervisory staff can drill down to both clinician and individual served level should additional follow-up or monitoring be suggested.



MONITORING TREATMENT PROVISION

The Admission/Discharge Monitoring Dashboard is reviewed in UM Committee on a monthly basis. This reporting shows the number of unique new individuals that were started in various programs at OnPoint. Over the last six months, an average of just over 60 individuals started services with the agency each month. The number of discharges from all services are also tracked on a monthly basis. The average length of time someone has been receiving services is also being monitored.

UTILIZATION MANAGEMENT UPDATE



Recently, the reporting has been updated to begin to monitor for the increase in volume of active individuals receiving services through OnPoint. Year to year we are serving an additional 246 individuals.

Respectfully Submitted,
Michell Truax, MA LLP QMHP
Utilization Manager

OnPoint
Executive Committee Meeting Minutes DRAFT
February 17, 2023 – 2:30 pm
Location: OnPoint, 3283-122nd Street, Allegan, MI 49010

Board Members [] Commissioner Gale Dugan, OnPoint Board Chairperson
 [X] Alice Kelsey, OnPoint Board Vice-Chairperson
 [X] Elizabeth Johnston, OnPoint Board Treasurer
 [X] Commissioner Mark DeYoung, OnPoint Board Secretary
OnPoint Staff [X] Mark Witte, OnPoint Executive Director
 [X] Mandy Padget, Director of Quality, Compliance and Innovation

1. **Call to Order** – Vice-Chairperson Alice Kelsey called the meeting to order at 2:47 pm.
2. **Members Present/Excused** – All members present except Chairperson Gale Dugan who previously announced his unavoidable absence and was thus excused by Vice-Chairperson Kelsey.
3. **Review of Agenda** – Agenda reviewed. Motion by Beth Johnston, seconded by Commissioner DeYoung, to approve the agenda as presented. All in favor. Motion adopted.
4. **Review/Approval of Minutes of Prior Meeting** – Minutes reviewed. Motion by Beth Johnston, seconded by Commissioner DeYoung, to approve the minutes as presented. All in favor. Motion adopted.
5. **Compliance Update** – Mandy Padget, OnPoint Director of Compliance, Quality and Innovation, joined the meeting to report on a compliance item – namely, our risk management plan – to review and explain it and to request board approval. This document is completely acceptable as is, but Mandy anticipates developing it a bit more over time to match the complexity of OnPoint’s complete scope of work. Suggestions made to keep the board informed about significant risk events or circumstances as we proceed. Motion by Beth Johnston, seconded by Commissioner DeYoung, to recommend approval of the risk management plan as presented to the full board. All in favor. Motion adopted.
6. **Updates on Prior Meeting Topics**
 - a. Building Updates – Director Witte shared several pictures depicting the current status of the construction project. He further explained that we have been informed of the potential award of grant funding to allow complete buildout of the unfinished MAT (medication assisted treatment) area and initiation of services.
 - b. Proposed LRE Board member appointment – OnPoint has received an application for appointment to the LRE Executive Board from Jim Storey, former OnPoint board member and current county commission chairperson. Commissioner Storey is also a member of the LRE’s Oversight Policy Board. After reviewing the application, Beth Johnson moved, seconded by Commissioner DeYoung, to recommend the appointment of Jim Story to the LRE board as an at large member from Allegan County.
 - c. Director Evaluation – At the prior request of Chairperson Dugan, a form for gathering board member input for the evaluation of the Executive Director was presented. The members offered no suggestions for revision of that plan. Thus Commissioner Dugan is free to distribute the form at next Tuesday’s meeting of the full board.
7. **Executive Director Items**
 - a. Members reviewed the Board Meeting Packet Review and were offered an opportunity for comments and clarification. Beth Johnston noted the absence of LRE budget information. Witte will work to incorporate from the LRE board packet.
 - b. Actions due per the Board annual calendar of key tasks:
 - i. Nominations Committee – In order to have a slate of officers for the next board year (which starts 4/1/2023), Chairperson Dugan will be asked to appoint Nominations Committee members at the 2/21/23 board meeting

- ii. Bylaws & Board Policies – In order to start the next board year on 4/1/2023 with current Bylaws and Board Policies, a copy of the current Bylaws and Board Policies (along with proposed changes to date, as applicable) will be distributed to board members on 2/21/23. Review and comment will be requested to the Executive Committee by 3/17/23. Plan to review/recommend affirmation or changes for the 3/21/23 board meeting.
 - c. Strategic Plan – Director Witte noted that he anticipates collection of completed written “homework” from board members on 2/21/23. Per the plan presented at the 1/17/23 board meeting, he will ask board members to agree on a date for a strategic plan “work session” on a Tuesday evening between the February and March board meetings to review synthesized input and finalize strategic plan goals for 2023-2026.
 - d. CFO Selection – Director Witte introduced Andre Pierre, LRE Chief Financial Officer, who started on 2/13/23.
8. **Discussion Items Requested by Members**
- a. Commissioner DeYoung reported that a Western Region board member vacancy was identified during the recent CMHA conference in Kalamazoo. Commissioner Dugan, who had run for CMHA Treasurer in 11/2022, was the sole nominee for that position. Our thanks and congratulations to Commissioner Dugan!
9. **Next Meeting Date/Time**
- a. Proposed: Friday, March 17, 2023 at 2:30 pm
10. **Adjournment** – Meeting adjourned at 4:25pm.

Submitted by Mark Witte

MINUTES

ONPOINT BOARD

Tuesday, February 21, 2023, 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, Robin Klay, Beth Johnston, Alice Kelsey, Emily Schwartz, Pastor Craig Van Beek and John Weerstra

Absent: Amy Clugston and Karen Stratton

Staff: Susan Conrad, Geniene Gersh, Brenda Holquist, Leanne Kellogg, Kelsey Newsome, Mandy Padgett, Cathy Potter, Lauren Tordaro, Erinn Trask and Mark Witte

Visitors: Stephanie VanDerKooi

1. Call to Order

Commissioner Dugan called the meeting to order at 5:37 pm. Roll call was taken and a quorum was reached.

2. Pledge of Allegiance

Recited.

3. Provision for Public Comment

None.

4. Approval of Agenda with the addition of the nominating committee and the LRE Board member appointment.

Moved: Ms. Johnston

Supported: Mr. Weerstra

Motion carried by roll call.

5. Presentation of plaque commemorating his years of service on the board for Commissioner Storey.

6. 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. RRAC Meeting (12.20.2022)
- ii. Executive Committee Meeting (01.13.2023)
- iii. Board Meeting (01.17.2023)
- iv. Building Committee Meeting (01.17.2023)
- v. Finance Committee Meeting (01.17.2023)
- vi. Program Committee Meeting (01.17.2023)

Moved: Ms. Kelsey

Supported: Mr. Brookhouse

Motion carried by roll call.

7. Building Committee

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

8. Program Committee Report

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

9. Finance Committee Report

- a. The Finance Committee recommends that the OnPoint Board approve the January 2023 disbursements totaling \$4,108,579.12.

Moved: Ms. Johnston

Supported: Mr. Weerstra

Motion carried by roll call.

- b. The Finance Committee recommends that the OnPoint Board approve the following list of provider contracts for fiscal year 2023. Sacred Heart Rehabilitation Center, LLC.

Moved: Ms. Johnston

Supported: Ms. Klay

Motion carried by roll call.

Ms. Trask gave an overview of the December financials and was available for questions.

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

Mr. Brookhouse reported on the most recent meeting and was available for questions. The committee is moving to a quarterly meeting. May, August and November

11. Chairperson's/Executive Committee Report

Commissioner Dugan reported on the Executive Committee meeting and was available for questions.

Motion: Commissioner Dugan suggests that Commissioner DeYoung, Alice Kelsey, Glen Brookhouse and Pastor Van Beek be appointed to the Nominating Committee.

Moved: Commissioner Dugan

Supported: Ms. Stratton

Motion carried by roll call.

Motion: To appoint Commissioner Storey to the LRE board.

Moved: Ms. Klay

Supported: Mr. Weerstra

Motion carried by roll call.

Commissioner Dugan handed out an evaluation form for the ED to be filled out and returned to Commissioner Dugan or Ms. Holquist.

Mr. Witte asks for feedback on the bylaws and policies to Commissioner Dugan/Mr. Witte by 3/17 at noon.

Motion: To adopt the 2023/2026 Risk Management Plan as presented.

Moved: Mr. Weerstra

Supported: Ms. Johnston

Motion carried by roll call.

Commissioner Dugan, Mr. Weerstra, Commissioner DeYoung. Please send in new applications to the county for renewal of your board seats.

12. LRE Update

Stephanie VanDerKooi gave an update on the LRE and was available for questions.

13. OnPoint Executive Director's Report

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

14. Provision for Public Comment

None.

15. Board Member Comments

Mr. Weerstra shared that with the end of the pandemic, he will lose over \$100 a month in food stamps, but he is prepared.

Commissioner Dugan shares that he attended a Kalamazoo Junior Symphony Orchestra performance and they performed a composition to honor the homeless.

16. Motion to Adjourn:

Moved: Mr. Weerstra

Supported: Ms. Kelsey

Motion carried.

Meeting adjourned at 6:52 pm.

Respectfully submitted,

Brenda Holquist
Executive Assistant

Gale Dugan
Board Chair

OnPoint
Initial/Annual Conflict of Interest Disclosure for Board Members

Name: _____ Date: _____

Address: _____ City: _____ Zip _____

Occupation: _____

Home phone: _____ Business phone/Cell: _____

E-mail _____

Are you 18 or older? Yes No Are you an Allegan County resident? Yes No

Per the Michigan Mental Health Code 330.1222, certain categories need to be represented on the Community Mental Health Board. Please check the categories which you believe apply to you and please explain how you represent that category.

- Provider of mental health services. _____
- Agency/occupation having a working involvement with mental health services. _____
- General public (brief job description) _____
- Public official (defined as individuals serving in an elected or appointed public office or employed more than 20 hours per week by an agency of federal, state, city, or local government, including public schools or colleges or universities. _____
- Recipient or primary consumer of mental health services (defined as an individual who has received or is receiving services from a community mental health services program or from the private sector equivalent to those offered by the Department or a community mental health services program.) _____
- Family of a recipient/primary consumer of mental health services (defined as a parent, stepparent, spouse, sibling, child, or grandparent of a primary consumer, or an individual upon whom a primary consumer is dependent for at least 50% of his/her financial support.) _____

Please list your membership on other boards or commissions: _____

The Michigan Mental Health Code prohibits a person from serving as a community mental health board member if **(1) he/she is a party to a contract with the community mental health services program or (2) administers or directly benefits financially from a contract with the community mental health services program or (3) serves in a policy-making position with an agency under contract with the community mental health services program.** A list of current OnPoint contractors is posted at www.onpointallegan.org under "Board" tab. Do any of these limitations apply to you? Yes No. If yes, please explain: _____

I have read the OnPoint's Bylaws and Board Policies (available on website www.onpointallegan.org, under "Board" tab) concerning Conflict of Interest (OnPoint Bylaws, Art. VIII, Policy #201, Sec. III), and agree to comply fully with these terms and conditions at all times during my service as an OnPoint Board member. If at any time following the submission of this form I become aware of any actual or potential conflicts of interest, or if the information I provided becomes inaccurate or incomplete, I will promptly notify the Board Chairperson in writing.

Board Member's Signature / Date

Please print your name

OnPoint Board of Directors
Executive Director Report
March 2023

1. Agency

Building – We are really seeing things come together and anticipate the completion of the bulk of all construction and furniture installation activities in the next few weeks. Our attention has turned to preparing for the mechanics of moving everything that will go into the building on May 4-5 so that we can open for regular business on Monday, May 8, 2023. Before our March 21 board meeting happens, we will set the date for a community open house. As of now, we can only say that the date will fall between Monday 4/17 and Thursday 4/27; hopefully on a date the state legislature is also out of session.

Housing Grant – We noted last month that OnPoint was awarded a grant of \$411,533 over three years from the US Department of Housing and Urban Development (HUD), and Chairperson Dugan alluded to media coverage from the press release we issued. For your continued awareness and information, a copy of the article that appeared in the Allegan NEWS is attached to this report.

2. Board

Strategic Plan – Thanks to the board for your excellent input into the strategic plan that was evident in our special work session on 3/7/2023. As specified there, staff will work to translate board member comments into updated goal statements for the board to review through the Executive Committee on 3/17/2023 and at the board meeting (for approval, if the board is ready) on 3/21/2023.

Board Bylaws and Board Policies – Barring any last-minute submissions or revisions, the board will see redrafted bylaws and policies at the board meeting on 3/21/2023 for approval. We have been notified that the county commission will consider board member reappointments at their 3/23/2023 board meeting for the four terms that end 3/31/2023.

3. Community

No real news in the past few weeks on any community initiatives. We expect the Community Health Improvement Project to take further steps in the coming weeks, which will engage our housing and behavioral health leadership. The MACC leadership is transitioning from United Way of Ottawa/Allegan to the Allegan County Community Foundation, led by Amanda Telgenhof (formerly of the United Way).

4. Region

LRE Board Meetings – The LRE continues to await the outcome of the 1/23/2023 hearing in the state Court of Appeals regarding their request for judgment (“declaratory action”) which was though already last month to be imminent. In the meantime, we were notified that Network180 has now also filed suit against the LRE – presumably over the funds from FY2019 that it is due. The declaratory action by the LRE was intended to force the state to let the LRE use funds it holds from post-FY2019 surpluses to pay its debts to Network180 and Muskegon County – something the state has opposed at the risk of contract cancellation with the LRE. This standoff is counterproductive to the interests of the people of our region and is of increasing concern to all of the LRE’s partners and participants. Our region needs to restore normal operations and concentrate on serving the people.

Ottawa County – There has been a lot of local and, increasingly, regional/state attention being given to the recent change in direction by the Ottawa County Board of Commissioners. As

it relates to the issue of behavioral health services, we have received inquiries as to our thoughts about the dialogue between CMH of Ottawa County (which does not operate as a mental health authority) and the county commissioners to which it is directly accountable. I have provided some limited comments for the press from the perspective of a co-recipient with Ottawa County of the federal CCBHC expansion grant. I make no judgment about the commission or anything at all in Ottawa County, but do hope that this opportunity to advance regionally-connected behavioral health projects will not be lost at this very important juncture.

5. State

Legislative – I am scheduled to meet with Barry County CMH CEO (and former Allegan CMH employee) Rich Thiemke and Rep. Rachelle Smit on 3/22/2023. Her district touches several counties but is largely within Allegan and Barry. It is a good opportunity offer our assistance with any unusual or unmet needs in our area of responsibility for any of her constituents who request assistance.

Sincerely,

Mark Witte
March 9, 2023



OnPoint in Allegan garners homeless assistance funding

By Gari Voss

OnPoint, that assists individuals and families, has been awarded a three-year grant of \$411,533 from the US Department of Housing and Urban Development (HUD). The funds are earmarked to assist homeless individuals and families across Allegan County.

Allegan County, through Community Mental Health – now OnPoint, has been the lead agency for assisting individuals and families with housing needs. For years, this arm of the agency has existed with one fulltime employee who has taken calls, followed-up with interviews and visits, and assisted with developing plans to find solutions.

The needs across the county are more than a single person can humanly handle. Even though the case manager knows the county geographically, is familiar with the needs, and has assisted the homeless for more than twenty years, there is not enough time.

Program Director Susan Conrad shared, “We live in a community that is working together for the most vulner-

able. We do not have all of the answers, but we have the capacity to respond to real needs and design more than a short-term solution.”

Conrad was able to develop the request for funding from a HUD bonus round of funding with the support of the county collaborative body and OnPoint’s housing manager. This was a competitive grant through the Michigan Balance of State Continuum of Care (MIBOSCOC) that targeted rural counties. She believes that the success relied on collaboration with the Multi-agency Collaborative Council that is tied into the Michigan state homeless system.

Thankful for working with a Council that recognized the gaps, Conrad shared that the collaborative body earmarked the need for additional staff to “open the front door” into more housing programs and support. Adding additional staff will provide time – time for not just talking to someone, but talking with them about their unique situation, their possible options, and how OnPoint can help.

Conversation can lead to

putting together a plan that goes beyond short-term to long-term solutions. Conrad acknowledges, “It is important to walk along side someone as they sort things out. We are excited to add the two new positions that will address the time issue.”

The two 40-hour positions will be two-fold. One will help support the current case manager who is attempting to respond to numerous phone calls and emails. Then going out to do follow-up visits.

The other will be 100% community based. That is, working in the community to identify homeless folks who may be sheltering in neighboring counties and even to work with the DNR and parks commissions to locate people living in county and state parks. This person will truly be a community outreach worker.

“Case managers need time to go beyond the need for shelter. Many homeless people are frozen in the moment. OnPoint workers can assist them in identifying their resources, support systems and safe shelters until a more long-term solution can be obtained.

Each situation is unique and possibilities for solutions are diverse. Conversation and the proper guidance can identify options for today that lead to tomorrow’s resolution,” Conrad explained.

“Homeless individuals need to be able to look at their strengths. One being their resilience. Then tap into their skills and support systems to come to a conclusion. Often a simpler solution is the best one to solve the problem,” added Conrad.

If all goes on schedule, the funds will be available beginning in June. At that time, job descriptions will be available, postings can be made and case managers hired. The team will then begin the expanded services across the county.

The OnPoint team will become part of the broader system. While they provide on the ground information on trends, the Collaborative can be utilize the data to create the space to talk about what can be done better.

“The time is perfect because of identifying the need being out there, but also for using what we are

learning in order to improve the broader system that we are dealing with,” stated Conrad.

As summer approaches and staff is hired, OnPoint will create materials highlighting the process and goals of the program. These can be distributed across the county to agencies, churches, schools, doctor offices, and libraries so individuals understand how to assist people in accessing the housing assistance program.

The OnPoint team will strive to share information about what the program can and cannot do. At the same time, other support systems will be included in solutions to best meet the needs of the clients.

“We live in a community that is working together to address some gaps of the most vulnerable. This is really at the heart of what we are trying to do,” reiterated Conrad. “We don’t have all the answers, but we are trying to have enough of the right capacity to respond as effectively as we can.”

As pointed out by Mark Witte, executive director of OnPoint, “This effort focuses on people who

need assistance. There are solutions that go well beyond buildings that bring together people who need assistance.”

Conrad added, “The managers want to engage with the people solve long-term problems. It is really problem solving with folks who are homeless. We are trying to help people look at their unique situations to find the best solution for their needs.”

The work has just begun in the OnPoint’s housing division. There will be documentation to identify eligibility, handling calls and making connections. A smooth response flow of services must be established.

In the meanwhile, the agency will continue responding to calls and requests for assistance from people facing housing needs. The goal is to be able to talk to groups and agencies about how the process works and what the team hopes to accomplish.

Those seeking assistance can call OnPoint at 269-686-5124 or email customerservices@onpointallegan.org.