

EATON COUNTY BOARD OF COMMISSIONERS

MEMBERS

Tim Barnes
Blake Mulder
Terrance Augustine
Brandon Haskell
Jeanne Pearl-Wright
Jane Whitacre
Mark J. Mudry
Joseph Brehler



MEMBERS

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Dairus Reynnet
Wayne Ridge
Brian Lautzenheiser
Jim Mott
Jeremy Whittum
Barbara Rogers

1045 Independence Blvd, Charlotte, MI 48813

EATON COUNTY BOARD OF COMMISSIONERS/HEALTH AND HUMAN SERVICES COMMITTEE

MONDAY, OCTOBER 3, 2022, 9:00 A.M.

BOARD OF COMMISSIONERS' ROOM, COUNTY COURTHOUSE, CHARLOTTE

AGENDA

1. Call to Order.
2. Pledge of Allegiance.
3. Agenda Additions and Changes.
4. Approval of September 6, 2022 Minutes.
5. Limited Public Comment.
6. Community Mental Health Semi-Annual Report.
7. Tri-County Office on Aging Resolution.
8. Appointments.
9. Miscellaneous.
10. Limited Public Comment.

A quorum of the Board of Commissioners may be present at this meeting.

HEALTH AND HUMAN SERVICES COMMITTEE MEETING

TUESDAY, SEPTEMBER 6, 2022

9:00 A.M.

MINUTES

MEMBERS PRESENT: Commissioners Jim Mott, Barbara Rogers, Tim Barnes, Mark Mudry, Blake Mulder and Jeanne Pearl-Wright

MEMBER ABSENT: Commissioner Dairus Reynnet

ALSO PRESENT: Martha Richard (Healing and Recovery Center), Kim Thalison (Eaton RESA), Charisse Tuell (Eaton RESA) and John Fuentes

The September 6, 2022 regular meeting of the Health and Human Services Committee was called to order at 9:00 am by Chairperson Mott.

The Pledge of Allegiance was given by all.

Commissioner Rogers moved to approve the agenda, as presented. Commissioner Barnes seconded. Motion carried unanimously.

Commissioner Rogers moved to approve the minutes of the August 1, 2022 meeting, as presented. Commissioner Mulder seconded. Motion carried unanimously.

Martha Richard, Healing and Recovery Center Administrator, was present to provide the agency's semi-annual update. It was reported that although the facility is licensed for 142 beds under Medicaid, its occupancy has been reduced to 110 due to staffing shortages. The reduction has enabled the facility to reduce its reliance on contractual agency nurses from a high of nine to, two currently. Additional information was provided on the outstanding receivables reported at the August meeting. The amounts referenced are primarily receivables for the Consolidated Appropriations Act (CAA), Employee Retention Tax Credit (ERTC) and not Medicaid cost settlements. The Medicaid cost settlement process was reviewed. Medicaid reimbursements are based on facility cost reports from two years prior. During periods of inflationary cost increases, the reimbursements will be insufficient to cover current costs and will be increased or "settled" in a future period. A comparison of the current operating positions of three similar sized county facilities was provided.

It was reported that the Executive Director of Tri-County Office on Aging, Marion Owen would be retiring from the agency in November 2022. The agency requested the Board of Commissioners consider a resolution of appreciation. A resolution will be prepared for the November 16 regular meeting.

Kim Thalison and Charisse Tuell, Eaton RESA, were present to discuss the upcoming opioid summit hosted in conjunction with the Eaton County Substance Awareness Advisory Council scheduled for September 14. The facilitated discussion is intended to identify service gaps and priorities to utilize the County's national opioid litigation settlement proceeds. Discussion held.

A crisis stabilization unit planning focus group summary and feedback document prepared by CEI-Community Mental Health was distributed for review. The unit and its development will be discussed in greater detail at the next regular meeting during the agency's semi-annual report.

A schedule of the expiring citizen appointments was provided for the committee's review. It was reported that a public service announcement to solicit interest is appearing in print media and is available on the County website. Applications of interest will be provided to the Committee at their next regular meeting.

Chairperson Mott adjourned the meeting at 9:33am.

The next regularly scheduled meeting of the Health and Human Services Committee will be held on Monday, October 3, 2022 at 9:00am in the Board of Commissioners Room of the Courthouse located at 1045 Independence Blvd, Charlotte MI 48813.

Jim Mott, Chairperson



Community

MENTAL HEALTH
CLINTON • EATON • INGHAM

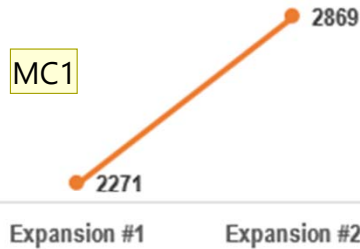
CCBHC EXPANSION GRANT UPDATE

10.03.2022

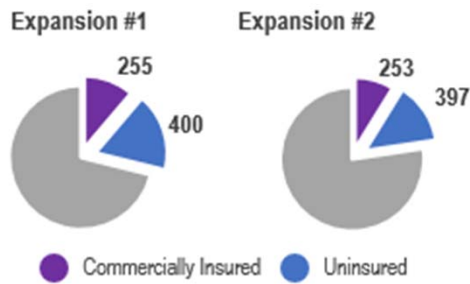


TOTAL SERVED

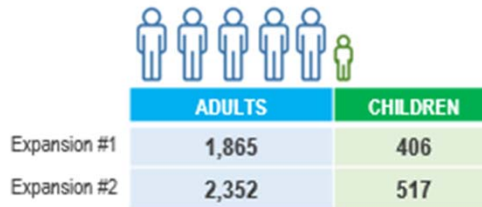
The number of unduplicated consumers served per grant



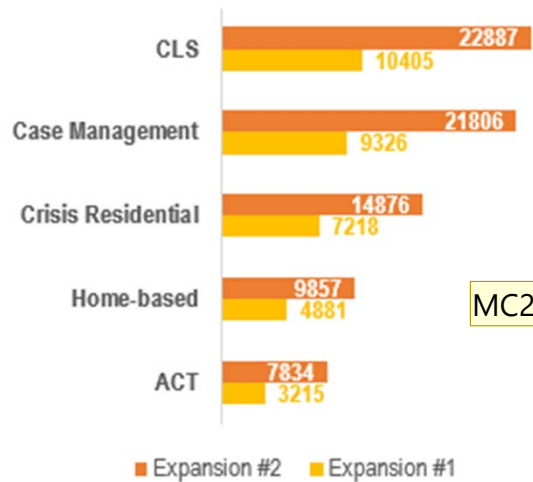
INSURANCE STATUS



AGE GROUP



SERVICE UTILIZATION



MC3

EXPANSION GRANTS 1 & 2

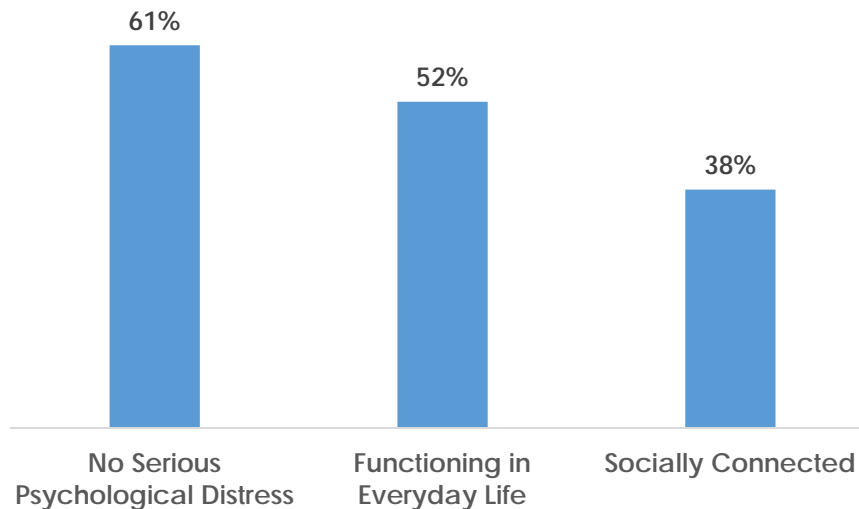
Slide 2

- MC1** Either change Total Served icons to people, or show that we hit our targets each time (2000 for G1, and 2500 for G2)
Martha Callow-Rucker, 9/9/2022
- MC2** In place of the Service Utilization, put in demographic breakdowns
Martha Callow-Rucker, 9/9/2022
- MC3** Add veteran numbers per grant (use grant #1 data that is 1 month short of end date)
Martha Callow-Rucker, 9/9/2022

STATISTICAL SIGNIFICANCE

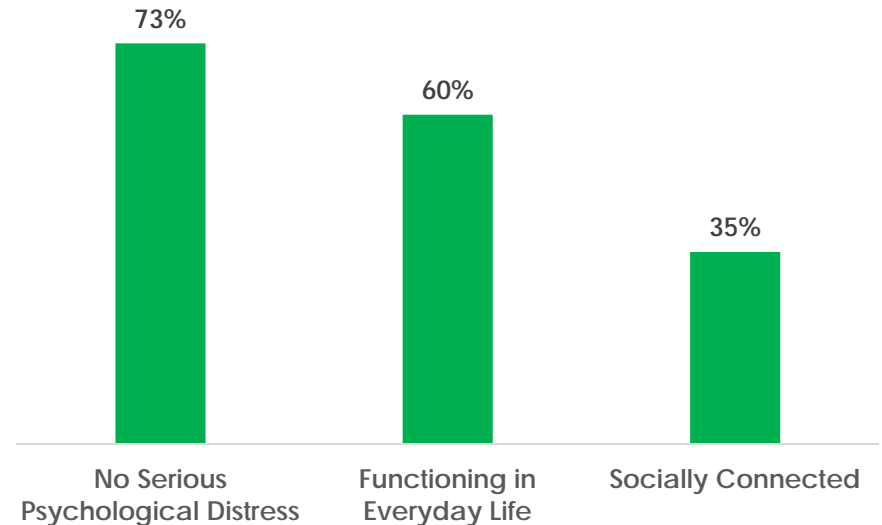
(APRIL 2019 – JULY 2022)

Adults



■ Percentage by Overall Outcomes Changed: Adults

Youth



■ Percentage by Overall Outcomes Changed: Youth



Community
MENTAL HEALTH
CLINTON • EATON • INGHAM

INFRASTRUCTURE DEVELOPMENT

In Preparation for CCBHC



Veteran Systems Navigator Program



After-Hours Clinic



Mobile Crisis Services



Consumer Advisory Council



Ability to generate reports from E.H.R.



Care Coordination projects

As a Result of CCBHC



Wellness Coaching



Same Day Access



RN Care Managers



Process Mapping



Expanded reimbursement services



Outcome Data



Care Pathways

CEI IMPACT

Primary Care



More consumers connected to PCPs

Culture of Healthcare Integration



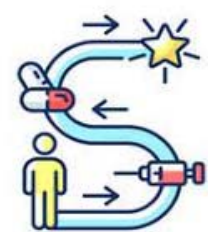
Increased understanding of HCI among staff

Care Coordination



Continuity of Care Document to PCPs

Care Pathways



Three Pathways rolled out: HTN, Hep C, Asthma

Wellness Coaching



Pre- and Post-Tests to measure outcomes

Co-Occurring Services



ACT received IDDT license and began using modifiers

Medication Assisted Treatment



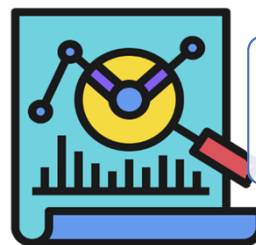
ITRS launched their own in-house MAT program

Sustainability



Streamlined and centralized reimbursement and insurance verification

Efficiency



Over 100 process maps created across the agency

CONSUMER TESTIMONIALS

“...we have a good team backing us up and looking out for [him].”

“It was wonderful, super helpful ... It was an amazing experience. I’m really thankful she was there for me.”

“I don’t want to die anymore. I always wanted to die, and now it’s just gone. I’m actually enjoying living right now. I didn’t let myself enjoy stuff to the fullest extent before.”

“The encouragement and help I got from them is just amazing ... I changed my entire life and world by coming here, and if it wasn’t for CMHA and TRC – I don’t know what would have happened.”

“[CMH’s Veteran System Navigator] has been incredibly helpful. [He] also understands me – the cultural differences and racial challenges I face.”

“I love all of the support we had. They were there before he even came home from the hospital. I was prepared for him to come home because I knew we were going to have all of that support.”

PARTNER INTERVIEWS

“I can’t express how much the collaboration benefits people and changes their lives. It changes every aspect of their lives. They see these systems that they felt worked against them actually working for them ... The work we do together has helped people trust the system more.”

“We have a wonderful rapport. If they have client needs, they call us. I know everybody by name who works over there, and they know me. We have a really great relationship back and forth.”

“...we did a forum with [CMHA-CEI] on integrating behavioral health and physical health services. The evaluations on that were so impressive. We engaged people who otherwise would not have been engaged in our work. We were able to pull that together because of the strong partnership we had with CMH.”



EATON COUNTY BOARD OF COMMISSIONERS

**RESOLUTION OF APPRECIATION FOR
MARION OWEN
TRI-COUNTY OFFICE ON AGING (TCOA)**

OCTOBER 19, 2022

WHEREAS, Marion Owen dedicated her entire professional career of 48 plus years towards the mission of the Tri-County Office on Aging (TCOA) promoting and preserving the independence and dignity of the aging population; and

WHEREAS, Marion Owen started her professional career with TCOA on August 5, 1974 and serving as its Executive Director over 21 years since 2001; and

WHEREAS, Marion Owen tirelessly served the aging population of citizens in the counties of Clinton, Eaton and Ingham and the Cities of Lansing and East Lansing; and

WHEREAS, Marion Owen provided executive direction of services and supports to empower older adults and people with disabilities through such programs as Meals on Wheels, Michigan Medicare/Medicaid Assistance Program (MMAP), MI Choice Waiver Program, Evidence-based health and wellness workshops, Caregiver resources, in-home and community-based care services and general information and assistance; and

WHEREAS, Marion Owen was the ultimate advocate leading TCOA through her vision and values of respect, fairness, inclusion, teamwork, honesty, integrity, hard work and innovation; and

WHEREAS, Marion Owen leaves TCOA having built a solid foundation for the success and future of this organization,

NOW, THEREFORE, BE IT RESOLVED, that the Board of Commissioners does hereby thank Marion for years of exceptional service to Eaton County and expresses its best wishes to her in the next chapter of her life; and

BE IT FURTHER RESOLVED, that this resolution of appreciation and support be duly recorded and attached to the permanent records of the County on this 19th day of the month of October in the year 2022.

Jeremy Whittum
Chairman of the Board of Commissioners

Diana Bosworth
Clerk of the Board of Commissioners

Eaton RESA Community Discussion

Facilitated by TBD Solutions

September 14th, 2022

Facilitated Discussion

Question 1 *(When thinking about yourself, a friend, a neighbor, or a loved one...*

Why do they use substances?)

- Poor self-image (i.e., middle school girls)
- T.V., "Pill to fix everything."
- Middle schoolers need education
- Coping with job problems, personal relationships
- Stress
- For fun
- Loneliness
- Social isolation
- Pain management
- Undiagnosed medical conditions
- Accessible
- Peer pressure/hanging out with the wrong people
- Defiance/rebelling
- Lack of parent involvement/skills
- Access to substances and alcohol
- Trauma
- Stress
- Pain relief
 - Mental
 - Physical
- "Doctor told me" – overprescribed
- Avoiding stressors
- Bored/lacking direction
- Aversive event (loss)
- Risk-taking behavior pattern
- Sense of hopelessness
- Small or no support network
- Difficult to engage parents
- Teens with psychological issues find it easier and quicker to self-medicate
- Undiagnosed mental health issues

Themes: Stress, Loneliness, isolation, pain management, mental health issues

Question 2 *(Who gets the help they need and why? Who does not get the help they need and why?)*

Gets Help

- People with money go to inpatient because they can afford it
- Those in the court system get help
- Schools in wealthier school districts
- People who are persistent
- People who know where to find resources
- Family
- Celebrate recovery
- Have hope
- Train attorneys about drug court
- Improve data sharing agreements
- Higher class

- People with access to more resources
- Higher education
- People with self-efficacy
- Schools with programs and counseling
- Parents who care and are involved
- Persistent
- Multiple access points
- Medicaid
- Good health resources, insurance
- Connections to supportive people

Themes: People with resources and connections and those who know how to find resources and get connected receive more help

Doesn't Get Help

- Insurance companies deny
- Rural areas, limited transportation/accessibility
- Kids who don't go to school
- Cultural stigma
- Parents fear consequences to their family
- Not aware
- People don't want it/addicts don't want help
- They're functioning – don't think they have a problem
- Trust Issues - distrust of law enforcement
- Parents afraid of losing kids
- Commercially insured minorities
- Fear of being locked up
- Interrupted treatment/recovery
- Lack of support

Themes: Lack of support, disconnectedness, lack of trust, and fear

Question 3 *(What needs to happen for the people in Eaton County to live their best lives?)*

- Safer communities
- Relationships
 - Relationships can be hard to keep
 - Connections with community, neighbors, family
- Know where to go when needing help
- Use tools to connect (social media)
- Programs (Families Against Narcotics)
- Organizations collaborate with the community (beyond collaborations with other organizations)
- Venues to share stories
- People helping other people (human to human)
- Access to doctors, scripts
- Better access to affordable mental health/physical health care
- Remove stigma associated with SUD
- Better/easier process to obtain medical insurance
- Facilities – such as state hospitals
- Long-term follow-up

- Increase in providers (i.e., residential, sober living)
- Vote for those running for office with a proven track record of supporting reduction/recovery/mental health
- Help guide more people to seek training/careers in the health field
- Education for young people (health curriculum)
- Housing
- Parks and community centers

Themes: More collaboration, safer communities, better access to care, build stronger relationships

Question 4 (*What areas should we spend less time/resources on? What areas should we invest more time/resources on?*)

More

- Education in schools (pointed to middle school)
- Activities in school/out of school
- Narcan – Easy to get without a prescription
 - In schools
- Drug courts
- Drug test strips
- Follow-up/transition programs
- Things to do/ways to connect
- Opioid health homes
- Keep conversations going
- Focus on sustainability
- Transportation
- Mental health/recovery involvement
- Harm reduction (clean needles)
- Public health funds
- Contract with health care providers
- Parent education
- Full continuum of care
- Parent education and Respite
- Treatment housing

Themes: Provide more education in schools, make Narcan more accessible, provide education to parents

Less

- Less talk, more action
- Less politics
- Less criminalization (not punishing for use)
- Justice system involvement
- Less research, more hands-on action

Themes: More action, more justice involvement, less criminalization

Specific Ideas Generated during Dinner Conversation

- District Nursing – possibly through County Health to see to the needs of individuals within a regional district
 - Addressing loneliness, access, food insecurities
 - They would be able to spot issues earlier
- Reliable accessible transportation
- Recovery housing (men+women)
- Create Community centers
- Restorative Justice Programs
- Passing out flyers with instructions on how to apply for Medicaid insurance at all MI works locations
- Scan barcode that people can access with their cellphone with a link to apply for medical insurance
- Get to them sooner
- Show kids a different philosophy on life
- Release people from jail/rehab with naloxone
- Follow-up procedures when people leave rehab because they are at their most vulnerable
- Coverage for commercially insured

SUMMARY

The ideas and recommendations reflected in this document primarily represent the input from professionals in public health and substance use disorder treatment. In the first session (pre-dinner), about 31 professionals participated in a facilitated discussion.

During dinner, the same participants were asked to think about specific challenges they experienced when serving individuals with substance use disorder and to write down what would have been helpful during those times.

After dinner, about seven community members participated in a facilitated discussion. One person with lived experience with a substance use disorder participated. However, he reported his discomfort at sharing with his probation officer present.

Next steps: it is recommended that subsequent input sessions or conversations include more individuals with lived experience with substance use disorders as they are the best responders to the questions posed and shed light on gaps within the greater Eaton County region.

**Grant Agreement Between
Michigan Department of Health and Human Services
hereinafter referred to as the "Department"**

and

**Eaton County Juvenile Court
1045 Independence Blvd
Charlotte MI 48813 1033**

**Federal I.D.#: 38-6004847, Unique Entity Identifier: HV2ALQ8NDTH2
hereinafter referred to as the "Grantee"**

for

Raise the Age - 2023

Part 1

1. Period of Agreement:

This Agreement will commence on the date of the Grantee's signature or October 1, 2022, whichever is later, and continue through September 30, 2023. No activity will be performed and no costs to the state will be incurred prior to October 1, 2022 or the effective date of the Agreement, whichever is later. Throughout the Agreement, the date of the Grantee's signature or October 1, 2022, whichever is later, will be referred to as the start date. This Agreement is in full force and effect for the period specified.

2. Program Budget and Agreement Amount:

A. Agreement Amount

The total amount of this Agreement is \$10,100,000.00. Under the terms of this Agreement, the Department will provide funding not to exceed \$10,100,000.00. The source of funding provided by the Department can be obtained in the Schedule of Financial Assistance, available on-demand in the EGrAMS electronic grants management system (<http://egramsmi.com/mdhhs>).

The Agreement is designated as a:

- Subrecipient relationship (federal funding); or
- Recipient (non-federal funding).

The Agreement is designated as:

- Research and development project; or
- Not a research and development project.

B1 Attachment B1 - Program Budget Summary

PROGRAM Raise the Age - 2023			DATE PREPARED 9/16/2022		
CONTRACTOR NAME Eaton County Juvenile Court			BUDGET PERIOD From : 10/1/2022 To : 9/30/2023		
MAILING ADDRESS (Number and Street) 1045 Independence Blvd			BUDGET AGREEMENT <input checked="" type="checkbox"/> Original <input type="checkbox"/> Amendment		AMENDMENT # 0
CITY Charlotte	STATE MI	ZIP CODE 48813-1033	FEDERAL ID NUMBER 38-6004847		

	Category	Total	Amount
DIRECT EXPENSES			
Program Expenses			
1	Salary & Wages	135,000.00	135,000.00
2	Fringe Benefits	56,466.00	56,466.00
3	Employee Travel and Training	0.00	0.00
4	Supplies & Materials	5,000.00	5,000.00
5	Subawards – Subrecipient Services	0.00	0.00
6	Contractual - Professional Services	0.00	0.00
7	Communications	0.00	0.00
8	Grantee Rent Costs	0.00	0.00
9	Space Costs	0.00	0.00
10	Capital Expenditures - Equipment & Other	8,843,534.00	8,843,534.00
11	Client Assistance - Rent	0.00	0.00
12	Client Assistance - All Other	0.00	0.00
13	Other Expense	50,000.00	50,000.00
Total Program Expenses		9,090,000.00	9,090,000.00
TOTAL DIRECT EXPENSES		9,090,000.00	9,090,000.00
INDIRECT EXPENSES			
Indirect Costs			
1	Indirect Costs	1,010,000.00	1,010,000.00
2	Cost Allocation Plan	0.00	0.00
Total Indirect Costs		1,010,000.00	1,010,000.00
TOTAL INDIRECT EXPENSES		1,010,000.00	1,010,000.00
TOTAL EXPENDITURES		10,100,000.00	10,100,000.00

SOURCE OF FUNDS

	Category	Total	Amount	Cash	Inkind
1	Source of Funds				
	MDHHS State Agreement	10,100,000.00	10,100,000.00	0.00	0.00
	Fees and Collections - 1st and 2nd Party	0.00	0.00	0.00	0.00
	Fees and Collections - 3rd Party	0.00	0.00	0.00	0.00
	Local	0.00	0.00	0.00	0.00
	Non-MDHHS State Agreements	0.00	0.00	0.00	0.00
	Federal	0.00	0.00	0.00	0.00
	Other	0.00	0.00	0.00	0.00
	In-Kind	0.00	0.00	0.00	0.00
	Federal Cost Based Reimbursement	0.00	0.00	0.00	0.00
	Total Source of Funds	10,100,000.00	10,100,000.00	0.00	0.00
	Totals	10,100,000.00	10,100,000.00	0.00	0.00