

# EATON COUNTY BOARD OF COMMISSIONERS

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Terrance Augustine  
Brandon Haskell  
Jeanne Pearl-Wright  
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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

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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

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**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.

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Jim Mott, Chairperson

# Crisis Stabilization Unit (CSU) Planning

## Focus Group Summary and Feedback

CMHA-CEI asked community members within multiple focus groups from January to March 2022 to provide feedback and guidance in the development of a new Crisis Stabilization Unit to serve the tri-county area. TBD Solutions gathered the extensive feedback and cultivated themes for further consideration in our planning. The focus groups major themes and highlighted responses are identified below and will help guide CMHA-CEI's next steps in this exciting development.

1. What 3 words would you use to describe the behavioral health crisis need in your community?

- Access to services and supports
- Shortages with services and staffing
- Education surrounding services and resources offered at CMHA-CEI

*"Lack or/inadequate services. Resources for everyone, not just Medicaid population or commercially insured. Long wait lists to see psychiatrists."*



2. Of the current array of crisis services offered by CMHA-CEI - What is Working?

- Crisis Intervention Team (CIT) in collaboration with local law enforcement
- Certified Community Behavioral Health Clinic (CCBHC)
- Youth Services connecting to youth in the community
- Coordinating Mental Health Services with CMHA-CEI
- Mobile Crisis for youth



3. What makes your community unique or special?

- Urban and Rural Areas
- A community with diverse backgrounds and cultures
- Collaboration with local agencies (NAMI, MSU, DHHS, Local Coalitions)

*"All various agencies coming together to work on the issues"*



4. What is the best resource for a person in crisis?

- 24 hour access to crisis services at CMHA-CEI
- Crisis Intervention Team (CIT) Training for Public Safety
- Crisis Line and getting individuals connected immediately to treatment

*"It is accessibility. Quick, here and now"*



5. What made your experience better when you were in crisis or working with someone in crisis?

- Knowledge of services and resources
- Training/supervision within the workplace
- Warm handoffs due to strong bonds with providers and the community



*"Knowing I am working with a qualified professional. Experience, education to help me find a solution. Knowing an organization has a good success rate"*

6. Based on the current array of CMHA-CEI crisis services - What is NOT working?

- Not enough transportation within rural communities to get to CMHA-CEI
- Inconsistencies with bed availability, staffing, and CCBHC
- Communication/Confusion around access with crisis workers
- Education/De-Stigma around the subtle signs of mental health in youth



*"Transportation in rural communities ("I work in Maple Valley, I don't have gas money or public transportation)"*

7. What crisis services do you wish the community had more of?

- More Psychiatric Beds
- Diversion initiatives within public safety and jails
- Expand Mobile Crisis coverage



*"Mobile Crisis Teams - we would love more of them!  
And to be able to expand coverage"*

8. What services should be offered at the CSU?

- Communication among providers
- Stronger presence for the LGBTQ+ community
- Psychiatry consultation and to provide co-occurring services in the same location
- De-Escalation training for parents and caregivers



*"Make sure people feel heard, and respond to the needs they have"*



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## 9. What staffing should the CSU have?

- Peer Support Specialist
- Psychiatrist
- Qualified Staff who are aware of services and resources
- Empathic Staff who are non-judgemental



*"Peers, Psychiatrist, recovery coaches, people trained in suicide/ suicide prevention, wrap-around, counselor, case manager"*

## 10. What kind of environment should the CSU be?

- A Collaborative Team
- Comfortable furniture, soothing music, and temperature regulation
- Calm staff that are sensory friendly
- Welcoming environment that should feel like home



*"Very trauma-informed, less clinical. Peer support is a great idea, someone is there to answer questions for the client and the person helping"*

## 11. Is there anything else that we have not covered that would improve the crisis system in the region?

- Public Education: Public awareness of services and resources



*"It should be mandatory for all schools to understand and talk about mental health issues..."*

*"Clinton County - the most rural of the 3. There's no teen space. They need a recreational place where people feel safe, and could have crisis services at it as well"*

*"I think of single parents, if you have someone who takes the child in, what do you do with the other children. Education for the families too"*



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**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 (MMAAP), 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.

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Jeremy Whittum  
Chairman of the Board of Commissioners

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Diana Bosworth  
Clerk of the Board of Commissioners





# Eaton RESA Community Discussion

Facilitated by TBD Solutions

September 14<sup>th</sup>, 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.