

ST. CLAIR COUNTY COMMUNITY MENTAL HEALTH
3111 Electric Avenue
Port Huron, Michigan 48060

GROUP MEETING: Advisory Council
PLACE: St. Clair County CMH – Summit
DATE: October 16, 2024
TIME: 12:00 p.m.
PRESIDING: Nancy Thomson, Chairman

PRESENT: N. Condland, S. Herrle, T. Hudson, C. Raymo, N. Thomson, K. Thompson
ABSENT: H. Fogarty, K. Gallagher, D. Johnson, J. Marocco, R. Mirabelli, M. Partipilo, R. Thick
GUEST: D. Choiniere, A. Johnson

I. Call to Order/Agenda Changes

The meeting was called to order at 12:05 pm. Nancy Thomson informed the council that Alesha Fay and Harold Powell will no longer serve on the council, as they have both accepted new positions. Alesha plans to reach out to someone from her workplace to find a replacement. Please check if Kathleen Gallagher can contact Ruth Thick to confirm whether she still intends to remain on the council. We also need to focus on recruiting additional members for the council, and it would be helpful to ask clinicians to consider referring individuals who receive services. Additionally, the Quality Improvement Committee is seeking individuals who receive services as well.

II. Review/Accept Minutes

Cynthia Raymo moved to approve the meeting minutes from August 21, 2024, with Nora Condland seconding the motion.

III. Satisfaction Survey Update

Denise Choiniere presented the satisfaction survey results for fiscal year 2024. The surveys were administered August 14, 2024 - September 11, 2024. All individuals or the parent/guardian of those individuals open to services on July 26, 2024, received a hardcopy survey via mail. We need to identify individuals for demographic purposes related to insurance, programs, and other similar requirement. Each mailed survey also included a self-addressed stamped envelope for their convenience. Two weeks following the initial mail out, any individuals who had not yet forwarded their completed survey were contacted via phone and given an additional opportunity to complete the survey. Adding the follow up calls to the survey process significantly increased the response rate and gave individuals an alternative method to express their satisfaction with services.

The overall response rate for FY24 Customer Satisfaction was 19% (779 of 4088). This was a one percent increase from FY23.

The overall satisfaction rate was 93%, a 2% decrease from the previous year. The questions used to determine the overall satisfaction include the following:

- Child: “Overall, I am satisfied with the services my child received.” 88% or (88 of 100)
- Adult: “I like the services that I received here.” 94% or (633 of 673).

SCCCMH staff work very hard to provide the highest level of service to all individuals open to CMH. In fiscal year 2024, SCCCMH had and continues to have high levels of individuals requesting services. We are always looking for ways to improve the services we provide as the need for more services continues.

Survey Questions (Child & Adult):

- There were two surveys administered one for children and one for adults.
- The child survey consisted of 31 questions, 28 straightforward questions and three open ended questions.
- The adult survey consisted of 41 questions, 38 straightforward questions and three open ended questions.
- The possible responses for the straightforward questions included Strongly Agree/Agree, Neutral, Strongly Disagree/Disagree and Not Applicable.

All surveys requesting a follow-up call were forwarded to Chief Clinical Officer Kathleen Gallagher. She then directed adult surveys to Jason Marocco or Kristen Thompson, and child surveys to Heidi Fogarty. Additionally, any surveys or comments flagged as concerning, regardless of a follow-up request, were also sent to the Chief Clinical Officer for review and follow-up. Kristen confirmed that all follow-ups have been completed.

This year, Region 10 introduced a 'neutral' category alongside 'N/A'. When included in the strongly agree/agree section, the results closely align with previous years.

The open-ended questions reveal recurring issues we have encountered in the past, such as lack of transportation, delays in testing, and frequent caseholder changes. The waitlist is typically not for general services, but rather for specific needs like psychiatric evaluations or ABA services with a particular provider.

IV. Executive Director Update

1. Strategic Plan

- a. Kristen Thompson first highlighted SCCCMH's participation in outreach activities. Internal discussions have raised the question of whether it is more effective to focus staff on larger, well-attended events or to continue spreading resources across all events. While attending every event requires significant staff time, we are concerned about who we might miss if we skip certain ones. Nancy suggested a possible solution: attending the major events annually while rotating attendance at smaller events every other year to reduce staff burnout. For events targeting specific populations, staff members who work closely with those groups are encouraged to participate.
- b. The next highlighted section was the Physician Liaison initiative, where we aim to increase outreach to all St. Clair County physicians. One of our staff members, embedded in local pediatric offices, along with Adrienne from the main office, is helping to expand this effort. Physicians are often hesitant to prescribe atypical psychotropic medications—while they might prescribe medications like Prozac, they tend to avoid injectables, which makes them uncomfortable. We are working to bridge this gap because many individuals, who are otherwise doing well and managing full-time jobs, rely on injectable medications that have proven effective for them. However, they cannot get these injections from their primary care providers.

Our outreach message emphasizes that our doctors can offer support if the individual has been stable on these medications for two years. Although it is a moving target, we have been collaborating with the People's Clinic and Community First Health Centers to expand physician participation. Nancy and Cynthia suggested broadening our outreach to hospitals, such as Corewell Health, Henry Ford, or Ascension in Richmond, where physicians may be more familiar with these types of medications. Another idea was to have patients bring a note from our physician to their primary care doctor, stating their stability on the medication, and requesting continued support.

- c. The final highlighted section addressed the implementation of a staff mass texting solution. The IT department has signed up for this service, and we are currently developing guidelines and rules for its use. We recognized the need for a reliable communication tool during recent power issues, which created confusion about staff assignments and safety protocols. In critical situations, such as

an active shooter incident, the system could provide urgent alerts, such as instructing staff to avoid certain areas until further notice.

To avoid overwhelming staff with unnecessary messages, we are establishing clear rules for what constitutes an essential communication. For now, this system will be exclusively for staff. We are also working on a synchronized communication strategy that will ensure mass texts, Facebook updates, and radio announcements contain the same information and are released simultaneously.

Nancy and Cynthia suggested using Remind, which allows staff to choose whether they want to receive texts, emails, or only urgent notifications via text. Kristen mentioned that our IT Supervisor is leading this initiative and aims to integrate it with our social media efforts. As we transition to Microsoft Teams, there will be options to display important messages during meetings—so if something urgent arises, staff can receive timely notifications without disrupting the meeting

2. Advisory Member Feedback

Members were sent a survey monkey link to provide feedback on SCCCMH performance over the last year.

V. Division Director(s) Update

1. Parenting through Change

This group will be offered regularly as part of the parenting mentoring training that many of our children's clinical staff have completed. Currently, we have two trained staff members and three more working toward certification. Our goal is to expand outreach and encourage participation.

The group provides free parenting support and empowers parents to be their child's best teacher. Parents and caregivers will receive guidance from group leaders and peer support in achieving their family's specific goals, managing challenging behaviors, and learning effective discipline techniques. Sessions are held every Tuesday at our children's location from 1:00 p.m. to 2:30 p.m.

Nancy inquired about the possibility of a nighttime group, while Cynthia asked if childcare would be provided. Kristen will have Heidi look into these options and will share the findings at the next meeting.

Cynthia also asked if SCCCMH and DHHS collaborate to recommend this group to parents. Kristen mentioned that they recently hosted a meet-and-greet with DHHS at SCCCMH and plan to hold meetings either quarterly or every six months to rebuild connections that were disrupted during COVID, when DHHS was and still are primarily working remote.

Kristen also highlighted 'Baby Court,' which supports families facing significant legal and substance abuse issues who have or are expecting children. Our children's staff will be involved in the court process to help guide these families in a positive direction early on.

2. Grandparents Raising Grandkids

The children's division will be offering a group for grandparents raising grandchildren soon. Additional information will be forthcoming, they are seeing more grandparents raising grandchildren.

3. Children's Crisis Residential

An RFI was issued for the children's crisis residential group home which will provide an alternative to inpatient psychiatric services or shorten the length of in-patient stays for children, ages seven to seventeen, who need behavioral stabilization due to a severe emotional disturbance or a severe emotional disturbance with a co-occurring intellectual or developmental disability. We have yet to receive any proposals.

4. Dental Update

Kristen has conducted research on dental care, particularly addressing the significant challenges faced by individuals with developmental disabilities. Some of these individuals often cannot tolerate dental procedures without sedation and may struggle to communicate where they are experiencing pain. Some families have had to pay out-of-pocket costs ranging from \$4,000 to \$7,000 per procedure, which has been life-changing for those individuals, but many families cannot afford such expenses. Medicaid coverage for dental care has historically been inconsistent, so Kristen reached out to all clinical staff to gather their experiences and identify any providers that accept Medicaid. While there is no straightforward solution, this is what Kristen's research has uncovered regarding options in Michigan.

- Insurance company is responsible to provide a list of providers for the needed service. Individuals should be calling the number on the back of their card to request this support. Specifically ask about surgeons on situations where sedation and extraction are needed.

If they can find a dentist that accepts the dental coverage for the dental care portion and likely an ambulatory surgery center that accepts their medical coverage, they will have little or no out-of-pocket.

- My Community Dental Centers in Port Huron (the one in our front parking lot) have a staff person who coordinates hospital cases so they may be able to help those that must be treated in a hospital. There is a lengthy wait across the state due to several factors including that since the Governor shut down emergency rooms to “optional” procedures during COVID, most have never gone back to accepting those cases because they can’t profit enough.

[Contact|MCDC \(mydental.org\)](#), [Oral Surgery Practice | Oral Surgery | Henry Ford Health | Henry Ford Health - Detroit, MI](#)

Other Resources

- University of Detroit has a dental clinic. Case managers who have recently explored this indicate it is a wait list right now. [School of Dentistry | University of Detroit Mercy \(udmercy.edu\)](#)
- University of Michigan – Delta Dental Integrated Special Care Clinic. We have a case manager helping someone through the application process for this program right now. We’ll report back on how it goes. [Delta Dental Integrated Special Care Clinic | University of Michigan School of Dentistry \(umich.edu\)](#)
- Donated Dental Clinic – This program has historically had a lengthy waitlist, but it never hurts to add someone to it. [Dental Care Program Options in Michigan \(dentallifeline.org\)](#)

5. Mobile Crisis Unit Van

Kristen Thompson and Kathleen Gallagher recently attended a national conference in St. Louis, where they saw a Mobile Crisis Unit Van in action. The great advantage of this van is that it allows staff to respond to individuals in crisis in rural areas, instead of trying to convince individuals to come back to the office, the van can be driven to their location. It functions as a fully equipped mobile office with access to health records and the ability to connect with a provider remotely.

While the van is expensive, Kathleen had discussions with County Commissioner Lisa Beedon about securing ARPA funding, and we recently received confirmation of \$50,000 in ARPA support. Our organization will cover the remaining costs, and Kathleen is now coordinating with the transportation department to place the order. The van will be a valuable resource, and we are making every effort to ensure it is wheelchair accessible. Once it arrives, we plan to showcase it at events so people can walk through and see that it feels like a therapy office and is not intimidating.

VI. Community Relations Update

1. United Way Campaign

We are excited to support United Way in their 100th anniversary fundraising campaign, with Debra Johnson serving as this year's campaign chair. Staff have a few ways to get involved: one option is through payroll deduction, and another is our "Give Me Five" initiative. Each location has designated team captains who are working to collect \$100 in \$5 pledges. For every completed pledge envelope, staff will earn entries into a prize drawing sponsored by both United Way and SCCCMH.

2. Trunk or Treats

We are excited to announce two Trunk or Treat events happening on the same day! One will be at our main office in Port Huron, and the other in Marine City. While we expect many of the families we serve to attend, these events are also open to the surrounding neighborhoods. At our Port Huron location, DHHS will be joining us, which is a great opportunity to strengthen our ongoing relationship with them.

3. Celebration of Recovery

The Celebration of Recovery will take place at Alexander's in Marysville on October 17, 2024. We are thrilled to recognize some truly exceptional individuals who have made remarkable progress in their recovery journeys, and we are excited to celebrate their achievements.

4. SCCCMH Apparel

It was noted that some Advisory Council members are interested in purchasing SCCCMH apparel. We have sent an email with a link to our staff store, set up with TP Logos. They have our logo on file, so if you find an item in their brick-and-mortar store, they can screen print or embroider it on any of their products.

VII. Policy Review

03-001-0010 Self-Determination/Choice Voucher – While there were no substantive changes to the policy, 'Case Manager' was added as a stakeholder. The procedures remain unchanged. If a family prefers to have a qualified individual from their personal network provide a service instead of an external contractor, SCCCMH allows this, provided the individual completes the necessary training. However, Medicaid rules prohibit a parent or guardian from providing these services to minor children.

VIII. Next Meeting

Wednesday, November 20th, 2024

IX. Adjournment

Meeting was adjourned at 1:00 p.m.

Respectfully Submitted,
Tonia Hudson
Recording Secretary

Reviewed and Approved,
Kristen Thompson
Adult Services Director