AGENDA

BAY ARENAC BEHAVIORAL HEALTH BOARD OF DIRECTORS PROGRAM COMMITTEE MEETING

Thursday, November 9, 2023 at 5:00 pm

William B. Cammin Clinic, Bay Room, 1010 N. Madison Avenue, Bay City, MI 48708

| Committee Members: | Present | Excused | Absent | Committee Members: | Present | Excused | Absent | Others Present: |
|---------------------|---------|---------|--------|---------------------------|---------|---------|--------|---|
| Chris Girard, Ch | | | | Toni Reese | | | | BABH: Heather Beson, Joelin Hahn, |
| Ernie Krygier, V Ch | | | | Colleen Maillette, Ex Off | | | | Chris Pinter, Allison Gruehn, Sarah Van |
| Robert Luce | | | | Richard Byrne, Ex Off | | | | Paris, and Sara McRae |
| Sally Mrozinski | | | | | | | | |
| | | | | | | | | Legend: M-Motion; S-Support; MA- |
| | | | | | | | | Motion Adopted; AB-Abstained |

| | Agenda Item | Discussion | Motion/Action |
|----|--|------------|---|
| 1. | Call To Order & Roll Call | | |
| 2. | Public Input (Maximum of 3 Minutes) | | |
| 3. | Clinical Program Review 3.1) Adult Mental Illness Services, A. Gruehn | | 3.1) No action necessary |
| 4. | Requests for Clinical Privileges 4.1) Ali Ibrahim, Medical Doctor (MD), – Two-Year Renewal Term Expiring November 30, 2025 4.2) Jill LeBourdais, Physician's Assistant | | 4.1) Consideration of a motion to refer the clinical privileges for Ali Ibrahim, MD, to the full Board for approval4.2) Consideration of a motion to refer the clinical privileges |
| | (PA), - Two-Year Renewal Term Expiring November 30, 2025 | | for Jill LeBourdais, PA, to the full Board for approval |
| 5. | Unfinished Business 5.1) None | | |

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| | New Business 6.1) Medical Staff Plan, S. Van Paris | | | 6.1) Consideration of motion to refer the Medical Staff Plan to the full Board for approval |
|----|---|-----|-----|---|
| | 6.2) Crisis Residential Unit Update, J. Hahn | | | 6.2) No action necessary |
| 6. | 6.3) Capacity Recovery Planning Update, J. Hahn | | | 6.3) No action necessary |
| | 6.4) Community Mental Health Association (CMHA) 2023 Go To Bat Award, C. Pinter | | | 6.4) No action necessary or consideration of motion to refer a nominee to the full Board for approval |
| 7. | Adjournment | M - | S - | pm MA |

Adult MI Services

Adult Case Management/Supports Coordination
Senior Outreach
Assertive Community Treatment

Adult Targeted Case Management

- Targeted case management is a specialty mental health service that assists consumers to design and implement strategies for obtaining services and supports that are goal-oriented and individualized.
- Targeted case management is provided in a responsive, coordinated, effective and efficient manner focusing on process and outcomes.
- Caseload size and composition must be realistic for the case manager to complete the core requirements as identified in the individual plan of service developed through the person-centered planning process.

Services Provided by Targeted Case Management

- Assisting the beneficiary to access programs that provide financial, medical, and other assistance such as Home Help and Transportation services.
- Assuring coordination with the beneficiary's primary and other health care providers to assure continuity of care.
- Coordinating and assisting the beneficiary in crisis intervention and discharge planning, including community supports after hospitalization.
- Facilitating the transition (e.g., from inpatient to community services, school to work, dependent to independent living) process, including arrangements for follow-up services.
- Assisting beneficiaries with crisis planning.
- Identifying the process for after-hours contact.

Supports Coordination

- When individuals no longer have targeted case management goals and continue to be eligible for specialty mental health services an individual may receive supports coordination.
- Supports strategies incorporate the principles of empowerment, community inclusion, health and safety assurances, and the use of natural supports.
- Supports coordinators work closely with the beneficiary to assure ongoing satisfaction with the process and outcomes of supports, services, and available resources.

Services Provided by Supports Coordination

The Support's coordinator assesses the need for support and service coordination, and assurance of the following:

- Planning and/or facilitating planning using person-centered principles
- Developing an individual plan of service using the person-centered planning process
- Linking to, coordinating with, follow-up of, advocacy with, monitoring of, and/or providing education about Specialty Services and Supports and other community services/supports
- Brokering of providers of services/supports
- Assistance with access to entitlements and/or legal representation
- Coordination with the Medicaid Health Plan, Medicaid fee-for-service, or other health care providers

Senior Outreach

- Provides mental health services to senior adults who reside in Nursing Homes or Private Residences and unable to access services due to lack of transportation, severity of their physical and mental health needs and lack of natural supports.
- Clinical services are provided in the consumer's home environment.
- Services are provided to senior adults who have mental illness, developmental disabilities, and/or co-occurring mental and substance use disorders.

Services provided by Senior Outreach

- Evaluate the social, emotional, and treatment needs of each consumer.
- Individual therapy sessions.
- Crisis intervention as needed.
- Diagnostic evaluations, community consultations, and education as needed.
- Psycho-education on issues related to aging for consumer, family members, family caregivers and other natural supports.

Assertive Community Treatment

- ACT is a service delivery model, not a case management program
- ACT's primary goal is recovery through community treatment and habilitation
- A team approach
- Services provided in homes, work settings, or other places in the community
- A small caseload
- Time-unlimited services
- A shared caseload
- Flexible service delivery
- Primary responsibility for all services
- Crisis management available 24 hours a day, 7 days a week

ACT has Primary responsibility for all services

- Collectively ACT team members are experienced in psychiatry, psychology, nursing, social work, rehabilitation, substance-abuse treatment, and employment
- Rather than referring individuals to multiple programs and services, the ACT team provides the treatment and services individuals need
- If people need a service the team is unable to provide—for example, housing or medical care—the team is responsible for making certain they receive that service

ACT is targeted for individuals with:

- A primary diagnosis of a severe and persistent mental illness
- Significant difficulty doing the everyday things needed to live independently in the community, or
- Continuously high-service need

Bay-Arenac Behavioral Health Authority Medical Staff Plan 2021-2022

Board Adoption: 5/20/2021

ARTICLE I: PURPOSE

The Medical Staff of Bay-Arenac Behavioral Health Authority, (BABHA) is composed of licensed independent or supervised practitioners who provide medical care to the agency's consumers either under employment or contractual arrangements.

The Medical Director, under the authority of the Chief Executive Officer (CEO) and Board, is responsible for establishing and monitoring standards of care, resolving disputes over clinical matters, providing supervision to all medical and nursing staff and promoting quality and performance improvement initiatives.

ARTICLE II: MEDICAL STAFF MEMBERSHIP

Section 1. Nature of Medical Staff Membership

Membership on the BABHA medical staff is a privilege, which shall be extended only to professionally competent prescribing professionals who continuously meet the qualifications, standards and requirements set forth in this Medical Staff Plan.

Section 2. Qualifications for Membership

- A. Only a prescribing professional holding an unlimited license to practice in the State of Michigan, who can produce evidence of his or her background, experience, training, judgment, individual character, and demonstrated competence, physical and mental capabilities (referring to any potential impairment), adherence to the ethics of his/her profession to assure the Medical Director, and/or the CEO that any patient treated by him/her will be given a high quality of medical care, shall be qualified to apply for membership, and
- B. Primary Source verification of successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) approved residency for the Psychiatrist is required. National board certification in specialty is preferred. National certification from the American Nurses Credentialing Center (ANCC) or the American Association of Nurse Practitioners (AANP) for Nurse Practitioners or National Commission on Certification of Physician Assistants (NCCPA) for Physician Assistants is required at hire or contract.

Section 3. Nondiscrimination

No aspect of Medical Staff membership or clinical privileges shall be denied on the basis of gender, race, religion, age, creed, color, national origin or any other basis prohibited by law.

Section 4. Conditions and Duration of Privileges

- A. The CEO shall review all initial privileges and renewal of privileges to the Medical Staff, upon recommendation by the Medical Director. The Medical Director will seek input from the Healthcare Practices Committee (HPC) when formulating his/her recommendation(s). The Medical Director will then make recommendations to the CEO. If the CEO concurs with the Medical Director's recommendation(s), the privileging request is forwarded to the appropriate committee of the BABH Board for action. The Board shall act on privileges and renewal of privileges, denials or revocations of privileges and reinstatements, and
- B. Renewal of privileges to the Medical Staff shall be for no more that 24 calendar months. Initial privileges are Provisional and are for 12 calendar months.

Section 5. Ethics

A person who accepts membership on the Medical Staff agrees to act in an ethical, professional, and courteous manner, in accordance with the mission and philosophy of BABHA.

Section 6. Responsibilities of Membership

- A. Each Medical Staff member must abide by the Medical Staff Plan,
- B. And BABHA policies and procedures and recommendations made by the (HPC), when applicable.
- C. Each Medical Staff member shall, upon request, provide documented evidence of current and continuous professional license, Federal and State controlled substance licenses, recent MAPS report card if applicable, and professional liability insurance in accordance with BABHA policy.
- D. Each Medical Staff member shall submit a complete application for renewal of privileges prior to the end of the current privileging time frame, as directed by the credential verification organization. Failure of the Member to submit such an application in a timely manner shall be construed as a voluntary resignation from the Medical Staff.
- D. Each Medical Staff member shall notify the Medical Director or CEO in writing within 15 calendar days or receipt of written or oral notice of any investigation or adverse action affecting Medical Staff membership or privileges at any hospital or health care entity, the commencement of an investigation or pending action regarding his/her license to practice

in the State of Michigan or in any other state, the loss of professional liability insurance, the filing of criminal charges, or any change in physical or mental health status which may interfere with the competent practice of his/her profession and performance of duties. Failure to notify may result in immediate suspension of privileges. The Medical Director or CEO is required to report any receipt of written or oral notice of any of the above action to the Department of Licensing and Regulatory Affairs (LARA).

Section 7. Medical Staff Member Rights

- A. Each member of the Medical Staff has the right to meet with the Medical Director or the CEO.
- B. Each member of the Medical Staff has the right to fully participate in the meeting of the Medical Staff.

Section 8. Temporary Privileges and Provisional Privileges

A. Temporary Privileges

The Healthcare Practices Committee will review credentials prior to making a recommendation for temporary privileges to the CEO. Temporary privileges may be granted for up to 120 days during the Credentialing Process. to the Temporary privileges may be granted to an applicant by the CEO, in consultation with the Medical Director, for up to 120 days during the Credentialing Procedure.

B. Provisional Privileges[JL1]

Each applicant approved for initial privileges will be granted Provisional Privileges for a period of one calendar year. At the end of the one-year provisional period, an evaluation of performance, to include input from the HPC, will be conducted. The individual will be eligible for full privileges if all requirements have been fulfilled and an acceptable standard of care and conduct have been rendered.

ARTICLE III: MEDICAL STAFF MEETINGS

Section 1. Meetings of Medical Staff

- A. Meetings of the Medical Staff shall be held and chaired by the Medical Director. Written notice of the meeting will be sent to all members of the medical staff. The agenda of the meeting may include reports on quality indicators, pertinent clinical topics or case studies and performance measures. In addition, goals for the following year will be discussed and established.
- B. Written minutes of all meetings shall be recorded and approved.

- C. Additional communications during the year may occur by mail (e.g. newsletters, etc.) and email.
- D. All nursing staff from the clinic sites will be periodically invited to attend the regularly scheduled Medical Staff meetings.

ARTICLE IV: PROFESSIONAL REVIEW ACTIONS

Section 1. Automatic Revocation (Voluntary Resignation), Suspension, Restriction, Limitation

- A. State License: Whenever a medical staff member's license to practice in the state of Michigan (and in the state which they are physically located while practicing tele-psych) is revoked, suspended, or in any way limited or restricted, his/her privileges to practice under contract with BABHA will also be revoked, suspended, limited, or restricted to the same degree. Revocation shall result in immediate and automatic revocation of Medical Staff membership and all clinical privileges. Any suspension, limitation or restriction will be effective upon and for at least the term of the imposed suspension, limitation or restriction. The Medical Director, under the authority of the CEO, will implement the appropriate restriction. If BABHA takes any action against any medical staff member for a quality concern, the Medical Director and/or CEO are required to report this to the State of Michigan Health Professional Licensing Bureau (LARA).
- B. Drug Enforcement Agency (DEA) and State of Michigan Controlled Substance License: If a medical staff member's right to prescribe controlled substances is revoked, restricted, suspended, or placed on probation by a proper licensing authority, his or her privileges to prescribe such substances under contract with BABHA will also be revoked, restricted, suspended or placed on probation. The Medical Director, under the authority of the CEO, will implement the appropriate restriction.
- C. Professional Liability Insurance: Evidence of professional liability insurance coverage, as defined by BABHA policy and/or clinical service contracts, shall be submitted upon request and in no event more than thirty calendar days after the effective date of the policy or renewal of the policy. Failure to maintain a minimum amount of professional liability insurance or to provide evidence thereof shall be construed as a voluntary resignation from the member's medical staff clinical privileges.

Any Member of the Medical Staff whose membership and clinical privileges have been automatically revoked under Section 1 above shall not have the right to a hearing under the Board's Grievance Procedure.

ARTICLE V: IMMUNITY FROM LIABILITY

The following shall be express conditions to any practitioner's application or reapplication for membership and clinical privileges with the BABHA Medical Staff.

Section 1. Privileged Communications

Any act, communication, report, recommendation, or disclosure regarding any practitioner, performed or made in good faith and without malice and at the request of an authorized representation of this or any other healthcare entity, for the purpose of achieving and maintaining quality patient care in this or any other healthcare entity, shall be privileged from disclosure to the fullest extent provided by law.

Section 2. Immunity and Release from Liability

No person furnishing information, data, reports, and records to any supervisor, Medical Director, or CEO regarding any member of the medical staff shall, by reason of furnishing such information, be liable in damages to any person. Employees of BABHA will not be liable in damages to any person for any actions taken or recommendation made within the scope of his/her employment if such an employee acts without malice and in the reasonable belief that such action or recommendation is warranted by the facts known to him/her. Each member and applicant agree to release, indemnify and hold harmless BABHA and all third parties from liability for any and all such statements or actions.

Section 3. Release of Information

BABHA representatives who may provide information to any other hospital or entity to which a Member or past Member may apply for membership and/or clinical privileges shall, by reason of furnishing such information, not be held liable in damages to any person, provided such release of information is made within the scope of the duties of such representative and is made in good faith and without malice.

ARTICLE VI: HEALTHCARE PRACTICE COMMITTEE (HPC)

Section I. Medical Director Responsibilities

- A. The Medical Director of BABHA will provide oversight of the Medical Staff Psychiatric Services and Health Care Practices.
- B. The oversight and peer review processes will be completed through the HPC activities, as outlined in the HPC criteria for review.
- C. These processes will be for educational purposes and monitoring for quality trends and compliance with agency policy and procedures for the licensed professionals providing services in the Medical Practices.
- D. The Medical Director will consult with the CEO regarding the Medical Staff Practices, as deemed necessary.

Section 2. Meeting Activities

- A. The HPC will meet on a monthly basis, or sooner if needed, to review established criteria, as outlined in the HPC.
- B. The HPC will review all medically related policies, procedures, and plans.
- C. The HPC will provide peer review information and other pertinent information to the Medical Director during the privileging process.
- D. Nursing Self-Assessment Skills Checklist will be completed annually by each nurse and reported to HCP, as necessary.

ARTICLE VII: MANAGEMENT OF PRESCRIBING PRACTICES

Section I. Electronic Software

- A. All BABHA sites will use an electronic software system to ensure a prescribing data base is in place.
- B. This database will be used to review prescribing practices and feedback will be provided to the HPC as appropriate.

ARTICLE VIII. ATTACHMENTS

HPC Committee – Statement of Purpose and Membership

Attachments to HPC:

- Medical Record Peer Review Guidelines
- Medical Record Peer Review Tool

Nursing Self-Assessment Skills Checklist



"GO TO BAT" AWARD **NOMINATION FORM**

- The "Go To Bat" Award is presented by the Community Mental Health Association of Michigan to an individual outside of the public mental health system (DHHS or CMH) who exemplifies extraordinary concern, advocacy or leadership aimed at improving the quality and quantity of community-based mental health services for persons with mental illness and developmental disabilities in Michigan. Note: "Outside of public mental health refers to an individual who cannot be receiving monetary compensation from the CMH system).
- II. Nominations may be submitted by any of the following member groups:
 - A CMH Board
 - An Affiliate Member

 - An Association Standing Committee
- The CMHA Executive Board
- An Association Region

| III. | NAME OF NOMINEE SENCETOR Kristen Mc Donald-Rivet |
|------|---|
| | Nominated by College Madlette |
| | Nominee's Address 21000 Center Pore, Baylety MI 48708 |
| | Phone Number (home) 517-294-0349 (business) 984-297-4107 Steve Process |
| | Nominee's Occupation and Place of Employment Sendor at Michigan State Sende |
| | List community service or professional organizations with which the nominee is or has been affiliated. Please include |
| | the nominee's relationship to each organization. Michigan Future Try Former |
| | Zndward Connulioner former President/CED at Greater |
| | Midland Comments venter, torner VP Birgunit Policy the Skilman |
| | foundation, worked at MI Dept of Human Services (Condernor Office |
| | Former Executive duredon Michigan Wood Start Assoc, Former |
| | Chief of Stay at MI Dept of Education worked at the MI housen type |
| | |

- ON A SEPARATE SHEET OF PAPER, PLEASE PROVIDE A DESCRIPTION OF THE NOMINEE'S IV. CONTRIBUTION TO IMPROVING COMMUNITY-BASED PUBLIC MENTAL HEALTH SERVICES IN MICHIGAN.
- To be considered, all nominations must be submitted on this form, or a copy of same, to: CMH Association of Michigan, 507 South Grand Ave., Lansing, MI 48933 or Fax: 517-374-1053. THE DEADLINE FOR NOMINATIONS IS NOVEMBER 17, AT 5:00pm. All nominations will be submitted to the Member Services Committee in care of the Association office. Award recommendations will be based on the quality of this description. its support information and attachments, not the number of nominations an individual receives. Nominees will NOT be considered without supporting documentation. The award will be presented during the Association's Winter Conference.
- VI. For more information, please contact Monique Francis at 517-374-6848 or e-mail mfrancis@cmham.org.

PREVIOUS RECIPIENTS OF THE "GO-TO-BAT" AWARD

2022 – Senator Rick Outman

2021 - Sheriff Mat King

2020 - Representative Sue Allor

2019 - The Honorable Freddie Burton

2018 - Kevin Fischer

2017-Andrea Cole

2016—Lieutenant Governor Brian Calley and Representative Rob VerHeulen 2015—The Honorable John Tomlinson and The Honorable Dorene Allen 2014—Senator Mike Shirkey

2013-Representative Matt Lori and Representative Al Pscholka

2012-Stephen Fitton

2011-Veda Sharp

2010-Senator Roger Kahn

2009-Senator Gilda Jacobs

2008-Representative Gary McDowell

2007-Senator Tony Stamas

2006-Governor Jennifer Granholm

2005-Representative Bruce Caswell

2004-Senator Beverly Hammerstrom

2003-Representative Gary Newell

2002-Judith Taylor

2001-Senator Dan DeGrow

2000-Senator Shirley Johnson

1999-Representative Terry Geiger

1998-Senator Joseph Conroy

1997-Senator Robert R. Geake

1996-Patrick Elwell

1995-Representative Beverly Hammerstrom and Senator Joel Gougeon

1994-Representative Donald Gilmer

1993-Representative Nick Ciaramitaro

1992-Margie Mitchell

1991-William Allen

1990-Representative Dick Allen

1989-Representative Debbie Stabenow

1988-Ben Censoni