## **MINUTES**

## BAY ARENAC BEHAVIORAL HEALTH BOARD OF DIRECTORS

## **HEALTH CARE IMPROVEMENT & COMPLIANCE COMMITTEE MEETING**

Monday, December 2, 2024 at 5:00 pm

Room 225, Behavioral Health Center, 201 Mulholland Street, Bay City, MI 48708

|     | Committee Members:        | Present | Excused | Absent | Committee Members:    | Present | Excused | Absent | Others Present:                    |
|-----|---------------------------|---------|---------|--------|-----------------------|---------|---------|--------|------------------------------------|
|     | Robert Pawlak, Ex Off, Ch | X       |         |        | Patrick McFarland     | X       |         |        | BABH: Karen Amon, Sarah Holsinger, |
| 1   | Christopher Girard, V Ch  | X       |         |        | Pam Schumacher        | X       |         |        | Chris Pinter, and Sara McRae       |
|     | Tim Banaszak              |         | X       |        | Richard Byrne, Ex Off | X       |         |        |                                    |
| 1   | Patrick Conley            | X       |         |        |                       |         |         |        | Legend: M-Motion; S-Support; MA-   |
| 1 1 |                           |         |         |        |                       |         |         |        | Motion Adopted; AB-Abstained       |
|     |                           |         |         |        |                       |         |         |        |                                    |

|    | Agenda Item  | Discussion   | Motion/Action   |
|----|--|--|---|
| 1. | Call to Order & Roll Call  | Committee Chair, R. Pawlak, called the meeting to order at 5:00 pm.  | On motion of C. Girard and support of R. Byrne, T. Banaszak was excused. The motion passed unanimously. |
| 2. | Public Input (Maximum of 3 Minutes)  | There were not any members of the public present.  |   |
| 3. | Corporate Compliance Report<br>3.1) Corporate Compliance Report  | 3.1) K. Amon provided the corporate compliance report noting there have not been any fraud, abuse, or privacy complaints. K. Amon reported there have been an increase in subpoenas received, the compliance consultations completed, and strategic planning for 2025 is underway. | 3.1) No action was necessary  |
|    | 3.2) Corporate Compliance Committee notes from October 14, 2024  | 3.2) The Committee reviewed the notes.   | 3.2) No action was necessary  |
| 4. | Other Reports 4.1) Primary Network Operations and Quality Management Committee notes from October 10, 2024 | 4.1) The Committee reviewed the notes.   | 4.1) No action was necessary  |

| 5. | Unfinished Business 5.1) Donation of Personal Protection Equipment (PPE)                | 5.1) K. Amon reported the Nicklass Clinic will accept a donation of PPE from BABH and thanked the Committee for the suggestion.   | 5.1) No action was necessary  |
|----|---|---|---|
| 6. | New Business 6.1) 2024-2025 Information Management Strategic & Operational Plan (IMSOP) | 6.1) K. Amon reviewed the proposed revisions to the IMSOP noting the 2024-2025 program priorities and summary of updates. The phone system's end of life is in December of 2025. The reduction of BABH's physical footprint will be considered as part of the evaluation process. There were general discussions regarding artificial intelligence (AI) application opportunities for BABH.   | 6.1) On motion of R. Byrne and support of C. Girard, the 2024-2025 IMSOP was referred to the full Board for approval. The motion was adopted unanimously. |
|    | 6.2) Quality Dashboard/Report   | 6.2) S. Holsinger provided the quality report noting adverse events, emergency physical interventions, cardiovascular screening, Medicaid event verification, evidence of primary care, performance indicators, and the provider survey. There were general discussions regarding the majority of emergency physical interventions are resulting from a new placement, the performance indicators and challenges to engage people in care because most individual seek care when they are in a crisis, transportation and other barriers to accessing services, benefits of a walk-in service model, the physical building expansion of Great Lakes Bay Health, the patient reminder process including text messages and phone calls, providers are not paid for no-shows, no-show are common in the behavioral health care industry. | 6.2) No action was necessary  |
|    | 6.3) Wirt Building Update   | 6.3) K. Amon reported the moves relocating staff from the Wirt Building are in progress. Movers are scheduled for next week.  | 6.3) No action was necessary  |
|    | 6.4) HCIC Committee Changes 2025  | 6.4) S. McRae reviewed the spreadsheet with committee functions anticipated to be reported on each month for the 2025 board organizational structure changes. S. McRae also reviewed the draft board calendar for February of 2025 to prepare for the transition. There were general discussions regarding whether there are unintended consequences of the transition.   | 6.4) No action was necessary  |

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7. Adjournment

On motion of R. Byrne and support of C. Girard, the meeting adjourned at 5:34 pm. The motion passed unanimously.

Robert Pawlak, Committee Chair