NORTHEAST MICHIGAN COMMUNITY MENTAL HEALTH AUTHORITY

NOVEMBER BOARD MEETING

November 12, 2026
3:00 p.m.

400 Johnson St.
Alpena, MI 49707

(989) 356-2161 ☎ (800) 968-1964

NORTHEAST MICHIGAN COMMUNITY MENTAL HEALTH AUTHORITY BOARD
Meeting Agenda | Thursday, November 12, 2026 | 3:00 p.m.

MISSION STATEMENT
To provide comprehensive services and supports that enable people to live and work independently.

I. Call to Order

II. Roll call & Determination of a Quorum

III. Pledge of Allegiance

IV. Acknowledgement of Conflict of Interest

V. Information and/or Comments from the Public

VI. Approval of Minutes ..... **(Pages 1 – 4)**

VII. Consent Agenda: NEMROC ..... **(4.1)**

VIII. Consent Agenda ..... **(Handout)**

IX. Educational Session: Annual Compliance Report & Training with Jen Walburn ... **(Presentation)**

X. November Monitoring Reports
1. Treatment of Individuals Served 01-002 ..... **(Page 5 – 9)**
2. Ends 04-001 ..... **(Handout)**

XI. Board Policies Review
1. Treatment of Individuals Served 01-002 [Review] ..... **(Pages 10 – 11)**
2. Staff Treatment 01-003 [Review] ..... **(Page 12)**

XII. Linkage Reports
1. NMRE Board ..... **(Verbal)**
   a. 2026 Customer Satisfaction Survey Results ..... **(Pages 13 – 26)**
2. CMHA Fall Conference ..... **(Verbal)**

XIII. Operations Report ..... **(Page 27)**

XIV. Nominations Committee Report ..... **(Verbal)**

XV. Board Chair's Report
1. Board Meeting Evaluation ..... **(Pages 28 – 30)**

XVI. Executive Director's Report ..... **(Verbal)**

XVII. Information and/or Comments from the Public

XVIII. Information and/or Comments for the Good of the Organization

XIX. Next NeMCMHA Board Meeting – Thursday, December 10, 2026, at 3:00 p.m.
1. Proposed December Items..... **(Page 31)**

XX. Adjournment

Northeast Michigan Community Mental Health Authority
Board Meeting and Budget Public Hearing – October 8, 2026

I. Call to Order

Chair Eric Lawson called the meeting to order in the Board Room at 3:00 p.m.

II. Roll Call and Determination of a Quorum

Present:	Bob Adrian, Dennis Bannon, Bonnie Cornelius, Jennifer Graham, Lynnette Grzeskowiak, Charlotte Helman, Eric Lawson, Kara Bauer LeMonds, Lloyd Peltier, Anne Ryan, Terry Small.
Absent:	Dana Labar (Excused)
Staff & Guests:	Carolyn Bruning, Connie Cadarette, Rebekah Duhaime, Erin Fletcher, Jason Lepper, Brooke Paczkowski, Kerry Rastigue, Nena Sork, Kara Steinke, Jen Walburn, Lisa Wilson

III. Pledge of Allegiance

Attendees recited the Pledge of Allegiance as a group.

Chair Eric Lawson struck item VIII from the agenda, as the NEMROC contract is not yet finalized.

IV. Acknowledgement of Conflict of Interest

No conflicts of interest were acknowledged.

V. Information and/or Comments from the Public

None were presented.

VI. Approval of Minutes

Moved by Charlotte Helman, supported by Terry Small, to approve the minutes of the September Board meeting. Motion carried.

VII. Consent Agenda

Board members received a handout with one additional item for the consent agenda, the Michigan Rehabilitation Services (MRS) Interagency Cash Transfer Agreement (ICTA). The consent agenda included Compassionate Care, Bay View Center, Catholic Human Services, Touchstone Services, Inc. dba Light of Hope Clubhouse, Autism of America, Acorn Health, The Sunset Project, Partners in Prevention, Assistance to Independence (ATI), Thunder Bay Transportation, 10 inpatient hospitals, Karen's Accounting, Amanda's Payroll Services, Case Management of Michigan, and North Shores/Alpine CRU/Bay City CRU.

Moved by Bob Adrian, supported by Lynnette Grzeskowiak, to approve the October 2026 Consent Agenda. Roll Call: Ayes: Bob Adrian, Bonnie Cornelius, Jennifer Graham, Lynnette Grzeskowiak, Charlotte Helman, Eric Lawson, Kara Bauer LeMonds, Lloyd Peltier, Anne Ryan, Terry Small; Nays: None. Absent: Dana Labar. Motion carried.

VIII. October Monitoring Reports

1. Budgeting 01-004

Connie Cadarette reported on revenue and expenses for the month ending August 31, 2026, with 91.67% of the year elapsed. Larger variances are mostly due to timing and should even out next month due to their prepaid nature. Staff Recruiting and Development will retain a variance due to more expensive Indeed postings, which did yield positive results in recruiting qualified staff. The variance on Miscellaneous Expenses is due to state hospitalizations. The Change in Net Position is at $1,060,687, which are funds that can be kept. General Funds are underspent by $28,477. Medicaid and Healthy Michigan combined are underspent by $1.2 million, of which around $400,000 will be sent back to the NMRE at the end of the year. There are 46 days of cash on hand.

2. Compensation and Benefits 01-008
Rebekah Duhaime reported that the only change to the monitoring report from last year was the new expiration date for the Executive Director's contract.

Moved by Bonnie Cornelius, supported by Lynnette Grzeskowiak, to approve the October monitoring reports. Motion carried.

IX. Public Hearing: FY27 Budget

Chair Eric Lawson opened the public hearing for the FY27 budget at 3:12 p.m.

Connie reviewed the proposed FY27 Budget, starting with the Revenue Budget. Changes included not budgeting for NMRE incentive revenue, as it is not expected for FY27. An increase of 2.5% was budgeted for Medicaid rates. BHH will see an increase in revenue, up to $690,000. Food Stamps has decreased as all food stamp amounts have gone down due to redeterminations. The total amount budgeted for FY27 is $43,363,309, an increase of $1,103,460 over FY26.

Connie next reviewed the Expenditure Budget (by account) for FY27. An increase of $748,502 was budgeted for Salaries. Connie based the budgeted Health Insurance amount off FY26 usage and then added a 9% increase. Dental and Vision Insurance rates are going down. Mileage will increase to $0.71 for the new fiscal year. The Expenditure Budget (by program) was created assuming full staffing across all departments. The Capital Purchases budget includes six replacement vehicles to be purchased.

Moved by Terry Small, supported by Charlotte Helman, to approve the proposed FY27 Budget. Roll Call: Ayes: Bob Adrian, Bonnie Cornelius, Jennifer Graham, Lynnette Grzeskowiak, Charlotte Helman, Eric Lawson, Kara Bauer LeMonds, Lloyd Peltier, Anne Ryan, Terry Small; Nays: None. Absent: Dana Labar. Motion carried.

Chair Eric Lawson closed the public hearing for the FY27 budget at 3:26 p.m.

X. Board Policies Review

1. Annual Board Planning Cycle 02-007
The Board reviewed the policy, noting that they could better "celebrate," as noted in number three.

2. Executive Director Job Description 03-003
Board members and Nena discussed the usefulness of the short policy as the Executive Director's job description. This approach to the job description comes directly from the Carver Model. Per the policy, Nena's performance is viewed as covering "organizational performance as a total."

3. Monitoring Executive Director Performance 03-004
The Board discussed how this policy fits with the Executive Director Job Description Policy, in that the Board has Ends that the Executive Director must strive to meet while staying within her Executive Limitations.

4. Board Ends Statement 04-001
The Board reviewed revisions which reflect changes made to Ends during strategic planning.

Moved by Terry Small, supported by Kara Bauer LeMonds, to accept the revised Board Ends Statement Policy. Motion carried.

XI. Linkage Reports

1. Northern Michigan Regional Entity (NMRE) Board
Eric reported this was Chip Johnston's last meeting as the Executive Director of Centra Wellness, as he is retiring after 36 years in the CMH system. Chip began the Crisis Response Officer program with the Benzie County

Sheriff in response to state-required adult mobile crisis response, which had requirements that were unfeasible in rural Michigan. The CMH pays half a deputy's salary and trains them, and then, as an employee, they can access applicable electronic health records to help individuals in crisis. Ferris State University will be doing research to make the Crisis Response Officer program an evidence-based practice.

Eric shared that mediation on the NMRE's lawsuit regarding the MDHHS contract was not successful and it will be going to a hearing. The issues are the 7.5% cap on the internal service fund and the items added from the result of the Waskul Settlement.

2. Advisory Council

The Council had a quorum for the first time since February. They discussed the Walk a Mile Rally in Lansing and a conference Light of Hope Clubhouse members recently attended. The Council has reached its minimum membership amount of eight members.

XII. Operations Report

Erin reported on operations for the month of September, reviewing the distinctions between the different case management programs. I/DD Case Management serves individuals of any age with an I/DD diagnosis. They served 131 individuals in September. MI Adult Case Management serves adults between the ages of 18-54 and they served 69 individuals in September. Older Adult Case Management serves individuals over the age of 55 and they also served 69 individuals in September. The total of unduplicated individuals served in September was 993.

XIII. Board Chair's Report

1. FY27 Strategic Plan

Board members received their spiral-bound FY27 Strategic Plans.

2. Schedule Nominations Committee Meeting

There are four Board members with terms expiring on March 31, 2027: Terry, Eric, Kara, and Charlotte. Bonnie, Lynnette, Dana, and Lloyd will make up the Nominations Committee and will meet at 2:30 p.m. before the November 12 Board meeting.

3. CMHA Fall Conference (October 26 & 27): Attendees and Voting Delegates

Kara, Dana, Bonnie, Lloyd, and Anne will all be attending the conference. Bonnie and Lloyd will be the voting delegates on Sunday evening.

XIV. Executive Director's Report

Nena and Jen Walburn introduced Lisa Wilson as the new Quality Improvement Coordinator. Lisa had previously worked for the Agency as an I/DD Case Manager.

Nena reviewed her activities over the last month, including meetings attended and chaired. Much of the month consisted of meetings with contract providers to finalize their FY27 contracts. A lot of time has been spent on one specific case that has become outside the scope of the Agency concerning medical care. She has been consulting with attorneys and the State to gain support. She met with VOYA for their annual review of staff retirement accounts, which earned between 11-14% on investments over the year.

Nena reported that the Agency was awarded a two-year, $663,196 grant to create an evidence-based program based on the Agency's Assisted Outpatient Treatment (AOT) program. Kara Steinke, CAO, wrote the grant for the Michigan Health Endowment. The Agency will partner with a university to create a replicable evidence-based practice to share with other CMHs in the state and nationally. Hospital recidivism has gone down by 40-60% since Dr. Spurlock started having individuals stay on court orders for a longer period to ensure they have true insight into their mental illness and need for treatment.

The Agency had the second highest rate of return for the NMRE's annual consumer survey, with 232 completed surveys. Nena was glad to see the percentage of individuals who feel CMH staff treat them nicely has increased to 95%.

Chip Johnston will be starting a consulting business, Platte Management and Contracting Services, after his retirement from Centra Wellness. Nena asked the board to approve entering into a contract for consulting services at the rate of $1,000 per month, with a maximum cost of $12,000 for the year. This would provide a minimum of five hours from Chip each month, though he would be able to work more at no additional cost. He will be focusing on the new program with the Alcona County Sheriff and SIP homes. The contract will also include provisions that if the Agency is in funding or revenue deficit, the contract will end without a 30-day waiting period.

Moved by Terry Small, supported by Charlotte Helman, to approve entering into a contract with Platte Management and Contracting Services. Roll Call: Ayes: Bob Adrian, Bonnie Cornelius, Jennifer Graham, Lynnette Grzeskowiak, Charlotte Helman, Eric Lawson, Kara Bauer LeMonds, Lloyd Peltier, Anne Ryan, Terry Small; Nays: None. Absent: Dana Labar. Motion carried.

XV. Information and/or Comments from the Public

None were presented.

XVI. Information and/or Comments for the Good of the Organization

Nothing was presented.

XVII. Next Meeting

The next meeting of the NeMCMHA Board is scheduled for Thursday, November 12, 2026, at 3:00 p.m.

1. Proposed November Agenda Items

The November agenda items were reviewed.

XVIII. Adjournment

Moved by Charlotte Helman, supported by Terry Small, to adjourn the meeting. Motion carried.

This meeting adjourned at 4:25 p.m.

_____

Bonnie Cornelius, Secretary

_____

Eric Lawson, Chair

NORTHEAST MICHIGAN COMMUNITY MENTAL HEALTH AUTHORITY

OFFICE: (989) 356-2161 | (800) 968-1964
FAX: (989) 354-5898 | TTY#: 711
400 Johnson St., Alpena, MI 49707
www.nemcmh.org

November 2, 2026

Consent Agenda: NEMROC

A. North Eastern Michigan Rehabilitation and Opportunity Center (NEMROC)

NEMROC offers Community Living Supports (CLS) and Supported Employment (SE) services on behalf of the Agency. The CLS and SE contracts are executed separately for tracking and reporting purposes. NEMROC negotiated an increase to their base contracted rate of 5% and their per unit cost will also include the direct care wage passthrough amount. Both contracts will be reviewed semi-annually.

The CLS contract capitation for FY27 is $80,024.00 and the SE contract is $502,986.13. Approval is recommended for both contracts.

NORTHEAST MICHIGAN COMMUNITY MENTAL HEALTH AUTHORITY

Recipient Rights Advisory Committee Minutes
October 7, 2026

The meeting was called to order at 10:26 a.m. on October 7, 2026, by Committee Member Lorell Whitscell in the Administrative Conference Room.

Present: Tom Fredlund, Renee Smart-Sheppler, Lorell Whitscell, Eric Lawson
Absent: Kara Bauer LeMonds, Lynnett Grzeskowiak, Barb Murphy and Patricia Przeslawski
Staff: Elizabeth Kowalski and Pamela Shannon
Guests: None

DRAFT

I. **Old Business.** None.

II. **Approval of Minutes.** The minutes from 5-5-2026 and 7-22-2026 were reviewed, Lorell moved to accept, Tom supported, motion carried.

III. **New Business.**

QUARTERLY RIGHTS ACTIVITY REPORT: The committee reviewed the report which covered the fourth quarter of FY 26, 7/1/2026 – 9/30/2026. There were 28 complaints with 21 investigated, 2 handled as an intervention, and 4 contained no code protected right. Of the 24 investigations/interventions, there were 14 substantiations. There was one pending remedial action. As of the date of this report, the rights office has 9 open investigations. Remediation of substantiated rights violations will be reported at the next quarterly RRAC meeting. Lorell moved to review the report, Rene supported.

Eric noted a general reduction in total incident reports for fiscal year 2026 compared to fiscal year 2025. During the review of substantiated rights violation remediation a brief description of a listed contract provider was provided, and an inquiry was made regarding the number of recipients living in AFC homes outside the agency's catchment area and the total number of AFC contract providers located outside the catchment area. Follow-up information will be provided to the committee at the next quarterly meeting.

MEETING DATES: The committee agreed to continue with the same scheduled meeting dates for 2027 as the 4th Wednesday of the first, fourth, seventh and tenth months of the year (January, April, July, & October) at 3:00 p.m.

IV. **Educational Session:** "Advisory Committee Roles and Responsibilities" training was provided by the MDHHS Office of Recipient Rights via TEAMS. The committee noted clarification is needed from the State regarding voting requirements for action requiring approval, such as approval of meeting minutes. Response from MDHHS will be provided to the committee at the next quarterly meeting.

V. **Other Business:**.
ANNUAL RIGHTS REPORT: The MDHHS State Rights Office released the annual report template on October 6, 2026. The Rights Officer proposed holding a special RRAC meeting to give the committee an opportunity to review, comment, and provide recommendations to the Board and Director. The annual rights report is due from the

Director to the State by December 30, 2026. The committee agreed by consensus to meet on November 18, 2026, at 3:00 p.m. in the Administrative Conference Room.

VI. Adjournment.

Renee moved to adjourn, Lorell supported. The meeting adjourned at 11:02 a.m.

Special RRAC meeting to review the Rights Annual Report will be on November 18, 2026 in the Administrative Conference Room at 3 p.m.

The next scheduled RRAC quarterly meeting will be on January 27, 2026, in the Administrative Conference Room at 3:00 pm.

Elizabeth Kowalski, Recorder

Patricia Przeslawski, Chairperson

Northeast Michigan Community Mental Health Authority
400 Johnson Street, Alpena, MI 49707
989-358-7847

QUARTERLY RECIPIENT RIGHTS ACTIVITY REPORT

Time Period: July, August & September 2026:

I. COMPLAINT DATA SUMMARY

A. Totals	FY 25-26 1st	2nd	3rd	4th	FY 24-25 1st	2nd	3rd	4th
Complaints Received:	24	25	24	28	18	29	28	26
Investigated:	12	20	16	21	27	19	18	12
Interventions:	03	01	04	02	01	-0-	03	03
Substantiated:	10	17	12	*14	23	16	16	13
Outside Jurisdiction:	01	02	02	01	-0-	-0-	-0-	01
No Code Protected Right:	08	02	02	04	05	02	06	04

B. Aggregate Summary of Complaints

CATEGORY	Received	Investigation	Intervention	Substantiated
Abuse I	0	0		0
Abuse II	3	3		1
Abuse III	0	0		0
Sexual Abuse	0	0		0
Neglect I	0	0		0
Neglect II	0	0		0
Neglect III	3	3		2
Rights Protection System	0	0	0	0
Admiss/Dischrg-2ND Opinion	0	0	0	0
Civil Rights	0	0	0	0
Family Rights	0	0	0	0
Communication & Visits	0	0	0	0
Confidentiality/Disclosure	4	2	2	3
Treatment Environment	0	0	0	0
Freedom of Movement	0	0	0	0
Financial Rights	0	0	0	0
Personal Property	0	0	0	0
Suitable Services	13	13	0	9
Treatment Planning	0	0	0	0
Photos/Fingerprints/Audio etc	0	0	0	0
Forensic Issues	0	0	0	0
Video Surveillance	0	0	0	0
Total	23	21	2	*15

*Subject to change upon completion of outstanding open investigations.

C. Remediation of substantiated rights violations.

Category/Specific Allegation	Specific Provider	Specific Remedial Action
Pending Actions from last qtr:		
Abuse, Class II	NEMCMH	Suspension/Training
Actions this qtr:		
Abuse, Class II (Nonaccidental)	Eisenhower Center	Pending
Neglect, Class III	NEMCMH	Employment Terminated
Neglect, Class III	NEMCMH	Written Reprimand
Suitable Services	NEMCMH	Written Reprimand
Suitable Services	NEMCMH	Employment Terminated
Suit Services/Dignity & Respect	NEMCMH	Documented Counseling
Suit Services/Dignity & Respect	NEMCMH	Verbal Reprimand
Suit Services/Dignity & Respect	NEMCMH	Employment Terminated
Suit Services/Dignity & Respect	NEMCMH	Employee left, but substantiated
Suit Services/Dignity & Respect	NEMCMH	Employment Terminated
Suit Services/Dignity & Respect	Bouchers AFC	Training
Suit Services/Dignity & Respect	NEMCMH	Employee left, but substantiated
Confidentiality	NEMCMH	Documented Counseling
Confidentiality	NEMCMH	Documented Counseling
Confidentiality	NEMCMH	Pending

Note: Nine (9) active investigations pending completion.

D. Summary of Incident Reports. (4th Qtr '26)

Category Type	1st Qtr		2nd Qtr		3rd Qtr		4th Qtr	
	'26	'25	'26	'25	'26	'25	'26	'25
05.0 Absent without leave (AWOL)	01	07	00	21	04	00	01	00
04.0 Accident – No injury	10	18	08	9	03	15	12	14
04.1 Accident – With injury	27	41	15	40	16	42	23	40
01.0 Aggressive Acts – No injury	44	29	13	29	24	27	29	31
01.1 Aggressive Acts – w/ injury	10	04	08	09	04	14	07	12
01.2 Aggressive Acts – Prop. Destruct	03	02	02	02	01	05	01	01
05.2 Death	02	05	02	03	03	06	07	05
04.3 Fall – No injury	41	13	23	13	20	28	36	32
02.1 Medical Problem	73	151	82	136	112	62	102	43
03.0 Medication Delay	03	06	02	05	03	04	07	01
03.1 Medication Error	15	10	15	19	14	19	07	12
03.2 Medication Other	97	124	74	154	83	107	81	114
03.3 Medication Refusal	22	44	26	33	11	42	15	24
04.5 Non-Serious Injury-Unknown cause	17	15	18	18	25	36	09	23
05.3 Other	46	109	59	93	65	70	81	65
01.4 Self Injurious Acts – No injury	02	03	05	06	06	11	07	03
01.5 Self Injurious Acts – w/injury	08	10	07	11	11	13	13	06
01.3 Challenging Behavior	50	23	48	10	45	59	31	74
04.4 Fall – with injury	14	19	17	13	14	24	25	17
05.1 Arrests	03	04	03	04	09	08	03	01
Total	488	637	427	628	473	592	497	518

E. Prevention Activity	Quarter	YTD
Hours Used in Training Provided	22	101.5
Hours Used in Training Received	53.25	66.75
Hours Used in Site Visits	28	106.5

F. Monitoring Activity	Quarter	YTD
Incident Report Received	497	1,885

G. Source of All Complaints:	Quarter	YTD
Recipient:	05	19
Staff:	08	17
ORR:	10	45
Gdn/Family:	00	03
Anonymous:	03	06
Comm/Gen Pub:	02	11
Total:	28	101

Elizabeth Kowalski, Recipient Rights Officer

10/07/2026
Date

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EXECUTIVE LIMITATIONS
(Manual Section)

TREATMENT OF INDIVIDUALS SERVED – POLICY 01-002

Board Approval of Policy	August 8, 2002
Policy Last Reviewed:	November 13, 2025
Last Revision to Policy Approved by Board:	November 14, 2019

●1 POLICY:

With respect to interactions with individuals served, or those individuals applying for services, the Executive Director shall not cause or allow conditions, procedures, or decisions which are unsafe, disrespectful, unduly undignified, unnecessarily intrusive, or which fail to provide appropriate confidentiality and privacy.

Accordingly, she or he may not:

1. Use application forms or procedures that elicit information for which there is no clear necessity.

2. Use methods of collecting, reviewing, or storing client information that fail to protect against improper access to the information elicited.

3. Maintain facilities that fail to provide a reasonable level of privacy, both aural and visual.

4. Fail to provide procedural safeguards for the transmission of information.

5. Fail to establish with the individual receiving services a clear contract of what may be expected and what may not be expected from the service offered.

6. Fail to inform individuals served by this Agency of this policy or to provide a grievance process to those individuals served who believe that they have not been accorded a reasonable interpretation of their rights under this policy.

7. Fail to have staffing or contractual arrangements to provide services that reflect the diversity found in the community.
   A. ethnic
   B. gender
   C. geographic

8. Fail to provide services and benefits to clients or the public and contract agencies without prejudice as to religion, race, color, national origin, age, sex,

height, weight, marital status, political affiliation, sexual orientation, record of arrest without conviction, physical or mental handicap or ability to pay.

●2 APPLICATION:

The Northeast Michigan Community Mental Health Authority Board

●3 DEFINITIONS:

●4 REFERENCES:

●5 FORMS AND EXHIBITS:

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EXECUTIVE LIMITATIONS
(Manual Section)

STAFF TREATMENT – POLICY 01-003

Board Approval of Policy	August 8, 2002
Policy Last Reviewed:	November 13, 2025
Last Revision of Policy Approved by Board:	December 12, 2024

●1 POLICY:

With respect to treatment of paid and volunteer staff, the Executive Director may not cause or allow conditions which are unfair, undignified, unsafe or unclear.

Accordingly, she or he may not:

1. Operate without written personnel procedures which: clarify personnel rules for staff, provide for effective handling of grievances and protect against wrongful conditions.

2. Discriminate against any staff member for non-disruptive expression of dissent.

3. Fail to acquaint staff with their rights under this policy.

4. Fail to be sensitive to and consider human diversity in all dealings with staff once known or perceived.

5. Fail to provide equal employment opportunities to all employees and applicants for employment and may not discriminate in the recruitment, hiring, training, upgrading, promotion, retention or any other personnel action based on religion, race, color, national origin, age, sex, height, weight, marital status, political affiliation, sexual orientation, record of arrest without conviction, or physical or mental handicap, except where age, sex or physical requirements constitute a bona fide occupational qualification necessary to proper and efficient administration.

●2 APPLICATION:

The Northeast Michigan Community Mental Health Authority Board

●3 DEFINITIONS:

●4 REFERENCES:

●5 FORMS AND EXHIBITS:

2026 NMRE Mental Health Services Satisfaction Survey

Thursday, September 24, 2026

Powered by SurveyMonkey

848

NMRE Total Responses

232

NeMCMHA Total Responses

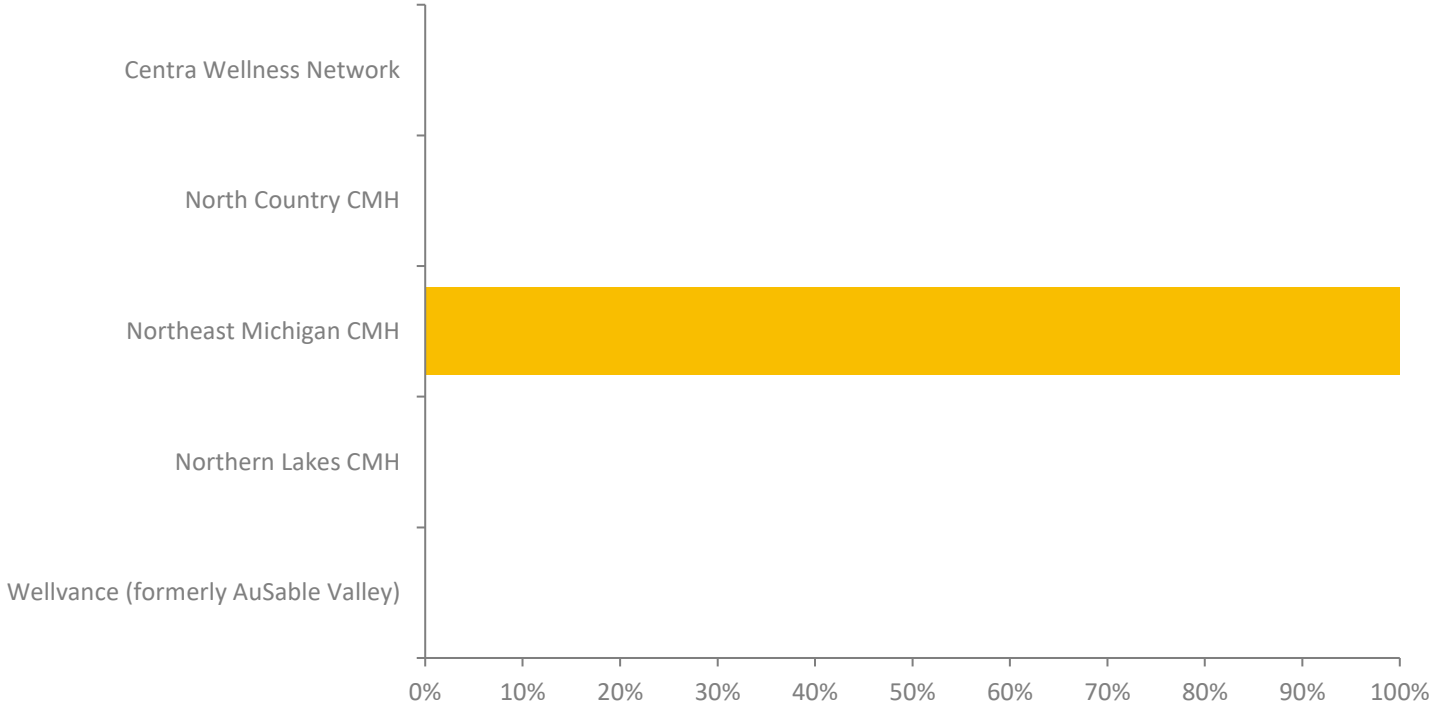
Date Created: Monday, June 22, 2026

Complete Responses: 848

Powered by SurveyMonkey

Q1: Where do you receive services?

Answered: 232 Skipped: 0



Powered by SurveyMonkey

Q1: Where do you receive services?

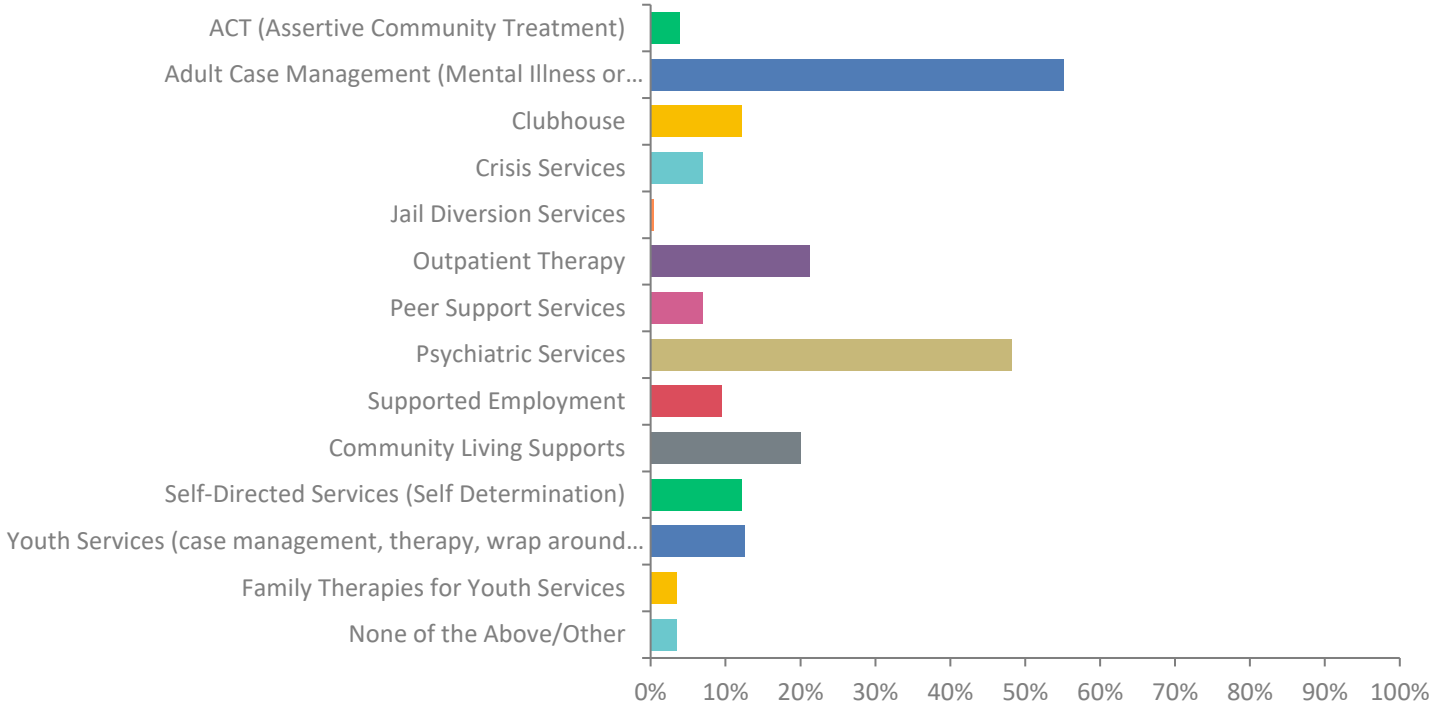
Answered: 232 Skipped: 0

ANSWER CHOICES	RESPONSES	
Centra Wellness Network	0.00%	0
North Country CMH	0.00%	0
Northeast Michigan CMH	100.00%	232
Northern Lakes CMH	0.00%	0
Wellvance (formerly AuSable Valley)	0.00%	0
TOTAL		232

Powered by SurveyMonkey

Q2: What services do you receive?

Answered: 230 Skipped: 2



Powered by SurveyMonkey

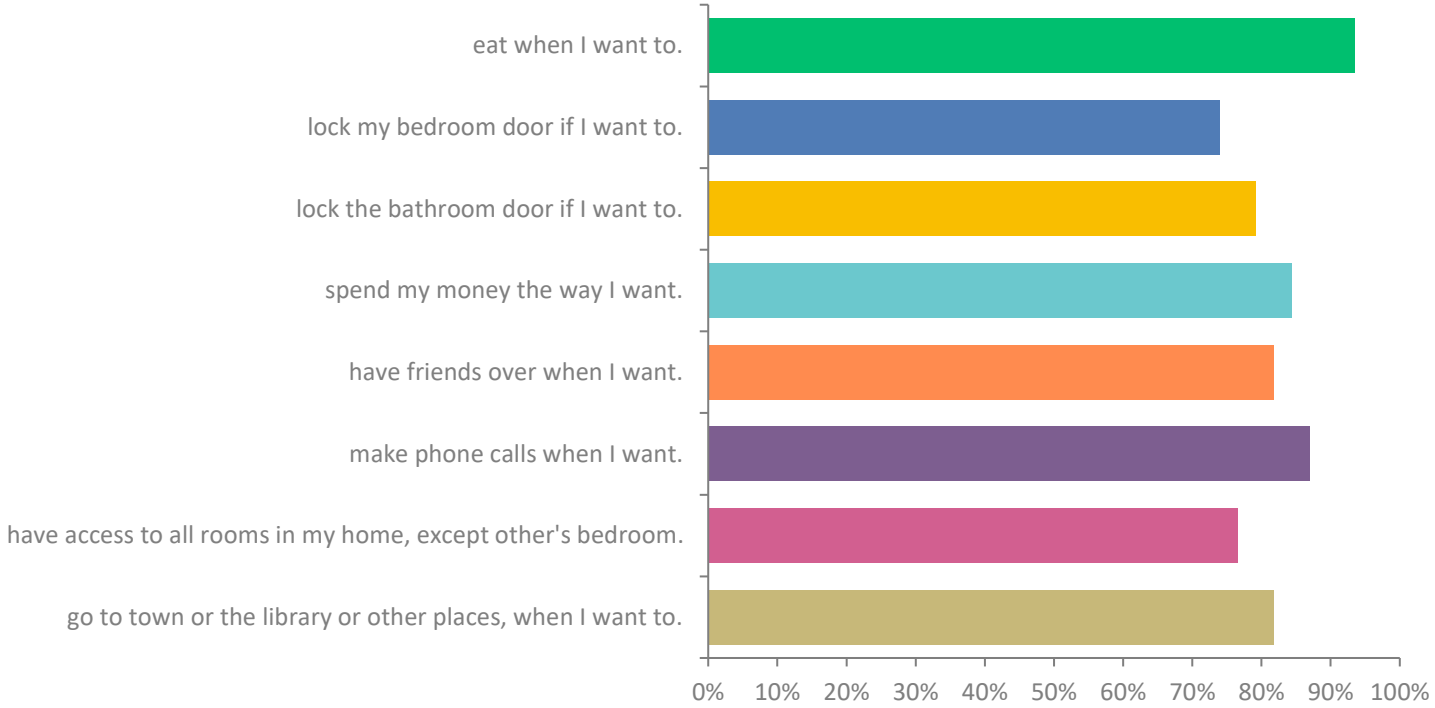
Q2: What services do you receive?

Answered: 230 Skipped: 2

ANSWER CHOICES	RESPONSES	
ACT (Assertive Community Treatment)	3.91%	9
Adult Case Management (Mental Illness or Intellectual/Developmental Disabilities)	55.22%	127
Clubhouse	12.17%	28
Crisis Services	6.96%	16
Jail Diversion Services	0.43%	1
Outpatient Therapy	21.30%	49
Peer Support Services	6.96%	16
Psychiatric Services	48.26%	111
Supported Employment	9.57%	22
Community Living Supports	20.00%	46
Self-Directed Services (Self Determination)	12.17%	28
Youth Services (case management, therapy, wrap around services, home based services, etc.,)	12.61%	29
Family Therapies for Youth Services	3.48%	8
None of the Above/Other	3.48%	8
TOTAL		498

Q3: Please only answer this question if you live in a residential facility. At home, I can (check all that apply):

Answered: 77 Skipped: 155



Powered by SurveyMonkey

Q3: Please only answer this question if you live in a residential facility. At home, I can (check all that apply):

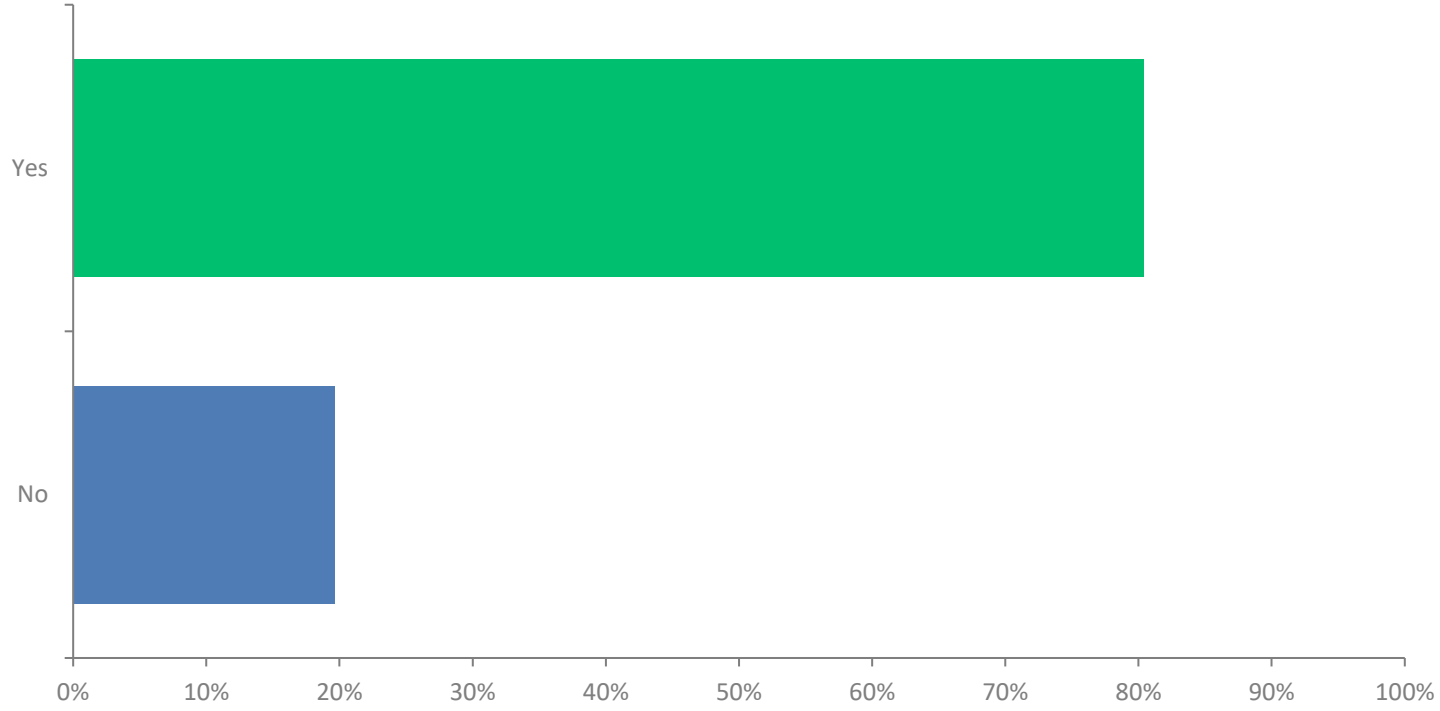
Answered: 77 Skipped: 155

ANSWER CHOICES	RESPONSES	
eat when I want to.	93.51%	72
lock my bedroom door if I want to.	74.03%	57
lock the bathroom door if I want to.	79.22%	61
spend my money the way I want.	84.42%	65
have friends over when I want.	81.82%	63
make phone calls when I want.	87.01%	67
have access to all rooms in my home, except other's bedroom.	76.62%	59
go to town or the library or other places, when I want to.	81.82%	63
TOTAL		507

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Q4: I received an NMRE Guide to Services from my CMH.

Answered: 209 Skipped: 23



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Q4: I received an NMRE Guide to Services from my CMH.

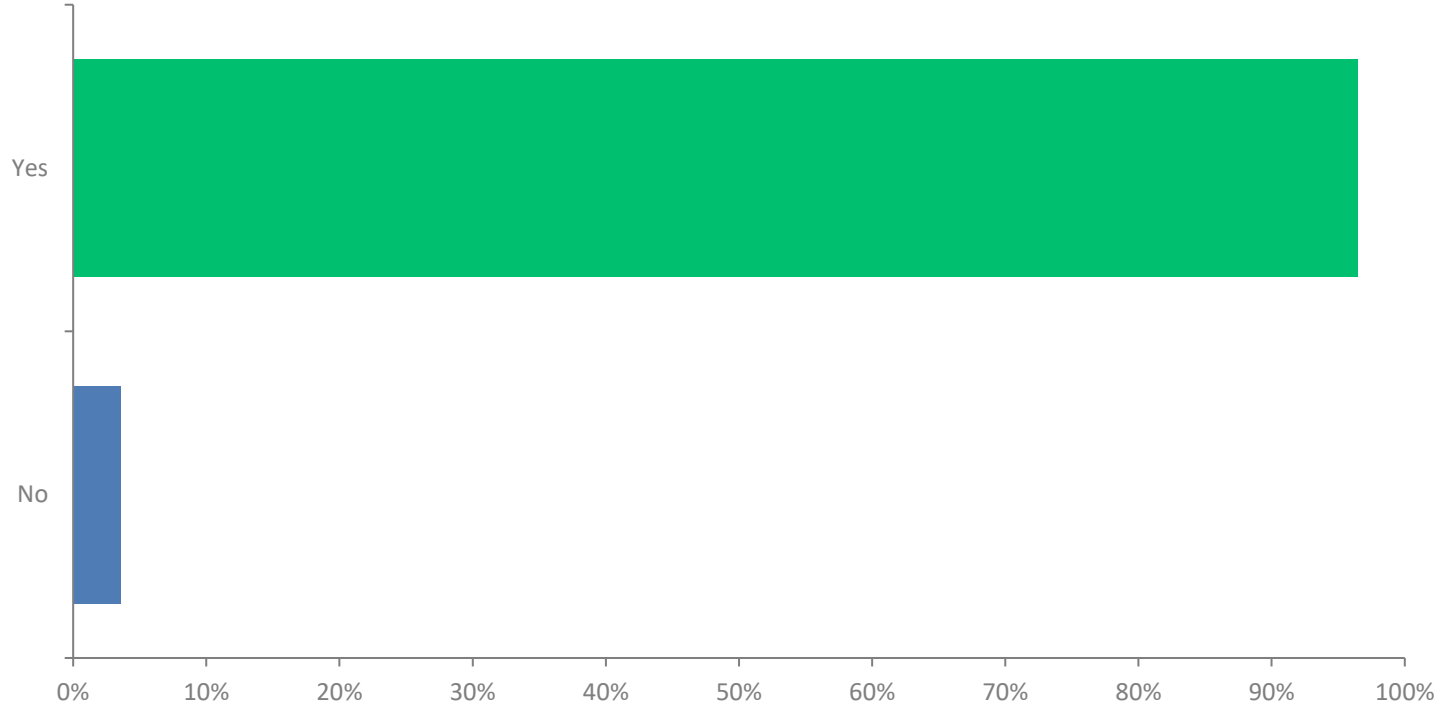
Answered: 209 Skipped: 23

ANSWER CHOICES	RESPONSES	
Yes	80.38%	168
No	19.62%	41
TOTAL		209

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Q5: I can make decisions about what services I receive from my CMH.

Answered: 226 Skipped: 6



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Q5: I can make decisions about what services I receive from my CMH.

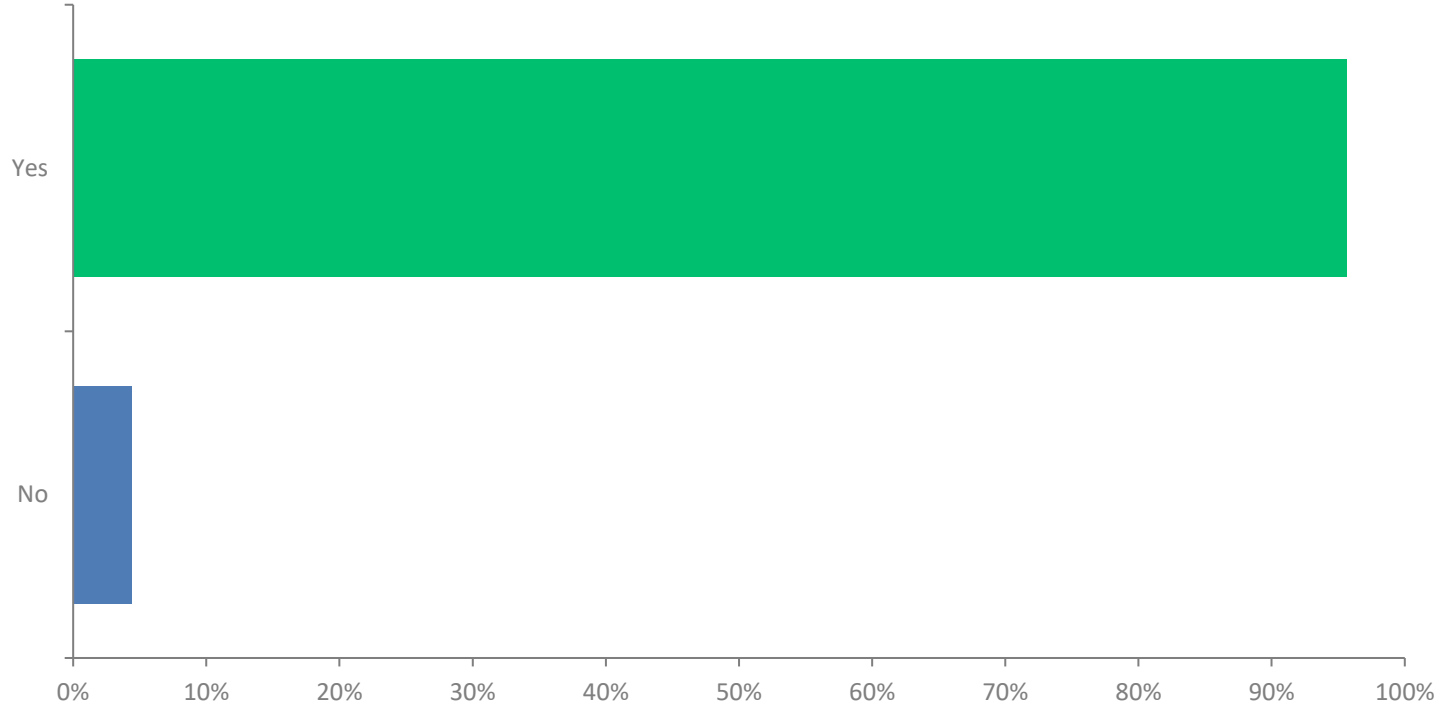
Answered: 226 Skipped: 6

ANSWER CHOICES	RESPONSES	
Yes	96.46%	218
No	3.54%	8
TOTAL		226

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Q6: I understand the services I receive from my CMH.

Answered: 229 Skipped: 3



Powered by SurveyMonkey

Q6: I understand the services I receive from my CMH.

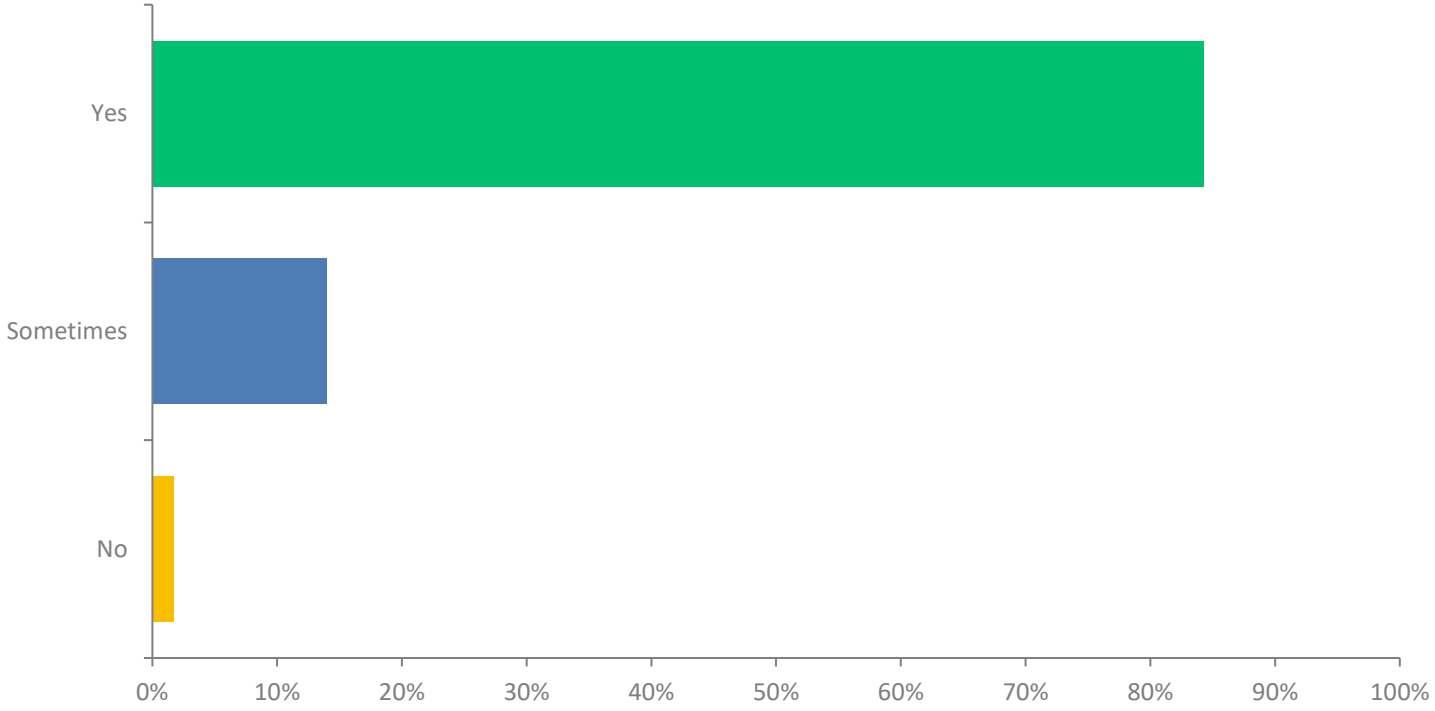
Answered: 229 Skipped: 3

ANSWER CHOICES	RESPONSES	
Yes	95.63%	219
No	4.37%	10
TOTAL		229

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Q7: I feel comfortable asking questions about my services or asking for other services I want.

Answered: 229 Skipped: 3



Powered by SurveyMonkey

Q7: I feel comfortable asking questions about my services or asking for other services I want.

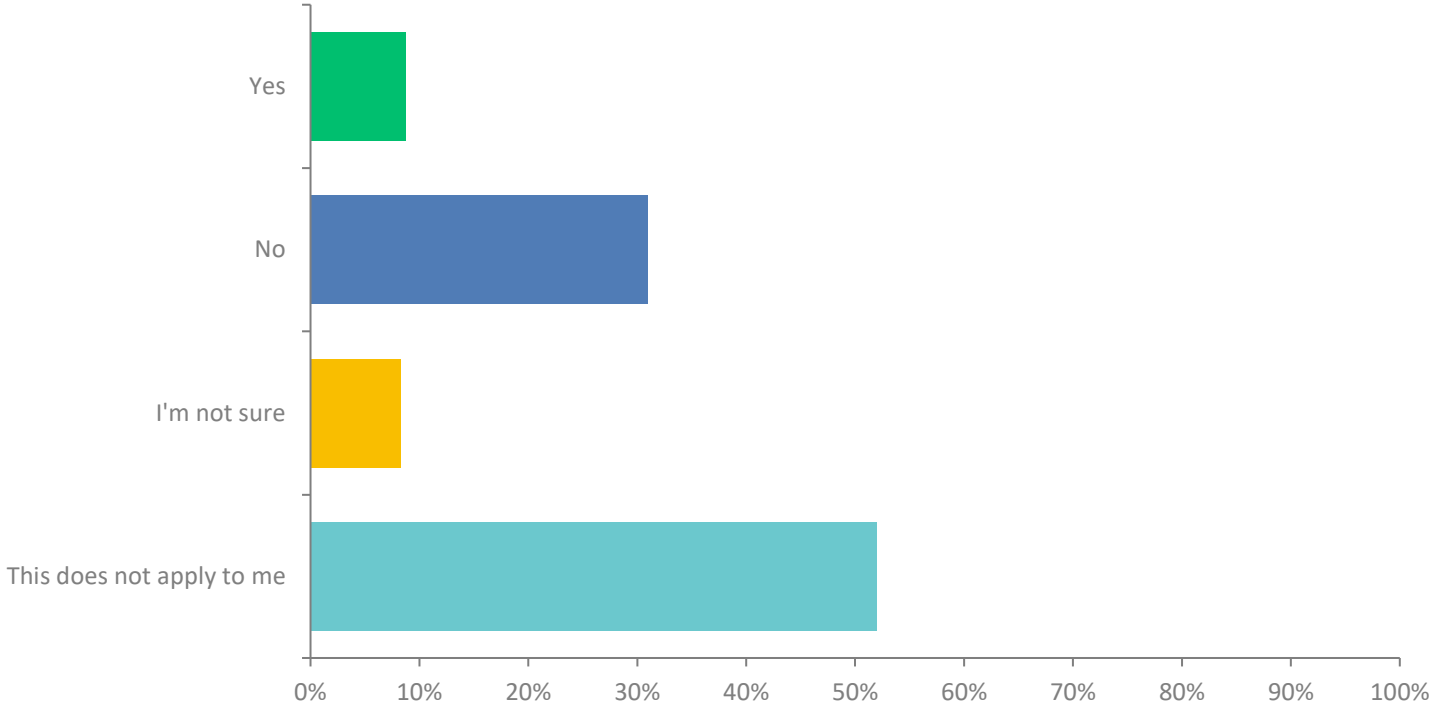
Answered: 229 Skipped: 3

ANSWER CHOICES	RESPONSES	
Yes	84.28%	193
Sometimes	13.97%	32
No	1.75%	4
TOTAL		229

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Q8: I asked for a service and CMH said no. CMH sent me a notice that said I could not have the service.

Answered: 229 Skipped: 3



Powered by SurveyMonkey

Q8: I asked for a service and CMH said no. CMH sent me a notice that said I could not have the service.

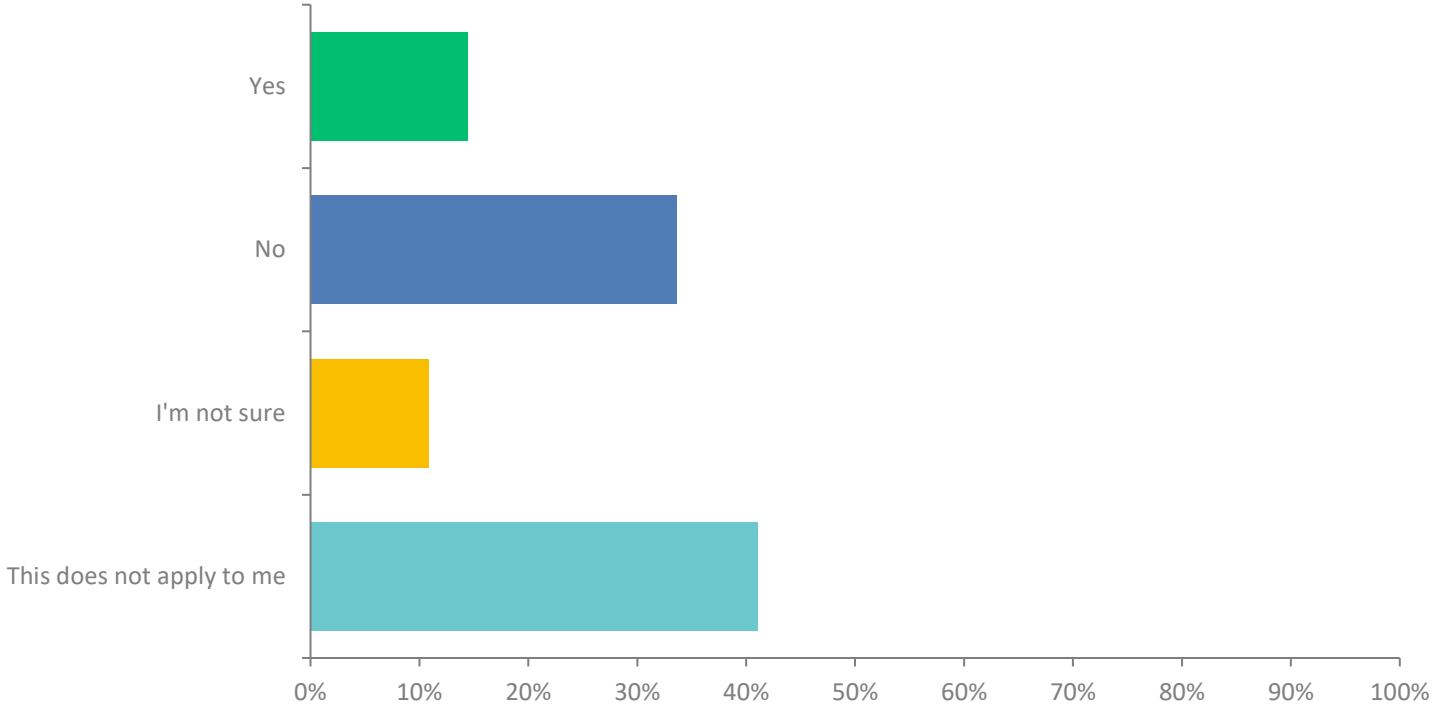
Answered: 229 Skipped: 3

ANSWER CHOICES	RESPONSES	
Yes	8.73%	20
No	31.00%	71
I'm not sure	8.30%	19
This does not apply to me	51.97%	119
TOTAL		229

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Q9: I received a notice telling me that the services I receive were being changed in some way.

Answered: 229 Skipped: 3



Powered by SurveyMonkey

Q9: I received a notice telling me that the services I receive were being changed in some way.

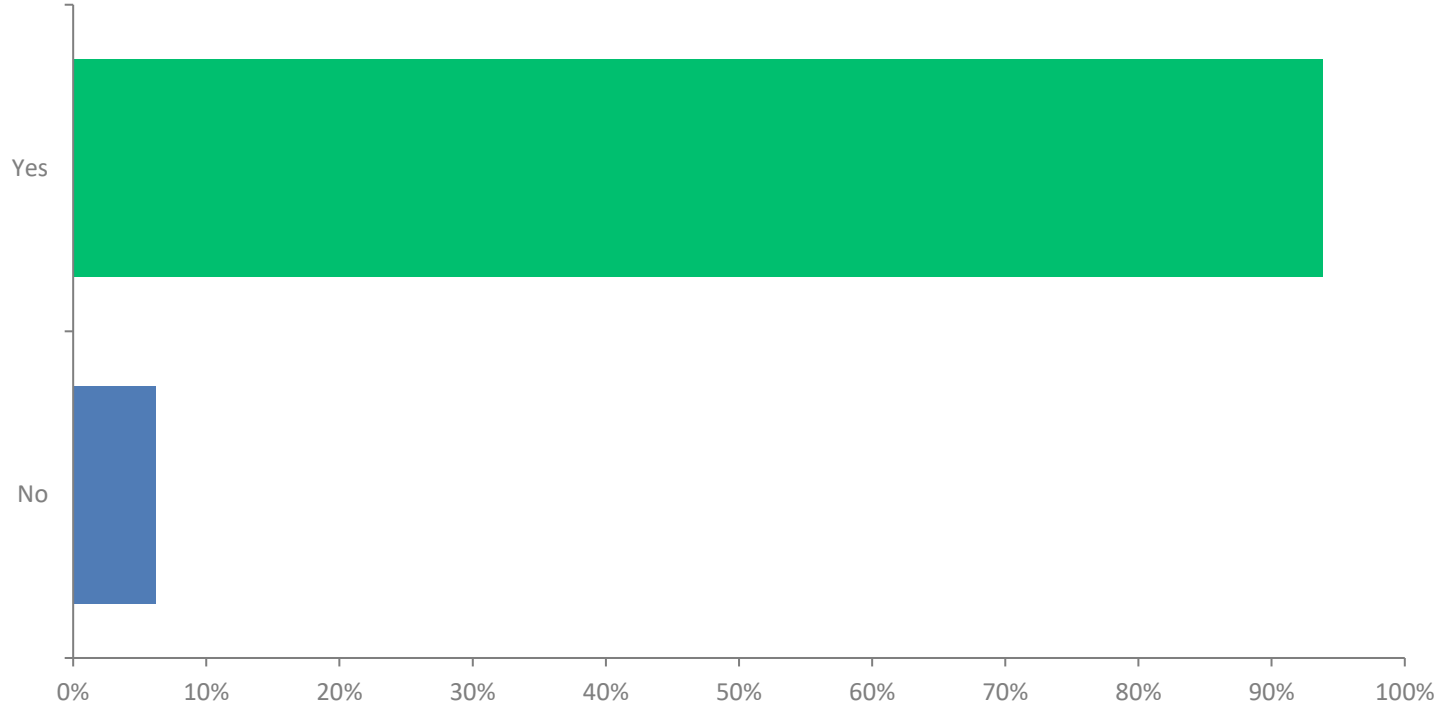
Answered: 229 Skipped: 3

ANSWER CHOICES	RESPONSES	
Yes	14.41%	33
No	33.62%	77
I'm not sure	10.92%	25
This does not apply to me	41.05%	94
TOTAL		229

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Q10: I know I can file an appeal if I'm not happy that CMH said no to a service or changed my services in some way.

Answered: 227 Skipped: 5



Powered by SurveyMonkey

Q10: I know I can file an appeal if I'm not happy that CMH said no to a service or changed my services in some way.

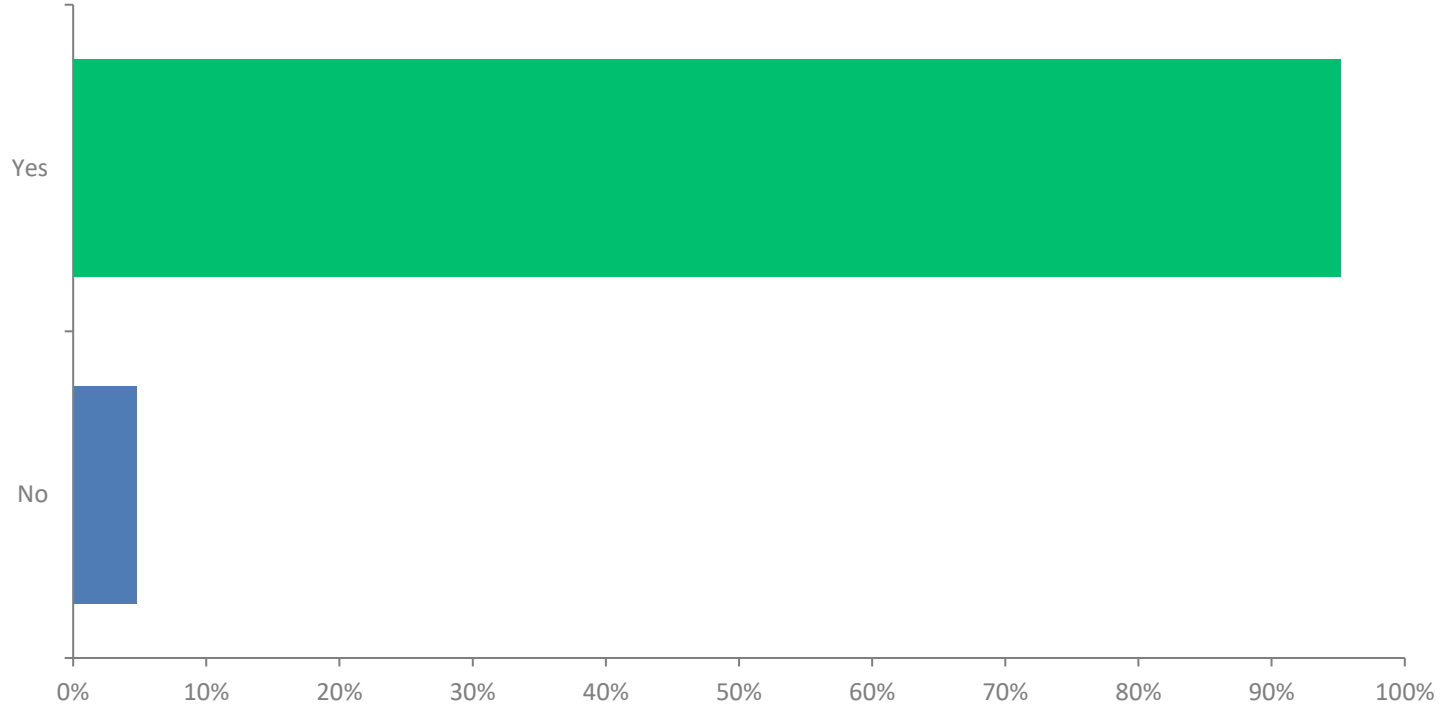
Answered: 227 Skipped: 5

ANSWER CHOICES	RESPONSES	
Yes	93.83%	213
No	6.17%	14
TOTAL		227

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Q11: I know I can file a grievance if I'm not happy about something to do with CMH.

Answered: 230 Skipped: 2



Powered by SurveyMonkey

Q11: I know I can file a grievance if I'm not happy about something to do with CMH.

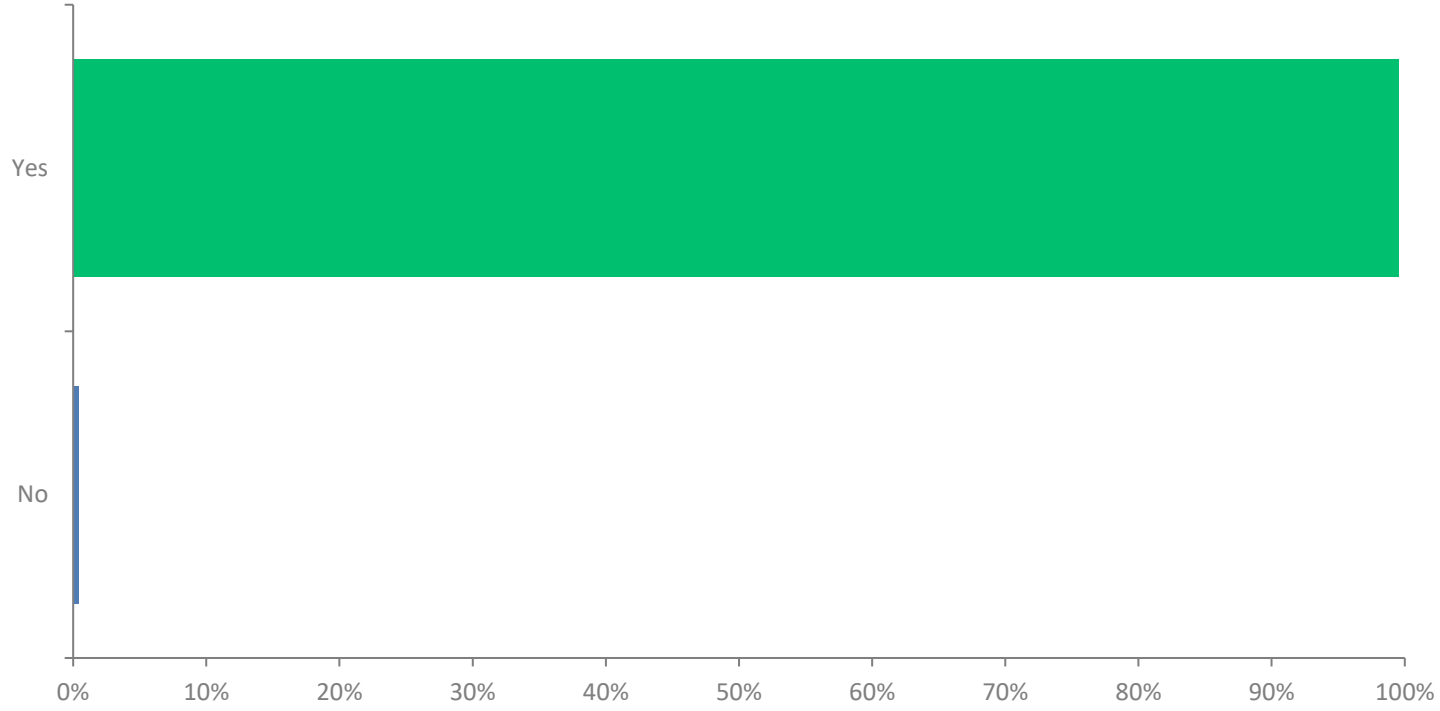
Answered: 230 Skipped: 2

ANSWER CHOICES	RESPONSES	
Yes	95.22%	219
No	4.78%	11
TOTAL		230

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Q12: Staff are nice to me.

Answered: 230 Skipped: 2



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Q12: Staff are nice to me.

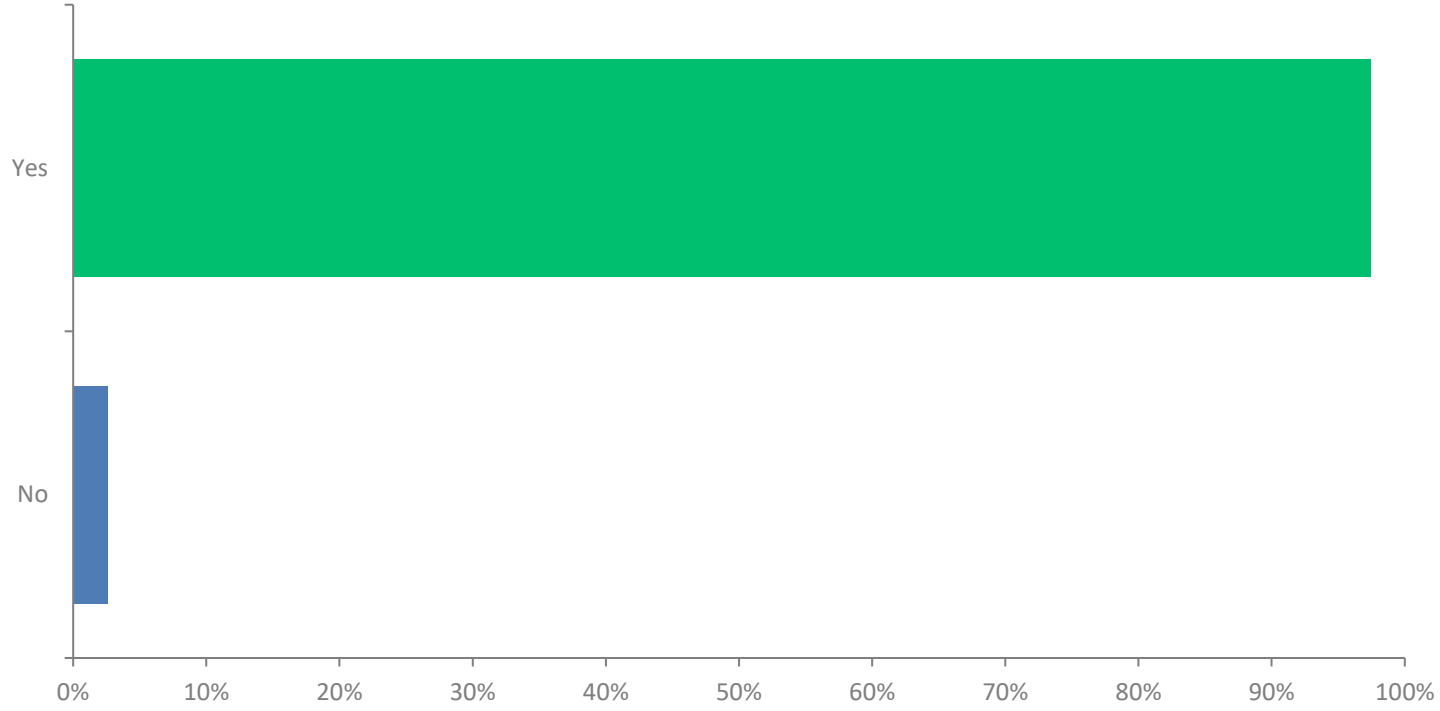
Answered: 230 Skipped: 2

ANSWER CHOICES	RESPONSES	
Yes	99.57%	229
No	0.43%	1
TOTAL		230

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Q13: Overall, I am happy with the services I receive.

Answered: 231 Skipped: 1



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Q13: Overall, I am happy with the services I receive.

Answered: 231 Skipped: 1

ANSWER CHOICES	RESPONSES	
Yes	97.40%	225
No	2.60%	6
TOTAL		231

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	Program	Consumers served October 2026 (10/1/26 - 10/31/26)	Consumers served in the Past Year (11/1/25 - 10/31/26)	Running Monthly Average(year) (11/1/25 - 10/31/26)
1	**Access** **Routine**	46	546	44
	Emergent	0	1	0
	Urgent	0	2	0
	Crisis	39	400	32
	Prescreens	45	586	46
2	**Doctors' Services**	382	1054	371
3	**Case Management**			
	Older Adult (OAS)	65	100	67
	MI Adult	97	227	70
	MI ACT	19	32	17
	Home Based Children	44	83	35
	MI Children's Services	78	150	56
	IDD	149	302	139
4	**Outpatient Counseling**	113(28/85)	270	70
5	**Hospital Prescreens**	45	586	46
6	**Private Hospital Admissions**	18	225	15
7	**State Hospital Admissions**	0	2	0
8	**Employment Services**			
	IDD	46	69	47
	MI	46	96	37
	Touchstone Clubhouse	75	86	72
9	**Peer Support**	39(3/36)	75	42
10	**Community Living Support Services**			
	IDD	85	96	85
	MI	66	99	57
11	**CMH Operated Residential Services**			
	IDD Only	44	47	46
12	**Other Contracted Resid. Services**			
	IDD	36	47	36
	MI	27	30	27
13	**Total Unduplicated Served**	1023	2098	979

County	Unduplicated Consumers Served Since November 2025
Alcona	235
Alpena	1220
Montmorency	252
Presque Isle	312
Other	58
No County Listed	21

NORTHEAST MICHIGAN COMMUNITY MENTAL HEALTH AUTHORITY

INTEROFFICE MEMORANDUM

TO: Board Members
FROM: Rebekah Duhaime
SUBJECT: Board Semiannual Meeting Evaluations
DATE: November 2, 2026

As discussed at previous meetings, the Board's previous monthly meeting evaluations will be changing to semiannual instead of monthly and they will be in a new format. The June and July NeMCMHA Board meeting minutes show the following discussions:

> June 11, 2026: Board members discussed options for improving the process, including rotating questions or decreasing the frequency of evaluations. The evaluation could be done during months with a lighter agenda and then Eric could present the results during his Board Chair's Report the following month. This discussion will be continued next month.
>
> July 9, 2026: The Board's self-evaluations will be changing to three per year, instead of monthly. The Board's larger annual self-evaluation will remain in August/September. The Board will discuss a new format for the remaining yearly evaluations during their October meeting, which will then be utilized in December and April.

The Board conducts their larger, annual self-evaluation in August, with results presented each September. This evaluation is both quantitative and qualitative. The two new evaluations, one completed in December with results presented in January and the other completed in April with results presented in May, could be a mix of quantitative and qualitative, to gather diverse information.

Possible Options:

Qualitative: Plus/Delta Method of Evaluation (See Exhibit A)
Board members anonymously complete a Plus/Delta Method form. The Form has two columns: on the plus "+" side, Board members write successes or positive attributes of Board meetings, and on the delta "Δ" side, they note areas needing improvement and suggestions for change. Responses will be compiled and reviewed during the following month's Board Chair's Report.

Quantitative: Meeting Assessment Questionnaire (See Exhibit B)
This quick, five-question assessment, with questions pulled directly from the Agency's accrediting body, CARF, would be completed by all present Board members as the selected meeting. Results would be compiled and reviewed during the following month's Board Chair's report.

The combination of all three annual assessment formats meet CARF's requirements for accreditation in Board Governance. Changes may still be made at this time, as the first use of the new format will be utilized in December.

Exhibit A

Northeast Michigan Community Mental Health Authority Board
Semiannual Board Meeting Evaluation – Plus/Delta Method

+	Δ

Northeast Michigan Community Mental Health Authority Board
Board Meeting Assessment Questionnaire

Exhibit B

	Question	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1	We (the Board) spent our time effectively.					
2	The meeting was chaired efficiently and with respect for all Board members.					
3	Meeting materials were provided in a timely manner and were sufficient for my preparation.					
4	Monitoring reports were informative, and all questions were satisfactorily answered.					
5	The previous month's meeting was well-documented in the minutes and reflected meaningful discussions and all decisions.					

My personal notes (if any):

PROPOSED DECEMBER AGENDA ITEMS

Policy Review
Grants or Contracts 01-011

Policy Review & Self-Evaluation
Board Member Recognition 02-011
Board Member Orientation 02-015

Monitoring Reports
Budgeting 01-004
Grants or Contracts 01-011

Review
Bylaws

Educational Session
TBD