



MOUNTAIN LAKES
Behavioral Healthcare

ADMINISTRATIVE SERVICES
3200 Willow Beach Road, Guntersville, AL 35976
256-582-4240 • 256-582-4161 (fax)

TO: Board of Directors
FROM: Shelly Pierce, Executive Coordinator
RE: April Board meeting
DATE: April 11, 2025

The next meeting of the Board of Directors will be conducted on **Tuesday, April 15, 2025**, at the MLBHC facility located at 16003 AL Hwy 35, Scottsboro. An evening meal will be provided, with the meeting starting at 5:30 pm.

If you prefer to participate via teleconference, the connection information is listed below.

April Board Meeting

Apr 15, 2025, 5:30 – 6:30 PM (America/Chicago)

Please join my meeting from your computer, tablet or smartphone.

<https://meet.goto.com/684733333>

You can also dial in using your phone.

Access Code: 684-733-333

United States: [+1 \(224\) 501-3412](tel:+12245013412)

The items listed below are included in this packet for your advanced review:

- April Board Agenda
- Minutes from the March 18, 2025, Board meeting
- Financial Reports through March 31, 2025
- Personnel Report
- IT Director's Report
- Clinical Director's Report
- Recent local newspaper articles
- Minutes from the weekly CCBHC Task Force meetings
- Summary of Reports for March from the CQI Committee
- Minutes from the March Leadership Committee meeting
- April newsletter

Any items needing clarification or requiring Board approval will be discussed at that time. We will make the most efficient use of your time by considering only items of major importance and requiring formal action. Unless noted, all other items will be considered correct.

MARSHALL-JACKSON MENTAL HEALTH BOARD, INC.
MOUNTAIN LAKES BEHAVIORAL HEALTHCARE

April 15, 2025

AGENDA

- I. Call the meeting to order – David Kennamer, President
- II. Approval of minutes of the March 18, 2025, meeting – David Kennamer, President
- III. Executive Director’s Report
- IV. Financial reports through March 31, 2025 – Cammy Holland, Business Manager
- V. Written Reports
 - Personnel – Lane Black, HR Coordinator
 - IT – Steve Collins, IT Director
 - Clinical – Dianne Simpson, Clinical Director
- VI. Board requested items for future meeting
- VII. Executive Session

**Marshall-Jackson Mental Health Board, Inc.
Mountain Lakes Behavioral Healthcare**

**Board of Directors Meeting
March 18, 2025**

MINUTES

I. Call to Order

David Kennamer, President, called the meeting to order at 5:35 p.m. at the Administrative Office in Guntersville, Alabama. Virtual participation was also available for this meeting.

Present: Joe Huotari
Jo-Anne Hutton
John David Jordan
David Kennamer, President
Bill Kirkpatrick
Andrea LeCroy
Victor Manning, Treasurer
Hannah Nixon, Vice-President
Lucien Reed
Jane Seltzer, Secretary

Absent: None

Staff: Dana Childs, CQI Coordinator/Clinical Administrative Assistant
Steve Collins, IT Director
Myron Gargis, Executive Director
Cammy Holland, Business Manager
Shelly Pierce, Executive Coordinator
Kimberly Romero, Care Coordinator, Marshall County
Dianne Simpson, Clinical Director (Virtual)

II. Approval of the minutes of the February 18, 2025, Board meeting – David Kennamer, President

MOTION: Hannah Nixon made a motion that the Board approve the minutes of the February 18, 2025, meeting, as presented. Victor Manning seconded the motion, which was approved unanimously.

III. Executive Director's Report

The Executive Director's Report for March (Appendix A) was submitted in written format and made available to all Board members for review prior to the meeting.

IV. Financial reports through February 28, 2025 – Cammy Holland, Business Manager

Ms. Holland noted that all regular financial reports were included in the monthly packet and asked if there were any questions in regard to these items.

The FY25 Program Summary reflected a net income for all programs, with the exception of Jackson County MHC, Substance Use and Substance Use Prevention.

The current Balance Sheet, which included Board Investments, indicated Total Cash of \$444,077. This total is \$630,530 less than this same time period last year. Continued review reflected Total Accounts Receivable of \$2,369,804, which is \$119,210 more than in FY24.

The Income Statement, which does not include Board Investments, reflected a YTD Net Income of \$132,084, which is \$326,001 less than in FY24.

V. Written Reports

The Personnel, IT and Clinical Reports were submitted in written format for the monthly Board packets. Any items of question or requiring Board action will be discussed during the meeting.

The Clinical Director's report included information on High Intensity Care Coordination and Kimberly Romero was introduced as the High Intensity Care Coordinator for Marshall County. Ms. Romero shared that she had work for the organization about 1½ years, serving in her current role since August, 2024. Her position works with children and adolescents that need more intensive services and she meets with each at least once per week. She monitors each consumer's behavior, provides pertinent information to their therapist and also communicates regularly with their family members. The HICC caseload limit is 18, with four currently on the waiting list for these type services. Most consumers seen by Ms. Romero have multi-agency involvement, meaning they are also engaged with DHR, Multi-Needs Team, etc.

VI. Board requested items for future meetings

There were no items requested for future Board meetings.

Prior to this meeting, the Board conducted a work session to review details relating to the implementation of CCBHC. Subsequent to discussion during the work session, the following motion was made:

MOTION: Lucien Reed made a motion that the Board authorize Myron Gargis to seek legal guidance on the possibility of utilizing different corporate structures to possibly separate MLBHC employees that work under the CCBHC model from MLBHC employees that work under the fee-for-service (FFS) model. Victor Manning seconded the motion, which was approved unanimously.

VII. Executive Session

Mr. Kennamer announced that the Board needed to enter into Executive Session to discuss the possible purchase of property in Jackson County.

MOTION: Bill Kirkpatrick made a motion that the Board enter into Executive Session at 6:30 p.m. to discuss the possible purchase of property in Jackson County. Hannah Nixon seconded the motion, which was approved unanimously.

MOTION: Hannah Nixon made a motion that the Board reconvene the regular meeting at 6:50 p.m. and adjourn. Jane Seltzer seconded the motion, which was approved unanimously.

David Kennamer, President
Marshall-Jackson Mental Health Board, Inc.

Jane Seltzer, Secretary
Marshall-Jackson Mental Health Board, Inc.

APPENDIX A

Executive Director's Report – March 18, 2025

Transportation Service Updates

In February, Jackson County completed 36 transports, while Marshall County recorded 174 transports (Day Treatment – 145; Outpatient – 29).

Albertville City Schools Mental Health Grant

Albertville City Schools has been awarded a \$3.5 million, five-year grant to expand School-Based Mental Health services. As part of this expansion, they have approved the addition of three new therapist positions and have agreed to contract with us for these roles. These therapists are expected to begin in August, coinciding with the start of the next school year.

Miracle League Sponsorship Renewal – Sand Mountain Park (SMP)

In April, we are scheduled to renew our sponsorship of The Miracle League at Sand Mountain Park. The sponsorship agreement spans three years (4/25 – 4/28) at a rate of \$37,000 per year.

CCBHC Task Force

We have established a CCBHC Task Force, meeting weekly to prepare for CCBHC implementation in July. Key progress includes:

- Initial hiring plan development
- Enhancing scheduling processes for outpatient providers to accommodate the anticipated increase in clients
- Improving client follow-up and engagement for more efficient and effective service delivery

Task Force minutes will be included in your packets to keep you updated on our progress.

Pending Legislation – Regional Mental Health Board Law

Attached is a draft of the proposed amendments to Alabama Code sections 22-51-8, 22-51-9, and 22-51-14, outlining the current pending changes.

**MOUNTAIN LAKES BEHAVIORAL HEALTHCARE
PROGRAM SUMMARY**

FOR THE SIX MONTHS ENDED MARCH 31, 2025

PROGRAM	BUDGETED REVENUE		ACTUAL REVENUE		BUDGETED EXPENSES		ACTUAL EXPENSES		Budget vs Actual Revenues \$		Budget vs Actual Revenues %		Budget vs Actual Expenses \$		Budget vs Actual Expenses %		BUDGETED OPERATING INCOME	ACTUAL OPERATING INCOME	DEPRECIATION EXPENSE	NET INCOME (LOSS)	Variance +/- % Comments	
	BUDGETED REVENUE	ACTUAL REVENUE	BUDGETED EXPENSES	ACTUAL EXPENSES	Variance	%	Variance	%	Variance	%												
1000 Administration	273,991	498,752	273,991	424,295	224,781	45.06%	224,764	45.07%	0	0.00%	0	0.00%	0	74,457	74,460	(3)						
1500 Region 1 Project	91,214	91,214	91,214	91,214	(0)	0.00%	0	0.00%	0	0.00%	0	0.00%	0	(0)	0	0	0					
2110 Marshall County MHC	1,740,496	1,990,339	1,698,806	1,606,962	249,843	12.55%	(65,323)	-4.07%	41,690	393,377	383,377	26,521	26,521	356,856	356,856	0						
2210 Jackson County MHC	1,298,453	1,308,985	1,307,393	1,180,352	10,532	0	(98,920)	-8.38%	(8,939)	128,633	128,633	28,121	100,513	100,513	100,513	0						
2300 Geriatrics	197,700	218,142	186,236	176,860	20,441	9.37%	(9,377)	-5.30%	11,464	41,282	41,282	0	41,282	41,282	41,282	0						
2400 Behavioral Health Unit (BHU)	120,349	204,998	120,349	204,998	84,650	0.00%	84,650	0.00%	0	0	0	0	0	0	0	0						
2610 Dogwood Apartments	34,075	39,061	26,372	19,032	4,986	12.76%	(2,876)	-15.11%	7,703	20,029	20,029	4,463	15,565	15,565	15,565	0						
2620 EBP Supportive Housing	82,357	89,666	82,345	79,318	7,309	8.15%	(3,027)	-3.82%	12	10,348	10,348	0	10,348	10,348	10,348	0						
2640 Dutton Facilities	498,086	701,541	537,665	554,997	203,455	29.00%	45,884	8.27%	(39,579)	146,544	146,544	28,552	117,992	117,992	117,992	0						
2650 Jackson Place	220,603	240,059	206,439	176,375	19,456	8.10%	(19,969)	-11.32%	14,164	63,894	63,894	10,094	53,590	53,590	53,590	0						
2651 Marshall Place	125,672	162,523	162,305	146,092	36,851	22.67%	(13,896)	-9.51%	(36,633)	16,432	16,432	2,317	14,115	14,115	14,115	0						
3030 Substance Use	661,900	715,866	665,038	613,848	53,966	7.54%	(9,119)	-1.49%	(3,137)	102,018	102,018	42,070	59,948	59,948	59,948	0						
3060 Prevention	185,446	162,465	180,010	155,282	(22,982)	-14.15%	(24,728)	-15.92%	5,436	7,182	7,182	0	7,182	7,182	7,182	0						
Board Investments	137,315	9,993	9,820	6,243	(127,322)	-1274.09%	1,994	31.94%	127,495	3,750	3,750	5,571	(1,821)	(1,821)	(1,821)	0						
Grand Total	5,667,657	6,433,603	5,547,982	5,435,867					119,676	997,736	997,736	222,170	775,566	775,566	775,566	0						

Budget is divided equally over 12 months. Actual is based on the activity during the month

Budget is divided equally over 12 months. Actual is based on the activity during the month

**MOUNTAIN LAKES BEHAVIORAL HEALTHCARE
PROGRAM SUMMARY**

FOR THE MONTH ENDED MARCH 31, 2025

PROGRAM	BUDGETED REVENUE	ACTUAL REVENUE	BUDGETED EXPENSES	ACTUAL EXPENSES	Budget vs Actual		Budget vs Actual		BUDGETED OPERATING INCOME	ACTUAL OPERATING INCOME	DEPRECIATION EXPENSE	NET INCOME (LOSS)	Variance +/- % Comments
					Revenue \$	Variance	Expenses \$	Variance					
1000 Administration	45,665	432,975	45,965	428,091	387,310	89.45%	387,310	89.45%	0	4,884	4,884	0	
1500 Region 1 Project	15,202	15,202	15,202	15,202	(0)	0.00%	0	0.00%	0	(0)	0	0	
2110 Marshall County MHC	290,083	391,029	283,134	156,620	100,946	25.82%	(111,594)	-71.25%	6,948	234,409	14,921	219,488	
2210 Jackson County MHC	216,409	276,631	217,899	96,460	60,222	0	(107,766)	-111.72%	(1,490)	180,171	13,673	166,498	
2300 Geriatric	32,950	36,072	31,039	12,228	3,122	8.56%	(18,811)	-153.83%	1,911	23,844	0	23,844	
2400 Behavioral Health Unit (BHU)	20,058	20,000	20,058	20,000	(58)	0.00%	(58)	0.00%	0	0	0	0	
2610 Dogwood Apartments	5,679	7,226	4,395	2,840	1,547	21.40%	(1,032)	-36.33%	1,284	4,386	523	3,862	
2620 EBP Supportive Housing	13,726	14,383	13,724	9,021	657	4.57%	(4,704)	-52.14%	2	5,363	0	5,363	
2640 Dutton Facilities	83,014	115,703	89,611	56,235	32,689	28.25%	(29,980)	-53.31%	(6,597)	59,468	3,396	56,072	
2650 Jackson Place	36,767	40,746	34,406	17,519	3,979	9.77%	(15,241)	-86.99%	2,361	23,227	1,647	21,580	
2651 Marshall Place	20,945	23,208	27,051	10,618	2,263	9.75%	(16,047)	-151.13%	(6,105)	12,590	386	12,204	
3030 Substance Use	110,317	158,768	119,840	40,041	48,451	30.52%	(64,756)	-161.73%	(523)	118,727	6,042	112,685	
3060 Prevention	30,908	33,412	30,002	9,706	2,504	7.50%	(20,295)	-209.09%	906	23,706	0	23,706	
Board Investments	22,886	(156,875)	1,637	891	(179,761)	114.59%	141	15.79%	21,249	(157,766)	887	(158,652)	
Grand Total	944,610	1,408,481	924,664	875,472	19,946	533,008	46,358	466,650					

Budget is divided equally over 12 months. Actual is based on the activity during the month

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**REVENUE & EXPENSE REPORT FOR THE
SIX MONTHS ENDED MARCH 31, 2025**

	PROGRAM	BUDGET	ACTUAL
Revenue	1500 REGION 1 PROJECT	<u>91,214</u>	<u>91,214</u>
Expense		<u>91,214</u>	<u>91,214</u>
Revenue	2110 MARSHALL COUNTY MHC	<u>1,740,496</u>	<u>1,990,339</u>
Expense		<u>1,698,806</u>	<u>1,606,962</u>
Revenue	2210 JACKSON COUNTY MHC	<u>1,298,453</u>	<u>1,308,985</u>
Expense		<u>1,307,393</u>	<u>1,180,352</u>
Revenue	2300 GERIATRICS	<u>197,700</u>	<u>218,142</u>
Expense		<u>186,236</u>	<u>176,860</u>
Revenue	2400 BEHAVIORAL HEALTH UNIT	<u>120,349</u>	<u>204,998</u>
Expense		<u>120,349</u>	<u>204,998</u>
Revenue	2610 DOGWOOD APARTMENTS	<u>34,075</u>	<u>39,061</u>
Expense		<u>26,372</u>	<u>19,032</u>
Revenue	2620 EBP SUPPORTIVE HOUSING	<u>82,357</u>	<u>89,666</u>
Expense		<u>82,345</u>	<u>79,318</u>
Revenue	2640 DUTTON FACILITIES	<u>498,086</u>	<u>701,541</u>
Expense		<u>537,665</u>	<u>554,997</u>
Revenue	2650 JACKSON PLACE	<u>220,603</u>	<u>240,059</u>
Expense		<u>206,439</u>	<u>176,375</u>
Revenue	2651 MARSHALL PLACE	<u>125,672</u>	<u>162,523</u>
Expense		<u>162,305</u>	<u>146,092</u>
Revenue	3030 SUBSTANCE USE	<u>661,900</u>	<u>715,866</u>
Expense		<u>665,038</u>	<u>613,848</u>
Revenue	STR/CURES/SOR (Part of the Substance Use Program)		<u>22,408</u>
Expense			<u>12,178</u>
Revenue	3060 PREVENTION	<u>185,446</u>	<u>162,465</u>
Expense		<u>180,010</u>	<u>155,282</u>

2025 COMPARATIVE INCOME STATEMENT

As of Accounting Period 6

	50.00%	<u>FY 2024</u>	<u>FY 2025</u>	<u>\$</u>	<u>%</u>
				<u>VARIANCE/YEAR</u>	
Medicaid		\$1,578,346	\$2,225,590	\$647,244	29.08%
% of Budget		43.42%	62.08%		
DMH		\$ 3,088,591	\$ 2,983,034	\$ (105,557)	-3.54%
		54.79%	50.35%		
Medicare		\$ 15,274	\$ 15,832	\$ 558	3.52%
		47.85%	53.67%		
Self Pay		\$ 58,501	\$ 72,431	\$ 13,930	19.23%
		40.85%	67.68%		
Insurance		\$ 309,088	\$ 301,057	\$ (8,031)	-2.67%
		60.70%	49.54%		
Total Operating Revenue		\$5,490,278	\$6,423,610	\$ 933,332	14.53%
		51.39%	57.97%		
Salary		\$ 2,854,601	\$ 3,278,227	\$ 423,626	12.92%
		52.82%	52.23%		
Fringe		\$ 596,156	\$ 652,501	\$ 56,345	8.64%
		51.70%	54.05%		
Misc Exp-BHU		\$ 165,225	\$ 204,998	\$ 39,773	19.40%
		68.64%	85.17%		
Fees Contract Staff		\$ 23,981	\$ 47,602	\$ 23,621	49.62%
		35.29%	31.08%		
Travel		\$ 115,761	\$ 138,817	\$ 23,056	16.61%
		49.19%	57.09%		
Total Operating Expenses		\$4,827,172	\$5,424,054	\$596,882	11.00%
		50.85%	51.22%		
Operating Income		\$663,106	\$999,557	\$336,451	33.66%
Depreciation		(\$179,890)	(\$222,170)	(\$42,280)	19.03%
Net Income/(Loss)		<u>\$483,216</u>	<u>\$777,387</u>	<u>\$294,171</u>	

***Does not include Board Investments

2025 COMPARATIVE BALANCE SHEET

As of Accounting Period 6

	<u>FY 2024</u>	<u>FY 2025</u>	<u>\$</u>	<u>%</u>
			<u>VARIANCE</u>	
Current Assets				
Cash	\$1,085,921	\$790,599	\$ (295,322)	-37.35%
Total Receivables	\$2,332,600	\$2,556,899	\$ 224,299	8.77%
Total Other Current Assets	\$3,416,357	\$3,425,498	\$ 9,141	0.27%
Total Current Assets	\$6,834,878	\$6,772,996	-\$61,882	-0.91%
Long Term Assets				
Fixed Assets	\$3,188,033	\$3,663,842	\$ 475,809	12.99%
Other Long Term Assets	\$6,546,561	\$6,811,703	\$ 265,142	3.89%
Total Long Term Assets	\$9,734,594	\$10,475,545	\$ 740,951	7.07%
Total Assets	\$16,569,472	\$17,248,541	\$ 679,069	3.94%
Liabilities				
Current Liabilities	(\$775,265)	(\$662,589)	\$ 112,676	-17.01%
Long Term Liabilities	\$0	(\$200,000)	\$ (200,000)	
Total Liabilities	(\$775,265)	(\$862,589)	\$ (87,324)	10.12%
Net Assets				
Unrestricted Net Assets	(\$14,513,195)	(\$15,610,386)	\$ (1,097,191)	7.03%
Net (Income) Loss	(\$1,281,012)	(\$775,566)	\$ 505,446	-65.17%
Total Net Assets	(\$15,794,207)	(\$16,385,952)	\$ (591,745)	3.61%
Total Liabilities and Net Assets	(\$16,569,472)	(\$17,248,541)	(\$679,069)	3.94%

Other Information

March 2025

Transportation	<u>Marshall County</u>	<u>Jackson County</u>	
Miles driven in month	1,435.00	1,419.00	
Number of riders	193	41	
Fuel Purchased	220.44	616.68	
Average Price/gallon	2.70	3.09	
Maintenance	91.53	258.17	Oil change, new tire, rotate & balance
Depreciation	869.78	842.00	
Salary	2,311.70	2,172.80	
Cost/rider	18.10	94.87	

Client Medical Expense	<u>Dutton</u>	<u>Jackson Place</u>	<u>Marshall Place</u>	<u>Cedar Lodge</u>	
Pharmacy	2,870.71	204.41	240.21	291.88	
Physician Charges				1,816.50	
Co-Pays/Deductibles	393.83				
	<hr/>	<hr/>	<hr/>	<hr/>	
	3,264.54	204.41	240.21	2,108.38	5,817.54

Consumer Housing	<u>Duplex-Board Inv</u>
# of Available Units	-
# of Units Rented	-
Rental Revenue	-

**Mountain Lakes Behavioral Healthcare
Estimated Net Accounts Receivable Aging
As of March 31, 2025**

	<u>Self Pay</u>				
	<u>30</u>	<u>60</u>	<u>90</u>	<u>>90</u>	<u>Total</u>
A/R Balance as of 3/31/25	80,063.08	31,690.35	15,162.65	87,660.74	214,576.82
Adjustment %	93.50%	93.50%	93.50%	93.50%	
Estimated Net Self Pay A/R Balance	5,204.10	2,059.87	985.57	5,697.95	13,947.49
	<u>DHR and Probate</u>				
	<u>30</u>	<u>60</u>	<u>90</u>	<u>>90</u>	<u>Total</u>
A/R Balance as of 3/31/25	3,839.21	2,361.16	2,000.00	1,481.23	9,681.60
Adjustment %	0.00%	0.00%	0.00%	0.00%	
Estimated Net DHR/Probate A/R Balance	3,839.21	2,361.16	2,000.00	1,481.23	9,681.60
	<u>Medicare</u>				
	<u>30</u>	<u>60</u>	<u>90</u>	<u>>90</u>	<u>Total</u>
A/R Balance as of 3/31/25	4,751.44	-	-	-	4,751.44
Adjustment %	70.00%	70.00%	70.00%	70.00%	
Estimated Net Medicare A/R Balance	1,425.43	-	-	-	1,425.43
	<u>Medicaid</u>				
	<u>30</u>	<u>60</u>	<u>90</u>	<u>>90</u>	<u>Total</u>
A/R Balance as of 3/31/25	438,189.66	10,225.43	2,540.23	15,473.39	466,428.71
Adjustment %	31.88%	31.88%	31.88%	31.88%	
Estimated Net Medicaid A/R Balance	298,494.80	6,965.56	1,730.40	10,540.47	317,731.24
	<u>Insurance</u>				
	<u>30</u>	<u>60</u>	<u>90</u>	<u>>90</u>	<u>Total</u>
A/R Balance as of 3/31/25	78,746.27	10,367.25	2,410.89	6,356.01	97,880.42
Adjustment %	51.67%	51.67%	51.67%	51.67%	
Estimated Net Insurance A/R Balance	38,058.07	5,010.49	1,165.18	3,071.86	47,305.61
	<u>ASAIS</u>				
	<u>30</u>	<u>60</u>	<u>90</u>	<u>>90</u>	<u>Total</u>
A/R Balance as of 3/31/25	323,435.66	59,622.77	69,497.74	1,917.95	454,474.12
Adjustment %	33.00%	33.00%	33.00%	33.00%	
Estimated Net Insurance A/R Balance	216,701.89	39,947.26	46,563.49	1,285.03	304,497.66
	<u>Total</u>				
	<u>30</u>	<u>60</u>	<u>90</u>	<u>>90</u>	<u>Total</u>
A/R Balance as of 3/31/25	929,025.32	114,266.96	91,611.51	112,889.32	1,247,793.11
Average Adjustment %					
Estimated Net Total A/R Balance	563,723.50	56,344.34	52,444.65	22,076.54	694,589.03

STARTING MARKET VALUE **\$10,193,279.33**

Dec 31, 2024 - Mar 31, 2025

Dec 31, 2024

DEPOSIT AND WITHDRAWALS **\$0.00**

\$10,000

Value Time Period Investments Deposits & Withdrawals

INVESTMENT RETURNS **-\$8,286.78**

\$10,000

Value Time Period Investments Deposits & Withdrawals

TOTAL RETURN **0.08%**

\$10,000

Value Time Period Investments Deposits & Withdrawals

ENDING MARKET VALUE **\$10,184,992.55**

\$10,000

Value Time Period Investments Deposits & Withdrawals

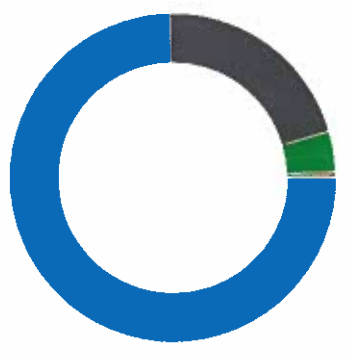
As of Mar 31, 2025, Market: Close
*This total does not include unrvalued values and may not match Total Value

Value Time Period Investments Deposits & Withdrawals

ASSET ALLOCATION

VIEW BY

Broad Asset Class



During market hours, values for securities that are priced daily are calculated using prior day's closing price.

MLBH PERSONNEL REPORT

4/15/2025

NEW HIRES

PT	Jessica Leven	Outpatient Therapist	3/25/2025	MCMHC
FT	Ishemika Ramsey	Life Skills Specialist	3/21/2025	Marshall Place
PT	Ilenna Knapp	Life Skills Specialist RDP	4/1/2025	MCMHC
FT	Kimberly Lahman	Program Coordinator	4/15/2025	Dutton Group Homes
FT	Zachary Nickerson	Parent Peer Specialist	4/15/2025	MC & JC

SEPARATIONS (VOLUNTARY)

DOH				<i>dissatisfied</i>
7/10/2024	FT	Jaclyn Gilbert	Peer Specialist	4/9/2025 Jail-Based Services <i>personal issues</i>

SEPARATIONS (INVOLUNTARY)

DOH	FT	Katrina Ramsey	Program Director	4/7/2025	Substance Use Services
7/9/2012					
DOH	FT	N Anna York	Life Skills Specialist	4/8/2025	Substance Use Services
2/13/2024					

NEW POSITIONS ADDED

FT	Jennifer L Brown	Contingency Management Specialist in addition to current Records Librarian	3/31/2025	Both Counties
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TRANSFERS

NA

PROMOTIONS

NA

NOTE: Sierra Adams began in Marshall County on 03/03/25

AIH = Adult In-Home

CAIH = Child/Adolescent In-Home

CRNP = Certified Registered Nurse Practitioner

CRSS = Certified Recovery Support Specialist (SA)

NL = Non-Licensed

QSAP = Qualified Substance Abuse Professional

SU = Substance Use

SLP = Sign Language Proficient

RDP = Rehabilitative Day Program

TPR = Treatment Plan Review

CURRENT OPEN POSITIONS

MLBH PERSONNEL REPORT

JP LSS FT (1) PRN (2)

MP LSS PRN (1)

Crisis Coordinator FT (1)

SU LSS PT WE Nights (1)

Program Coordinator (1) SU

Peer Specialist/ Jail-Based (1)

IT Board Report APR 2025

Items Completed from last reports:

- Start prep work / conversations for Msoft 365 / Azure Cloud services.
- Lots of Avatar patches to install.
- SSL Certificates for year 2025.
- Renewals for support services on several products forthcoming.
- Exchange prereq updates for 365 Hybrid deployment.
- ~~-Working with contractor #2 to assist with 365 Hybrid setup Agreements.~~
- Secureworks acquired by SOPHOS. What changes will ensue?
- Implement Azure AD Connect.
- Cabling additions for addl office builds at new Sboro.
- Secureworks Billing issues.
- Avatar Reporting Servers move to AWS.
- Install IP Phones at New Sboro location. Waiting on move in.

New Items / Continued:

- ATT phone service renewal waiting on countersigned contract.
- Bunch of CCBHC changes / additions in Avatar.
- Trying to implement Non Profit version of 365.
- Secureworks new Agent Software to install.
- Viper AntiV Agent Software to un-install.
- New Sboro Phones do final activation stuff.
- New Sboro computers move stuff.
- New Sboro additions missed items?
- Old Sboro move ATT dialtone fiber systems to New Sboro? When?
- Old Sboro move Phone Server to New Sboro? When?
- Old Sboro disco Farmers Metro Fiber? When?
- Are we going to keep Old Sboro Building for a period of time?
- Farmers start discussions with moving Servers to their datacenter?
- Lots of other stuff to start depending on July CCBHC Rate approval.

Clinical Services Report

April 2025

Adult In-Home Intervention Program

The Adult In-Home Intervention Program (AIH) is designed for consumers who are seriously mentally ill and have a need for more intensive services than traditional outpatient services. This is typically due to a recent hospitalization, an increase in symptoms, immediate crisis situation, unstable living situation, or history of failure to engage in other outpatient services. AIH is a home-based treatment provided by a two person treatment team, a therapist and a case manager. The team is flexible and their availability extends beyond the Monday – Friday 8:00 – 4:30 business hours. The program standard requires that the AIH cases are staffed on a regular basis and treatment decisions are made jointly by the team.

Mountain Lakes currently has an AIH team in each county. Due to the intensity of the services, their caseloads typically average around 12-20 clients.

Opening Day for Miracle League

By John Mann

There was a huge crowd at Sand Mountain Park last Thursday evening for the opening ceremony and parade of teams for both youth league rec ball and the Miracle League.

“This is very special,” Sand Mountain Park General Manager Shawn Perry said. “Getting to celebrate these kids is very exciting and it helps to get them excited for the season. I like to be able to recognize the volunteer coaches and of course the Miracle League and all their buddies. The league has gotten bigger every year.”

Youth baseball, softball and soccer teams made up

the parade with age groups down to six and under as well as teams for the Miracle League, which provides athletic opportunity and community for adults and children with mental and physical challenges.

The league has two seasons a year in the spring and fall and has seen incredible growth over the years going from 53 athletes in 2021 for the inaugural season and now boasting over 200

“I’m really glad that Shawn expressed where we started and where we are at now,” Miracle League MC Mark Coy said. “Who knows how big this thing is going to get. In 2021, we started with 53 athletes and over 180 last year so it has just grown every year.”

Each Miracle League athlete also has at least one assistant, called a buddy, to lend a hand in each game which means that the league boasts a huge volunteer presence when the season is on. The athletes are split into two age groups being fifteen and under and sixteen and over but well-comes athletes of any age to take part and get a baseball experience.

The opening ceremony featured a performance from the Shining Stars Choir, most of whom are also Miracle League athletes, singing the national anthem before the opening pitch was thrown to start the seasons.

The opening pitch itself was thrown in honor of the late Buddy Smith, who passed away earlier this year after over 30 years of commitment to parks and rec in Albertville.

“Many of the dads out here today were either coached by him, umpired by him or refed by him,” Perry said. “Somehow, he would be the one out there



Miracle League players and their buddies gathered for opening day festivities last Thursday.

telling them good job. To be able to bring his family out to throw the first pitch was a way to wrap up not just a memory to an extent but also celebrate his part in everything. He would have loved this; in fact, he'd still be out there with the kids.”

Smith's brother Mike was the one to throw the pitch, using a ball that in itself was a tribute to Buddy's life. It was a softball that

he himself threw to open a game a few years ago between Alabama and Jacksonville State that was held at Sand Mountain Park. “Buddy was a huge Alabama fan, and he threw out the first pitch,” Eric Scott, athletic event sales representative for Sand Mountain Park, said. “He loved Alabama softball and when I asked him if he wanted to throw the first pitch it was like an immediate yes. He

would come out here every day and practice throwing and this is the same softball he threw for that game.” More information about Sand Mountain Park and its programs can be found on their website at sandmountainpark.com. More information about the Miracle League can also be found on the park's website or on their Facebook page “The Miracle League of Albertville.”



Miracle League of Albertville and Youth Sports celebrates opening night

By DRUW GIAMALVA
The Reporter

It was a crowded night at Sand Mountain Park and Amphitheater as hundreds of friends, families and community members gathered for the opening night parade for the Miracle League of Albertville and Youth Sports. The Miracle League of Albertville started in Fall of 2021, where they started off with just 51 athletes

and four teams. Today, the league has grown into so much more, as there are now 203 athletes on 16 teams competing.

"The Miracle League of Albertville began in the fall of 2021 with just 51 athletes and four teams. Today, we've grown to 203 athletes and 16 teams. We are incredibly blessed with the most amazing athletes, coaches and buddies,"

said Lisa Hansford, coordinator of the Miracle League of Albertville.

Nate Chacon announced each Miracle team to a roar of cheers from the crowd. After the announcement of each team, everyone was led in prayer by Will Brumbeloe and finished off with a moving performance from the Shining Stars.

See MIRACLE, A2



Special to The Reporter
Ayden Ward and his mom, Amy, were one of many families at the Miracle League's opening night.

MIRACLE

Continued from

The Miracle League is a special league for children or adults who suffer from physical or mental disabilities. The Miracle League removes the barriers that keep children and adults with mental and physical disabilities off the



Hundreds of families across the county turned out for the Miracle League's opening night parade at SMPA.

Druw Giamalva | The Reporter

our buddies make it possible. They come to be a blessing to others and leave feeling blessed themselves. None of this would be possible without our incredible staff: Mark Coy, Mona Barksdale, Austin Freeman and Lena Bilbrey, whose dedication helps make every season a success," Hansford said.

Miracle League teams play on custom-designed turf that accommodates wheelchairs and other assistive devices that prevent them from injuries. The league is for ages 5 to 99 but offers a 15 and under league and a 16 and up league. The Miracle League of Albertville holds a spring (April and May) and a fall (September and October) season.

baseball field and lets them experience the joy of baseball. To help the athletes, the league uses a "buddy" pairing system with each player, where they create a strong and trusting bond.

"Our athletes make every game special, but

CCBHC Task Force

April 9, 2025

MINUTES

Present: Lane Black, Myron Gargis, Cammy Holland, Dana McCarley, Shelly Pierce and Erica Player

Absent: Dianne Simpson

Today's meeting began by reviewing updated schedules for Outpatient Therapists in both counties. Significant improvement was noted.

Myron then explained that the implementation of CCBHC creates the need to develop two organizational charts, with the goal of the updated org charts clearly defining CCBHC programs/staff and Non-CCBHC programs/staff in each county. With this in mind, the group began to focus on draft versions of the updated organizational charts. The task force reviewed pages 1-4 of the CCBHC Org Chart, discussing and recommending various revisions to the document. Shelly will make these noted revisions and email the updated copies to each group member for review.

At next week's meeting, the task force will continue review and discussion of both draft organizational charts.

CCBHC Task Force Meeting Minutes

Date: April 2, 2025

Attendees:

Myron Gargis, Cammy Holland, Dana McCarley, Erica Player and Dianne Simpson

Absent:

Shelly Pierce

1. Organizational Chart

The organizational chart will be reviewed at the next meeting when Shelly Pierce is present.

2. Scheduling Updates

Progress is being made with staff scheduling.

Dana McCarley noted that the recent move in Scottsboro has negatively affected scheduling.

Myron emphasized that client care must remain the priority. He instructed that Program Directors should review schedules daily alongside Office Managers.

With the new therapist schedules set to begin in May, any staff not maintaining full schedules will indicate overstaffing. Adjustments may be necessary.

Dana was asked to redirect her team's focus back to client care and scheduling.

3. Intake Process Changes

In Marshall County, the Intake Coordinator is currently assigned 3 intakes per day, plus 72-hour follow-ups.

In Jackson County, the Intake Coordinator handles 4 intakes daily.

After discussion, it was decided to separate the treatment plan from the intake session. The treatment plan will now be conducted during the first therapy session.

With this change, fully trained Intake Coordinators will now complete 5 intakes per day, scheduled at:

- 8:00 AM, 9:30 AM, 11:00 AM, 1:30 PM, 3:00 PM

This change takes effect immediately.

If the 8:00 AM intake is a no-show, the Intake Coordinator will attend staffing. If the intake occurs, the Program Director will provide staffing updates afterward.

The goal is for Intake Coordinators to focus solely on intake appointments (except for Medicare clients), while therapists will conduct therapy sessions.

4. Staff Communication – ACT & RDP

Erica received approval to begin discussions with ACT and RDP teams regarding salary expectations, with the assumption that their pay will remain unchanged due to their non-CCBHC status.

5. AI Documentation – Upheal Implementation

The team approved the use of Upheal as the new AI-supported tool for clinical note documentation.

Implementation will begin with four outpatient therapists in each county.

6. Upcoming Agenda Items

Next week's meeting will include:

- - Review of the organizational chart
- - Discussion on staff productivity

CCBHC Task Force

March 27, 2025

MINUTES

Present: Myron Gargis, Cammy Holland, Dana McCarley, Erica Player and Dianne Simpson

Absent: Shelly Pierce

There was no update yet to nurses' and prescribers' schedules.

Revised Levels of Care were distributed. Level 2 is brief but more intense. This is set up for the client to accomplish their goals quickly. Level 3 is more like someone with SMI. These levels of care are for internal use. The Levels of Care were approved.

Dianne handed out a Missed Appointment Policy that was adapted from MTM. The group discussed that there is nothing in the policy about the chart closing. This may need to be added. The group continued to talk out the logistics of how this policy would be implemented. It was noted that the bottom part of the form was for internal use only and would not print on the policy. A lot of the implementation of this policy would depend on the Care Navigator's role. A decision was made to table the Missed Appointment Policy until the Care Navigators have been put in place.

Myron discussed some of the questions that came about during the organization chart revisions. C/A Director would supervise HICC, Therapeutic Mentor, Peer Specialist, etc. Jennifer Brown did get a form for Shelly to use for the new org chart once all decisions about positions have been made.

On April 2, an email will be sent to all users containing job postings for the new positions that will be available July 1.

The meeting adjourned at 12:57pm.

CCBHC Task Force

March 20, 2025

MINUTES

Present: Myron Gargis, Cammy Holland, Dana McCarley, Shelly Pierce, Erica Player and Dianne Simpson

Absent: None

The meeting began by reviewing updated schedules for several Outpatient Therapists, with some improvement realized. Erica noted that Marshall County is now scheduling into May and is currently manually entering appointments into the new scheduling system. Getting the scheduling template set up will definitely simplify the job for front desk staff.

The group next discussed schedules of prescribers and RNs. Dianne noted that she had reviewed the past 90 days of injections, which averaged approximately a half day per week. All were reminded that Rob Barrett is currently utilized as ½ FTE for JC ACT and Stephanie Knott ¼ FTE for MC ACT. It was also noted that Rob is currently spending a lot of time on tasks that will be the responsibility of the future Benefit Specialist.

All were in agreement on the need to utilize the RNs in conjunction with the prescriber appointments, with Erica noting that Belinda was very much in favor of having the RN triage the consumer prior to seeing the prescriber.

The task group then discussed that the RNs currently bill med monitoring, which is a triggering event, but that it can't be billed on the same day with a prescriber's visit under CCBHC. With that in mind, the RN may be able to bill other service codes, such as Nursing Assessment, as a FFS event and the prescriber will bill as a triggering event under CCBHC.

Myron noted recent DMH clarification on billing location restrictions. As of now, services provided at residential or nursing home locations are non-triggering events and are not included in the CCBHC model. Substance use services provided in a residential setting are also not included in the CCBHC model.

Task force members were encouraged to keep in mind that CCBHC programs will be paid via CCBHC enhanced funds and non-CCBHC programs will continue to be paid under FFS (non-CCBHC enhanced funds). A few exceptions to this rule are In-Home and Case Management Services. While neither are classified as triggering events under CCBHC, costs for both are included in the CCBHC cost report.

For clarification purposes, a recommendation was made to develop a separate Salary Classifications Listing, Pay scale and Organizational Chart for CCBHC programs and non-CCBHC programs. The group discussed that any current staff members working in a non-CCBHC position will have the first opportunity to apply for vacant CCBHC positions.

As follow-up from the last meeting, Dianne distributed draft Level of Care Guidelines for MI Adult Services. These documents listed five levels of care, with the higher number being the more intense. After review, the group agreed these guidelines were an excellent starting point, noting that only a few minor tweaks and corrections needed to be made prior to implementation. Erica commented that while color coding was not an option, the use of specific symbols to designate each level of care could be utilized for tracking purposes.

All task force members were in agreement to make the necessary revisions to the LOC Guidelines and train staff on their usage, tentatively by the first week of May.

Myron shared with the group that he and the IT staff were reviewing different AI programs for assistance with progress notes and a final decision would likely be made next week. All are hopeful to implement the new AI system prior to the upcoming schedule changes on May 1, 2025.

Items for review at the next meeting:

- Missed visit policy
- Revised LOCs
- Possibly the choice of AI software
- Possibly draft Org Chart for CCBHC and Non-CCBHC programs/positions

**Continuous Quality Improvement
Monthly Summary Reports
March 20, 2025**

I. Report from Clinical Director, Dianne Simpson:

- **Staff Error Report-** The February report was distributed to the Program Directors/Coordinators.

- **Wall of Fame/Incentive Plan for February 2025:** The following staff achieved the incentive for the month of February. They all exceeded their productivity standard and produced excellent and error free documentation.

Congratulations:

Incentive Plan-

Cheek, Brittany
Early-Foster, Alison
Floyd, Jessica
Herring, Belinda
Holland, Miranda

McMurrey, Kimberly
Riggins, Jennifer
Robinson, Hannah
Strange, Lilly (JC RDP)

Wall of Fame-

Alford, Lindsay Marshall
Barrett, Rob Jackson
Boxley, Sarah Multiple
Brand, Kali Marshall
Brookshire, Tom Jackson
Burks, Julie Marshall
Burns, April M. P.
DeAtley, Joanna Residential
Dettweiler, Sarah Jackson
English, Audrey Jackson
Estes, Ashlee Marshall
George, Margaret Marshall
Green, Brittney Dutton
Hanna, Sarah M. P.
Hayes, Leilani M. P.
Headrick, Tina Marshall
Hixon, Ryan Dutton
Johnson, Dallas Jackson
Johnson, Stacey Marshall
Justice, Desiree Dutton
Kilian, Zachary Dutton
Knott, Stephanie Marshall
Malone, Crystal MC RDP/M.P.
Martin, Stephanie Marshall

Miller, Savannah Jackson
Moore, Leah Geriatrics
Moses, Mona Geriatrics
Paschal, Nancy Dutton
Richie, Denise Marshall
Romero, Kimberley Marshall
Rucker, Elizabeth Marshall
Sabb, Shaquitta Jackson
Scyphers, Patrick Marshall
Steed, Tyler Geriatrics
Travis, Samantha Dutton
Traweek, Elizebeth Marshall
Tubbs, Felicia J. P.
Whitley, Jessica Dutton
Whitten, Brooke Jackson
Wilson, Billy (Ross) M. P.
Zurita, Marili Marshall
Bartke, George Cedar
Crowell, Robert Cedar
Kirkland, Jana Cedar
Ramsey, Katrina Cedar
Sweatman, Susan Cedar
Woodham, Cynthia Cedar

**Continuous Quality Improvement
Monthly Summary Reports
March 20, 2025**

II. Review and approve of February 20, 2025 summary report: February minutes were approved as sent out with no changes noted.

III. Administrative Review Summary/Error Reports for February 2025: (Jan MTD 1.0 % YTD 0.7):

	Cases Reviewed	Docs Reviewed	Docs w/errors	Total Errors	Predominant Errors
TOTAL	25	3394	21	28	Service not provided per t-plan (Med Mon, Psycho-Ed); Late notes; No subsequent CANS

MONTHLY ADMIN REVIEW ERROR RATE: 1.0 % YTD ERROR RATE: 0.7 %

A summary report was sent out to the committee for each program containing details of the errors for review. The breakdown of reviews done for 6 month reviews and other/transfers were submitted for each program. The predominant errors were service not provided per t-plan (Med Mon, Psycho-Ed); late notes; no subsequent CANS. The monthly and yearly error rates were the same as last month.

IV. State Reporting Data Elements (SRDE) Report for January 2025-These errors are reported one month later as they are not received in time to research and compile prior to the CQI review.

Total Errors	Predominant Error Trends
6	Invalid legal status

VIII. Prevention Activities: 162 Prevention activity sheets were reviewed for February 2025. Report for February submitted by Hannah Chandler, SA Prevention Coordinator.

Direct Services	# Hours billed in Marshall County	# Hours billed in Jackson County
Block- Community	5	15
Block-Environmental	26	26
Block- Information Dissemination	74	48
Block-Education	24	11
Block-Alternatives	0	0
Block-PIDR	20	N/A
SOR-Environmental	46	N/A
SOR-CBP	0	N/A
Total	195	100

The Prevention team began promoting the Youth Survey for all 6th-12th grade students throughout both counties. The data on youth substance use will be used by both ADMH and MLBHC to develop future prevention strategies. The team also focused on promoting safe storage and disposal practices. Additionally, they set up displays at local pharmacies promoting "Remove the Risk" materials.

They conducted Narcan training for all Marshall County librarians, providing 32 Narcan kits. The team also attended the Kids n Kin events in both Marshall and Jackson Counties. In Marshall County Schools, they continued their in-depth classes with students caught vaping.

**Continuous Quality Improvement
Monthly Summary Reports
March 20, 2025**

The prevention team is currently in the 9th week of delivering the "Too Good for Drugs" program to all 5th grade students at Boaz Intermediate and Woodville Elementary schools. They also set up "Talk They Hear You" informational tables at local libraries in both counties, offering outreach to parents on how to discuss substance misuse with their children.

IX. Hospital Discharge Follow-up Report for February:

Location	Total
Marshall	12
Jackson	5
Geriatrics	1
Total	18

Tracking reports of hospital discharges and 72 hour follow-ups for clients in Marshall and Jackson County were sent out to the committee. All appointments were kept. Eight out of the eighteen were children/adolescents.

X. Incident Prevention and Management for February: There were no "other" incidents or reportable incidents aside from the medication errors.

XI. Medication Errors for February: There were 3 medication errors reported for the month of February. Three wrong client. No trends to note.

By Personnel

	MAC	RN	LPN	Pharmacist	Other (explain)
Level 1	3				
Level 2					
Level 3					
TOTAL	3	0	0	0	0

By Division

	MI	SA	TOTAL
Level 1	3	0	23
Level 2			
Level 3			
TOTAL	3	0	3

By Error Type

	Wrong Person	Wrong Med	Wrong Dose	Wrong Route	Wrong Time	Wrong Reason	Wrong Documentation	Missed Dose	Other (explain)
Level 1	3								
Level 2									
Level 3									
TOTAL	3	0	0	0	0	0	0	0	0

XII. Consumer Feedback, Complaints, and Grievances: There were 0 complaints reported for February.

**Continuous Quality Improvement
Monthly Summary Reports
March 20, 2025**

FY25-Consumer Feedback	February	February	February	February	February Total per location
	Compliments	Suggestions	Complaints	Comments	
Guntersville	0	0	0	0	0
Scottsboro	0	0	0	0	0
Outreach/Residential	0	0	0	0	0
Cedar Lodge	2	0	0	0	2
Total MTD	2	0	0	0	0
Total YTD	12	10	11	6	39

XIII. Residential Services Report for February 2025:

FACILITY	CAPACITY	TARGETED PT DAYS	ACTUAL PT DAYS	% OCCUPANCY
Jackson Place	3	84	84	100
Marshall Place	3	84	84	100
Jackson Place Sup Apt.	2	56	28	50
Dogwood Apartments	8	224	224	100
Supportive Housing	12	336	224	67
MLBH Residential Care	10	280	246	88
MLBH Crisis Stabilization	2	56	56	100
Foster Homes	26	728	728	100
Totals		1848	1674	91

XIV. Treatment Plan Reviews for February 2025:

Programs	Total Charts	Admission Criteria not met	Not Timely	Not Individualized	Documentation Does Not Relate To TP And/or Address Progress	No Attempts of Active Engagement Documented	No Modification for Accommodations	Total Errors
Geriatrics	10	0	1	0	0	0	0	1
Jackson	92	0	10	0	9	0	0	19
Marshall	198	0	18	0	7	0	0	25
Substance Abuse	12	0	0	0	0	0	0	0
Residential	0	0	0	0	0	0	0	0
TOTALS	312	0	29	0	16	0	0	45

Standards 580-2-20-.07 (7) (a):

- (1.) The appropriateness of admission to that program is relative to published admission criteria.
- (2.) Treatment plan is timely.
- (3.) Treatment plan is individualized.
- (4.) Documentation of services is related to the treatment plan and addresses progress toward treatment objectives.
- (5.) There is evidence of attempts to actively engage recipient, family and collateral supports in the treatment process to include linguistic and/or auxiliary support services for people who are deaf, hard of hearing, or limited English proficient as well as any other accommodations for other disabilities.
- (6.) Treatment plan modified (if needed) to include linguistic and/or auxiliary support services for people who are deaf, hard of hearing, or limited English proficient as well as any other accommodations for other disabilities.

**Continuous Quality Improvement
Monthly Summary Reports
March 20, 2025**

The committee was sent a breakdown of the clinical data compiled from the Treatment Plan Reviews. A summary report was sent out to the committee for each program. The trends for the month were: treatment plans not timely and documentation does not relate to treatment plan and/or address progress.

XV. Form-Policy & Procedure Revisions/Approvals:

Forms-

- **Term Trak Release-Retired** form as of 3/13/25 is no longer required by DMH. Please destroy any blank paper copies and delete electronic versions on your computers. Form was removed from MLBHC links>Administrative Forms>New Hire Forms tab.

P & P: Procedure revisions for CQI approval-None

P & P: Board Approved Policy Revisions-None

XVI. Miscellaneous Items:

- None

Leadership Committee

March 27, 2025

MINUTES

Present: Lane Black, Myron Gargis, Cammy Holland, Dana McCarley, Erica Player, Gerald Privett, Katrina Ramsey, Sherneria Rose and Dianne Simpson

Absent: Shelly Pierce

I. Approve minutes of the February 20, 2025, meeting

Minutes of the February 20, 2025, meeting were distributed to all staff via e-mail. Minutes were approved, as presented.

II. Committee reports

Human Rights from 3-3-25

In Attendance

Those in attendance were: Marguerite Rollins, Tricia Hopper, Dianne Simpson, and Sherneria Rose.

Not present: Kathleen Rice, Carrie Thomas, Leona Stancil, Sherry Bailey, and Katrina Ramsey

Human Rights Committee

The meeting was called to order at 5:02 p.m. at Cedar Lodge. The minutes from the December 2, 2024, meeting were reviewed. Tricia Hopper moved to approve them as written, and Marguerite Rollins seconded the motion. The committee unanimously approved the minutes.

The committee reviewed MLBHC Policy and Procedure 7.15.12 on Consumer Rights and Responsibilities, with a primary focus on consumer responsibilities for potential recommendations. While discussing consumer rights and the policy regarding any restrictions, the committee examined the responsibilities section in detail. Following the discussion, they recommended adding: "To budget personal funds in a manner that meets monthly needs, with staff assistance as needed."

The review of officer terms was postponed to the next meeting.

A Cedar Lodge consumer joined the meeting to provide feedback. He noted that this was his second admission to Cedar Lodge and expressed high praise for the program and staff. He shared insights gained during treatment and discussed his plans after discharge. Additionally, he stated that the food was good and had no suggestions for improvement.

Tricia Hopper will review her agency's rights and responsibilities for comparison and any suggestions. The committee will continue to review the P & P at the next meeting.

Next Meeting

Monday, June 2, 2025 at 5:00 pm. Location to be Cedar Lodge.

[Meeting adjourned 5:43 pm.]

Consumer Sat from 3-7-25

Present: Brittany Cheek, Cammy Holland, Jennifer Riggins, and Elizabeth Rucker

Absent: Hannah Chandler, Sarah Hanna, Dianne Simpson and Lily Sparks

I. Consumer Feedback Forms:

Consumer feedback forms from Oct 24 – Feb 25 were reviewed. 12 Compliments, 10 Suggestions, 11 Complaints and 6 Comments. Committee discussed suggestions and complaints. All complaints have been addressed.

II. New Business:

May is Consumer Appreciation Month. The committee decided to have doughnuts/cookies, fruit and drinks out at each clinic. Dutton clients will have the same foods available at snack at Dutton. Marshall Place and Jackson Place residents will have the opportunity to receive these snacks at RDP at each location. The committee suggested a sign that says “we appreciate our clients”. Maybe a sign that says 1 per person so all can enjoy. Mrs. Holland will create a budget for Mr. Gargis to approve. Mrs. Holland will order doughnut/cookies for Marshall County. Mrs. Rucker & Mrs. Riggins will pick up items and set up at the Guntersville Mental Health Center. Ms. Cheek will get items for Dutton and get with staff there to distribute to clients. Mrs. Holland will purchase items and take to the Scottsboro Mental Health Center and see if someone their can help keep the food replenished. Mrs. Holland will check the schedule of Dr. Boxley in May and select a day for the Guntersville location and the Scottsboro location to have the Appreciation Day. Ms. Cheek will get with the staff at Dutton and select a day that Jackson Place will be in attendance for RDP.

There was small discussion concerning an activity or acknowledgment of Suicide Prevention Month. This discussion was tabled until the next meeting.

Suggestions were made to try to recruit committee members from Cedar Lodge, Geriatrics, Jackson Place and Scottsboro in order for all areas to be represented.

III. Next Meeting

TBD

III. Program Financial Reports: October, 2024 – February, 2025

- YTD net income of \$132,084 (not including Board investments).
- **Marshall Co. OP & OR – Net income \$137,368**
- **Jackson Co. OP & OR – Net loss \$65,985**
- **Geriatrics – Net income \$17,438**
- **Residential –**
 - Supervised Apartments – Net income \$11,703
 - EBP Supportive Housing – Net income \$4,985 (program designed to break even)
 - Dutton – Net income \$61,919
 - Jackson Place – Net income \$32,009
 - Marshall Place – Net income \$1,910
- **SU Services – Net loss \$52,737**
- **Prevention Services – Net loss \$16,523**

IV. Reports & Program Updates:

- **Executive Director’s Report – Myron Gargis**
 - All residential programs will be excluded from CCBHC. Currently, the nursing home location is excluded from CCBHC. Myron has asked that this be reviewed. He noted that our consultant said he usually does not see nursing home locations excluded. Programs not included will have to operate on their own standing.
 - Myron is currently negotiating with the owner of the land adjoining Cedar Lodge. He would like to purchase a section to square off the property line in the back.
 - Scottsboro is moving to the new facility on Hwy 35 on April 11, 2025.
- **Clinical Director’s Report – Dianne Simpson**
 - SU had a compliance review earlier this week, with no findings.
 - Region 1 has 27 at Bryce. This may lead to DMH reclaiming money.
 - Lelani Hayes has transitioned to SU Prevention.
 - MHSIP surveys are paperless this year. More participants are required, so the timeframe for surveying has been extended to three months.
- **Administrative Services – Cammy Holland**

- No report for today.
- **HR Report – Lane Black**
 - Internal job postings will be coming soon. With the implementation of CCBHC, we will transition to having two pay scales (CCBHC and Non-CCBHC). The CCBHC scale will be estimated to be 20-30% higher than the Non-CCBHC scale. Internal job postings will include a statement that the pay scale is an estimate.
 - Katrina needs one third shift LSS for the weekends.
 - LSS at JP & MP, as well as a Crisis Coordinator, are the current openings.
 - Dana may need the CPS-P position to be open again.
- **Jackson County – Dana McCarley**
 - Staff are focusing on improving therapist schedules, packing and moving to the new facility.
 - Dewayne will work on putting together desks and identifying desks that need to be moved.
- **Marshall County OP & OR – Erica Player**
 - Kristen Perigo, the new MC TM, is training today.
 - A PT Therapist for MC started this week.
 - A new PT LSS for MC RDP starts next week.
 - The new IC is up to 50%.
 - A lot of time is spent focusing on CCBHC. Levels of Care are almost ready to be implemented.
- **Geriatrics – Gerald Privett**
 - Gerald Privett and Gerald Bell recently met with a nursing home in an attempt to increase services provided by the Geriatric Program.
 - Many ideas related to peers working in the nursing homes were discussed.
- **Residential – Sherneria Rose**
 - A second shift LSS at MP has been hired.
 - Two JP staff take their PEER test on April 10.
 - The paperwork for a Program Coordinator for Dutton is on Myron’s desk.
 - Sherneria & Becca attended the Food Bank of North Alabama training on March 24.
- **SA Services – Katrina Ramsey**
 - The census at Cedar has been above 25. Today it is at 28.
 - Danny Quick received his serve safe certification.
 - Katrina and Amanda also attended the Food Bank of North Alabama training on March 24.

V. Review of wait times

For March, 2025, the following wait times were reported:

MC Intake	6 days	MC MD/CRNP	16 days
JC Intake	6 days	JC MD/CRNP	7 days
Average	6 days	Average	11.5 days

VI. Unfinished Business

- None noted

VII. New Business

- None noted

VIII. Adjournment

The Leadership Committee meeting was adjourned at 1:58 p.m.



New Directions 2025



New Faces at MLBHC

During the month of March, five new employees joined MLBHC.

(Top row - left to right) **Keith Holcombe, MS**, is an Intake Coordinator for both Marshall and Jackson County; **Jessica Leven, ALC**, is a Marshall County Outpatient Therapist; and **Kristen Perigo** is a Therapeutic Mentor for Marshall County. (Bottom row - left to right) **Ishemika Ramsey** is a Life Skills Specialist at Marshall Place and **Danny Quick** joined Cedar Lodge as a Life Skills Specialist.



**April is
National Distracted Driving
Awareness Month**

*As a reminder to all staff, MLBHC's
Distracted Driving Policy is included below.*



**MLBHC Personnel Policy Spotlight
4.6.8 - Distracted Driving**

MLBHC has a strong commitment to the health, safety and welfare of its employees and customers, as well as to their families. In order to increase safety and eliminate unnecessary risks while operating a motor vehicle, MLBHC has enacted a Distracted Driving Policy. Distracted driving is any activity that could divert a person's attention away from the primary task of driving. All distractions endanger driver, passenger and bystander safety. These types of distractions include, but are not limited to the following:

- Texting
- Using a cell phone or smart phone
- Reading and/or responding to emails
- Surfing the internet
- Engaging in phone conversations
- Reading, including maps
- Using a navigation system
- Watching a video
- Adjusting a radio, CD player, or MP3 player
- Eating and/or drinking
- Grooming
- Driving while drowsy
- Driving while under the influence of medications

MLBHC is committed to ending the epidemic of distracted driving and has created the following rules which apply to any employee operating either a company vehicle or a personal vehicle for company business and using an electronic device, whether personal or company issued.

- Employees may not use any electronic devices while operating a vehicle - whether the vehicle is in motion or stopped at a traffic light or stop sign. This includes but is not limited to the distractions listed above.
- If an employee needs to use their phone, they must cautiously pull off the roadside to a safe location.
- Additionally, MLBHC employees are required to:
 - Turn cell phones off or put them on silent or vibrate before starting the car.
 - Consider modifying voice mail greetings to indicate that you are unavailable to answer calls or return messages while driving.
 - Inform clients, associates and business partners of this policy as an explanation of why calls may not be returned immediately.

**Staff found to be in violation of this Distracted Driving Policy
will be subject to disciplinary action, up to and including termination.**

What's Going On ????

April Anniversaries

Gabby Catchings	1 year
Shelby Granger	1 year
Zach Kilian	1 year
Samantha Travis	1 year
Brenda Odom	2 years
Kali Brand	3 years
😊 Loyalty Bonus	\$100
Amanda Higdon	4 years
Belinda Herring	9 years

April Birthdays

April 1	Sherneria Rose
April 2	Ashlee Estes
April 2	Desiree Justice
April 5	Regenia Davis
April 9	Jeremy Burrage
April 17	Dan Phillips
April 21	Cailey Daniel
April 21	Wes Morgan
April 26	Kali Brand
April 26	Lindsey Quinn
April 28	Tom Brookshire
April 29	Courtney Landers
April 30	Kylie Evans

~ Monthly Meetings ~

Tuesday, April 15th

Board meeting 5:30 pm

Hwy 35 - Scottsboro

(Confirm attendance with Shelly Pierce)

Thursday, April 17th

PI Committee meeting 1:00 pm

Leadership Committee meeting (following PI)

Quarterly meeting so all attend in person
at Administrative Office



**MLBHC will observe the
Good Friday holiday on
April 18th for all
full-time staff members**



The renovations and upgrades to the facility have finally been completed and MLBHC's Mental Health Center in Scottsboro will move to the new location on Friday, April 11, 2025.

Our first day to service consumers will be Monday, April 14, 2025, and our new address is:

16003 AL Hwy 35
Scottsboro, AL 35768

you
are
awesome

Wall of Fame

February 2025 I - Incentive

you
are
awesome

MC OP & OR

Lindsay Alford
Kali Brand
Julie Burks
Ali Early-Foster (I)
Ashlee Estes
Tina Headrick
Belinda Herring (I)
Stacey Johnson
Stephanie Knott
Stephanie Martin
Jennifer Riggins (I)
Denise Ritchie
Kim Romero
Elizabeth Rucker
Patrick Scyphers
Elizebeth Traweek
Marili Zurita

Geriatrics

Leah Moore
Mona Moses
Tyler Steed

Residential

April Burns
Joanna DeAtley
Brittney Green
Sarah Hanna
Leilani Hayes
Ryan Hixon
Desiree Justice
Zach Kilian
Kimberly McMurrey (I)
Nancy Paschal
Mark Slade
Samantha Travis
Felicia Tubbs
Jessica Whitley
Chris Whitworth
Ross Wilson

Multi Programs

Sarah Boxley
Margaret George
Crystal Malone
Lilly Strange (I)

JC OP & OR

Rob Barrett
Tom Brookshire
Brittany Cheek (I)
Sarah Dettweiler
Audrey English
Jessica Floyd (I)
Miranda Holland (I)
Dallas Johnson
Savanah Miller
Hannah Robinson (I)
Shaquitta Sabb
Brooke Whitten

Substance Use

George Bartke
Bob Crowell
Jana Kirkland
Katrina Ramsey
Susan Sweatman
Cindy Woodham



2025 MHSIP Surveys

The CCBHC Demonstration Program has prompted ADMH to revise the consumer satisfaction (MHSIP) survey process for 2025.

MHCs will continue to use the Adult and the Youth Family surveys, but the surveys will only be available in electronic format and can be completed using any device with internet connection. The consumers and youth family members will directly enter survey responses using a survey link or QR code on their own device.

Oversampling is required by all agencies, with a minimum of 300 Adult MHSIP Surveys and a minimum of 300 Youth Family surveys. For this reason, the survey window has been expanded to a 3 month timeframe (April 1 - June 30, 2025). MHCs must promote the surveys to adult consumers and youth family members throughout the data collection period.

More information on this new survey format has been shared with Program Directors, who will be passing the details along to the staff members assisting with the surveys.



Below are a few quotes recently shared in regard to MLBHC staff/services

JC CAIH Team

Jessica Floyd, Therapist

Hannah Robinson, Care Coordinator
and JC HICC Audrey English

"My daughter is like a whole other child since the in-home team (Hannah, Jessica and other staff) and HICC (Audrey) started working with her. She is only aggressive with me maybe once a month now instead of almost every day. She has been listening to me more and helping out around the house."

JC High Intensity Care Coordinator
Audrey English

"We love Audrey. I wish you had an entire building made up of Audreys. She's firm with my son; she does it in a supportive way. He respects her and does what she asks. She's up front with me. She will call him out when he's not being honest and will celebrate his accomplishments with him."



Crystal Malone definitely looked festive as she celebrated St. Patrick's with the staff and consumers at the Marshall County MHC.

Crystal recently transferred from LSS for MC RDP to a Secretarial position at that center.



If you would like to have an article/photo/etc published in New Directions, please e-mail it to Shelly Pierce by the 20th of each month for the next month's publication.

Make certain that your submission does not refer to a consumer by name or include any other type of identifying information. If so, you must submit an "Informed Consent" form specific to each item.

Personnel Policy Spotlight 4.2.4 Transfers

The Executive Director may, at his/her discretion, initiate or approve employee job transfers from one job to another or from one location to another. The following procedures shall apply to job transfers:

- Job openings will be posted internally. Periodically, management, in its discretion, will fill job openings or make transfers without posting the job, based upon the circumstances.
- An employee requesting a voluntary transfer must have held his/her current position for at least one year, have had no disciplinary actions during that year, and have a satisfactory performance record.
- An employee who is transferred or promoted to a new position within MLBHC will be placed in a six month "Performance Probationary Period." This in no way effects benefits or the use of leave, but does allow for a time of performance evaluation and coaching by the new Supervisor.