



# Community

MENTAL HEALTH  
CLINTON • EATON • INGHAM

## COMMUNITY ACCESS COMMITTEE “HYBRID” MEETING MINUTES

812 E. Jolly Road, G11-C, Lansing, MI, 48910

Monday, March 24, 2025 at 5:30 p.m.

### Committee Members Present

Dianne Holman, Chair, Jason White, Vice-Chair, Al Platt, Dwight Washington

### Committee Members Observing via Zoom

None

### Excused

Paul Palmer, Paula Yensen

### Other Board Present

None

### Other Board Present via. Zoom

None

### Staff Present

Stacy FoxElster, Sara Lurie

### Staff attending via Zoom

Rachel McCoy, Emily Wollner

### Staff Excused

None

### Public Present

None

**Public Present (Via Zoom)**

Elizabeth Pratt, NAMI Lansing

**Call to Order:**

The meeting was called to order by Dianne Holman, Committee Chair at 5:32 pm.

**Previous Meeting Minutes**

**ACTION:**

MOVED by Dwight Washington and SUPPORTED by Jason White to adopt the meeting minutes of January 27, 2025 as written.

MOTION CARRIED unanimously.

**Adoption of Agenda**

**ACTION:**

MOVED by Jason White and SUPPORTED by Al Platt to adopt the meeting Agenda of March 24, 2025 as written.

MOTION CARRIED unanimously.

**Public Comment on Agenda Items**

Elizabeth Pratt from NAMI Lansing reported that they nominated Sara Lurie for the Mental Health Administrator of the Year. They are very excited to have nominated Sara, specifically citing her efforts to increase access to CMHA-CEI and pursuit of new initiatives like the CCBHC, new Crisis Care Center, and Crisis Stabilization Unit.

**BUSINESS ITEMS**

**CMHA-CEI Communication Plan**

Rachel McCoy, Public Relations and Outreach Specialist attended the meeting to present the current CMHA-CEI Communication Plan. The plan is updated every 3-5 years. The current version was created in 2022. Rachel reviewed each objective and strategy of the plan, providing the latest updates on each one.

There are five themes that guide the agency's promotional efforts: create a positive public image, increase access and awareness of service and penetration rate in targeted populations, establish/maintain a consistent professional brand standard for the agency, enhance community and public service opportunities, and incorporate CCBHC mission, vision, and values with all agency communications.

Rachel noted that in addition to the CCBHC generally, they are also trying to focus communication on the Crisis Care Center and Zero Suicide.

Dianne asked how the full Board reviews this information. Sara suggested that it could be included in the next Board packet. Emily will forward the communication plan to Aleshia with the minutes.

**Objectives:**

- **Expand and Integrate CMHA-CEI Communication Efforts via Online Media**
    - Strategy 1b: The agency newsletters are also included in the Board packet each month. The VOICES newsletter is the only newsletter that is distributed externally. VOICES is a consumer newsletter that is distributed to consumers and posted online. There is also an internal staff newsletter that highlights different units at CMHA-CEI, the employee of the month, and upcoming events. There is no longer a COVID-10 specific newsletter.
    - Strategy 2b: CMHA-CEI now has an Instagram page in addition to Facebook. The Instagram was utilized to promote the Potter Park Zoo event this summer and there were successful posts and engagement. Using Instagram helps CMHA-CEI reach a younger generation who are no longer using Facebook.
    - Strategy 2c: Anyone who becomes a Facebook page administrator receives a training with Rachel. For example, Rachel trained Jessica in HR who uses Facebook to do staff recruiting. This gives staff an opportunity to learn more about our brand standards and the guidelines for posting and promotion.
    - Strategy 3a: The agency is currently in the process of updating CMHA-CEI website with the assistance of a contractor. This will be a big shift – the new website will prioritize accessibility and being welcoming and friendly to those accessing the website.
    - Strategy 3b: A procedure now exists to ensure website update requests received by IS are reviewed by Rachel to ensure brand standards are being followed.
  - **Intensify Current Outreach Efforts**
    - Strategy 1a: In addition to the internal outreach team, they also work to involve other clinical and admin programs in applicable events.
    - Strategy 1b: Within the Prevention and Outreach unit in QCSRR, and an internal event calendar is maintained with detailed action steps and tasks that are assigned to specific individuals.
-

- Strategy 3: Rachel identified that over the last four years, separate communication plans have been developed for various projects like CCBHC, Zero Suicide, and ITRS.
- Enhance CMHA-CEI's Public Image/Impression
  - Strategy 1: the perception survey was completed in the fall of 2023.
  - Strategy 2: Rachel now has an in-depth media contact spreadsheet and there are media members we've built relationships with. There is frequent turnover in the media, so this ends up being an ongoing effort.
  - Strategy 3: The creation of promotional materials is always ongoing. A helpful new tool has been Canva, which allows more staff to create brand approved materials. An example is HR creating recruiting materials and the DEI team creating promotional materials. Rachel still gives input, but Canva allows staff to create materials independently.
  - Strategy 5: The crisis communication plan was developed by a team including Rachel and Sara and is now in effect.

Dwight wondered if any outreach takes place at marijuana and alcohol stores – could we have promotional materials available at those locations? Rachel identified that it's possible the Recovery Coaches have done outreach at those locations or that there is outreach through regional substance use coalitions. Sara noted that one of the major marijuana companies did reach out to CEI asking for promotional materials and she was able to connect them with Joel. Rachel will follow-up with Joel on this idea.

Dwight also wondered if the ambassadors program, referenced in strategy 2c under the first objective, involves financial compensation or if it is just for volunteers. Rachel noted that the ambassadors program is an idea that was initially broached a couple of years ago and is still in development. There would be no financial compensation, volunteer only.

It was suggested that an AI bot on the website to help with navigation could be a helpful tool. Rachel will explore this idea with IS to see if that is possible through the current redesign process.

Dwight noted that he's learned there is some concern about the current CMHA-CEI logo and wondered if there is any background information, context, or history available on the logo design. Sara added that this was mentioned at the Consumer Advisory Council or at Program & Planning. Some individuals don't like the logo because they feel it looks similar to a hazard sign. The logo was selected at least 10

years ago so Sara and Rachel weren't involved in that process. Rachel can ask around and will work to learn more about what the design process was and how the logo was selected. Sara added that the "together we can" byline in the logo does help and makes a connection to each color representing one of three counties and seeing our communities working together.

CAC members are welcome reach out to Rachel at [mccoy@ceicmh.org](mailto:mccoy@ceicmh.org) with any additional questions or thoughts.

### CCBHC Quality Measures

Stacy FoxElster, Healthcare Integration Supervisor, attended the meeting to review information about the current CCBHC quality measures. In her presentation Stacy highlighted the following measures:

- Suicide Risk Assessment – Child & Adult
- Follow- Up After Hospitalization for Mental Illness – Child & Adult
- Initiation of Alcohol and Other Drug Dependence Treatment
- Percentage of those Served with an Initial Evaluation within 10 Business Days
- Mean Number of Days Until Initial Evaluation

The data presented for each measure is for FY22 – demonstration year one – and FY23 – demonstration year two. The FY24 data isn't available yet, but they are hoping to have access to it soon. Each graph includes the benchmark that must be met to receive an incentive payment (if applicable), the CMHA-CEI rates for FY22 and FY23, and the CCBHC state average for FY23.

Slide 6, Benefits by the Numbers, shows the increase in adults, children, and the mild-to-moderated population served between FY23 and FY24.

The creation and implementation of a Social Determinants of Health (SDOH) screening tool is a FY25 focus for CCBHC. CEI's assessments and screening tools have asked about the SDOH health, but not in a measurable way. The implementation of the tracking tool will allow staff to review this data. The first five areas of focus are transportation, housing, food, safety, and utilities. Additional areas can be added after successful implementation of the initial five areas. Use of the tool just started in January, so the initial focus is on consistent use of the tool vs. review of the data collected.

Dwight noted that the State is in the process of developing a SDOH information

---

exchange. Eaton and Ingham counties are both writing for the grant opportunity and working to get Clinton county on board. Sara will forward the grant information to Liz with NAMI Lansing.

**UNFINISHED BUSINESS**

None

**NEW BUSINESS**

None

**Public Comment**

None

**Adjournment**

The meeting was adjourned at 6:45 pm. The next regular meeting is scheduled for Monday, June 2, 2025 at 5:30 p.m., G11-C, 812 E. Jolly Road, Lansing, MI.

Minutes submitted by:

Emily Wollner

QCSRR Administrative Assistant