Imperial Calcasieu Human Services Authority

Governance Board Meeting

Region V OBH Regional Office

3505 5th Avenue, Suite B

Lake Charles, Louisiana 70607

April 16, 2013, 5:30 – 7:30 PM

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MINUTES

1. CALL TO ORDER

Doug Hebert opened the meeting at 5:33

1. ROLL CALL
	1. Doug Hebert, Jr., appointed by Allen parish
	2. Clarence “Chris” Stewart, appointed by Governor Jindal
	3. Mrs. Sandy Gay, appointed by Calcasieu Parish
	4. Mr. Shawn Sabelhaus, appointed by Governor Jindal
	5. Mr. David Palay, appointed by Governor Jindal
	6. Christina Mehal, appointed by Jefferson Davis Parish

Doug Hebert noted for the minutes that a quorum of the board was present.

Absent

1. Susan Dupont
2. Patti Farris

Executive Staff Present

1. Mrs. Tanya McGee, Executive Director
2. APPROVAL OF MINUTES

There were no additions or corrections to the March minutes so the minutes were approved unanimously as written.

1. APPROVAL OF AGENDA

David Palay moved that a report from Dr. Stewart Clark be added to the agenda. Chris Stewart seconded the motion and the motion was unanimously approved.

1. DR. STEWART CLARK

Dr. Clark reported that he is working with the leadership team of the district to help re-organize the agencies so that they operate under a practice management model, as opposed to an agency model in an effort to streamline processes in order to generate more revenue. There have been long meetings and he has experienced a tremendous amount of cooperation from the leadership team. He is impressed with the leadership team and has confidence that the re-organization will work out well.

The shift that is called for in becoming a functioning district is very difficult. This shift has to be done very quickly and involves a cultural shift as well as a shift in the way of doing business. The cultural shift is especially difficult for the people who work in the state agencies, many of whom have been in their positions for many years. The total focus in the past has been on the patients. Now there is a need to focus on the business of the agencies and a need to generate dollars, in addition to patient care.

Dr. Stewart expressed a great hope for the organization. The people in leadership are solid and dedicated to the shift and he is confident that they will be successful. He expressed that he is happy to be working with them and is open to listening and assisting whenever he can. He encouraged the executive directors to stay in touch with each other which will give them more power in dealing with the state government. He expects that the organization can begin implementation in July.

1. PUBLIC COMMENT

Gordon Propst reported that he is a private provider and is pleased that Kathy H. Kliebert has been appointed as the Interim Secretary of the Department of Health and Hospitals. He said that Kathy has a lot of experience with behavioral health and developmental disabilities and fully understands what the agencies are dealing with. He hopes that she will be appointed permanently to that position and encouraged the board to give whatever support possible to assure that appointment.

1. PHASE II ASSESSMENT

Tanya McGee reported the Board’s work plan called for completion of Phase II in August or September. Rusty Semon suggested that the time line be moved to July to fall in line with the move of staff and budget under ImCal. The staff will be ready with the tasks they are charged with by July 1.

The Board reviewed their work plan. Tanya reported that some of the responsibilities of the Board are the following:

* Work with the community input in the development of the Ends statement- on the agenda for this meeting
* Review by-laws and policies –done on an ongoing basis.
* Finalizing board orientation process for new board members – done.
* Board development – on the agenda for this meeting.
* Board monitoring process – needs to be done.
* Clarifying expectations and evaluation of Executive Director – on the agenda for this meeting.

David Palay moved that the board move the target date for completing the tasks needed for the assessment of Phase II from August/September to July. Chris Stewart seconded the motion and the motion passed unanimously.

1. OLD BUSINESS
2. Board Development – Tanya McGee reported that Paul Duguid had gathered input regarding possibilities for board development training. After discussion, David Palay moved that Tanya McGee be authorized to schedule a board development date at the St. Charles Center, conducted by David Britt if possible on June 24, 2013. The topic will be how the Board can use the manual to govern. In negotiating with St. Charles Center, schedule breakfast and lunch but not dinner. Chris Steward seconded the motion and the motion passed unanimously.
3. Performance Review. Tanya McGee reported that the Policy Manual, beginning page 31, contains an annual performance review which names each policy and space to indicate whether or not she has met the needs of that policy. In addition to the annual statement, Rusty Semon sent to the board an instrument marked Appendix D which is entitled “Policy Governance Executive Limitations Evaluation Form” which can be used by each board member every time an Executive Limit policy is evaluated. The board reviewed the Appendix D document and agreed to modify the document by combining items 3 and 4. David Palay moved that the document be added to the Policy Governance Manual as amended. Chris Stewart seconded the motion and the motion was approved unanimously.
4. Ends Statement. The board reviewed the recommended changes to the ends statement submitted by David Palay and another rough draft submitted by Rusty Semon based on David’s draft. David Palay moved that the Ends statements drafted by Rusty Semon be modified with the addition of the following paragraph “*In order to do so, ImCal HSA shall adhere to the principles of effectiveness, efficiency, and egalitarianism. While at times these principles may be complimentary, when they are not, the ImCal HSA shall maintain objective data derived from evidence based practices and implementation efforts that rationally explain its efforts to maximize all resources within its control.”* and be added to the May agenda for final approval. Chris Stewart seconded the motion and the motion was approved unanimously. Tanya McGee agreed to make the modifications to submit to the Board for final approval. Her revisions are attached to these minutes.
5. EXECUTIVE DIRECTOR REPORT
6. Tanya introduced Paul Duguid, ImCal CFO and COO. She said he started the position on April 1, 2013. The temporary HR Director is Becky Thibodeaux. The new Executive Assistant has also been hired. Her name is Alayna Patterson. She will begin work on Monday.
7. Tanya presented budgets to the Board – the transitional budget for the authority and OBH. The budget for OCCD was not received from Baton Rouge despite the fact that James made many requests.
8. Tanya reported that at the legislative session began on April 6th, HB 284 will be heard in the Health and Welfare Committee. This bill would put the charity hospital systems under districts in addition to community based services. Since LSU is getting out of the business of running the charity hospitals, the plan was toward a partnership between private and public hospitals. In this area, Memorial Hospital would come in and provide services. She said that the goal is that the hospitals not be closed whether it is through partnership with other hospitals or placing them under the districts. She will keep the board posted on the progress of the bill.
9. Tanya reported that there are a couple of other bills her office is watching closely. One involves the Early Steps program and the other regarding a combined Behavioral Health facility license. Again, she will keep the board posted.
10. Tanya has submitted a request for the lease for the new district office which is in the office complex as OCDD and OBH regional office. She is still waiting for the approval of the lease.
11. Responding to the question about why Public Health is not part of the district, Tanya responded that the Act 373 specifically mandates the provision of OBH and OCDD and discusses what aspects of public health could be part of the district and what cannot. If the Board wants to pursue bringing Public Health in the staff can look into the possibilities.
12. POLICY REVIEW

**Executive Limits: Compensation and Benefits, adopted August 9, 2011**

“Wi*th respect to employment, compensation, and benefits to employees, the ED shall not cause or allow jeopardy to fiscal integrity or public image.*

Accordingly, the ED shall not:

1. Fail to comply with all applicable Louisiana State Civil Service Provisions.

2. Fail to ensure the Board is informed of the percentage of employee turn- over within the Authority.

 Tanya expressed her understanding that the policy calls for her to ensure that she does not allow any jeopardy to fiscal integrity or public image and has to assure that the district is following Civil Service Law. She reported that there have been no appeals or complaints filed to Civil Services by staff and she presented a handout to the board on the turnover report from OBH and OCDD. The reported noted 12 turnovers from OBH which is 14% and 2 from OCDD which is 8%. She asked if that was all the information needed by the board.

The discussion resulted in the following considerations:

1. If someone were terminated and appealed under the Civil Service Law the Board would like to know immediately.
2. Would like to report to include he number of terminations resulting from being fired, resigned , retired, or the ending of a temporary employment.
3. How many vacancies have been refilled, how many will not be refilled and how many are still open.

After this discussion, David Palay moved that the policy statement be amended to add another provision:

3. Fail to advise the board of information affecting this policy.

Chris Stewart seconded the motion and the motion was approved unanimously.

**Governance Process: Board Committee Principles, adopted September 13, 2011**

*Board committees, when used, will be assigned so as to reinforce the wholeness of the board’s job and so as never to interfere with delegation from board to ED.*

This policy has five points:

1. Board committees are to help the board do its job, never to help or advise the staff.
2. When committees are appointed they should be given a clear understanding of the results expected and the authority they are given to accomplish the tasks.
3. Board committees cannot speak or act for the entire Board unless give such authority for specific and time-limited purposes, carefully stated in order not to conflict with authority delegated to ED.
4. Board cannot exercise authority over the staff.
5. Board committees that help create policy on some topic will not be used to monitor organizational performance on the same time.
6. Committees will be used sparingly and ordinarily in an ad hoc capacity.

*This policy applies to any group that is formed by board action, whether or not it is called a committee and regardless whether the group includes board members. It does not apply to committees formed under the authority of the ED.*

After discussion, David Palay moved since the committees appointed to date have worked under the provisions of this policy statement, there is no need to modify the policy. Chris Stewart seconded the motion and the motion was passed unanimously.

**Board Task: Convene Nominating Committee**

Doug Hebert reminded the Board that it had previously decided that since the board is so small, nominations for officers would be made from the floor and there was no need for a nominating committee. This is included in the board’s bylaws and Doug moved that the item be removed from the policy manual, Sandy Gay seconded the motion and the motion was approved unanimously.

**Board Task: Executive Session to discuss ED**

The discussion on this task clarified that this is the time of the year that we would ordinarily look at the annual evaluation of the ED.

The process for evaluation was discussed. The document adopted at this meeting will be used on a regular basis to monitor evaluation. These evaluations will be collected either by the ED or the Secretary of the Board. At this time of year next year, a committee will review these periodic evaluations and prepare an annual evaluation to be presented to the Board for review before the annual evaluation of the executive director.

1. OTHER BUSINESS

None

1. NEW BUSINESS

Board Monitoring Process

1. NEXT MEETING – May 21,2013

Phase II Assessment

Board Member Terms

Board Monitoring Process

Policy Manual Calls for Discussion of the Following

Emergency Executive Director Succession

Chairperson’s Role

Member’s Code of Conduct

Present Slate of Officers

Board Member Self Evaluation

Status Update of IMCAL HSA Strategic Plan , Selected Initiatives

1. ADJOURNMENT

David Palay moved that the meeting be adjourned. Christine Mehal seconded the motion and the motion was approved unanimously.



Imperial Calcasieu Human Services Authority

ENDS STATEMENT

Imperial Calcasieu Human Services Authority (ImCal HSA) exists so that citizens with mental health, addictions, and developmental challenges residing in the parishes of Allen, Beauregard, Calcasieu, Cameron, and Jefferson Davis are empowered, and self-determination is valued such that individuals live a satisfying, hopeful, and contributing life.

1. The Imperial Calcasieu HSA governing board will be accountable to its “Owners” (stakeholders, persons served, advocates, partnering providers, the community at large, etc.) establishing trust, a spirit of collaboration and confidence. In order to do so, ImCal HSA shall adhere to the principles of effectiveness, efficiency, and egalitarianism. While at times these principles may be complimentary, when they are not, the ImCal HSA shall maintain objective data derived from evidence based practices and implementation efforts that rationally explain its efforts to maximize all resources within its control.

2. Individuals receiving services will have access to evidence based services that are responsive to their needs and cost effective so that;

1. Individuals with acute illnesses are able to rapidly resume optimal functioning;
2. Individuals with chronic illness may live in a safe environment that encourages personal growth;
3. Youth and Families strengths and resilience are enhanced;
4. The voice of and collaboration with Individuals in the community is enhanced;

3. ImCal HSA will make use of best practices in implementing, evaluating, monitoring, modifying existing services so that quality is assured, services meet the needs of those served, and the variety of services available adequately address the range of behavioral health issues identified, or that services are further developed to address service gaps.

4. These ENDs will be achieved by maximizing the resources made available through ImCal HSA’ s participation in the State Budgeting / Grant allocation process, self-generated funds through the MCO, or other resources developed through the fund raising efforts of the Authority.