

Governance Board Meeting
One Lakeshore Drive, Suite 2000
Lake Charles, Louisiana 70629
May 7, 2020

MINUTES

I. CALL TO ORDER

Corlissa Hoffoss called the meeting to order at 12:10pm noting that a quorum was present. The meeting was held via ZOOM in order to comply with the Governor's COVID 19 Stay at Home order.

II. ROLL CALL

- a. Corlissa Hoffoss, appointed by Governor Jindal
- b. Betty Cunningham, appointed by Governor Edwards
- c. Bill Sommers, appointed by Governor Edwards
- d. Rita Cole, appointed by Allen Parish
- e. Linda Storer, appointed by Beauregard Parish
- f. Aaron LeBoeuf, appointed by Calcasieu Parish

Absent:

- a. Angela Jouett, appointed by Cameron Parish
- b. Kristen Cassidy, appointed by Jefferson Davis Parish

EXECUTIVE STAFF PRESENT

- a. Tanya McGee, Executive Director
- b. Jenny Mills, Deputy Director
- c. Kristen Arville, Executive Assistant

III. INTRODUCTION OF GUESTS

No guests were present at this meeting.

IV. APPROVAL OF MINUTES

Board members received March minutes prior to the meeting. Note there was not an April Meeting due to COVID-19. Corlissa Hoffoss entertained a motion to approve the March minutes. Linda Storer motioned and Betty Cunningham seconded. Minutes unanimously approved.

V. APPROVAL OF AGENDA

Corlissa Hoffoss made a motion to approve the agenda. Aaron LeBoeuf motioned and Linda Storer seconded

VI. BOARD MONITORING

a. Board Committee Principles

Tanya McGee reviewed the policy with the board. This explains the use of sub-committees and what they would do. The board can create sub-committees in accordance with the principles set in the policy for work completed by the board. This policy has been in existence since the creation of the board and Tanya has no recommendations for change.

b. Members Code of Conduct

Tanya reviewed the policy with the board. This policy refers to the code of conduct for board members and potential conflict of interest. Board members can have their own personal business interest but cannot publicly support their own agendas under ImCal's name or make a statement as representative of the board. Tanya has no recommendations for change.

c. Chairpersons Role

Tanya reviewed the policy with the board. The policy details the role of the chairperson, which is to insure that the current policies are followed and the meeting content is focused. The chairperson's deliberation must be fair and open. The chairperson can also be the district representative with board approval and can appoint any subcommittees to assist the board, if needed. Tanya stated that she has no recommendations for change.

d. Present Slate Officers

At the start of the new Fiscal year in July, officers for the board will need to be elected. The board can keep current officers or nominate replacements. The current slate of officers of the board include Corlissa Hoffoss, Chair, Rita Cole, Vice Chair, Betty Cunningham, Secretary and Aaron LeBoeuf, Treasurer. In the June meeting members will vote for officers. Tanya asked the current officers to decide if they would like to remain in their positions and for all members to consider nominations of new officers.

e. Financial Disclosures

Tanya informed the board that Financial Disclosures for 2019 are due to Kristen by Friday May 8, 2020. Once all is received she will send them to the Governor's office in Baton Rouge.

VII. EXECUTIVE DIRECTOR REPORT

a. Emergency Executive Director Succession

In case of an emergency Tanya is required to submit two names annually to the board of who can assume the role of Executive Director. Those names are Jenny Mills, ImCal HSA Deputy Director and Leigh Conway, ImCal Human Resources Director. Signed letter of succession kept on file within Admin office.

b. Compensation & Benefits

Tanya presented the board with the 2020 Turn Over report from the Human Resources Department. Tanya went through the positions and resignations. She explained why each employee resigned. Tanya informed the board that an exit interview is conducted with the employees who leave to ensure there wasn't any issues with ImCal that would result in the employee leaving. ImCal currently has two vacant positions. Social Service Counselor 3 and HR Analyst. Two ImCal employees also retired. The turnover rate for April 2019 to April 2020 was 8%, which is much lower than industry standards. ImCal currently has 76 fulltime positions, 6 Wage Alternate Employees (WAE), and 10 in-house professional contractors. Included in the turnover report is a summary of employee performance ratings. Tanya informed the board ten employees had exceptional performance ratings this past rating period and received a one-time bonus. This rating requires documentation and explanation from the direct supervisor of why the employee is exceptional. Tanya informed the board they saw a decrease in exceptional rating but she believes this is due to the documentation needed to verify the exceptional rating in order to receive the bonus.

c. Status Update on ImCal HSA, Selected Initiatives

ImCal submits a 5-year Strategic Plan to LDH. This plan has been provided to the Board. ImCal Executive Management Team (EMT) develops an Annual Business Plan. This plan focuses on selected initiatives across all ImCal divisions and departments. EMT members each come up with at least two goals they would like to achieve for the year, which could include implementation of a new program, refinement of policy and procedure, performance improvement projects, etc. The plan is developed at the beginning of the fiscal year and goals/timelines reviewed at FY midpoint and at end of FY. Tanya presented the business plan to the board and went over all individual sections for each division and their goals and objectives.

d. COVID Response within ImCal Facilities

In response to the Governor's Stay at Home order issued in March, ImCal put in place measures to limit the number of visitors in ImCal facilities, move services to telephone and telemed where appropriate, and make accommodations for staff to work from home, if possible. Even though ImCal is considered an essential agency, Tanya felt it best to implement these new procedures in order to keep staff and clients healthy and well. Tanya informed the board she is working with local officials, state officials and following all Center for Disease Control guidelines. Weekly ZOOM meetings are conducted with ImCal's EMT for updates on all divisions. A screening procedure was created to screen clients and staff coming into all facilities for COVID-19 related

symptoms. Approximately 70-80% of Behavioral Health services are being conducted via telemed or phone. The Developmental Disability Division conducting visits and entry assessments visits via Zoom or telephone. ImCal is following the phased in guidance set by the Governor as a guideline on what to do and how to reopen safely. ImCal is registered with the Open Safely website created by the Governor's office. The Briscoe Treatment center run by Odyssey House Louisiana is currently open along with ImCals newly opened Sobering & Engagement Center. The majority of ImCals administration and Developmental Disability staff are working from home and come into the office as needed. Twenty-five percent of staff are working in the clinics at a given time. No COVID-19 cases for any staff at this time. Tanya informed the board that she will keep them up to date on any changes relating to COVID-19.

e. **Sobering Center & Crisis Line**

Corlissa Hoffoss asked if ImCal has seen an increase in people needing services. Tanya informed that they haven't seen an increase in clients coming into the clinics, but after speaking with local officials, they are seeing an influx of people using substances whether that be alcohol or drugs. Most of them are intoxicated, but don't fit the criteria of going to the hospital they just need a place to sober up. ImCal has recently opened the Sobering & Engagement Center. Currently it was only open to Law Enforcement referrals. ImCal is now taking referrals to the center from local Emergency Departments and the local corners office. ImCal has also expanded the Via Link contract to include a 24-hour Crisis line for anyone needing help or someone to talk to can call in. This crisis line was already in place for ImCal clients to call, but now this is opened up to the public and serves adults and children. The goal is to provide de-escalation and prevent hospitalization.

VIII. NEW BUSINESS

IX. NEXT MEETING – June 4, 2020

X. ADJOURNMENT

Corlissa Hoffoss entertained a motion to adjourn the meeting. Aaron LeBoeuf motioned and Linda Storer seconded. Meeting adjourned at 1:10pm.



BUSINESS PLAN	ImCal HSA
FY 19-20	PROJECT MANAGER: Tanya McGee
	DATE: July 1 2019

ADMINISTRATION

1) GOAL: Implement ImCal HSA Resource App	PLANNED COMPLETION DATE	REVISED COMPLETION DATE	ACTUAL COMPLETION DATE	LEAD	COMMENTS
<i>a. Compile resource directory in designated spreadsheet</i>	8/31/19		8/27/19		
<i>b. Complete Resource App data entry</i>	10/15/19		9/6/19		
<i>c. Market to ImCal stakeholders</i>					
<i>d. Update Resource App content quarterly</i>	Ongoing				

2) GOAL: Open a Sobering and Engagement Center	PLANNED COMPLETION DATE	REVISED COMPLETION DATE	ACTUAL COMPLETION DATE	LEAD	COMMENTS
<i>a. Secure location</i>	7/19/19				
<i>b. Execute a contract with OHL for program management</i>	3/31/19				
<i>c. Open Sobering and Engagement Center</i>	11/15/19				

3) GOAL: To ensure ImCal HSA branding is consistent across the district	PLANNED COMPLETION DATE	REVISED COMPLETION DATE	ACTUAL COMPLETION DATE	LEAD	COMMENTS
<i>a. Identify all written and verbal communication which are points of focus for branding opportunity</i>	9/15/19				
<i>b. Determine cost associated with branding initiatives</i>	10/15/19				

<i>c. Create SOP for branding utilization of ImCal logo</i>	12/15/19				
<i>d. Implement district – wide</i>	12/31/19				

BUSINESS PLAN	ImCal HSA
FY 19-20	PROJECT MANAGER: Leslie Nolan
	DATE: July 1 2019

BEHAVIORAL HEALTH

1) GOAL: Implementation of Gender Specific Programming in the district.	PLANNED COMPLETION DATE	REVISED COMPLETION DATE	ACTUAL COMPLETION DATE	LEAD	COMMENTS
<i>a. Identify GSP to use</i>	8/31/19		8/31/19	Leslie	
<i>b. Order materials as needed</i>	9/15/19		9/9/19	Leslie	
<i>c. Identify staff and training needs</i>	9/30/19		9/15/19	Leslie	
<i>d. Implementation in each clinic</i>	10/31/19		11/30/19	Leslie	
<i>e. Monitoring utilization/participation</i>	Quarterly at the end of 2 nd , 3 rd , 4 th		ongoing		

2) GOAL: Implementation of Educational Parenting Program	PLANNED COMPLETION DATE	REVISED COMPLETION DATE	ACTUAL COMPLETION DATE	LEAD	COMMENTS
<i>a. Identify Parenting Program to implement</i>	7/31/19		7/26/19	Leslie	
<i>b. Discuss billing options</i>	9/30/19		11/25/19	Leslie	
<i>c. Identify staff to facilitate</i>	9/30/19		11/1/19	Leslie	
<i>d. Identify and complete training</i>	10/31/19		pending	Leslie	
<i>e. Order supplies as needed</i>	10/31/19		11/27/19	Leslie	
<i>f. Implementation in district</i>	11/30/19		1/27/20	Leslie	
<i>g. Monitor utilization and participation</i>	Quarterly at the end of 2 nd , 3 rd , 4 th		ongoing	Leslie	

BUSINESS PLAN	ImCal HSA
FY 19-20	PROJECT MANAGER: Laurie Hebert
	DATE: July 1 2019

COMMUNITY SERVICES

1) GOAL: Provide HIV/IVDU Outreach with expansion of MOU with SLAC and SWLAHEC.	PLANNED COMPLETION DATE	REVISED COMPLETION DATE	ACTUAL COMPLETION DATE	LEAD	COMMENTS
<i>a. Schedule meeting to establish MOU</i>	10/1/19		01/12/2020	Laurie	<i>Met with SWLAHEC and will be developing a contract with them to provide outreach services</i>
<i>b. Identify a trained outreach worker to partner with for outreach</i>	10/1/19	6/30/2020		Laurie	
<i>c. Provide outreach materials to insure education and increased awareness efforts are maximized</i>	10/30/19	6/30/2020		Laurie	
<i>d. Conduct quarterly visits to SLAC/SWLAHEC clinics</i>	6/30/19				
<i>e. Develop MOUs with Abrahams tent and Water's edge food banks to provide outreach and outreach material</i>	12/1/19	6/30/2020		Laurie	<i>New contractor will determine outreach site and material needed.</i>
2) Goal: Insure SOR prevention expectation are met through a variety of prevention strategies such as information dissemination, and development of a contractual agreement to provide Generation RX in the public school system	PLANNED COMPLETION DATE	REVISED COMPLETION DATE	ACTUAL COMPLETION DATE	LEAD	COMMENTS
<i>a. Contract with SWLA Youth Foundation to provide Gen Rx in the school system</i>	9/30/19		9/12/19	Laurie	<i>Signed contract with SWLA Youth Foundation for the provision of Gen Rx in the school setting with a target of 570 participants.</i>
<i>b. Increase Gen Rx presentation to Council on Aging in all parishes</i>	11/1/19	6/30/2020		Laurie	
<i>c. Provide lock bags etc. to ImCal clinics, and Council on Aging sites</i>	9/1/19	6/30/2020		Laurie	<i>This is occurring and will be ongoing</i>

<i>d. Provide narcan kits to area medical clinics and treatment providers</i>	<i>12/1/19</i>	<i>6/30/2020</i>		<i>Laurie</i>	<i>This is occurring and will be ongoing</i>
<i>e. Identify need and expand drop box locations by 2 boxes/locations</i>	<i>1/1/20</i>	<i>6/30/2020</i>		<i>Laurie</i>	

BUSINESS PLAN	ImCal HSA
FY 19-20	PROJECT MANAGER: <i>Sheryl Meek</i>
	DATE: July 1 2019

CORPORATE COMPLIANCE

1) GOAL: Organize and streamline the storage and maintenance of administrative and programmatic records, both paper and electronic. Improve information sharing across the Authority	PLANNED COMPLETION DATE	REVISED COMPLETION DATE	ACTUAL COMPLETION DATE	LEAD	COMMENTS
<i>a. Collaborate with DD to identify non-vital information within consumer records and develop retention schedules for non-vital items. Work with DD to identify information to be stored within the data base, to reduce the volume of paper records</i>	<i>11/15/19</i>		<i>10/25/2019</i>	<i>Sheryl</i>	
<i>b. Submit proposed records retention schedule to SOS Records Management</i>	<i>11/29/19</i>		<i>11/12/2019</i>	<i>Sheryl</i>	<i>Schedule submitted on 11/12/19. Multiple revisions have been made in response to discussion with SOS. Final revision was submitted on 01/24/2020. New schedule approved on 02/06/2020.</i>
<i>c. Clean and re-organize the Shared Drive to facilitate efficient file sharing. Explore other information sharing software and propose possible alternatives</i>	<i>12/31/19</i>		<i>12/31/2019</i>	<i>Sheryl</i>	<i>All folders have been cleaned. Reorganization is ongoing within the DD Division.</i>

2) GOAL: Improve data collection procedures within the EHR to ensure accurate and robust reporting of ImCal's productivity and performance	PLANNED COMPLETION DATE	REVISED COMPLETION DATE	ACTUAL COMPLETION DATE	LEAD	COMMENTS
<i>a. Work with ICANotes to develop reporting capabilities of information within the Episodes tabs</i>	<i>8/30/19 (Actual Completion: 8/20/19)</i>		<i>8/20/2019</i>	<i>Sheryl</i>	<i>As of 02/03/2020, the report being created by ICANotes still isn't live.</i>
<i>b. Train staff on the OBH Data manual to assure accurate data entry</i>	<i>1/31/19</i>		<i>12/20/2019</i>	<i>Sheryl</i>	
<i>c. Monitor input of data to assure data collection procedures are implemented and maintained</i>	<i>10/31/19</i>		<i>9/30/2019</i>	<i>Sheryl</i>	<i>Monitoring of episode data has been added to the quarterly chart audits.</i>

BUSINESS PLAN	OBH SECTION: <i>ImCal HSA</i>
FY 19-20	PROJECT MANAGER: James Lewis
	DATE: July 1 2019

DEVELOPMENTAL DISABILITIES					
1) GOAL: Develop a new Family Support Priority Instrument for the OCDD Individual & Family Support Policy	PLANNED COMPLETION DATE	REVISED COMPLETION DATE	ACTUAL COMPLETION DATE	LEAD	COMMENTS
<i>a. Inform OCDD of plans to draft</i>	<i>9/30/20</i>	<i>10/4/19</i>	<i>10/4/19</i>	<i>James</i>	
<i>b. Develop 1st draft and submit to DD Director</i>	<i>10/31/19</i>		<i>10/18/19</i>	<i>Tammy</i>	
<i>c. Meet with Family Support Unit to review & revise</i>	<i>12/31/19</i>		<i>12/30/19</i>	<i>James</i>	
<i>d. Submit Final Draft to OCDD for approval/recommendations</i>	<i>4/30/20</i>		<i>1/2/20</i>	<i>James</i>	<i>Submitted to Tanya Murphy via email</i>
2) GOAL: Develop and Implement procedures/process for DD case records	PLANNED COMPLETION DATE	REVISED COMPLETION DATE	ACTUAL COMPLETION DATE	LEAD	COMMENTS
<i>a. Meet with each DD unit (Entry, Family Support, Waiver) to draft procedures</i>	<i>10/31/19</i>		<i>9/16/19</i>	<i>James</i>	<i>Met with FS on 8/26;waiver 9/9; Entry 9/16</i>
<i>b. Finalize procedures/process with Corporate Compliance Officer</i>	<i>12/31/19</i>		<i>10/25/19</i>	<i>James/Sheryl</i>	

<i>c. Begin Implementation</i>	<i>1/31/20</i>		<i>2/24/2020</i>	<i>James/Bobby</i>	<i>Notified by CC Officer that SOS approved on 2/6. Started implementation on the destruction of waiver files on 2/24.</i>
<i>d. Monitor DD units progress</i>	<i>quarterly-ongoing</i>			<i>James/Bobby DD Unit Sups</i>	

BUSINESS PLAN	ImCal HSA
	PROJECT MANAGER: Melanie Jackson
FY 19-20	DATE: July 1 2019

FISCAL

1) GOAL: Establish ImCal as Fiscal Agent	PLANNED COMPLETION DATE	REVISED COMPLETION DATE	ACTUAL COMPLETION DATE	LEAD	COMMENTS
<i>a. Meet with LDH Fiscal</i>	<i>10/31/19</i>		<i>11/19/19</i>	<i>Melanie</i>	<i>TOs denied by LDH waiting to see if job appointment would be approved.</i>
<i>b. Determine which duties can be taken and system processes to change from LDH Fiscal to ImCal</i>	<i>11/30/19</i>	<i>03/31/20</i>		<i>Melanie</i>	
<i>c. Implement duties, processes and train</i>	<i>6/30/19</i>				
<i>d. Accommodate new duties</i>	<i>6/30/19</i>				
2) GOAL: Streamline and Improve Fiscal Department processes. Identify Fiscal process duties that are efficient or no longer relevant	PLANNED COMPLETION DATE	REVISED COMPLETION DATE	ACTUAL COMPLETION DATE	LEAD	COMMENTS
<i>a. Review each process to determine efficiency and relevancy</i>	<i>12/31/19</i>		<i>12/1/19</i>	<i>Melanie</i>	
<i>b. Discuss changes</i>	<i>3/31/19</i>		<i>12/1/19</i>	<i>Melanie</i>	
<i>c. Implement Changes</i>	<i>6/30/19</i>		<i>12/1/19</i>	<i>Melanie</i>	

BUSINESS PLAN	ImCal HSA
FY 19-20	PROJECT MANAGER: Leigh Conway
	DATE: July 1 2019

HUMAN RESOURCES

1) GOAL: Create Salary & Benefits Summary	PLANNED COMPLETION DATE	REVISED COMPLETION DATE	ACTUAL COMPLETION DATE	LEAD	COMMENTS
<i>a. Determine what information will be included, frequency of summary & create template</i>	10/31/19	3/15/2020		Leigh	
<i>b. Research LaGov to determine what reports will be needed to capture all information</i>	11/15/19	4/1/2020		Leigh	
<i>c. Prepare summary for review & employee distribution</i>	12/15/19	5/1/2020		Leigh	
2) GOAL: HR file room reorganization	PLANNED COMPLETION DATE	REVISED COMPLETION DATE	ACTUAL COMPLETION DATE	LEAD	COMMENTS
<i>a. Sort files to determine order of clean-up</i>	1/31/20		2/4/2020	Leigh	
<i>b. Purge non-essential records based on the record retention schedule</i>	3/31/20				
<i>c. Reorganize all files and cabinets</i>	6/30/20				

BUSINESS PLAN	ImCal HSA
FY 19-20	PROJECT MANAGER: Jenny Mills
	DATE: July 1 2019

OPERATIONS

1) GOAL: Upgrade Network System Hardware	PLANNED COMPLETION DATE	REVISED COMPLETION DATE	ACTUAL COMPLETION DATE	LEAD	COMMENTS
<i>a. Identify product equipment</i>	8/31/19		9/18/19	Bruce	
<i>b. Obtain quote for hardware, consultation, and installation</i>	9/30/19		9/18/19	Bruce	Updated quotes 12/12/19 and 1/23/20

<i>c. Present to ImCal Administration and obtain approval to purchase</i>	<i>10/15/19</i>		<i>1/24/20</i>	<i>Jenny</i>	
<i>d. Complete system configuration</i>	<i>1/15/20</i>	<i>2/17/20</i>		<i>Bruce</i>	
<i>e. Install upgraded network hardware system</i>	<i>2/1/20</i>	<i>2/28/20</i>		<i>Bruce</i>	
2) GOAL: Implement Work Order Ticket System	PLANNED COMPLETION DATE	REVISED COMPLETION DATE	ACTUAL COMPLETION DATE	LEAD	COMMENTS
<i>a. Identify software</i>	<i>9/15/19</i>		<i>8/19/19</i>	<i>Jenny</i>	
<i>b. Present to ImCal Administration and secure approval</i>	<i>9/30/19</i>		<i>8/23/19</i>	<i>Jenny</i>	
<i>c. Train IT/Operations personnel and ImCal users</i>	<i>10/31/19</i>		<i>9/6/19</i>	<i>Jenny</i>	
<i>d. Implement</i>	<i>11/1/19</i>		<i>9/23/19</i>	<i>Jenny</i>	

Imperial Calcasieu HSA Turnover Report April 2019 – March 2020

Administration

Separation Count	Reason	Position Title	Fill/Contract/Vacant
1	Term of Temp Appt	Social Serv. Counselor 3- WAE	Vacant
1	Resigned	HR Analyst A- WAE	Vacant

Behavioral Health Division

Separation Count	Reason	Position Title	Fill/Contract/Vacant
• <u>Lake Charles</u>			
2	Retired	Social Serv. Counselor 5B - TO Admin Coord 3 – TO	Filled – TO Filled – TO
2	Resigned	Social Worker 4 – TO Admin Coord 3 – TO	Vacant Filled – TO
• <u>Sulphur</u>			
1	Resigned	Admin Coord 3 – TO	Filled – TO

Total Turnover

7/92 staff – 8%

92 Staff persons

76 - TO

6 - WAE

10- In-house Professional Contractors

Performance Adjustments for FY 18/19

56 – Successful Rating

10 – Exceptional Rating

1 – Needs Improvement Rating

4 – Unrated