

ADMINISTRATIVE SERVICES

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

TO: Board of Directors

FROM: Shelly Pierce, Executive Management Coordinator

RE: March Board meeting

DATE: March 14, 2024

The next meeting of the Board of Directors will be conducted on **Tuesday**, **March 19**, **2024**, at the new MLBHC property (old JC BOE property) located at 16003 AL Hwy 35 – Scottsboro, AL 35768. An evening meal will be provided, with the meeting starting at 5:30 p.m. Since there is currently no internet service at this facility, hard copies of the March Board packet will be available for all.

If you cannot attend in person, but would like to participate, a call in option is available:

March Board Meeting

Mar 19, 2024, 5:30 – 6:30 PM (America/Chicago)

You can also dial in using your phone.

Access Code: 455-784-605

United States: +1 (408) 650-3123

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

- March Board Agenda
- Minutes from the February 20, 2024, Board meeting
- Personnel Report
- IT Director's Report
- Clinical Director's Report
- Financial Reports through February 29, 2024
- Summary of Reports from the February PI meeting
- Minutes from the February Leadership Committee meeting
- March 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

March 19, 2024

AGENDA

- I. Call the meeting to order David Kennamer, President
- II. Approval of minutes of the February 20, 2024, meeting David Kennamer, President
- III. Executive Director's Report
- IV. Written Reports
 - Personnel Lane Black, HR Coordinator
 - IT Steve Collins, IT Director
 - Clinical Dianne Simpson, Clinical Director
- V. Financial reports through February 29, 2024 Cammy Holland, Business Manager
- VI. Board requested items for future meeting

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

Board of Directors Meeting February 20, 2024

MINUTES

I. Call to Order

David Kennamer, President, called the meeting to order at 5:30 p.m. at the Administrative Office in Guntersville, Alabama. Virtual participation in the monthly meeting was also available.

Present: Joe Huotari

Jo-Anne Hutton Joe Jones, Treasurer

David Kennamer, President

Bill Kirkpatrick Victor Manning

Hannah Nixon, Vice-President

Lucien Reed

Jane Seltzer, Secretary

Caleb Skipper

Absent: None

Staff: Lane Black, HR Coordinator

Hannah Chandler, Prevention Coordinator, Substance Use Prevention Services

Dana Childs, QA Coordinator/Clinical Administrative Assistant

Steve Collins, IT Director

Myron Gargis, Executive Director Cammy Holland, Business Manager Shelly Pierce, Executive Coordinator Dianne Simpson, Clinical Director

Other: Joelle Bogle, CPA – MDA Professional Group, PC (Virtual)

Nell Kennamer

II. FY23 Audit Report – Joella Bogle, CPA

Joella Bogle, CPA, presented the audit findings for the fiscal year October 1, 2022 through September 30, 2023. The FY23 Audit Report indicated an unmodified opinion and full compliance with all state and federal requirements. Total operating revenue for the year ended September 30, 2023, was \$9,951,902, with total operating expenses of \$9,497,951. When combined with non-operating revenue, this resulted in an increase in net position of \$937,960.

III. Approval of the minutes of the January 23, 2024, meeting – David Kennamer, President

MOTION: Victor Manning made a motion that the Board approve the minutes of the January 23, 2024, meeting, as presented. Hannah Nixon seconded the motion, which was approved unanimously.

IV. Executive Director's Report

The Executive Director's Report for February was submitted in written format and made available to all Board members for review prior to the meeting. This report is included as Appendix A to the minutes from tonight's Board meeting.

In discussion of the recent purchase of the former JC BOE property, a recommendation was made to conduct future Board meetings at this facility during the months designated for Jackson County. This will allow Board members an opportunity to see the facility renovations and upgrades as they are completed.

V. Financial reports through January 31, 2024 - 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 FY24 Program Summary reflected a net income for all programs, with exception of Jackson County MHC, Marshall Place, Substance Use Services and Substance Use Prevention.

The current Balance Sheet, which included Board Investments, indicated Total Cash of \$1,685,668. This total is \$645,880 less than this same time period last year. Continued review reflected Total Accounts Receivable of \$2,400,185, which is \$1,047,596 more than in FY23. Ms. Holland noted that AR was up due to delayed payments from DMH.

The Income Statement, which does not include Board Investments, reflected a YTD Net Income of \$47,573, which is \$388,503 less than in FY23.

VI. Proposed approval of new/revised Policies and Procedures - Myron Gargis, Executive Director

Mr. Gargis noted the two following Policies and Procedures being presented for Board approval at tonight's meeting:

• 4.3.12 Leave Donation – this is a newly developed P&P allowing employees to voluntarily donate leave time to another employee in need of such leave due to the serious illness or injury of that coworker or the co-worker's immediate family member. A recommendation was made to approve this P&P for a trial period of the effective date determined by the Board through September 30, 2024. At the end of the trial period, this policy will again be reviewed by the Board of Directors to determine if it will remain in place.

MOTION: Victor Manning made a motion that the Board approve P&P 4.3.12 Leave Donation, as presented, for a trial period of March 1, 2024 through September 30, 2024. Hannah Nixon seconded the motion, which was approved unanimously.

• 7.2.0 MI Residential Care Home with Specialized Basic Services – this P&P has been revised to remain in compliance with the most recent version of the Administrative Code.

MOTION: Joe Houtari made a motion that the Board approve P&P 7.2.0 MI Residential Care Home with Specialized Basic Services, as presented. Hannah Nixon seconded the motion, which was approved unanimously.

VII. Q1 review of the FY24 Strategic Action Plan – Myron Gargis, Executive Director

All 1st quarter updates to the FY24 Strategic Action Plan were made available to Board members for prior review. Following brief discussion, Board members were provided an opportunity to ask questions in regard to the Strategic Action Plan.

VIII. Written Reports

The Personnel, IT and Clinical Reports are 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 for February provided information on MLBHC's Substance Use Prevention Program. Ms. Simpson introduced Hannah Chandler as the SU Prevention Coordinator. Ms. Chandler noted that she has worked in SU Prevention for eight years, two of those with MLBHC. She then explained that the SU Prevention Team interacts with the local communities and schools to educate and council children/parents on the dangers of substance use. Prevention services are defined as evidence-based actions taken to delay the initial use of alcohol, tobacco, and other drugs and to prevent substance misuse in order to promote healthy behaviors. Ms. Chandler also shared that MLBHC's Prevention Team is now involved with Vape Court through the Marshall County Juvenile Probation Office and that they have recently joined a Suicide Prevention Team that is engaging with the local school systems.

IX. Board requested items for future meetings

There were no items requested for future Board meetings.

X. Executive Session

Mr. Kennamer announced that the Board needed to enter into Executive Session to discuss the job performance/annual evaluation of the Executive Director.

MOTION: Bill Kirkpatrick made a motion that the Board enter into Executive Session at 7:15 p.m. to discuss the job performance/annual evaluation of the Executive Director. Victor Manning seconded the motion, which was approved unanimously.

MOTION: Hannah Nixon made a motion that the Board reconvene the regular meeting at 8:20 p.m. and adjourn. Caleb Skipper 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

February 20, 2024

- <u>Transportation Service Updates-</u> January- Jackson County had 65 transports and Marshall County had 18 transports.
- Updates on JC BOE MLBH Property
 - o The closing occurred on 2/2 and everything went smoothly.
 - o John Porter will start the process on filing the quiet title action and I'll update you as that process progresses.
 - We're currently getting estimates on the upgrades and renovation projects that we plan to complete prior to moving in.
 - o The current clinic property was appraised earlier this month and we should receive the appraisal report soon.
- <u>Legislative Session</u>- The current legislative session began last week. Gambling legislation passed the House last week and will be considered by the Senate soon. If passed by the Senate and signed by Governor Ivey, the issue will be on the November ballot for voters to consider. DMH and mental health services are areas where new gambling revenues would be spent. I and other members of the Alabama Council for Behavioral Healthcare will be in Montgomery on Wednesday and Thursday meeting with members of the legislature to advocate for additional funding in the FY25 budget.
- <u>DMH Opioid Settlement Grant-</u> Our grant proposal was recently approved and funded by DMH. This grant will allow us to expand our jail based services by adding case management, peer support, medication assisted treatment (MAT), and housing support for individuals post-incarceration. It's a one year grant with a budget of \$518,500 and were hopeful that when we show positive results and data, we will receive continuation funding from DMH.

MLBH PERSONNEL REPORT

3/19/2024

FT FT FT

NEW HIKES			
Kimberly McMurrey	Life Skills Specialist	2/29/2024	Dutton GH
Brianna McDonald	Certified Peer Support-Youth	3/5/2024	Both Counties
Hannah Robinson	Therapist NonLicensed CAIH	3/5/2024	JCMHC

FT Susan Sweatman Counselor 3/5/2024 Substance Use

FT Erin Russell Therapist NonLicensed OP 3/7/2024 **MCMHC**

Life Skills Specialist PRN April Burns Marshall Place 3/7/2024

SEPARATIONS (VOLUNTARY)

DOH Life Skills Specialist 2/23/2024 Substance Use FT Joshua Tyler Davis 5/15/2023 Resignation Reason personal

SEPARATIONS (INVOLUNTARY)

NA

NEW POSITIONS ADDED NA

NA **TRANSFERS**

PROMOTIONS

MEMALUBEO

FT Katrina Ramsey From Program Coordinator

> to Program Director 2/26/2024 Substance Use

ACT = Assertive Community Treatment

AIH = Adult In-Home

CAIH = Child/Adolescent In-Home

CRNP = Certified Registered Nurse Practitioner CRSS = Certified Recovery Support Specialist (SA)

NL= Non-Licensed

OP=Outpatient

QSAP = Qualified Substance Abuse Professional

SU = Substance Use

SLP=Sign Language Proficient RDP = Rehabilitative Day Program TPR= Treatment Plan Review

Continued-----

MLBH PERSONNEL REPORT

CURRENT OPEN POSITIONS

MP LSS -PRN (1) WE Days (since 12/20/23)

DGH LSS FT-(1) FT 1st (1) FT 3rd (1) PRN WE Days (1) PRN WE Nights

JP LSS PRN (1) (since 5/22/23)

SU LSS - (2) FT second (since 1/12/24)

Care Coordinator--Jail-Based- (1) new

Peer Support Specialist--Jail-Based- (1) new

Care Coordinator--MC(1) (since 9/11/24)

Therapist Outpatient JC (2) (since 2/5/24)

Care Coordinator ACT JC (1) (since 1/31/24)

Program Coordinator DGH (1) (since May 2023)

Care Coordinator DGH (1) (since 11/30/23)

Registered Nurse DGH (1) (since 6/1/23)

IT Board Report MAR 2024

Items Completed from last reports:

- -Ordering new Fiber for new Sboro building and speed upgrades.
- -Old Avatar legacy interfaces being decommissioned.
- -Testing other Virtualization Systems just in case.
- -Waiting on Vmware Renewal pricing.
- -Digital marketing company for MLBHC web page.
- -Vmware intermediate OS upgrades.

New Items / Continued:

- -MLBHC new computer deployment 95% complete.
- -Wes Re-designing MLBHC web page.
- -EOY Windows User account cleanup plus Avatar User cleanup.
- -EOY User forced password changes.
- -Some selected Staff testing AI Software demo.
- -VPN Security Breach, 1st layer.
- -Eprescribing system hacked. (Netsmart issue)
- -Logo Fail hack.
- -New Jplace internet and conferencing unit.
- -Farmers Fiber and speed upgrades in progress.
- -Find new VPN device.
- -External Hiwaay email filter going away.
- -Investigating Barracuda Cloud email filtering system.
- -Barracuda Email archiving system, Cloud storage going away.
- -Implement Vmware new version.
- -New Sboro cable modifications.
- -Get addl equipment ordered for new Sboro building.
- -Server room new batteries for secondary UPS system.

Clinical Services Report

March 2024

Rehabilitative Day Program

The Rehabilitative Day Program (RDP) provides long-term recovery services with the goals of improving functioning, facilitating recovery, achieving personal life goals, regaining self-worth, optimizing illness management, and helping consumers to become productive participants in family and community life. The Rehabilitative Day Program constitutes interventions that specifically address the individual's life goals, builds on personal strengths and assets, improves functioning, increases skills, promotes a positive quality of life, and develops supportive networks. MLBHC offers a RDP program in each county. The program is staffed by a program coordinator and a life skills specialist. The daily average number of consumers who are served by the RDP program is 12 in Marshall County and 17 in Jackson County. Consumers attend anywhere from one to five days per week based on individual goals, preferences, needs, and circumstances.

MOUNTAIN LAKES BEHAVIORAL HEALTHCARE
PROGRAM SUMMARY
FOR THE MONTH ENDED FEBRUARY 29, 2024
Budget vs Budget vs Budget vs

	410,512	30,450	440,962	58,736		(63)		351,713	801,014	831,527	1,241,976	890,262	
Budget is divided equally over 12 months. Actual is based on the activity during the month	11,121	0	11,121	201	-87,13%	(12,365)	-5.71%	(1 445)	14,191	26,555	25,311	26,757	3060 Prevention
	51,657	6,978	58,635	13,891	-174.49%	(67 037)	-30,16%	(29,272)	38,419	112,434	97,054	126,325	3030 Substance Use
	7,197	448	7,645	(913)	-82.49%	(10,882)	-13.30%	(2,773)	13,193	24,523	20,838	23,611	2651 Marshall Place
	9,509	1,982	11,491	5,089	-3.81%	(1,024)	8.84%	3,395	26,897	29,903	38,388	34,993	2650 Jackson Place
	41,724	5,157	46,882	(1,518)	-143.61%	(45,809)	-3.26%	(2,567)	31,898	82,864	78,779	81,346	2640 Dutton Facilities
Budget is divided equally over 12 months. Actual is based on the activity during the month	4,328	0	4,328	ळं	-32,53%	(3,344)	6 62%	967	10,279	13,623	14,608	13,641	2620 EBP Supportive Housing
	1,059	873	1.932	(436)	-87.86%	(2,512)	-21 23%	(1,017)	2,859	6,244	4,791	5,808	2610 Dogwood Apartments
	0	0	0	0	0.00%	25,267	0.00%	25,267	45,325	20,058	45,325	20,058	2400 Behavioral Health Unit (BHU)
	18,215	0	18,215	6,437	-244.68%	(29,544)	-58.65%	(17,765)	12,075	41,619	30,290	48,055	2300 Geriatrics
	108,564	3,092	111,655	(2,291)	-134.77%	(114,413)	-1,81%	(3,558)	84,895	202,399	196,550	200,108	2210 Jackson County MHC
	157,349	2,490	159,839	38,257	-95.58%	(114,312)	1.71%	4,779	119,601	236,403	279,439	274,660	2110 Marshall County MHC
	0	0	(0)	0	0.00%	0	0.00%	(0)	15,202	15,202	15,202	15,202	1500 Region 1 Project
Fundsraising Expense	(211)	9,429	9,218	(0)	95.02%	375,913	95,02%	375,702	386, 182	19,698	395,400	19,698	1000 Administration
Variance -/+ 5% Comments	NET INCOME (LOSS)	DEPRECIATION	ACTUAL OPERATING INCOME	BUDGETED OPERATING INCOME	Actual Expenses %	Actual Expenses \$ Variance	Actual Revenues % Variance	Actual Revenues \$ Variance	ACTUAL EXPENSES	BUDGETED	ACTUAL REVENUE	BUDGETED	PROGRAM

MOUNTAIN LAKES BEHAVIORAL HEALTHCARE
PROGRAM SUMMARY
FOR THE FIVE MONTHS ENDED FEBRUARAY 29, 2024
Budget vs Budget vs Budget vs

	458,085	143,726	601,810	293,678		22,706		187,113	4,036,614	4,157,634	4,638,424	4,451,311	ir -
Budget is divided equally over 12 months, Actual is based on the activity during the month	(28,322)	0	(28,322)	1,007	0.93%	1,243	-26.57%	(28,086)	134,020	132,777	105,698	133,784	3060 Prevention
	4,982	34,891	39,873	69,455	-14.51%	(66,807)	-26.24%	(131,280)	460,473	562,171	500,346	631,626	3030 Substance Use
	(9,692)	2,242	(7,450)	(4,584)	-5.38%	(6,151)	-10.56%	(11,279)	114 224	122,617	106,774	118,053	2651 Mershall Place
	38,440	7,782	46,223	25,446	0 33%	470	7.15%	13,464	142,205	149,517	188,428	174,963	2650 Jackson Place
	54,097	25,787	79,884	(7,589)	-20.05%	(64,900)	-0.80%	(3,213)	323,632	414,318	403,516	406,729	2540 Dutton Facilities
Budget is divided equally over 12 months. Actual is based on the activity during the month	6,690	0	6 690	88	-3.24%	(2.138)	6 14%	4,464	65,978	68,116	72,668	68,204	2620 EBP Supportive Housing
	6.762	4,364	11,126	(2,180)	-55.38%	(9.574)	-2.22%	(632)	17,283	31,221	28,410	29,041	2610 Dogwood Apartments
	0	0	0	0	0.00%	44,935	0.00%	44,935	145,225	100,290	145,225	100,290	2400 Behavioral Health Unit (BHU)
	36,762	0	36,762	32,184	-47.97%	(67,461)	-35.45%	(62,883)	140,632	208,093	177,394		2300 Gerialrics
	100,129	9,064	109,193	(11,456)	-14.29%	(125,399)	-1.40%	(13,814)	877,532	1,011,995	986,726	1,000,539	2210 Jackson County MHC
	244,000	12,449	256,449	191,286	-12 66%	(131,394)	-6.08%	(78,679)	1,038,172	1,182,014	1,294,621	1,373,300	2110 Marshall County MHC
	0	0	(0)	0	0.00%	0	0.00%	(0)	76,012	76,012	76,012	76,012	1500 Region 1 Project
	4,235	47,147	51,383	(0)	82.04%	449,880	82 18%	454,115	501,224	98 492	552,607	98,492	1000 Administration
Variance -/+ 5% Comments	NET INCOME (LOSS)	DEPRECIATION	ACTUAL OPERATING INCOME	BUDGETED OPERATING INCOME	Actual Expenses % Variance	Actual Expenses \$	Actual Revenues % Variance	Actual Revenues \$ Variance	ACTUAL	BUDGETED	ACTUAL REVENUE	BUDGETED REVENUE	PROGRAM

REVENUE & EXPENSE REPORT FOR THE FIVE MONTHS ENDED FEBRUARY 29, 2024

PROGRAM

BUDGET

ACTUAL

	Revenue	1500	REGION 1 PROJECT	76,012	76,012
	Expense			76,012	76,012
	Revenue	2110	MARSHALL COUNTY MHC	1 373 200	1 204 624
	Expense		MARCHALL COORT MINC	1,373,300 1,182,014	1,294,621
				1,102,014	1,038,172
	Revenue	2210	JACKSON COUNTY MHC	1,000,539	986,726
	Expense			1,011,995	877,532
	Revenue	2300	GERIATRICS	240,277	177,394
	Expense			208,093	140,632
	2 23.51				140,002
	Revenue	2400	BEHAVIORAL HEALTH UNIT	100,290	145,225
	Expense			100,290	145,225
	Revenue	2610	DOGWOOD APARTMENTS	29,041	28,410
	Expense			31,221	17,283
	Revenue	2620	EBP SUPPORTIVE HOUSING	<u>68,204</u>	72,668
	Expense			<u>68,116</u>	65,978
	Revenue	2640	DUTTON FACILITIES	406,729	403,516
	Expense			414,318	323,632
	Revenue	2650	JACKSON PLACE	<u>174,963</u>	188,428
	Expense			<u>149,517</u>	142,205
	Revenue	2651	MARSHALL PLACE	118,053	106,774
	Expense			122,617	114,224
			6113.63.41.63.41.63		
	Revenue	3030	SUBSTANCE USE	631,626	500,346
	Expense			562,171	460,473
	Revenue		STR/CURES/SOR (Part of the Substance Use Program)		18,155
	Expense				13,010
	,		9:		13,010
1	Revenue	3060	PREVENTION	133,784	105,698
ı	Expense			132,777	134,020

2024 COMPARATIVE INCOME STATEMENT

As of Accounting Period 5

FY 2023	FY 2024	\$ VARIANCE	% /YEAR
\$1,454,994 44.17%	\$1,324,471 36.44%	(\$130,523)	-9.85%
\$ 2,281,822 43.45%	\$ 2,633,920 46.72%	\$ 352,098	13.37%
\$ 14,846 48.09%	\$ 12,524 39.23%	\$ (2,322)	-18.54%
\$ 67,180 54.56%	\$ 49,019 34.23%	\$ (18,161)	-37.05%
\$ 222,549 54.68%	\$ 265,511 52.14%	\$ 42,962	16.18%
\$4,310,434 44.34%	\$4,638,424 43.42%	\$ 327,990	7.07%
\$ 2,122,651 39.17%	\$ 2,383,988 44.11%	\$ 261,337	10.96%
\$ 473,051 45.04%	\$ 497,289 43.13%	\$ 24,238	4.87%
\$ 100,000 41.55%	\$ 145,225 60.34%	\$ 45,225	31.14%
\$ 32,917 27.44%	\$ 19,250 28.33%	\$ (13,667)	-71.00%
\$ 91,771 42.30%	\$ 95,939 40.76%	\$ 4,168	4.34%
\$3,722,381 40.31%	\$4,031,852 42.47%	\$309,471	7.68%
\$588,053	\$606,572	\$18,519	3.05%
(\$138,999)	(\$148,487)	(\$9,488)	6.39%
\$449,054	\$458,085	\$9,031	
	\$1,454,994 44.17% \$ 2,281,822 43.45% \$ 14,846 48.09% \$ 67,180 54.56% \$ 222,549 54.68% \$4,310,434 44.34% \$ 2,122,651 39.17% \$ 473,051 45.04% \$ 100,000 41.55% \$ 32,917 27.44% \$ 91,771 42.30% \$3,722,381 40.31% \$588,053 (\$138,999)	\$1,454,994 44.17% \$1,324,471 36.44% \$2,281,822 \$2,633,920 46.72% \$14,846 \$12,524 48.09% \$9,23% \$67,180 \$49,019 54.56% \$14,310,434 \$4,638,424 44.34% \$4,310,434 \$4,638,424 44.34% \$473,051 \$473,051 \$473,051 \$473,051 \$473,051 \$473,051 \$473,051 \$473,051 \$473,051 \$45.04% \$100,000 \$145,225 60.34% \$32,917 \$27,44% \$32,917 \$27,44% \$32,917 \$19,250 27,44% \$32,917 \$19,250 28,33% \$91,771 \$95,939 42,30% \$4,031,852 40,31% \$\$588,053 \$\$606,572 (\$138,999) \$(\$148,487)	FY 2023 FY 2024 VARIANCE \$1,454,994 \$1,324,471 (\$130,523) \$2,281,822 \$2,633,920 \$352,098 \$4,846 \$12,524 \$(2,322) \$48.09% \$39,23% \$(18,161) \$67,180 \$49,019 \$(18,161) \$4,56% \$34,23% \$42,962 \$222,549 \$265,511 \$42,962 \$4,310,434 \$4,638,424 \$327,990 \$43,10,434 \$4,638,424 \$327,990 \$473,051 \$497,289 \$24,238 \$45,04% \$43,13% \$45,225 \$100,000 \$145,225 \$45,225 \$41,55% \$60,34% \$19,771 \$2,383,989 \$4,168 \$3,722,381 \$4,031,852 \$309,471 \$588,053 \$606,572 \$18,519 (\$138,999) (\$148,487) (\$9,488)

^{***}Does not include Board Investments

2023 COMPARATIVE BALANCE SHEET

As of Accounting Period 5

			\$	%
Current Assets	FY 2023	FY 2024	VARIAN	ICE
Cash	\$2,671,915	\$1,074,607	\$ (1,597,308)	-148.64%
Total Receivables	\$1,136,814	\$2,250,594	\$ 1,113,780	49.49%
Total Other Current Assets	\$2,517,709	\$3,437,361	\$ 919,652	26.75%
Total Current Assets	\$6,326,438	\$6,762,563	\$436,125	6.45%
Long Term Assets				
Fixed Assets	\$2,041,284	\$3,215,818	\$ 1,174,534	36.52%
Other Long Term Assets	\$6,573,972	\$6,431,111	\$ (142,861)	-2.22%
Total Long Term Assets	\$8,615,256	\$9,646,929	\$ 1,031,673	10.69%
Total Assets	\$14,941,694	\$16,409,492	\$ 1,467,798	8.94%
Liabilities				
Current Liabilities	(\$652,148)	(\$753,193)	\$ (101,045)	13.42%
Long Term Liabilities	\$0	\$0	\$ -	15.42/0
Total Liabilities	(\$652,148)	(\$753,193)	\$ (101,045)	13.42%
Net Assets				
Unrestricted Net Assets	(\$13,559,007)	(\$14,513,195)	\$ (954,188)	6.57%
Net (Income) Loss	(\$730,539)	(\$1,143,104)	\$ (412,565)	36.09%
Total Net Assets	(\$14,289,546)	(\$15,656,299)	\$ (1,366,753)	8.73%
Total Liabilities and Net Assets	(\$14,941,694)	(\$16,409,492)	(\$1,467,798)	8.94%

Performance Improvement Committee Summary Reports February 15, 2024

I. Report from Clinical Director, Dianne Simpson:

- Staff Error Report- The January report was sent out to the Program Directors/Coordinators.
- Wall of Fame/Incentive Plan for January 2024: The following staff achieved the incentive for the
 month of January. They all exceeded their productivity standard and produced excellent and error free
 documentation.

Congratulations:

o Incentive Plan-

Brookshire, Tom
Cheek, Brittany
Clonts, Lisa
Estes, Ashlee
George, Margaret

Headrick, Tina
Riggins, Jennifer
Ritchie, Denise
Traweek, Elizebeth
Whitten, Brooke

Wall of Fame-

Alford, Lindsay Moses, Mona Barrett, Rob Parker, Alexis Boxley, Sarah Paschal, Nancy Brand, Kali Quinn, Lindsey Brown, Jennifer Rucker, Elizabeth Burks, Julie Scyphers, Patrick Cabaniss, Rebecca Steed, Tyler Campbell, Teana Sutton, Melinda Cooper, Rebecca Townsel, Briley DeAtley, Joanna Tubbs, Felicia Dettweiler, Sarah Whitley, Amanda Hanna, Sarah Wilson, Justin Haves, Leilani Bartke, George Herring, Belinda Crowell, Robert Hixon, Ryan Green, Conner Holcombe, Mitzi Kirkland, Jana Holmes, David Long, Brandy Knott, Stephanie Ramsey, Katrina Kyle, April Williams, Macy Malone, Crystal Woodham, Cynthia Mays, Treva

II. Review and approve of January 25, 2024 summary report: The January reports were approved with no corrections noted.

III. Administrative Review Summary/Error Reports for January 2024 (Dec MTD 1.1 % YTD 0.8):

	Cases Reviewed	Docs Reviewed	Docs w/errors	Total Errors	Predominant Errors	
					Med record not updated; Services not	
TOTAL	34	2189	7	25	provided per t-plan	

MONTHLY ADMIN REVIEW ERROR RATE: 1.1 % YTD ERROR RATE: 0.9 %

IV. State Reporting Data Elements (SRDE) Report for December 2023-These errors are reported one month later as they are not received in time to research and compile prior to PI.

Total Errors	Predominant Error Trends
4	No trends noted

V. Prevention Activities: 132 Prevention activity sheets were reviewed for January 2024.

Direct Services	# Activity Hours Marshall County	# Activity Hours Jackson County
Block-Environmental	29	0
Block-Education	64	34
Block-Alternatives	0	0
Block-Community Based	5	0
Block-ID	33	54
Block- PIDR		0
SOR-Environmental	11	31
SOR-Community Based Process	3	0
Total	145	119

In the month of January, Prevention initiated the Too Good for Drugs program at Boaz Intermediate School, where 10 lessons were delivered to the 5th grade students over the next 10 weeks. Boaz Intermediate School had a total of 156 students in the 5th grade. Simultaneously, Too Good for Drugs began at Skyline Elementary School for their 5th grade students, with staff conducting lessons every Friday until the program's completion. Skyline Elementary School had 56 5th grade students. Additionally, Prevention attended the Thrive Way Peer Helper's conference in Orange Beach, where they gained insights into the PATH curriculum, a new education program being implemented in schools across Marshall County. Prevention distributed over 50 bags of Deterra and Remove the Risk Information at Section Family Pharmacy and offered the Prevention Plus Wellness program to students who had pled guilty in Vape Court every Wednesday at the Tech School in Marshall County. Moreover, staff disseminated Talk They Hear You information at the Albertville Library and the Jackson County Courthouse. Prevention served as the keynote speaker at the Children Resource Network meeting at Liberty Restaurant, discussing the range of educational materials offered to parents and children. Furthermore, Prevention continued to implement the PATH curriculum at DAR, Brindle Mountain, and Douglas Schools.

VI. Hospital Discharge Follow-up Report for January:

Location	Local	State/CRU	Total
Marshall	9 (8 Active)	2	11
Jackson	3 Active	0	3
Total	12	2	14

Kim Croley, Crisis Specialist, submitted this report. Tracking reports of hospital discharges and 72 hour follow-ups for clients in Marshall and Jackson County were sent out to the committee.

- Marshall County scheduled local hospital follow-up appointments for <u>8</u> active and one inactive consumer that was on outpatient commitment. All consumers kept their appointments. The inactive consumer has been scheduled for an intake.
- There were 2 inactive consumers from Marshall County scheduled for follow-up from a CRU/State facility in the month of January. They both kept their appointments and were scheduled for an intake.
- Jackson County had 3 active consumers scheduled for local hospital follow up in January who all came for their appointment.
- There were <u>0</u> consumers from Jackson County scheduled for follow-up from a CRU in the month of January.
- VII. Incident Prevention and Management for January: There was one Major client injury with followup.

January 31, 2024 (DMH MI-24 hr rpt Major Client Injury Residential Care consumer # (1-2024) Consumer complained of back pain while visiting PCP. She reported a fall that had occurred previously, date unknown, but did not tell staff. PCP ordered x-ray which revealed compression fracture to vertebrae.

Follow up: Unsure how fall happened. Was not reported to staff. DMH inquired on 2/21/24 whether consumer had attended the appointment for orthopedic doctor. Per the program director, the consumer is currently hospitalized for psychiatric stabilization which began with an ER visit on 2/14/24. The case manager stated that he has not received any correspondence yet regarding the referral. He has contacted Highlands PC receptionist and asked on the status of the referral.

VIII. Medication Errors for January: There were 5 medication errors for the month of January. Four wrong person and one missed dose. No trends were noted.

January 3 (4 med errors)

Cedar Lodge

(2-5-2024) MAC worker accidentally gave medication to wrong client, Abilify 10 mg, Topamax 50 mg, Tegretol 200 mg, Hydroxyzine 50 mg. Client normally takes Hydroxyzine 25 mg and Benztropine 1 mg. Poison control was called who advised that client should be ok, drink plenty of fluids, eat something, expect client to be drowsy and to check vitals frequently. No lasting adverse effects were noted by consumer.

What should have happened? MAC worker should have had client tell her or his name and given client the correct medication.

Why the difference? Staff did not follow NDP guidelines.

How can a similar event be prevented in the future? MAC worker will follow proper NDP procedures.

Follow up: Supervision done with MAC worker.

January 10

Residential Care Home

(6-2024) MAC worker did not give consumer 4pm dose of Ativan 0.5mg. Error identified 1/11/23 during 6am med count. On call RN was notified. No adverse effects were noted by consumer.

What should have happened? Staff should follow NDP guidelines.

Why the difference? Staff did not follow NDP guidelines.

How can a similar event be prevented in the future? Double check all MARS at each med pass.

Follow up: Supervision with MAC worker.

By Personnel

	MAC	RN	LPN	Pharmacist	Other (explain)
Level 1	5				
Level 2					
Level 3					
TOTAL	5				

By Division

	MI	SA	TOTAL
Level 1	1	4	5
Level 2			
Level 3			
TOTAL	1	4	5

By Error Type

	Wrong Person	Wrong	Wrong	Wrong	Wrong	Wrong	Wrong	Missed	Other
		Med	Dose	Route	Time	Reason	Documentation	Dose	(explain)
Level 1	4							1	
Level 2									
Level 3									
TOTAL	4							1	

IX. Consumer Feedback, Complaints, and Grievances: There were three complaints/grievances reported for January.

January 5 Cedar Lodge

(7-2024) Consumer complaint form was found in feedback box on 1/5/24 dated 12/13/23. Client complained that staff had been using racist remarks. Complaint was given to supervisor.

Follow up: Supervision was done with staff involved.

January 5 Cedar Lodge

(8-2024) Consumer complaint form was found in feedback box on 1/5/24 dated 1/5/24. Client complained that someone had put toilet paper in the urinal. Complaint was given to supervisor. **Follow up**: Supervisor redirected group with respect for property.

January 26 Cedar Lodge

(9-2024) Consumer complaint form was found in feedback box on 1/26/24 dated 1/17/24. Client complained that staff had opened bedroom door to wake client which made client uncomfortable due to way client was dressed. Complaint was given to supervisor.

Follow up: Supervision was done with staff involved.

54	Jan	Jan	Jan	Jan	Jan
FY24-Consumer Feedback	Compliments	Suggestions	Complaints/ Grievances	Comments	Total per location
Guntersville	0	0	0	0	0
Scottsboro	0	0	0	0	0
Outreach/Residential	2	1	0	0	3
Cedar Lodge	8	0	3	2	13
Total MTD	10	1	3	2	16
Total YTD	19	8	6	4	37

X. Residential Services Report for January 2024: A monthly report was ran for January.

		TARGETED PT	ACTUAL PT	%
FACILITY	CAPACITY	DAYS	DAYS	OCCUPANCY
Jackson Place	3	93	93	100
Marshall Place	3	93	62	67
Jackson Place Sup Apt.	2	62	62	100
Dogwood Apartments	8	248	217	88
Supportive Housing	12	372	310	83
MLBH Residential Care	10	310	311	100
MLBH Crisis Stabilization	2	62	62	100
Foster Homes	26	806	806	100
Totals		2046	1923	94

A monthly report was ran for January residential services.

XI. Treatment Plan Reviews for January 2024:

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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	52	0	0	0	0	0	0	0
Jackson	168	0	0	1	15	0	0	16
Marshall	347	0	5	2	26	1	0	34
Substance Abuse	0	0	0	0	0	0	0	0
Residential	0	0	0	0	0	0	0	0
TOTALS	567	0	5	3	41	1	0	50

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.

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 with details of the errors and the staff responsible. The trend was plan not timely, not individualized, and documentation was not related to/address progress toward goals

XII. Form-Policy & Procedure Revisions/Approvals:

Forms-None

P & P: For PI approval-None P & P: Board Approved-None

XIII. Miscellaneous Items: None

Leadership Committee

February 15, 2024

MINUTES

Present: Lane Black, Myron Gargis, Cammy Holland, Dana McCarley, Shelly Pierce, Gerald Privett, Katrina Ramsey and Dianne Simpson

Absent: Erica Player and Sherneria Rose

I. HR Training – Lane Black

• Lane provided an HR training presentation titled "Memory Test".

II. Approve minutes of the January 25, 2024, meeting

Minutes of the January 25 meeting were distributed to all staff via e-mail. Minutes were approved, as presented.

III. Committee Reports

None for this month

IV. Program Financial Reports: October – January, 2024

- YTD net income of \$47,573 (not including Board investments).
- Marshall Co. OP & OR Net income \$86,652
- Jackson Co. OP & OR Net loss \$8,434
- Geriatrics Net income \$18,546
- Residential
 - Supervised Apartments Net income \$5,703
 - EBP Supportive Housing Net income \$2,362 (program designed to break even)
 - <u>Dutton</u> **Net income** \$12,373
 - Jackson Place Net income \$28,932
 - Marshall Place Net loss \$16,889
- SU Services Net loss \$46,675
- Prevention Services Net loss \$39,442

V. Reports & Program Updates:

• Executive Director's Report – Myron Gargis

- O Myron has been working with DMH on a possible plan to assist in the placement of one or two consumers from a deaf group home that will be closing prior to the end of the month. An initial proposal was submitted to DMH to add a respite bed at JP, but considering the requirements of an architect's involvement and the addition of a sprinkler system at that facility, that proposal was withdrawn.
 - Another option to assist with placement of these consumers is a "for sale by owner" home within blocks of JP in Woodville. DMH agreed to provide the funds for MLBHC to purchase and furnish this home. All are hopeful to close on this property next week. If all goes as planned, two current consumers at JP will move to this new home and if interested, be employed as peer support staff

- by MLBHC. The two consumers displaced by the closure of the deaf group home will then move in at JP.
- DMH has also asked Myron to develop a possible long term plan for increased housing and the addition of a Care Coordinator at JP.
- MLBHC has been awarded \$518K via a DMH Opioid Grant. This funding will allow for expansion of our jail based services program by adding case management, peer support, medication assisted treatment (MAT) and housing support for individuals following incarceration. Staff in this program will be based out of Cedar Lodge and will cover both Marshall and Jackson Counties.
- MLBHC closed on the purchase of the former JC BOE property earlier this month.
- Kickoff for Medicaid's Contingency Management Program was yesterday, with our first check (February) being sent by Friday. Once this money is received, we will purchase the gift cards and drug screens.
- MLBHC has purchased 40 portable cots that will be available for use during an emergency (inclement weather, loss of power, etc.)
- o Myron recently emailed a listing of MTM consultation options that we will have access to during Phase 3 of the prep toward becoming CCBHCs. LC members are to let Myron know which courses they are most interested in.
- o Highlands Hospital has decided to begin conducting psychiatric consults via telehealth. They will discontinue using MLBHC for these services as of 3-1-24.
- Dianne noted recently testing two methods of AI assisted documentation. A recommendation was made for a therapist to test this system with an actual MLBHC consumer.

Clinical Director's Report – Dianne Simpson

- Mitch Davis has recently been promoted to Training Coordinator and many staff are working to teach him the ropes.
- o Katrina Ramsey has been promoted to Program Director of Substance Use Services.
- O Dianne, Julianna and the SU Prevention Team are working with the school's Mental Health Coordinators on a Suicide Prevention Campaign. The SU Prevention Team will be on-site during lunch times at MC Schools to share information and brochures with the students. A future Community Awareness Event is also being planned for this summer. This event that will feature speakers with personal experience related to suicide.
- ODMH has added a division for early childhood services. Dianne shared information on this program with all LC members.
- The Avatar users group in which Dianne is a member is working on EPSDT data.
- Several items requested for regulatory relief have been approved and will be published in the Medicaid Manual as of April 1, 2024. Some of these changes include Therapist positions no longer requiring a practicum and TPRs being completed on a six month basis (instead of three month). TPRs will also no longer require completion by a licensed staff member.
- o All staff members are to be reminded to please complete their timesheet and travel reimbursement by the 5th of each month, as these items are used by Dianne to calculate productivity.
- Changes are being made to the scheduling module in that color coding by service is now now being used.
- o Dianne created a report to track "no shows" by provider. This report was very eye opening as it reflects a clearer picture of how "no shows" correlate to each clinician.

- Due to several LC members attending ASADS next month, the March LC meeting will be held on the second Thursday March 14, 2024. Time/format TBD.
- Administrative Services Cammy Holland no report for today.

• HR Report - Lane Black

- A listing of currently vacant positions was distributed to LC members. Any necessary revisions should be reported to Lane.
- LC members were in agreement to begin recruitment for a Jail Based Peer/LSS position.

• Jackson County - Dana McCarley

- o Paul Horn, PT OP TH, has agreed to work an extra day.
- Perris Hobbs, Intake Coordinator, will be the therapist for residential consumers at DGH.
- o A new JC CA IH Therapist and CC are in the pipeline.
- o Interviews have not gone well this week at 0/3.
- A Collaborative School Based Mental Health meeting is scheduled for March 5. This
 will include pertinent members from both the JC School System and the Scottsboro
 City School System.

• Marshall County OP & OR - Dianne Simpson

o Stacey Johnson has been hired as a PT SB TH, working at Marshall County Schools.

• Geriatrics – Gerald Privett

- o Geriatric staff met at the Admin Office last week to pick up their new computers.
- Steve is checking to see if there are any old computers that might could be used as backups for MLBHC staff at the nursing homes.
- Residential No report due to Sherneria's absence
- SA Services Katrina Ramsey
 - o Census is remaining around 25.
 - Anna York and Justin Cook were recently hired as LSS and are doing well.
 - o A counselor has also been hired to replace Macy Williams.

VI. Review of wait times

For January, 2024, the following wait times were reported:

MC Intake	8 days	MC MD/CRNP	23 days
JC Intake	9 days	JC MD/CRNP	6 days
Average	8.5 days	Average	14.5 days

VII. Unfinished Business

None

VIII. New Business

None

IX. Adjournment

The Leadership Committee meeting was adjourned at 2:50 p.m.



New Directions

2024





MLBHC will observe the Good Friday holiday on March 29th for all full-time staff members

March Birthdays

Vanessa Vandergriff March 5
Perris Hobbs March 7
Cody Darnell March 15
Lilly Sparks March 18
Debbie Burnett March 23
Bob Crowell March 23
Kim Coe March 27
Olivia Gifford March 28



March Anniversaries



Shaquitta Sabb 1 year Sarah Dettweiler 2 years Lindsey Quinn 2 years Elizebeth Traweek 3 years Nancy Paschal 6 years Jennifer Brown 8 years Teana Campbell 12 years Cammy Holland 16 years Kim Coe 18 years

Daylight Saving Time begins on Sunday,

March 10th





The individuals photographed below are new employees that completed orientation with MLBHC during February, 2024.

We look forward to working with each of you !!!









Left to right: Stacey Johnson, LMSW, Marshall County School Based Therapist; Justin Cook, LSS at Cedar Lodge; Desiree Justice and Kimberly McMurrey, both LSS at Dutton Group Homes.

Personnel Policy Spotlight

4.1.2 Equal Employment Opportunity

Equal Employment Opportunity has been and will continue to be, a fundamental principle of MLBHC, where employment is based upon personal capabilities and qualifications without discrimination because of race, color, religion, sex, age, national origin, disability, or any other protected characteristic as established by law. We value each employee's talents, and support an environment that is inclusive and respectful. This policy of Equal Employment Opportunity applies to all policies related to recruitment and hiring, compensation, benefits, termination and all other terms and conditions of employment.



Wall of Fame

January 2024 I = Incentive



Marshall OP & OR

Lindsey Alford
Kali Brand
Julie Burks
Lisa Clonts (I)
Ashlee Estes (I)
Tina Headrick (I)
Belinda Herring
Stephanie Knott
Crystal Malone
Lindsey Quinn
Jennifer Riggins (I)
Denise Ritchie (I)
Elizabeth Rucker

<u>Multi Programs</u> Sarah Boxley Margaret George (I)

Patrick Scyphers

Melinda Sutton-Griffin

Elizebeth Traweek (I)

JC OP & OR

Rob Barrett
Tom Brookshire (I)
Jennifer Brown
Brittany Cheek (I)
Sarah Dettweiler
David Holmes
Amanda Whitley
Brooke Whitten (I)

Substance Use

George Bartke
Bob Crowell
Conner Green
Jana Kirkland
Brandy Long
Katrina Ramsey
Macy Williams
Cindy Woodham

Residential

Rebecca Cabaniss
Teana Campbell
Rebecca Cooper
Joanna DeAtley
Sarah Hanna
Leilani Hayes
Ryan Hixon
April Kyle
Treva Mays
Nancy Paschal
Briley Townsel
Felicia Tubbs
Justin Wilson

Geriatrics

Mitzi Holcombe Mona Moses Tyler Steed



On The Calendar March 2024

Monday, March 11 Human Rights Committee Cedar Lodge - 5:00 pm

Thursday, March 14
Leadership Committee
Admin Office - Time TBD

Monday, March 18 CPR class for new staff Admin Office - 8:30 am

Tuesday, March 19 Board meeting Scottsboro MHC - 5:30 pm

Tues - Fri, March 19-22 ASADS Conference Bryant Conference Ctr - Tuscaloosa

Thursday, March 21
Social Work Career Fair
A&M University - Huntsville





MLBHC continues to partner with Sand Mountain Park and Amphitheater in Albertville to sponsor The Miracle Field. The Miracle Field was founded with the belief that every individual deserves a chance to play baseball. The mission of Miracle League is to provide that opportunity to all, regardless of their abilities. Through the design of facilities that meet the unique needs of Miracle League players, they experience the joy that comes from playing our national pastime - baseball.

Miracle League is now recruiting volunteers (buddies) to assist with ballgames for the nearly 175 special needs individuals that have registered to play this year. Several MLBHC staff members have signed up to again volunteer as a buddy for the coming season. (They enjoyed it so much last year that there going back for more!) Buddies are volunteers who work with the athletes to ensure their experience in the Miracle League is as special as they deserve it to be.

At the present time, the league still needs many more volunteers. Please consider donating some of your time to participate with these amazing players and coaches.

Important details:

- All games are held at the Sand Mountain Park in Albertville.
- The spring season runs during April and May, with games held on Tuesday and/or Thursday
 of each week.
- Buddies may sign up to be fill-in (as needed) or may commit to volunteering for all games during the spring season.
- Buddies must be 12 years of age or older.
- Registration does include a background check.

To register, please visit

https://sandmountainpark.recdesk.com/Community/Program?category=35

For more information or any questions, please contact:

Lisa Hansford

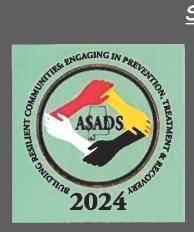
Sport Programming Coordinator

Sand Mountain Park and Amphitheater

lhansford@sportsfacilities.com

256-891-8240

Staff to attend ASADS Conference



Ten MLBHC staff members will soon attend the 48th Annual Alabama School of Alcohol and Other Drug Studies (ASADS) Conference at the Bryant Conference Center in Tuscaloosa. ASADS is designed to meet the continuing educational needs of professionals involved in the enforcement, prevention, identification, assessment, treatment and rehabilitation of chemical dependency. MLBHC staff look forward to this conference each year as it always offers excellent presenters and a wide range of topics related to substance use issues.

CONGRATULATIONS ON YOUR PROMOTIONS!



Mitch Davis, BA, was recently promoted from Jackson County Care Coordinator to the position of Training Coordinator for MLBHC.

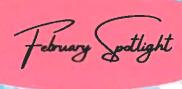


Katrina Ramsey, MA, has been promoted from Program Coordinator II to Program Director of Substance Use Services.



Guiding Values

- To treat our customers in a manner in which we would like to be treated.
- To be honest, forthright, and respectful with everyone.
- To be totally committed to excellence in all that we do.
- To continuously improve our work performance and the effectiveness of the services provided.
- To actively seek opportunities and initiate ideas to expand and secure the organization's growth and development.
- To work diligently and accurately so as to assure quality outcome and cost effectiveness.
- To create a work environment that encourages communication, participation, and creative thinking by all employees.
- To recognize the purpose of the organization as a whole as being more important than any given part or specific program.



Niede Gurley

Nicole is an Account Specialist in the Business Office and has been with M28H for over seven years. She has been marked to Alvin for eight years and has five kids. Maiya, Talan, Mallory, Jadrien, and Kaden.



Ulse part of the family are three dogs, a cat and some grandpups. Nicole likes turtles and the color green. Hor favorite singer is Whitney Houston.

She enjoys puzzles, baking, and most of all, spending time with her kids and family. Her functie quote is from Johnny Deap, "Thugh as much as you breathe and love as long as you live." Nicole is an important part of our MIDH family!



