



WEEKLY Update

November 13, 2020

COVID-19 Resources: CMHA has developed a curated set of COVID-19-related resources and announcements from a range of reputable state and national sources. That curated set of resources, which will be regularly updated, **is available by [CLICKING HERE](#)**.

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CMH Association and Member Activities

New! Newaygo County Board of Commissioners honors volunteer Adele Hansen

At its Wednesday, Oct. 28 meeting, the Newaygo County Board of Commissioners unanimously approved a resolution honoring Adele Hansen for her many years of service to the people of Newaygo County. (Adele was also named the 2020 recipient of the Art Wunsch Advocacy Award –an annual award presented by the Newaygo County Mental Health Board of Directors, recognizing persons who have demonstrated extraordinary advocacy on the part of and in partnership with persons with mental health needs.)

Hansen, now in her early 90’s, served on the Newaygo County Commission on Aging board for 23 years, starting in 1997, and volunteered as a member of the Area Agency on Aging of Western Michigan Advisory Council and Legislative Committee for more than 20 years. She also served as a member of the Newaygo County Community Mental Health board for more than 20 years.

The Michigan Department of Health and Human Services’ Aging and Adult Services Agency honored Hansen as the Michigan Senior Citizen of the Year in 2016 at the Older Michigianians Day gathering at the state capitol in Lansing.

Adele Hansen also devoted much of her time and energy to helping in personal ways, providing transportation, and caring for people in need.

New! West Michigan CMH receives \$750,000 mental health, jail diversion grant

Below are excerpts from a recent news release from West Michigan Community Mental Health regarding its receipt of federal dollars to bridge the mental health and corrections sectors of our society.

West Michigan Community Mental Health will use a \$750,000 federal grant to create programs that will help keep individuals with mental illness out of jail and get them the appropriate mental health supports.

The three-year grant from the Department of Justice stems from an initial planning grant that was awarded in 2018 that established the Jail Diversion Collaborative of Lake, Mason and Oceana counties. The collaborative identified opportunities for improving identification and response to persons with mental illness and co-occurring substance use disorders who interact with the criminal justice system.

The funding will include implementation of a crisis intervention team, increased access to mental health mobile crisis services using mobile devices and in-person contacts, expansion of jail diversion services including the use of criminogenic screenings, and provision of mental health services in local jails.

West Michigan CMH will continue to work with the Jail Diversion Collaborative to implement the comprehensive strategic plan developed in 2018 to improve service delivery through law enforcement and mental health. One of the long-term goals is to create a local “specialty court”, which would divert select defendants with mental illness into judicially supervised, community-based well-coordinated treatment.

New! NACBHDD seminar: defeating racism through diversity, equity, and inclusion

As Weekly Updates readers may remember, CMHA (and through CMHA, all CMHA members) have been longtime members of the National Association of County Behavioral Health and Developmental Disability Directors (NACBHDD). NACBHDD is the leading voice, in Washington DC, for the nation’s county-based mental health system.

A large number of CMHA members and stakeholders attended the NACBHDD Board meeting and seminar that was held on November 9. The two-day Board meeting and seminar centered around racial justice.

A key note presentation by Dr. Martell Teasley, the Dean of the School of Social Work at the University of Utah, “A Conversation on Diversity and Racial Dynamics”, was a powerful and concrete discussion on the components of race, racial equity, and the work needed to foster racial justice. The slides of Dr. Teasley’s presentation can be found at the lower section of [CMHA’s Cultural and Linguistic Competence webpage](#).

In addition to Dr. Teasley, Kirsty Fontaine, a Program Manager, National Association of Counties (NACo) reviewed the work of NACo related to diversity, equity, and inclusion. The descriptions of these efforts and related resources can be [found here](#).

The Michigan League for Public Policy (MLPP), a longstanding partner of CMHA, was also a presenter at the NACBHDD seminar. Julie Cassidy, from MLPP, provided information on the League's 21 Day Racial Equity Challenge. More information on the League's challenge can be [found here](#).

State & National Developments and Resources

New! MDHHS creates MI Health Link dashboard

Weekly Update readers may remember that MDHHS has a very comprehensive set of resources and sources of information related to Michigan's MI Health Link demonstration project (the demonstration project designed to improve the coordination of care for persons dually enrolled as Medicaid and Medicare beneficiaries). This website is [found here](#).

Recently, a set of dashboards on the quality measures and enrollment data for the MI Health Link. The dashboards can be found at: [Quality indicator dashboards](#) ; [Enrollment dashboards](#)

New! MDHHS shares gains in reforming state's child welfare system to improve child safety, keep families together

Below are excerpts from a recent press release from MDHHS on the its progress toward meeting goals of child welfare system reform.

Department's new leadership and team praised by federal judge for being 'devoted to moving this case forward in a way that no prior team has'

With new leadership in place, Michigan is making needed improvements to its child welfare system to keep children safer and families together. Michigan Department of Health and Human Services (MDHHS) officials today shared successes during the early stages of their reform efforts and promised even more significant progress as new plans are put into place.

MDHHS was in federal court virtually via Zoom to report on child welfare system improvements during the last six months of 2019 and listen to a report from court-appointed monitors. That monitoring period coincided with the beginning of JooYeun Chang's tenure as executive director of the department's Children's Services Agency.

Chang took over as head of the Children's Services Agency in May 2019. Speaking to Judge Nancy G. Edmunds of the U.S. District Court for the Eastern District of Michigan, she highlighted

progress MDHHS is making in three areas that demonstrates its commitment to improve critical child safety outcomes.

She said MDHHS has:

- Eliminated a previous backlog of 1,300 Children’s Protective Services investigations when Chang came to MDHHS. The department has taken swift action by sending additional staff to county field offices, improving policy to eliminate redundancies and outdated requirements, and problem-solving weekly with county offices that were behind. As a result, backlogs were eliminated within four months.
- Taken steps to reduce maltreatment of children in foster care. Among other things, the department has created a new unit that follows up on concerns that children in care are being abused or neglected.
- Provided increased support to relative caregivers so they can keep children safe. MDHHS – which believes children are better off when they are placed with appropriate family members – now provides financial support to relative foster families even if they are not licensed.

Tuesday she noted issues remain to be addressed, but she said she’s been impressed by the department’s new leadership based on what she’s heard from court monitor Kevin Ryan. In addition to working to meet the court’s requirements, Chang said MDHHS in the last year has focused on transforming the child welfare system

The full press release can be [found here](#).

New! MDHHS and DTMB Roll Out COVID-19 Exposure Alert App Statewide

Below are excerpts from a recent MDHHS press release around a COVID exposure alert app.

As part of the state’s continued efforts to slow the increasing spread of COVID-19, the Michigan Department of Health and Human Services (MDHHS) and Michigan Department of Technology, Management and Budget (DTMB) today announced the statewide rollout of the COVID-19 exposure notification app MI COVID Alert.

The anonymous, no cost and voluntary app, piloted in Ingham County and on the campus of Michigan State University last month, lets users know whether they may have recently been exposed to COVID-19. Users can confidentially submit a positive test result into the app and alert others in recent proximity that they may have also been exposed to the virus.

“COVID cases and deaths are now rising fast,” said Robert Gordon, director of MDHHS. “Using MI COVID Alert on your cell phone is a simple, safe step that everyone can take to protect themselves and their loved ones. It’s free, it’s easy, and it protects your privacy.”

“This app has the potential to provide the kind of early exposure notification that is critical to preventing the spread of the virus,” said Michigan State University Executive Vice President for Health Sciences, Dr. Norman J. Beauchamp Jr. “In addition to wearing a mask, social distancing and getting tested, downloading the app is one of the most important steps we can take to help keep our communities safe.”

When a person tests positive for COVID-19, they receive a randomly generated PIN from the local health department or State of Michigan case investigators that allows them to share their test results anonymously on the app. MI COVID Alert uses randomly generated phone codes and low energy Bluetooth technology instead of GPS location to protect privacy while looking back in time to determine close contact with other phones that have the app. If someone was in close contact with another person who submitted a positive COVID-19 test result, the close contact will receive a push notification once the positive test result is entered into the system. A notification means the app user was possibly within six feet for at least 15 minutes of someone who tested positive. Michigan worked with Apple and Google to make MI COVID Alert compatible with similar apps in other states. The app works in conjunction with traditional contact tracing, mask-wearing, hand washing and social distancing, but is not a replacement for these precautions or participation in contact tracing.

People who are exposed to COVID-19 should get tested and consider quarantining, including watching for symptoms for 14 days from the date of possible exposure. Individuals in need of testing may visit the COVID-19 website to find a testing location near them. They may also contact the Michigan COVID-19 hotline by calling 888-535-6136 from 8 a.m. to 5 p.m., Monday through Friday, or dialing 2-1-1 on their mobile phone to locate and schedule an appointment at a nearby, off-campus testing location.

The exposure notification feature included in recent iOS and Android operating system updates only works with a companion app like MI COVID Alert. The app is available in the Apple and Google app stores.

New! One in five COVID-19 patients develop mental illness within 90 days

Below are excerpts from recent news story on the some of the mental health consequences of COVID. Many COVID-19 survivors are likely to be at greater risk of developing mental illness, psychiatrists said on Monday, after a large study found 20% of those infected with the coronavirus are diagnosed with a psychiatric disorder within 90 days.

The full story can be [found here](#).

State Legislative Update

Michigan Election Results

On Wednesday, November 4, Michigan Secretary of State Jocelyn Benson confirmed that all valid ballots in Michigan had been counted. As is customary, the results remain unofficial until state officials and local clerks canvass and certify the results.

President – Democrat Joe Biden narrowly defeated Republican Donald Trump by a little over 140,000 votes.

Michigan Senate – Incumbent Democrat Gary Peters narrowly defeated Republican challenger John James by less than 100,000 votes.

Michigan Supreme Court – Bridget McCormick has been re-elected to the Michigan Supreme Court and Democrat-nominated Elizabeth Welch has also won election to the court, handing justices nominated by Democrats a 4-3 majority.

Michigan House – The Michigan House Republicans have retained their 58-52 majority.

- 28 freshmen lawmakers are coming to Lansing.
- 82 of the 84 incumbents have won their reelection.
- Republicans flipped the 48th District, ousting incumbent Sheryl Kennedy, and the 96th District, ousting incumbent Brian Elder.
- Democrats flipped the 61st District seat, which now belongs to Christine Morse, and the 38th District seat with Kelly Breen’s win over Chase Turner.
- Otherwise, Republicans have successfully fended off areas where they were on defense, such as the 39th (Ryan Berman) and 43rd (Andrea Schroeder) and the open seat in the 104th district covering Grand Traverse County.
- Democrats successfully played defense in the 19th where Democrat Laurie Pohutsky will retain her seat.
- In another competitive race, Republican Mark Tisdell defeated Democrat Barb Anness in the 45th District.

On Thursday, the Michigan House caucuses held their leadership elections. The following leadership posts were announced:

- Speaker of the House: Rep. Jason Wentworth (R-Clare)
- Majority Floor Leader: Rep. Ben Frederick (R-Owosso)
- Speaker Pro Tempore: Rep. Pamela Hornberger (R-Chesterfield Township)
- Associate Speakers Pro Tempore: Rep. Sarah Lightner (R-Springport) and Rep. Brad Paquette (R-Niles)
- Assistant Majority Floor Leaders: Rep. Ann Bollin (R-Brighton) and Rep. Julie Calley (R-Portland)
- Majority Whip: Rep. Andrea Schroeder (R-Independence Township)
- Deputy Whip: Rep. Jack O’Malley (R-Lake Ann)
- Caucus Chair: Rep. Matt Hall (R-Emmett Township)
- Caucus Vice Chair: Rep.-elect Andrew Beeler of Fort Gratiot (the incoming representative in the 83rd House District)

On the Democrat side, Representative Donna Lasinski (D-Scio Township) will be the new House Democrat Leader with Representative Yousef Rabhi (D-Ann Arbor) once again serving as the House Democratic Floor Leader.

DHHS EMERGENCY ORDERS

Currently, there are five active *DHHS* emergency orders. Please find a list of the active emergency orders with the topic, date it was signed and a hyper link accessing the emergency order below. For clients still interested, or in need of referencing previous *Executive Orders*, please click [here](#).

- ***Reporting of Confirmed and Probable Cases of COVID-19 at Schools*** – Signed October 6, 2020, please click [here](#) to access the emergency order.
- ***Temporary Restrictions on Entry into Congregate Care and Juvenile Justice Facilities*** – Signed October 6, 2020, please click [here](#) to access the emergency order.
- ***Requirements for Residential Care Facilities*** – Signed October 21, 2020, please click [here](#) to access the emergency order.
- ***Testing Requirements for Skilled Nursing Facilities, Homes for the Aged, and Adult Foster Care Facilities*** – Signed October 29, 2020, please click [here](#) to access the emergency order.
- ***Gathering Prohibition and Mask Order*** – Signed October 29, 2020, please click [here](#) to access the emergency order.

Executive Orders Signed

Currently, Governor Gretchen Whitmer has signed over 170 Executive Orders in response to COVID-19. Below is the most recent list of Executive Orders with the topic and a hyper link accessing the Executive Order below.

For a complete list of Governor Whitmer’s Executive Orders click on the link below:

https://www.michigan.gov/whitmer/0,9309,7-387-90499_90705---,00.html

- ***Executive Order 2020-181*** – Amendment to the Safe Start order, please click [here](#) to access Executive Order 181.

Federal Update

9-8-8 Signed into Law

The National Suicide Hotline Designation Act was signed into law on Saturday, October 17. This legislation will create a new 9-8-8 dialing code for suicide prevention, helping Americans who are

seeking services for mental health emergencies. The National Council thanks our advocates for tirelessly leading the charge in making this hotline a reality. The success of 9-8-8 comes at a critical time for behavioral health services, as COVID-19 has contributed to increased isolation and unemployment, among other difficulties. Implementation of 9-8-8 now moves to the Federal Communications Commission (FCC), which recently set a deadline of July 2022 for the full, national implementation of the hotline.

National Council Launches CCBHC Success Center

The Certified Community Behavioral Health Center (CCBHC) movement is transforming health care with new approaches to service delivery while expanding community members' access to care. To help organizations and states make the most of these opportunities, the National Council is excited to announce the launch of our [CCBHC Success Center](#) – a hub for information, implementation support and advocacy on the CCBHC model.

Whether you are a current or prospective CCBHC, a policymaker, association representative or just personally invested in the CCBHC model, the CCBHC Success Center is your one-stop shop for support from the National Council and our network of partners.

We offer training, educational opportunities, data, and resources for CCBHCs and other stakeholders.

Visit our site to:

- Kick-start your CCBHC grant or strengthen your existing CCBHC activities.
- Connect with peer CCBHCs to share ideas, innovations, and solutions.
- Get help with becoming CCBHC-ready for the next round of expansion grants.
- Explore how states can implement and tailor the CCBHC model to meet their goals for quality, scope of services and value.
- Learn how non-CCBHCs—like primary care clinics, children's providers, and others—can partner with CCBHCs to improve clients' access to the full spectrum of care.
- See a compilation of the latest data on CCBHCs' activities, outcomes and geographic reach.
- Get engaged in advocacy to advance the CCBHC model.
- And more...

Need one-on-one attention to support your unique needs and goals? Our expert staff have worked with states and clinics since 2014 to provide implementation support, financing guidance, and Medicaid design expertise. We are here to help meet any need.

The CCBHC Success Center is open for business. [Check us out today!](#) Make sure to check back often, as additional resources will be added in the weeks and months ahead.

New! The Invisible COVID Workforce: Direct Care Workers for Those with Disabilities



The response to the COVID-19 pandemic has not recognized the importance of the 4.5 million direct care workers in the United States who care for the elderly and people with disabilities.

There are steps policymakers could take to protect direct care workers and help people who depend on their services to stay in their homes

Nancy, a single woman with cerebral palsy, experienced a decline in functioning in middle age. By using a personal care aide (PCA) a few hours each day to help her bathe, dress, cook, and clean, Nancy was able to live on her own for many years.

As her needs increased, she reached limits on what Medicaid would pay. Nancy made the difficult decision to move to assisted living with onsite 24/7 personal care support.

Then COVID-19 hit. Nancy knows the advantages of social distancing, but her care requires close physical contact. Her PCAs take public transportation and care for others besides Nancy. They do not have regular access to personal protective equipment (PPE) because of shortages and lack of priority status to obtain such equipment. The facility attempts to compensate by screening staff members' temperatures and symptoms upon arrival and through reliance on handwashing, but Nancy worries this is not enough. She hears that in some states up to 50 percent of deaths from COVID-19 are people who reside in [long-term-care facilities](#).

Who Are Direct Care Workers?

Nancy's PCAs are one example of direct care workers — people who assist older adults and others with disabilities with daily tasks and long-term-care activities. Half of PCAs work in home-based settings. There are [4.5 million direct care workers](#) in the United States. They are overwhelmingly women (86%), most are people of color (59%), and about a quarter are immigrants. About 18 percent live in poverty and another 44 percent have low incomes. More than half (53%) rely on some form of public assistance; a quarter have Medicaid (26%) or use supplemental nutrition (SNAP) benefits (24%). About one in five lack health insurance. More than half are middle-aged or older (30% over age 55), placing them at higher risk for infection with COVID-19. They are unlikely to have [sick leave](#) if they become ill. Given the aging American population, the direct care workforce is projected to be the fastest-growing segment in the U.S. labor market in the next decade.

Who Needs Direct Care Workers?

[Twenty million](#) older adults and people with disability need assistance with activities of daily living (e.g., bathing, dressing) and routine daily tasks (e.g., cooking, shopping). The overwhelming majority (17 million) live in the community, rather than in facilities. Most receive assistance from unpaid caregivers — family or friends — but many require support from paid direct care workers. Someone turning 65 today has a 70 percent chance of needing long-term care; 20 percent over 65 will need this support for [five years or longer](#). More than [4 million](#) people receiving personal care in the community have low

incomes and qualify for home- and community-based services through Medicaid. [Recipients of home- and community-based services](#) are disproportionately older adults, people of color, have chronic illnesses, and are at high risk for serious illness and death if they contract COVID-19. If their in-home care system falls apart, they could easily end up with worsening health, [hospitalized, or in a nursing home](#).

The full article can be found [here](#).

Education Opportunities

CMHA Takes Trainings Virtual!



The COVID-19 pandemic continues - but so does the need for trainings. **CMHA will NOT be holding any in-person trainings or conferences through January 1, 2021 – we're moving to a virtual setting when possible.** The virtual training format will provide an excellent opportunity to keep current with best practices (clinical, administrative, governance) and allow attendees to obtain continued education credits. Watch for this graphic on future training notices so you can easily identify virtual trainings.

Please check our website [by clicking here](#) for updated information!

VIRTUAL Ethics for Social Work, Substance Use Disorder, Recipient Rights and Psychologist Professionals Trainings – Registration Open

Community Mental Health Association of Michigan is pleased to offer VIRTUAL Ethics for Social Work, Substance Use Disorder, Recipient Rights and Psychologist Professionals Trainings presented by Tom Moore, LMSW, LLP, CCS, Owner and Principal, Two Moons, LLC online through Zoom. There are 6 CE credits available for this training. This training fulfills the Michigan Social Work Licensing Board's requirement for licensure renewal for ethics. This training fulfills the MCBAP approved treatment ethics code education – specific.

Dates:

- January 11, 2021 ([Register Here](#)) (47 spots left)
- February 22, 2021 ([Register Here](#)) (63 spots left)
- March 22, 2021 ([Register Here](#)) (65 spots left)
- April 5, 2021 ([Register Here](#)) (65 spots left)
- April 26, 2021 ([Register Here](#)) (66 spots left)

Agenda:

Log into Zoom: 8:15am
Education: 8:30am – 11:30am
Lunch Break: 11:30am – 1:00pm
Education: 1:00pm – 4:00pm

Training Fees: \$120 CMHA Members \$143 Non-Members

VIRTUAL Pain Management and Mindfulness Trainings – Registration Open

Community Mental Health Association of Michigan is pleased to offer Pain Management Trainings presented by Tom Moore, LMSW, LLP, CCS, Owner and Principal, Two Moons, LLC online through Zoom.

This course qualifies for 2 CEUs and fulfills the Michigan Social Work Licensing Board's requirement for licensure renewal for pain management.

Dates:

- January 21, 2021 ([Register Here](#)) (53 spots left)
- March 8, 2021 ([Register Here](#)) (64 spots left)

Agenda:

Log into Zoom: 8:45 am
Education: 9:00am – 11:00am

Training Fees: \$43 CMHA Members \$51 Non-Members

Education & Training Resources from Great Lakes MHTTC



MHTTC

Mental Health Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

CMHA, in partnership with the SAMHSA-funded Great Lakes Mental Health Technology Transfer Center (Great Lakes MHTTC), CMHA, provides educational materials and training on a range of evidence based and promising mental health prevention and treatment practices. This section of the Weekly Update will regularly feature education, training, and technical assistance offerings from the Great Lakes MHTTC and its partner MHTTCs from across the country.

Catalog of MHTTC resources

The Great Lakes Mental Health Technology Transfer Center (MHTTC) makes available a large catalog of Great Lakes MHTTC products at its [Products and Resources](#) webpage.

This section of the MHTTC website hosts all Great Lakes MHTTC products along with products developed with their partner TTCs within the region and across the country.

News from Our Preferred Corporate Partners

Abilita: Are you ready for E-911?

By the end of this year, all organizations with greater than 20,000 square feet of workspace and/or multiple buildings or floors must comply. If someone from your organization called 911 now, would their location in the building get sent to the 911 center? Are you in compliance with the new E911 law?

Check out www.abilita.com/michigan-e911 to learn more and find out what you need to do to prepare!

myStrength: new digital behavioral health resources empower consumers to move beyond trauma

Trauma is incredibly common. Approximately 90% of U.S. adults have experienced at least one traumatic event in their lives, which can adversely affect emotional well-being and interfere with relationships, work and overall quality of life. Expanding on our diverse whole-person resources, Livongo for Behavioral Health by myStrength is pleased to announce new, digital tools to help individuals move beyond trauma. [Click here to request a demo.](#)

CMH Association's Officers & Staff Contact Info

CMHA Officers Contact Information:

The Officers of the CMH Association of Michigan recently proposed, in their commitment to fostering dialogue among the members of the Association with the Association's leaders, that their contact information be shared with the Association membership. While this dialogue will not take the place of the regular dialogue and decision making that occurs during the meetings of the Association's Board of Directors, Steering Committee, Provider Alliance, Association Committees, Directors Forum, PIHP CEOs meeting, nor any of the great number of Association-sponsored and supported dialogue venues, the Officers want to ensure that the members of the Association can reach them to discuss issues of interest to the Association's members. The contact information for the officers is provided below:

President: Joe Stone Stonejoe09@gmail.com; (989) 390-2284
First Vice President: Carl Rice Jr; cricejr@outlook.com; (517) 745-2124
Second Vice President: Craig Reiter; gullivercraig@gmail.com; (906) 283-3451
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Treasurer: Randy Kamps; randyk@4iam.com; (231)392-6670
Immediate Past President: Bill Davie; bill49866@gmail.com; (906) 226-4063



CMHA Staff Contact Information:

CMH Association staff can be contacted at (517) 374-6848 and via the e-mail addresses below:

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