Message from the Chair...
Eugenia Kirkland, LSW, MSSA, CDCA

In July, my term as Chair of the Alcohol, Drug Addiction and Mental Health Services (ADAMHS) Board of Cuyahoga County is coming to an end. It has been a pleasure and an honor to serve as Board Chair for the past four years. And, though I may no longer be the Chair, I will remain dedicated to the Board because I believe in its purpose, its mission and its vision to support the people in our community who need us the most.

As I was thinking about how to wrap up my tenure as Chair, I couldn’t help but be inspired by the late Maya Angelou who said, “We delight in the beauty of the butterfly, but rarely admit the changes it has gone through to achieve that beauty.” It is true that we often miss the subtleties of transformation. I have had the distinct honor of leading the Board through one of its largest eras of transformation and for that I am grateful.

Transformation is a process of many features changing over time. Some of those changes are drastic and sudden, and others slowly emerge over years. We saw that this past year in the transformation of leadership from William M. Denihan’s retirement and the ushering in of Valeria A. Harper as the Chief Executive Officer. And, again, when Ms. Harper passed away and Scott S. Osiecki proved to be a true leader in the Board’s time of need. I am so proud to have served with all three of these incredible leaders.

Thanks to Medicaid Expansion and Behavioral Healthcare Redesign, the Board has transformed from the center of treatment services to the coordinator of recovery support services. Through this transition, we have remained focused on providing funding for the most needed services for individuals in Cuyahoga County that are living with mental illness and substance use disorders. We have protected the investments of the Board by monitoring and tracking progress and success of these programs. In light of the opioid epidemic, we have heightened our prevention and education efforts, worked diligently to end stigma and invested in innovative and harm reduction programs.

Change isn’t always easy, but it is always happening. On behalf of all of us on the ADAMHS Board, we thank you for your continued partnership, support during these incredible transformations and work to turn our behavioral healthcare system into one of the best in the nation. As Chair of the ADAMHS Board of Cuyahoga County I can tell you that we have become stronger because of our collaboration. Let’s continue to grow and change together while we support all members of our community and their families who need us most.
It has been a year filled with change, some expected and some unexpected. Becoming Chief Executive Officer of the Alcohol, Drug Addiction and Mental Health Services (ADAMHS) Board of Cuyahoga County is a major change that has come with an incredible responsibility to serve as diligently as former Chief Executive Officer, William M. Denihan and as compassionately as the late Valeria A. Harper. Mr. Denihan and Ms. Harper were not only my colleagues, but also my friends. I am honored that the Board unanimously chose me to serve as the new Chief Executive Officer. I have been with the Board for 24 years and have held several positions of increased responsibility. I am certainly no stranger to our clients, families, providers, stakeholders and our system, which has undergone and weathered many transformations over the years.

Since accepting the great responsibility of Chief Executive Officer on March 1, 2018, I have committed to overseeing a priority setting process that is transparent and involves the input of our Board members, staff, providers, clients, families, partner systems and other stakeholders. I am excited to use the final priorities to assist the Board in making funding and policy decisions that will transform our system into a true Recovery Oriented System of Care.

Together, we have walked through the changing behavioral healthcare landscape that included Medicaid Expansion, tackling behavioral health redesign and finally implementing the Shared Healthcare and Recovery Enterprise System (SHARES) billing and data software program. In agreement with the Board, I have chosen to move some of our General Board meetings to locations in the community, giving Board members a chance to interact with the community and our providers. I have changed our Table of Organization to ensure that clinical needs, treatment and recovery supports are aligned to achieve seamless integration and continuation of services for all of our clients; and, that our education and training department will provide workforce development for all professionals in our system, as well as for our community partners. Throughout these changing times, one thing has remained the same - and will remain the same - our commitment to the clients and families we serve in Cuyahoga County.

Cuyahoga County is still in the height of the opioid crisis. However, we have come together as a community and are putting people first. Efforts continue to include harm reduction and access to detox, treatment and recovery support services. We will continue to help individuals who struggle with addiction and do our best to connect people to the services and supports needed for sustainable recovery. The ADAMHS Board will be there to support families and friends of individuals we have lost during this crisis and for all the people who are living in recovery. Together, we will fight stigma, advocate for effective programming, provide critical recovery supports and remain focused on the fact that treatment works and people do recover.

In addition to our efforts to address the opioid crisis, we will remain diligent in caring for individuals living with mental illness and working to prevent suicide in Cuyahoga County. Suicide is the second leading cause of death in Ohio and we must remain focused on educating the community about the risk factors and warning signs of depression and suicidal ideation. Over the past year, the ADAMHS Board has become the lead agency in the Cuyahoga County Suicide Prevention Coalition and increased its focus on prevention and education in the community for people of all ages.

The elephants on the cover of this report are significant. In many cultures, the elephant is revered as a creature of community, wisdom, compassion and strength. My vision is to work collectively to create a system of care that is guided by wisdom and in which the decisions made are supported with data while keeping clients best interests in the forefront. A system that supports collaborative community efforts, partnerships with managed care organizations, and compassion and hope for all people living with mental illness and/or addictions. Finally, a system that is appropriately funded to meet treatment and recovery needs.

We know that we cannot achieve this alone. We believe that our Board of Directors, staff, clients, families, faith-based leaders, legislators, providers and strategic partnerships with community non-profits and local businesses will help us transition to an organization that is leading a true recovery oriented system of care.
Accomplishments & Challenges

2017 Funding:
Our Calendar Year 2017 Budget totaled $73,138,737, which was $5,263,902 more than 2016. The budget included $39,363,659 in county health and human services levy funding which remained stable thanks to an agreement made during 2016 to maintain the funding for two years to ensure proper levels of service in addressing the continuing opioid crisis. The Board is still in the center of the opioid epidemic, and gratefully through the leadership of the entire Cuyahoga County Council, led by President Dan Brady, and County Executive Armond Budish, we maintained our funding level for CY17 of $39.3 million. We are extremely grateful to County Council President Dan Brady, Dave Greenspan, former Chair of the Finance and Budgeting Committee, all members of County Council and Mr. Budish for reaching this agreement so that the ADAMHS Board could continue our vital work.

The Board’s budget also included $5,508,677 in State funding, which was $1.9 million less than in Calendar Year 2016 and a decrease of just over $3 million from CY 15/16; $20,632,279 in Federal funding, which was $3.4 million more than in 2016; $3,825,833 in grant and other funding which decreased by just over $2 million from last year. In addition, the Board had to use carry over funding in the amount of $4,005,264 dollars to meet the needs of the community in response to the opioid crisis during 2017.

2017 Grant Funding:

SAMHSA AOT Project: The SAMHSA Assisted Outpatient Treatment (AOT) Project began enrolling clients in February 2017. The project workgroup met in March 2017 to finalize details regarding the flow of referrals, from identification to commitment, engagement and enrollment into treatment. A luncheon was held with Judge Gallagher and attorneys who represent the Board at commitment hearings. All agreed to expedite the initial and full hearing processes as much as possible to ensure appropriate clients are referred. At the end of the calendar year, 43 clients were enrolled with Frontline. This represented more than 10 times the number of outpatient commitments the Court and the Board had completed in any prior year. This shows that many clients who had fallen through the cracks in our system have been able to access the intensive services they need.

A site visit was conducted by representatives of SAMHSA’s GAINS Center. Meetings were held with Board staff, Judge Gallagher and Magistrate McCafferty and Frontline and CWRU staff. In May 2017, cross-site evaluators from the Research Triangle Institute in North Carolina spent two days in Cleveland interviewing the AOT team. Late in May, team leaders attended the AOT grantee meeting in Alexandria, VA.

In June 2017, the team held a meeting for area Medical Directors, chaired by Dr. Farid Sabet, the Board’s Chief Clinical Officer Consultant. Several area hospitals were represented, and the AOT law, court and commitment processes were discussed. The workgroup met to discuss project challenges and opportunities, following information shared at the grantee meeting.

OhioMHAS CJBH: In May 2017, the Board submitted a proposal to the Ohio Department of Mental Health and Addiction Services (OhioMHAS) for the Criminal Justice/Behavioral Health (CJBH) Project, which is designed to reduce the large number of people with mental illnesses and/or addiction disorders who currently cycle through the local criminal justice system. This proposal, which was awarded $88,333 for the first year of the grant in September 2017, aims to strengthen the capacity of professionals involved in pre-release planning; and pilot the use of Peer Supporters to ex-offenders as a post-release recovery support. By sharing key concepts and approaches, along with specific vocabularies, mandates and limits across systems, a collaborative approach to reentry planning is occurring. The Board proposes to provide training, on an in-kind basis, for behavioral health providers and criminal justice staff in 2018.

The Board also proposes to contract with Recovery Resources. Post-release services will be enhanced in a pilot pairing OHOiMHAS Certified Peer Supporters with individuals engaged with the reentry program.

ODYS/OHIOHAS BHJJ: In June 2017, the Board applied to renew its long-standing Behavioral Health/ juvenile Justice (BHJJ) project with the Ohio Department of Youth Services (ODYS) and OhioMHAS. Specialized Juvenile Court services, Care Coordination, Community-Based High-Fidelity Wraparound and a continuum of evidence-based treatment modalities are the primary elements of BHJJ. This includes positioning the BHJJ project within the larger context of the Juvenile Court’s Mental Health Court, which includes three phases of gradually lessened levels of supervision. The initiative will continue to serve juvenile justice involved youth (boys and girls ages 12 to 18), who are residents of Cuyahoga County, adjudicated delinquent for misdemeanors or felonies, screened and diagnosed with Mental Health/Serious Emotional Disturbance, Substance Abuse, or Co-occurring Disorders, and have a history of multi-system involvement. The Board was awarded $550,000 per year for two years.

2017 Budget:
The Board voted to enter into a two-year contract with most of our provider agencies for CY16/17. This decision offered our providers funding stability that they have requested in previous budgets.

CURES Funding

The ADAMHS Board received over $2.1 million from the Federal 21st Century CURES Act. We used this funding to provide Peer Recovery Support, Medication Assisted Treatment, Recovery Housing, Project DAWN and assessments.

2017-2020 Strategic Plan:
The ADAMHS Board of Cuyahoga County launched its strategic planning process to develop a 3-year plan that will position the Board to ensure a continuum of care and a system that is focused on recovery and hosted a two-day summit on December 8-9, 2016. Thanks to more than 130 dedicated and passionate community stakeholders who participated and shared experiences and expertise that were instrumental in developing the strategic plan that meets the needs of the individuals and families we serve. The plan was vetted and approved by the ADAMHS Board during its April 2017 meeting cycle.
Scott S. Osiecki, CEO, has begun a review of the Strategic Plan and a transparent priority setting process that will assist in making CY19 funding and policy decisions.

**Opioid Crisis Declared a National Public Health Emergency**

Fentanyl and Carfentanil have continued to seep into our community replacing heroin and making their way into other drugs such as cocaine and methamphetamine. Fatal drug overdoses in Cuyahoga County were staggering and reached 822 in 2017.

President Trump declared the Opioid Epidemic a Public Health Emergency in 2017. Positives outcomes of this declaration include: Eliminating barriers to treatment, increasing prevention programs and awareness campaigns for public education, and, a promise of additional federal funding to help combat the crisis. There are still some areas of concern, which include details of the plan, including how and when the changes will come to prevention, treatment and recovery programs; and, when and how the increased funds will be distributed.

**ADAMHS Board Led Partnership to Tackle Opioid Epidemic**

The ADAMHS Board was able to increase the number of detox and treatment beds in Cuyahoga County to 444. This was made possible through a partnership with the City of Cleveland and Cuyahoga County where each entity provided a grant of $250,000, that was combined with the Board’s $1 million contribution.

All-in-all, the ADAMHS Board of Cuyahoga County funded nearly $17 million in addiction treatment and recovery services for children, adults and seniors.

In 2017, we provided $100,000 to Project DAWN to ensure that lifesaving Naloxone kits were distributed far and wide in our community. By the end of 2017, more than 9,000 kits had been distributed since the program began in 2013 and thousands of lives have been saved.

We will continue to work with our community and government partners to find an end to this devastating epidemic through continued and increased prevention, treatment and recovery support services, including peer support, recovery services and recovery housing.

**Quick Response Protocol:**

A Quick Response Protocol and Pilot Program for the Cleveland Division of Police Narcotics Unit in partnership with the Cuyahoga County Sheriff’s Department was implemented in the 1st and 2nd Districts. The program allowed officers a chance to interact with individuals revived from a heroin/fentanyl overdose with Naloxone and help people connect with detox and treatment. Stella Maris, Salvation Army Harbor Light and St. Vincent Rosary Hall were our partners in this program.

Similar programs were created in Lakewood (Project SOAR) and through the MetroHealth Emergency Department (AscentED). However, those models includes contact with Peer Support recovery specialists because individuals with lived experience are better able to relate to the individual in crisis. Funding for both of these programs came from the CURES Act.

**Addiction Advocacy Recovery Meetings:**

Addiction Advocacy Recovery meetings continued in 2017 and will resume in the summer of 2018. The goal is to unite the powerful voices of individuals and advocacy groups to create change through action. Family members who have lost a loved one to addiction, individuals with a loved one struggling with addiction, recovery advocates, family support groups and professionals work together to brainstorm ideas to prevent the tragedy of death by overdose from happening to another family.

**Heroin/Opioid and Mental Health Presentations:**

The Board continues to co-sponsor, organize and speak at community events and forums to raise awareness of the heroin epidemic and its devastating effects on the community. Many of our Board staff have also participated in public education presentations about mental health at schools, senior centers, public events and libraries.

Some of the larger opioid based presentations include, the late Ms. Harper’s presentations on a panel titled, Heroin, Fentanyl, Carfentanil: The Triple Threat on our Door Step, held at St. Joseph’s Academy, as well as Speaker Rosenberger’s Task Force on HOPES (Heroin, Opioids, Prevention, Education & Safety) Panel at MetroHealth. Mr. Osiecki also presented at the Managing Opioid Turbulence event hosted by Representative Barnes at Ursuline College and a Public Safety Forum with Ms. Harper in Parma, Ohio.

ADAMHS Board staff also presented two workshops at the Ohio Association of County Behavioral Health Authorities (OACBHA) Opiate Conference in June 2017. Recovery stories were also shared with the community at the Health Centers Week Conference and our own Jenita Simmons shared a story of recovery at the OACBHA Recovery Conference in September 2017.

**SHARES:**

We continue to collaborate with the ADAMHS Boards of Franklin and Hamilton Counties on the implementation of the software system known as the Shared Healthcare and Recovery Enterprise System (SHARES). SHARES supports management of client enrollment, claims processing, service authorizations, outcomes and utilization review, and payment processes. SHARES became functional in February 2018 and by July 1, 2018, all Provider Agencies will be fully trained and all Board processes will be conducted in the SHARES system.

**DOJ Involvement:**

The ADAMHS Board continued its leadership and involvement in the Mental Health Response Advisory Committee (MHRAC) that was established as part of the Settlement Agreement between the City of Cleveland and the U.S. Department of Justice (DOJ), which was developed to address concerns about the Cleveland Division of Police (CDP) use-of-force policies and practices. The City of Cleveland selected the ADAMHS Board to establish the MHRAC and assist with the Police Crisis Intervention Program.

During Calendar Year 2017, the Chief Executive Officers of the ADAMHS Board - William M. Denihan (retired) and Valeria A. Harper, MA, CDCA, (deceased) - served as the Co-chairs of the MHRAC along with Ed Eckart Jr., Assistant Director of the Cleveland Department of Public Safety, and Captain James Purcell, CIT Coordinator, Cleveland Division of Police. Scott S. Osiecki now serves as one of the MHRAC Chairs.

Although not required under the Settlement Agreement, the MHRAC continued monitoring the CIT Co-responder Team Pilot

(Continued on page 13)
Scott Osiecki, then Chief of External Affairs (l) and William M. Denihan, Former CEO, with the 2017 Client Art Show/Contest award recipients (l-r) Sam S., Melanie D., and Tracy R.

The winning piece, “Powerless” was created by Tracy R., and is featured below.

(l-r) William M. Denihan, Former CEO of the ADAMHS Board; Stephanie Boido, President of the Cleveland Council of Black Nurses and the late, Valeria A. Harper, former CEO, at the Council of Black Nurses Conference.

William M. Denihan, former CEO of the ADAMHS Board of Cuyahoga County leading a discussion during the Addiction Recovery Advocacy Meeting held on July 11, 2017, that was attended by more than 150 people.

The late, Valeria A. Harper and Council President Dan Brady prepare for the press conference on October 27, 2017, announcing the County’s lawsuit against drug companies for their role in the opioid epidemic.

Cuyahoga County’s Know the RX campaign and its pill bottle coffin were on display at the press conference against the drug companies and many other opioid awareness events throughout the year. The ADAMHS Board was a partner in the campaign kick-off.

Board Staff (front, l-r) Jenita Simmons, Danei Chavez, Scott Osiecki, Maggie Spellman, Valeria A. Harper and Linda Torbert, and former intern Paul Fitzpatrick (Standing in truck bed) prepared to ‘stuff the bus’ with school supplies for Cuyahoga County Young people.
The late Valeria A. Harper, CDCA, CEO, ADAMHS Board (center) with (l-r) A. J. Groeber, Executive Director, State Medical Board of Ohio; Thomas P. Gilson, MD, Medical Examiner of Cuyahoga County; Mark Hurst, MD, Medical Director, Ohio Department of Mental Health & Addiction Services; Clint Koenig, MD, Medical Director, Ohio Department of Health; Merle R. Gordon, Director, Cleveland Department of Public Health and Farid Sabet, MD, Chief Clinical Officer Consultant, ADAMHS Board, at the Take Charge Ohio Kick-off.

The Take Charge Ohio Campaign was developed to help opioid prescribers educate their patients and the public about the dangers of misusing prescription pain medication and how to safely manage pain.

The ADAMHS Board of Cuyahoga County unveiled its “Treatment Works, People Recover” mural at 1981 East 55th Street on September 29, 2017, to visually promote prevention and education about the dangers of heroin and other drugs, reduce the stigma of seeking treatment, start public discussion and celebrate recovery through public art.

Some of the Distinguished Gentlemen of Spoken Word - with Director Honey Bell Bey - who kicked-off the ADAMHS Board Roads to Recovery ’17 Conference with an inspiring performance before a capacity-filled ballroom at the Marriott Cleveland Airport Hotel.

The late Valeria A. Harper, CDCA, CEO, ADAMHS Board (center) with (l-r) A. J. Groeber, Executive Director, State Medical Board of Ohio; Thomas P. Gilson, MD, Medical Examiner of Cuyahoga County; Mark Hurst, MD, Medical Director, Ohio Department of Mental Health & Addiction Services; Clint Koenig, MD, Medical Director, Ohio Department of Health; Merle R. Gordon, Director, Cleveland Department of Public Health and Farid Sabet, MD, Chief Clinical Officer Consultant, ADAMHS Board, at the Take Charge Ohio Kick-off.

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Calendar Year 2017 ADAMHS Board Financial Summary

Note: All financial and program data included in this report reflects a 12-month time period: January 1, 2017 - December 31, 2017.

Revenue:

- County Health & Human Services Levy: $39,363,659
- Federal Funds: $20,632,279
- State Funds: $5,311,702
- Grants/Other: $3,825,833
- Carry Over Funding: $4,005,264

TOTAL BOARD REVENUE: $73,138,737

Expenses:

Disbursements to Provider Agencies: $67,545,050

- Medicaid: $4,294,188
- Non-Medicaid Fee for Service: $63,250,862

Board Administrative Budget*: $5,593,687

TOTAL BOARD EXPENDITURES: $73,138,737

*Administrative Budget was 7.65% of total ADAMHS budget, which decreased from 8.2% in 2016.
**Calendar Year 2017 ADAMHS Board Expenses by Service Category**

$23.3 Million Addiction Expenses by Service Category

- Detoxification: $2,193,000 (10%)
- Medical Treatment: $1,260,000 (5%)
- Intensive Outpatient: $732,000 (3%)
- Residential Treatment: $8,530,000 (37%)
- Employment: $331,000 (1%)

**$49.9 Million Mental Health Expenses by Service Category**

- Treatment: $8,296,000 (17%)
- Crisis Intervention: $7,608,000 (15%)
- CPST: $3,003,000 (6%)
- Board Admin.: $3,813,000 (8%)
- Recovery/Peer Support: $3,156,000 (6%)
- Employment: $2,384,000 (5%)
- EC MH in Schools: $2,554,000 (5%)
- Forensic/Justice Related: $1,800,000 (4%)
- Evaluation/Education: $1,153,000 (2%)
- Residential: $16,137,000 (32%)
### Calendar Year 2017 Demographics: Treatment & Recovery Services

#### Individuals Receiving Addiction Services

#### Individuals Receiving Mental Health Services

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<td>2%</td>
</tr>
<tr>
<td>Gates Mills</td>
<td>0</td>
<td>3</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>0%</td>
</tr>
<tr>
<td>Highland Heights</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>6</td>
<td>1</td>
<td>4</td>
<td>0%</td>
</tr>
<tr>
<td>Highland Hills</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>4</td>
<td>0</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Independence</td>
<td>0</td>
<td>4</td>
<td>10</td>
<td>4</td>
<td>0</td>
<td>10</td>
<td>0%</td>
</tr>
<tr>
<td>Lakewood</td>
<td>4</td>
<td>41</td>
<td>171</td>
<td>235</td>
<td>3</td>
<td>178</td>
<td>6%</td>
</tr>
<tr>
<td>Lyndhurst</td>
<td>0</td>
<td>2</td>
<td>6</td>
<td>25</td>
<td>0</td>
<td>6</td>
<td>0%</td>
</tr>
<tr>
<td>Maple Heights</td>
<td>2</td>
<td>41</td>
<td>51</td>
<td>84</td>
<td>2</td>
<td>55</td>
<td>2%</td>
</tr>
<tr>
<td>Mayfield</td>
<td>0</td>
<td>9</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Mayfield Heights</td>
<td>0</td>
<td>0</td>
<td>15</td>
<td>41</td>
<td>0</td>
<td>15</td>
<td>0%</td>
</tr>
<tr>
<td>Middleburg Heights</td>
<td>0</td>
<td>1</td>
<td>9</td>
<td>5</td>
<td>0</td>
<td>9</td>
<td>0%</td>
</tr>
<tr>
<td>Moreland Hills</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0%</td>
</tr>
</tbody>
</table>

*SCombined Total Served includes people that were dually diagnosed and received both mental health and alcohol and other drug addiction treatment services. 212 people in Calendar Year 2017 received both types of services.

**Total Individuals Served represents the Combined Total Served less the number of people who received both mental health and alcohol and other drug addiction treatment services. 9,703 - 212 = 9,491 individuals."
Statistics regarding the number of people served only includes individuals who received services paid for with Non-Medicaid dollars.

The number of clients served in Calendar Year 2017 is lower than in previous years due to a variety of factors:

1. Due to the switching of service claiming from MACSIS to SHARES for Pilot Providers, some clients were not enrolled and/or claims not submitted so those clients were not counted.
2. Medicaid Expansion continued to allow more people to receive treatment services previously paid for by the ADAMHS Board.
3. Several of the providers had to implement new billing systems to comply with federal claims requirements, therefore this data may not include all clients served.
4. The ADAMHS Board is providing more costly long-term recovery support services, such as housing/residential care and recovery centers/peer support, which is not covered by Medicaid.
5. The numbers of clients served is generated from claims paid through the Multi-Agency Community Services Information System (MACSIS) billing system, and do not include individuals served through services paid for by grants to providers, such as crisis services, peer support, mental health in the schools, sober beds, adult care facilities and prevention programs. We know we are serving thousands of people through the grant funded programs. Now that the Board has transitioned to SHARES, we will have more complete numbers in CY18.
### Individuals Receiving Substance Use Services

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Client Count</th>
<th>Percent of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asian/Pacific Islander</td>
<td>8</td>
<td>&gt;1%</td>
</tr>
<tr>
<td>Black/African American</td>
<td>1,065</td>
<td>33%</td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>231</td>
<td>7%</td>
</tr>
<tr>
<td>Multi-Racial</td>
<td>110</td>
<td>3%</td>
</tr>
<tr>
<td>Native American</td>
<td>6</td>
<td>&gt;1%</td>
</tr>
<tr>
<td>Unknown</td>
<td>116</td>
<td>4%</td>
</tr>
<tr>
<td>White</td>
<td>1,696</td>
<td>52%</td>
</tr>
<tr>
<td><strong>Grand Total</strong></td>
<td><strong>3,232</strong></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gender</th>
<th>Client Count</th>
<th>Percent of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>1,118</td>
<td>34%</td>
</tr>
<tr>
<td>Male</td>
<td>2,113</td>
<td>65%</td>
</tr>
<tr>
<td>Unknown</td>
<td>1</td>
<td>1%</td>
</tr>
<tr>
<td><strong>Grand Total</strong></td>
<td><strong>3,232</strong></td>
<td></td>
</tr>
</tbody>
</table>

#### Calendar Year 2017 Primary Substance Use Diagnoses of People Served

- **Cannabis Dependence**: 323 (10%)
- **Alcohol Dependence**: 725 (22%)
- **Cocaine Dependence**: 355 (11%)
- **Opioid Type Dependence**: 1510 (47%)
- **Alcohol Abuse**: 67 (2%)
- **Opioid Abuse**: 25 (1%)
- **Hallucinogen Dependence**: 42 (1%)
- **Other**: 128 (4%)
- **Cannabis Abuse**: 57 (2%)
- **Other**: 128 (4%)

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[Calendar Year 2017 Annual Report](#)
### Individuals Receiving Mental Health Services

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Client Count</th>
<th>Percent of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asian/Pacific Islander</td>
<td>26</td>
<td>&gt;1%</td>
</tr>
<tr>
<td>Black/African American</td>
<td>2,842</td>
<td>44%</td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>271</td>
<td>4%</td>
</tr>
<tr>
<td>Multi-Racial</td>
<td>398</td>
<td>6%</td>
</tr>
<tr>
<td>Native American</td>
<td>10</td>
<td>&gt;1%</td>
</tr>
<tr>
<td>Unknown</td>
<td>406</td>
<td>6%</td>
</tr>
<tr>
<td>White</td>
<td>2,518</td>
<td>39%</td>
</tr>
<tr>
<td><strong>Grand Total</strong></td>
<td><strong>6,471</strong></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gender</th>
<th>Client Count</th>
<th>Percent of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>2,892</td>
<td>45%</td>
</tr>
<tr>
<td>Male</td>
<td>3,579</td>
<td>55%</td>
</tr>
<tr>
<td><strong>Grand Total</strong></td>
<td><strong>6,471</strong></td>
<td></td>
</tr>
</tbody>
</table>

### Calendar Year 2017 Primary Mental Health Diagnosis of People Served

- **Major Depressive Disorder**: 1,157 (18%)
- **Bipolar Disorder**: 863 (13%)
- **Adjustment Disorder**: 513 (8%)
- **Attention Deficit Hyperactivity Disorder**: 224 (4%)
- **Missing Diagnosis**: 128 (2%)
- **Other**: 2,010 (31%)
- **Schizophrenia**: 1,576 (24%)
Program in Cleveland’s second district, with expansion to the first district. MHRAC members also provided an overview of the MHRAC’s interest and relation to the Co-responder Team during a meeting to kick-off the City of Cleveland’s Federal Grant Co-responder Team Site Visit on November 30, 2017.

New Crisis Intervention Team (CIT) policies developed for the Cleveland Division of Police (CDP) by the Policy Review Subcommittee were approved by the federal court in Cleveland in early 2017. The policies include the Crisis Intervention Team Program Policy, Crisis Intervention Team Response Policy and Crisis Intervention Team Definitions.

Faith-based:
The ADAMHS Board of Directors continued to support the Faith-based initiative, which aims to integrate faith into the overall provision of treatment services; provide prevention and early intervention services for youth and their families; and, provide awareness and understanding of mental illness and substance abuse to faith-based leaders and the institutions they serve. In 2017, the Board contracted with five providers: Trinity Outreach Ministries for Another Chance of Ohio, Inner City Life Fitness and FAITH Boot Camp; Inner Healing Ministries for Student Training Outreach Programs (STOP) Church Assistance Program; Life Recovery Ministries for Let’s Talk Mental Health and Mental Health First Aid; NAMI Greater Cleveland for Outreach and Awareness; and, Ohio GuideStone for extending spiritual care into the community.

Although each organization’s services/programs are unique, all are working to accomplish the Board’s Faith-Based Outreach Committee’s mission to recognize and advocate spirituality in the recovery process; to connect the spiritual perspective with other interventions and best practices; and to promote the concept that treatment works and people recover.

Children Services:
Children age birth to six continued to receive mental health services through ADAMHS Board funded early childhood mental health (ECMH) programs. The ADAMHS Board contracts with the following agencies for the provision of Early Childhood Mental Health (ECMH) services: Achievement Centers for Families, Applewood Centers, Beech Brook, Ohio Guidestone, and the Positive Education Program (PEP). Combined, these agencies served 657 children in 2017.

Peer Support:
The ADAMHS Board believes in the benefits of peer support and continued funding to enhance peer support services at various provider agencies and client operated service agencies. Ohio Mental Health and Addictions Services (OhioMHAS) hosts peer support training at the ADAMHS Board.

Roads to Recovery Conference ’17:
The ADAMHS Board of Cuyahoga County held its Roads to Recovery Conference ’17: Heading in the Right Direction to Attain Mental Health and Addiction Recovery on October 23, 2017.
The conference opened with an inspiring performance from the Distinguished Gentlemen of Spoken Word. The excerpt from the play, *How to be a Respectable Junkie*, featured during the plenary session, was a gut-wrenching portrayal of living with a heroin addiction and provided a hopeful message of recovery.

More than 360 individuals participated in this biannual conference, which the ADAMHS Board has been hosting since 2005. Attendees represented mental health and addiction treatment, recovery and prevention providers, social workers, counselors, nurses, psychologists, students and people in recovery and/or living with mental illness and/or addictions, as well as family members and friends.

**Issue 9:**
Thanks to the overwhelming support of the community mental health and addiction treatment and recovery services system, Cuyahoga County voters passed Issue 9, the Cuyahoga County’s Health and Human Services levy, with more than 70% of votes in support of the two-year renewal. Issue 9 generates $104 million a year to help support services, throughout the county, that our most vulnerable residents—children, seniors, and individuals faced with a range of crisis situations—need and depend on.

Phone banks were organized by ADAMHS Board staff both inhouse and through provider agencies. Central phone banks were held Monday through Thursday at the ADAMHS Board offices from April 9 through May 3, 2018. Volunteers for the Central Phone Bank were provided by Cuyahoga County and community agencies, as well as individual volunteers/citizens. Thank you to everyone who volunteered with the phone banks, yard sign making, distributing yard signs, working the polls and/or attending Issue 9 events!

**Training Institute:**
The Board’s Training Institute offered 43 training events in 2017. Of the 43, 19 were offered for free to the public and ten were coordinated for outside entities. We also provided 6,040 hours of continuing education credits.

**First Responder Appreciation Week, Bringing Help, Bringing Hope:**
*Bringing Help, Bringing Hope* was a statewide first responder appreciation week celebrating individuals working on the frontlines of the opioid crisis in Cuyahoga County. The ADAMHS Board highlighted the work of the Cleveland Police, Fire and EMS as well as Dr. Papp from MetroHealth and Project DAWN, Peer Recovery Coaches from AscentED and detox providers at Stella Maris and Salvation Army Harbor Light Complex.

Board staff, members of the recovery community and their families delivered more than 600 thank you packages to police, fire and emergency departments across Cuyahoga County.

ADAMHS Board CEO, Scott Osiecki and Adult Behavioral Health Specialist, Derrick Kirklen helped wrap-up the celebration week in Lakewood at the *Heroin to Hope* event on April 17, 2018. The event highlighted the work of Project SOAR, a collaboration between Lakewood Emergency Department, Fire, Police, the Woodrow Project and the ADAMHS Board.

Derrick Kirklen served on a panel explaining the Board’s commitment to funding this pilot program. Scott Osiecki thanked the first responders in attendance, presented them with a resolution from Ohio Governor John Kasich, a certificate from Attorney General Mike DeWine and small tokens of appreciation from the ADAMHS Board of Cuyahoga County.

**Behavioral Health & Human Services Career Fair & Job Board:**
The ADAMHS Board hosted its third annual Behavioral Health and Human Services Career Fair on Thursday, May 18, 2017 at the Cleveland Airport Marriott. This was another successful career fair with 42 agencies and area non-profits participating. Nearly 300 job seekers brought resumes and explored the wide employment, internship and volunteer opportunities in the mental health, addiction, recovery treatment and human services fields. Many individuals left the event with scheduled job interviews.

A System Job Opportunities page was also launched on the ADAMHS Board website: adamhscc.org. This is a free service for individuals seeking employment with the providers and partners of our community mental health and addiction treatment and recovery network.

**New Board Members:**
Five new Board Members were sworn-in during the fall of 2017. Three of the new members were appointments from the Ohio Department of Mental Health and Addictions Services (OhioMHAS) and two were appointed by the Cuyahoga County Executive Armond Budish. We were pleased to welcome Katie Kern-Pilch, Rev. Max Rodas, Sharon Rosenbaum, Hugh Shannon and Mary Step to the Board!
About the Artwork:
The artwork featured in this annual report was created by clients who live in Cuyahoga County. The ADAMHS Board Art Program promotes the healing power of art for individuals in the recovery process from addiction and/or mental illness.

Cynthia R. created the cover artwork of the elephants. She was diagnosed with mental illness later in life and art became her expressive outlet for healing.

Other artwork is provided by Melodie E. (Blue Jay), Michelle M. (Tiger), De’borha (Butterfly), Future Directions (Owl) and JFSA (Landscape).

Thank you to our current ADAMHS Board Provider Network

Achievement Centers for Children
Applewood Centers, Inc.
Asian Services in Action, Inc.
Assured Payee Services
Beech Brook
Bellefaire Jewish Children's Bureau
Catholic Charities Corporation
The Centers for Families and Children
Circle Health Services (formerly the Free Clinic)
City of Cleveland - Department of Public Health
Cleveland Christian Home, Inc.
Cleveland Rape Crisis Center
Cleveland Treatment Center
Cleveland UMADAOP
Community Action Against Addiction
Community Assessment and Treatment Services, Inc.
Compeer Program at the Far West Center
Cuyahoga County Court of Common Pleas Corrections Planning Board
Cuyahoga County Court Psychiatric Clinic
Domestic Violence & Child Advocacy
East Cleveland Neighborhood Center
Eldercare Services Institute, LLC
Emerald Development and Economic Network, Inc.
Epilepsy Association
Far West Center
FrontLine Service
Front Steps Housing and Services
Future Directions
Golden Ciphers, Inc.
Hispanic UMADAOP
Hitchcock Center for Women
Hopewell
I'm in Transition Ministries
Inner Healing Ministries
Jewish Family Service Association of Cleveland
The Life Exchange Center
Life Recovery Ministries
Links Cleveland
The Living Miracles Peer Empowerment Center
Lutheran Metropolitan Ministry
Magnolia Clubhouse
May Dugan Center
MetroHealth System
Moore Counseling
Murtis Taylor Human Services System
NAMI Greater Cleveland
New Directions, Inc.
Northcoast Behavioral Healthcare
Northern Ohio Recovery Association
Northeast Ohio Recovery Residence Network
OhioGuidestone
Positive Education Program
Recovery Resources, Inc.
Rosary Hall at St. Vincent Medical Center
St. Vincent Charity Medical Center Psychiatric Emergency Room
The Salvation Army - Harbor Light
Scarborough House For Women
Shaker Heights Youth Center
Signature Health/Connections/ORCA House
Stella Maris, Inc.
Trinity Outreach Ministries Another Chance of Ohio
United Way’s First Call for Help
University Hospital Physician Services: PAL Program
University Settlement House
Visiting Nurse Association
Woodrow Project
Women's Recovery Center
YMCA Y-Haven of Greater Cleveland