

ALCOHOL, DRUG ADDICTION & MENTAL HEALTH SERVICES BOARD OF CUYAHOGA COUNTY

PLANNING & OVERSIGHT COMMITTEE MINUTES MARCH 11, 2020

Committee Members: Katie Kern-Pilch, ATR-BC, LPC-S, Committee Chair, Reginald C. Blue, Ph.D., Elsie Caraballo, J. Robert Fowler, Ph.D., Rev. Benjamin F. Gohlstin, Sr., Rev. Max M. Rodas, MA, Patricia James-Stewart, M.Ed., LSW

Absent: Gregory X. Boehm, M.D., Crystal Bryant, Esq., MS, LSW

Board Staff Present: Scott Osiecki, CEO, Carole Ballard, Christina Bohuslawsky-Brown, Erin DiVincenzo, Tami Fischer, Cheryl Fratalone, Madison Greenspan, Felicia Harrison, Esther Hazlett, Bill Hebble, Myra Henderson, Leslie Koblentz, Linda Lamp, Kelli Perk, Vicki Roemer, Allison Schaefer, Starlette Sizemore-Rice, LaVedia Smith, Maggie Tolbert, Beth Zietlow-DeJesus

1. Call to Order

Katie Kern-Pilch, Planning & Oversight Committee Chair, called the meeting to order at 4:00 p.m. Ms. Patricia James-Stewart read into the record the Committee Mission Statement: *"The Planning & Oversight Committee, in cooperation with all partners, advocates for and monitors programs, policies and practices which are continually improved to meet the needs of clients, their families and the community."*

2. Approval of Minutes

The Planning & Oversight Committee minutes of February 12, 2020 were approved as submitted.

3. COVID-19 Update

Ms. Kern-Pilch reported that the committee will add new business to the agenda regarding COVID-19 (Coronavirus) relative to planning on the state level, the county level, and for the ADAMHS Board. Mr. Scott Osiecki, Chief Executive Officer; Ms. Maggie Tolbert, Assistant Chief Clinical Officer; and Ms. Beth Zietlow-DeJesus, Director of External Affairs, would provide this update.

Ms. Kern-Pilch complimented Mr. Osiecki and Ms. Zietlow-DeJesus regarding comprehensive email correspondence containing information about COVID-19, which was forwarded in 3 different versions to Adult Care Facilities (ACFs), ADAMHS Board staff, and provider agencies.

Mr. Osiecki reported that the request to add this matter to the agenda is due to Governor DeWine's press conference regarding COVID-19, whereby decisions need to be made by Board members and staff.

Ms. Zietlow-DeJesus updated committee members regarding Governor DeWine's press conference. She reported that there is one new confirmed case of Coronavirus in Ohio, which is in Stark County; and is indicative of community spread. Community spread means that the individual did not have contact with anyone who traveled, had not traveled themselves and was not in contact with anyone with any other symptoms. Since there is community spread in Ohio, they are expecting additional confirmed cases of such. When there are two confirmed cases of community spread Coronavirus, it is indicative that at least 1% of the population already has the illness, which could be very mild and appear in the form of a common cold and test positive for the virus.

Ms. Zietlow-DeJesus reported that on Tuesday, March 10, 2020, Governor DeWine announced some recommendations for large gatherings. In the next 24 to 36 hours these recommendations will be state mandated through an executive order. As such, any large gatherings will need to abide and cancel. She reported that as far as testing goes, the test kits will only be utilized on high risk individuals or individuals with severe symptoms. When individuals need to be tested, they should call ahead to prepare first responders for their arrival.

Ms. Zietlow-DeJesus updated committee members on the various activities that have been canceled. She indicated that many of the Board's sponsored events, including the following: the Cleveland International Film Festival (CIFF), the Domestic Violence and Child Advocacy Center's lunch, the conference on racial disparity (hosted in collaboration with Case Western

Reserve University), and several other events. Additionally, a decision was made regarding a need to cancel any events for the next 30 days, including the Board's Training Institute and Coalition meetings. The Board will also be requesting that some meetings be held via conference call.

Ms. Zietlow-DeJesus noted that an executive order regarding Board meetings has not been reported yet; however, they have requested a temporary order to allow Board members to tele vote and have not received a response. As a result, Board members will still need to gather in person to vote and until a temporary executive order is established, livestreaming Board meetings on Facebook could be a solution.

Mr. Osiecki indicated that the Board's March General Meeting, which is scheduled at FrontLine Service, be postponed in a community setting, however, transpire at the Board's administrative office via Facebook live. Rev. Gohlstin concurred and requested that an email be forwarded to Board members as such. Ms. Zietlow-DeJesus reported that due to the lack of an executive order regarding public meetings, the language in the correspondence should be approved by the Board's Risk Manager to include a statement regarding the Board recommendation that the public not attend. Rev. Gohlstin noted that this does not stop the Board from being diligent. Ms. Zietlow-DeJesus indicated that she will draft email correspondence to indicate the Board's stance relative to this matter.

Mr. Osiecki indicated that a recommendation was had for the Board to purchase sanitizing wipes for the ACFs, Sober Living Facilities and Residential Care Facilities (RCFs). As a result, Ms. Zietlow-DeJesus contacted Sysco to inquire about becoming a vender. She also forwarded a list of Ohio Department of Health approved items and once reviewed by Sysco; a quote will be obtained. Due to Mr. Osiecki's scheduled leave time during which time a quote is obtained, discussion will ensue with Rev. Gohlstin for approval to purchase needed supplies for distribution.

Ms. Maggie Tolbert, Assistant Chief Clinical Officer, reported that staff have been looking at critical areas of need and are prioritizing their focus on 24/7 housing, which include ACFs, RCFs and sober living facilities. Other areas of focus include the need to maintain crisis services and peer support services. Board staff have reached out to the Ohio Association of County Behavioral Health Authorities (OACBHA) as well as scheduling a conference call to discuss the need for these supplies. Rev. Gohlstin reported that he is open to suggestions to ensure the Board is being proactive rather than reactive.

Ms. Kern-Pilch acknowledged Ray Gonzales and requested he speak about his perception of the residents in group homes as it relates to their safety. He stated that sometimes individuals listen to the news and make much more out of the situation, not to mention that individuals in the recovery process may have more of a challenge and need to be reassured that this is not a life or death matter. Mr. Osiecki reported that the Ohio Department of Mental Health and Addiction Services (OhioMHAS) indicated that the Board should communicate with ACFs to request residents to maintain social distancing and wash one's hands frequently with soap and water or alcohol-based hand rub for 20 seconds.

Ms. Tolbert reported that staff have reached out to various provider agencies including Thrive Behavioral Health, FrontLine Service and St. Vincent Charity Medical Center, to ensure that adequate staff is available to respond when called upon. The residential facilities have also provided their staff with relevant information and have provided the Board with copies. Through these continued efforts, the Board is being very proactive with reducing individual anxiety levels.

Board Member Input

- Ms. Kern-Pilch referenced the need to have hand sanitizer available upon entrance into any room and commended staff for their communication efforts around COVID-19.

4. Presentations:

- **Hispanic UMADAOP (Urban Minority Alcoholism & Drug Abuse Outreach Program)**

Mr. Nelson Ramirez, Executive Director of Hispanic UMADAOP, distributed a handout and shared that he was apologetic as to not having placed this presentation on his schedule, but was reminded a few hours ago of the need to present. He also thanked Board members for the opportunity to present on Hispanic UMADAOP. Mr. Ramirez reported that he has been with the organization for 7 years and was initially hired as the Prevention Director, and over the last 3 ½ to 4 years has had the privilege and honor to serve as the Executive Director. He indicated that he was aware of Hispanic UMADAOP as early as

1990 when he was establishing a family violence program in Lorain County and contacted Hispanic UMADAOP for their expertise.

In 1979, Hispanic leadership developed the Hispanic Alcohol Program to address the alcohol abuse problem in the Cleveland Hispanic Community. Three years later, services were first delivered through the Cleveland Department of Health. In 1984, the Hispanic Alcohol Program was moved to Catholic Counseling Center to enable the staff to be at an agency more closely serving the Hispanic Community. In 1989, Miguel A. Prieto, a recovered substance abuser, incorporated the Hispanic Urban Minority Alcoholism and Drug Abuse Outreach Program (HUMADAOP) with the vision of establishing a male and female residential chemical dependency treatment center. While planning for the development of the treatment center, the alcohol and drug prevention and education services were integrated into the newly founded organization.

In 1991, Hispanic UMADAOP celebrated the opening of Casa ALMA (Alternative to Liberate our Minds from Addiction), the first Hispanic male treatment center in the State of Ohio. Within a few years, Hispanic UMADAOP opened Casa MARIA (Making abstinence Recovery and Integrity our Aim), female treatment center.

Mr. Ramirez reported that Hispanic UMADAOP has two divisions, prevention and treatment. He stated that most of the prevention services are provided in the schools, and if the schools are closed or have reduced schedules, Hispanic UMADAOP's ability to provide prevention services would be impacted. He noted that they are generally in elementary, middle and high schools. Currently Hispanic UMADAOP has two full time staff: one full time staff person and one newly hired staff person in training. An evidence-based program model called Lions Quest Social Skills and Lions Quest Adolescence is incorporated into the school system. Presently they are in 7 buildings and about 15 classrooms a week and at full capacity 22 classrooms a week with either a full year curriculum or a semester curriculum. From July to December 2019, over 540 youth were served by Hispanic UMADAOP's prevention strategy.

Mr. Ramirez reported that another aspect of Hispanic UMADAOP's prevention strategy encompasses their hope of creating a signature program in response to the youth risk behavioral survey. This survey identified that middle school and high school Latino females are the largest group of youth showing depressive symptoms in Cuyahoga County, specifically on the west side of Cleveland, and has been the trend for the last 3 years. In collaboration with Case Western Reserve University's Prevention Research Institute, Hispanic UMADAOP has been attempting to educate and inform the community about this situation. In order to be more proactive, Hispanic UMADAOP staff researched Substance Abuse and Mental Health Services Administration's (SAMHSA's) evidence-based models and were able to identify a model called La Mariposa.

The La Mariposa program is a gender responsive, culturally competent group program model for adolescent females from 12 to 18 years of age. The vision is to offer Latina females a 12-session group curriculum that provides support through the multiple challenges they typically face. The program is a "personal empowerment program" that can be used in intervention and prevention settings, as it teaches practical skills that can help intervene in cycles of self-doubt and negative self-talk, which many adolescent females experience. Since the inception of the La Mariposa program in 2018, Hispanic UMADAOP has served over 40 young females and as of December 2019, had 43 graduates. Mr. Ramirez reported that Say Yes Cleveland was very interested in this program and identified Hispanic UMADAOP as a service provider. This program has opened doors for their organization to render services at Max Hayes, in middle schools and at Hispanic UMADAOP's administrative office.

Mr. Ramirez referenced material that was reflected on the OhioMHAS demographics for Girls – Circle – La Mariposa, July – December 2019 that included 22 young female participants and highlighted that this figure did not include prior participants nor participants currently in the program. Overall, Hispanic UMADAOP is hoping to utilize this program to impact the present scenario in the near west side of Cleveland.

Mr. Ramirez also reported on Hispanic UMADAOP's treatment demographic data. He noted that these numbers reflect clients that received services at a particular level of care and did not include those who refused treatment recommendations (i.e., clients who completed residential and were recommended to transfer to Intensive Outpatient (IOP) but refused to continue with treatment). In 2019 they provided 187 individuals with residential services (115 males and 72 females) of which 61 were Hispanic (56 males and 5 females) and equates to 30% of their population. Hispanic UMADAOP also provided 38 individuals with IOP services (25 males and 13 females) of which 18 were Hispanic (17 males and 1 female).

Ms. Tolbert reported that Board staff met with Mr. Ramirez approximately three weeks ago to discuss concerns regarding Hispanic UMADAOP. During this meeting, staff requested Mr. Ramirez to present at the March Planning & Oversight Committee meeting.

Mr. Ramirez provided an update on accessing residential services at Hispanic UMADAOP. He indicated that individuals can either call and/or arrive at their administrative office to get scheduled for an intake assessment. When an intake assessment is had, the individual's level of care is determined. If the level of care calls for residential treatment, residential treatment is provided. If the level of care calls for detoxification, detoxification centers are contacted for appropriate placement with the expectation that upon completion, the individual be referred to Hispanic UMADAOP for residential services. Due to the lack of an information and referral staff person, individuals requesting Substance Use Disorder (SUD) services are referred to the most appropriate location.

Due to the lack of dedicated staff at Hispanic UMADAOP, Mr. Ramirez reported that when individuals in residential treatment need outpatient care in a monolingual Spanish format, they are typically referred to Catholic Charities. As a result, concerns were raised regarding Hispanic UMADAOP's mission statement relative to the individuals being served by the agency. Mr. Ramirez reported that if the individual's level of care is residential, Hispanic UMADAOP employs a Spanish speaking Counselor to hold group sessions.

Committee members questioned Mr. Ramirez regarding services provided by Hispanic UMADAOP and stated the importance of focusing on the Hispanic/Latino community. After a lengthy discussion regarding the concerns raised by committee members, Board staff was requested to continue discussion with Mr. Ramirez to resolve these issues. (A copy of the handout is attached to the original minutes stored in the Executive Unit.)

- **Traumatic Loss Response Team (TLRT)**

Ms. LaVedia Smith, Adult Clinical Review Specialist, introduced Ms. Eileen Zatta, Program Manager, FrontLine Service; Mr. Ali Pillow, Lieutenant, Cleveland Division of Police (CDP); and Ms. Grace Leon, LSW, Crisis Intervention Specialist. Ms. Zatta reported that when a sudden, traumatic loss occurs, pain, anger, shock, and grief are common reactions. The personal stress and managing of details may add to the trauma, leaving one to feel hopeless or overwhelmed. In 2008, FrontLine Service responded to the needs of individuals and families experiencing this type of loss through the creation of the TLRT. This team, which started with a Department of Justice Grant, is currently funded by the ADAMHS Board and is comprised of licensed professionals who focus specifically on helping individuals and families through a difficult time. FrontLine Service has partnered with the Cuyahoga County Witness/Victim Service Center and the CDP Homicide Unit, to make a wider array of services available. This partnership, known as the Traumatic Loss Response Collaborative, offers services that address the practical and emotional needs of individuals and families after a sudden, traumatic loss. Presently, they are looking to increase their capacity to expand to suicides, overdoses, and traumatic accidents.

Families and individuals impacted by a traumatic loss may experience many distressing reactions to the circumstances of the death and the pain of the loss. When the TLRT is called on scene, or to the immediate aftermath of a violent death, FrontLine clinicians should be prepared to deal with:

- Notification
- Media intrusion
- Crime scene clean-up
- Essential belongings that are part of the crime scene
- Housing / shelter if home is a crime scene
- Arrangements for children if victim is a parent
- Arrangements for pets
- Obtaining information from investigators

Within the first 48 hours of a violent death, clinicians need to be prepared to assist with:

- Additional notification to significant others, specifically children
- Funeral arrangements (if families desire)
- Dealing with a victim's possessions
- Introduction of eligibility requirements for Ohio Victims of Crime Compensation program

- Potential need for risk assessment / evaluation for survivors expressing thoughts of self-harm or harm to others

Ongoing need for assistance in the weeks and/or months to come may include:

- Assistance with finances and paperwork
- Family Medical Leave Act (FMLA) / leave of absence if unable to return to work
- Ongoing childcare arrangements
- Coordination with the Child Welfare system
- Counseling / support group services
- Transportation to appointments
- Support through the criminal justice process
- Assistance with development of victim impact statement
- Obtaining information on final ruling from the Medical Examiner

Ms. Zatta reported that since 2015, the TLRT has sought to address the needs of family members who cases remain unsolved. Ms. Grace Leon, a survivor of a homicide herself, is now a licensed social worker and functions as a liaison to detectives for families awaiting case resolution. Significant dates (anniversaries, birthdays, etc.) are acknowledged with calls, as well as check-ins as detectives request. (A copy of the PowerPoint presentation is attached to the original minutes stored in the Executive Unit.)

Lieutenant Pillow provided a brief summary of the TLRT's involvement with CDP. He reported that for every homicide or child fatality that CDP responds to, the CDP Supervisor at the scene contacts the TLRT for assistance. Once the TLRT is on site, CDP provides a synopsis of what transpired, in addition to contact information for any relevant witnesses. Lieutenant Pillow indicated that due to the success of the TLRT, various cities including Chicago, The Bronx, Indianapolis, Philadelphia, and Baltimore have all reached out to him to replicate these collaborative efforts in their respective cities.

Board Member Input:

- Rev. Gohlstin reported that he recently became a licensed, certified Grief Recovery Specialist.

After concluding the presentations portion of the agenda, Rev. Gohlstin announced that he had just received communication from the Governor's office to suspend all Board meetings until further notice.

There being no audience comment, the meeting adjourned at 5:00 p.m.

Submitted by: Linda Lamp, Executive Assistant

Approved by: Kathleen Kern-Pilch, ATR-BC, LPC-S, Planning & Oversight Committee Chair