

# ALCOHOL, DRUG ADDICTION AND MENTAL HEALTH SERVICES BOARD OF CUYAHOGA COUNTY

## PLANNING & OVERSIGHT COMMITTEE MINUTES MAY 11, 2016

Planning & Oversight Committee Chair, J. Robert Fowler, Ph.D., called the meeting to order at 4:00 p.m.

### **Committee Members Present:**

Reginald C. Blue, Ph.D., Elsie Caraballo, Eugenia Cash, LSW, MSSA, CDCA, J. Robert Fowler, Ph.D., Pythias D. Jones, M.D., Steve Killpack, MS, LPC-S, Mary M. Step, Ph.D., Mary R. Warr, M.Ed., Anngela Williams

**Absent:** Katie Kern-Pilch, MA, ATR-BC

### **Board Staff Present:**

William M. Denihan, CEO, Frank Brickner, Michael Doud, Sally Gray, Valeria Harper, Myra Henderson, Carol Krajewski, Esmat Nasr, Scott Osiecki, Maggie Tolbert, Linda Torbert

### **1. APPROVAL OF MINUTES**

The April 13, 2016 Planning & Oversight Committee minutes were approved as submitted.

### **2. RECOMMENDATION FOR REPRESENTATIVE PAYEE PROGRAM**

Michael Doud, Adult Behavioral Health Services Administrator, provided background information around the Request for Information (RFI) issued in the fall of 2015 for the provision of Representative Payee Services in response to the closure of Consumer Protection Association (CPA). In the interim, the Board contracted with Murtis Taylor Human Services System on a grant basis to provide payee services to some of the clients formerly served by CPA.

Five entities submitted RFI responses. One response did not meet the minimum qualifications; another did not submit its RFI response timely. Three responses were evaluated by the RFI Review Team. Esmat Nasr, Adult Programs Specialist, reported that two applicants scored the highest and are being recommended for providing payee services for clients with severe persistent mental illness and who, due to their disability and poor money management skills, are unable to manage their own funds; they are: Murtis Taylor Human Services System and Assured Payee Service.

Murtis Taylor Human Services System has provided payee services to their clients for many years and during 2016 has provided interim services for other additional clients. Murtis Taylor would be contracted to provide payee services to 100-200 additional clients. Assured Payee Service is a 501-C3 operated by one individual, Chad Zimmerman, who presently serves 34 clients; he is bonded and was formerly a full-time employee of Beech Brook on its ACT Team. Mr. Doud noted that the Board has experience working with Mr. Zimmerman and has found him to be very knowledgeable about the needs of the adult population.

Discussion followed on the anticipated number of clients to be served. Valeria Harper, Vice President of Operations, suggested that the Agenda Process Sheet be amended to reflect that Murtis Taylor will serve up to an estimate of "250" clients according to the established cost per client. It was noted that the unit rate will be \$50/per client for services. In answer to Dr. Fowler's question, Murtis Taylor's Executive Director, Lovell Custard, confirmed that clients would not be charged a check cashing fee. Ms. Nasr explained the expectations of payee services for individual client needs.

Action Request: Committee Chair, Robert Fowler, suggested to Mr. Denihan that a status report regarding the provision of Representative Payee Services be scheduled for a Planning & Oversight Committee meeting after several months.

### **Motion to recommend approval of allocating funding for Representative Payee Services to Murtis Taylor Human Services System and Assured Payee Service to the Finance & Operations Committee.**

MOTION: S. Killpack / SECOND: R. Blue AYES: R. Blue, E. Caraballo, E. Cash, P. Jones, S. Killpack, M. Step, A. Williams / NAYS: M. Warr / ABSTAIN: None / **Motion passed.**

### **3. INVEST IN CHILDREN: INTENSIVE CONSULTATION**

Linda Torbert, Children's Projects Administrator, introduced Billie Osborne-Fears, Executive Director of Starting Point, who helped to explain the Intensive Consultation initiative and request for funding. Invest in Children (IIC) is leading a county-wide initiative to expand mental health services in Universal Pre-Kindergarten (UPK) classrooms to increase the rates of school readiness and make pre-school more affordable to low-income and moderate income families.

Early Childhood Mental Health providers have identified that more assistance is needed in classrooms for the increased number of challenges with children around their behavior. Children exhibit stress when parents are in the midst of a divorce, or when exposed to violence and/or trauma. The child often acts out his/her frustration in the classroom disrupting the learning experience for that particular child or others in the classroom. This initiative is an expanded model that is more intensive and provides technical assistance on behalf of the child. Questions of committee members were addressed by Ms. Osborne-Fears and Ms. Torbert. It was noted that this initiative will work closely with parents through the Devereux Early Childhood Assessment Tool/Model.

As an educator and social worker, Ms. Cash advocated for addressing the critical social issues and needs of children through prevention and intervention and noted that this amount of funding is not nearly enough.

### **Motion to recommend approval of the Universal Pre-Kindergarten (UPK) Program Expansion with Applewood, Beech Brook, Ohio Guidestone and Positive Education Program to the Finance & Operations Committee.**

MOTION: E. Caraballo / SECOND: R. Blue AYES: R. Blue, E. Caraballo, E. Cash, P. Jones, S. Killpack, M. Step, M. Warr, A. Williams / NAYS: None / ABSTAIN: None / **Motion passed.**

### **4. PERFORMANCE IMPROVEMENT WATCH REPORTS**

Valeria Harper, Vice President of Operations, reported that specific agencies, over the past three years, have been identified through concerns for programs/services and were placed on a performance improvement watch status. An improvement watch may mean a need for: a higher level of monitoring, establishing a list of goals and objectives for performance improvement, or a recommendation to a model change shift as a result of evidence to support the effort from Board staff. Monitoring may include site visits where programs are provided and may also utilize expertise of other Board staff disciplines.

- **MURTIS TAYLOR HUMAN SERVICES CENTER**

Mr. Doud reported that the focus review of Murtis Taylor began in August of 2014 when concerns were raised around the administration of medication. Murtis Taylor was responsive to the review and the Visiting Nurse Association was brought in to assist the agency and the Board to effect changes in the agency's policies and activities. The concerns were addressed at that time. In April of 2015, similar concerns resurfaced from clients, other agencies and residents of licensed residential care facilities managed by Murtis Taylor. Another very comprehensive focus review was held to look at adult services, alcohol and drug program services, billing errors/rejected claims, quality improvement of risk management and pharmacological management. A report was submitted to the agency.

Murtis Taylor completed the required action plan. What remains outstanding is pharmacological management services provided within the residential care facilities. Recently, the Board contracted with Visiting Nurse Association (VNA) Care Plus to determine what areas had been completed in this area. The document distributed addresses the following areas: Policies & Procedures; Medication Administration, Medication Administration Record and Orders; Medication Handling/Pharmacy. Mr. Doud noted that the agency has corrected some areas listed. (The document referenced is attached to the original minutes stored in the Executive Unit.)

Committee Members Input:

- Interest expressed in seeing a time frame--what issues have been rectified; which areas remain outstanding.
- Was hands-on technical support provided to the agency? Mr. Doud answered, yes.
- Request for report back to the committee showing those areas that have been completed and those areas needing work.
- Some medicines listed are monitored by the Drug Enforcement Administration (DEA) and have a street value. If there is no paper trail, there may be serious repercussions. This area needs to be prioritized in order to assure that it is all properly documented.

Mr. Doud explained that presently, VNA Care Plus is coordinating the medication orders, updating the medication administration record, confirming orders with primary prescriber (which may not be Murtis Taylor as the clients residing in the residential facilities may be receiving services from other agencies). Mr. Doud noted that the document distributed originated in 2014 and is being used to provide the checks and balances of the improvement process.

Executive Director, Lovell Custard, thanked Board staff for their efforts to work with the agency regarding continuous quality improvement and reported on the management/staffing changes made as a result of the first focus review and set-backs experienced. The agency is working diligently on the various concerns along with VNA.

Mr. Denihan stated that this situation demonstrates that our system does not have enough money to do the job. He added that Murtis Taylor has a reputation for accepting clients in their residential facilities who are the most difficult and challenging. Mr. Denihan emphasized Board staff's goals to care for those we serve and to assure that this area is corrected. He is proud of Board staff to take this on, to bring the information to the Board and for the hard work behind the scenes. As suggested by committee members, an updated report will be provided on this significant issue.

- **HITCHCOCK CENTER FOR WOMEN (HCFW)**

The document distributed illustrates the outcome & recommendations of the last focus review conducted on 01/29/16:

- Increase Program Director position to full time to assure adequate supervision and training of staff members.
- Hire a Quality Improvement Manager and/or Clinical Supervisor to ensure coverage and assist with clinical supervision and quality improvement functions.
- Provide scheduled coverage for intakes or explore hiring a part time person to ensure coverage.
- Provide at least five (5) days of group and or individual counseling per OhioMHAS certification standards.
- Provide supervision & training for group counseling to assist/ease staff comfort level in providing the service.
- All supervision and in-service training(s) should always include log documentation/entries.
- All template forms and documents must be updated with the correct state agency name of OhioMHAS, program name (Overflow Assessments) and current Client's Rights Officer (CRO).
- Ensure that all documentation includes the appropriate signatures on assessments, treatment plans, reviews and progress notes per OhioMHAS certification standards.

Mr. Doud noted that HCFW has done a great job in addressing outstanding deficiencies. To date, HCFW has not yet hired a QI person; some of the responsibilities are falling on the Executive Director. There is a new Clinical Director on site who is energized and is implementing initiatives, working closely with his team and has good documentation regarding supervision and training. Board staff has attended several on-site group sessions.

Frank Brickner, Chief Financial Officer, noted that Board staff still has some financial concerns about HCFW and is awaiting a financial audit report. One concern was the lack of a CFO; the agency did terminate the previous CFO and has hired a new one. There is evidence that they are enhancing their Medicaid billing/revenue. Mr. Denihan noted that the President of HCFW's Board was present at the last meeting with Board staff and heard our concerns around filling

HCFW beds due to the demand for drug addiction treatment for women. Mr. Doud noted that on-site visits will be pulled back from weekly to once per month. (The update is attached to the original minutes stored in the Executive Unit.)

Dr. Fowler asked about the total number of improvement watches underway. Ms. Harper noted that New Directions was one of the agencies identified earlier; however, it has been removed from the improvement watch based upon the agency's agreement to utilize the centralized process for admissions. The other two agencies—Recovery Resources and Murtis Taylor—were earmarked for their initial involvement with the Suburban Liaison Program. The watch was initiated to assure that Board dollars would be used as the last resort since the state has continued to generously fund dollars for treatment through its Indigent Driver Assessment Treatment (IDAT) fund. The intent is to bring this before the P&O Committee in June.

#### **5. EVALUATION OF CRISIS SERVICES**

John Garrity, Ph.D., Chief Quality Officer, reviewed the Evaluation of Crisis Services Summary that highlighted the following areas: FrontLine Mobile Crisis Unit, Crisis Stabilization Unit, St. Vincent's Psychiatric Emergency Department, Challenges and Initiatives. (The report is attached to the original minutes stored in the Executive Unit.)

#### **6. UPDATE ON COMMUNITY PLAN PROCESS**

Dr. John Garrity reported that OhioMHAS recently released its State Fiscal Year 2017 Community Plan Guidelines. It was noted that information from our Board will reflect its work over the past year. Information gleaned from focus groups and funding discussions will help to shape the plan. A draft of the SFY2017 Community Plan will be brought before the Planning & Oversight Committee for input/feedback at its next meeting in June. A resolution will be prepared to accept the Community Plan at the 6/22/16 General Meeting in order to meet its submission deadline by 6/30/16.

#### **7. OLD/NEW BUSINESS** - None

#### **8. FUTURE P&O COMMITTEE TOPICS**

##### **June 2016**

- Evaluation of CPST (Community Psychiatric Supportive Treatment) Services
- Performance Improvement Watch Report: Suburban Liaison Programs
- Wellness Program at The Centers for Families & Children

##### **July 2016**

- Update on New One-Year Contracts
- Behavioral Health Re-Design
- Process for Mid-Year Review of Two-Year Contracts
- Recovery Oriented System of Care Update
- Status Report on Provision of Representative Payee Services

##### **Tentative Dates/Topics**

- Lifetime Planning – September 2016
- Needs Assessment – October 2016
- HIPAA Security Risk Assessment
- Performance Improvement Watch Updates:
  - Murtis Taylor Human Services System
  - Hitchcock Center for Women

***There being no further business, the meeting adjourned at 5:45 p.m.***

**Submitted by: Carol Krajewski, Executive Specialist**

**Approved by: J. Robert Fowler, Ph.D., Planning & Oversight Committee Chair**