



Calendar Year 2014
Annual Report



Eugenia Cash, LSW, MSSA, CDCA
Board Chair

William M. Denihan
Chief Executive Officer

When meeting someone for the first time we rarely get a glimpse of the real person because as a society we are all wearing masks to appear normal and not face rejection. We wear unique masks for different events, people and places -- emotional masks that help us fit in, make new friends, function at work and survive personal pain. Wearing of masks has been especially relevant for people living with mental illnesses and/or addictions who often fear discrimination from being unmasked.

Over the past year we have encouraged clients to take off the masks and let the world know that they are normal and living with a disease just like any other illness. We will be asking more clients and families to step-up and eliminate the masks as Ohio's community mental health and addiction services system transitions from a system that concentrates on acute care to a Recovery-Oriented System of Care (ROSC) that focuses on recovery management to help individuals not only get well, but stay well. This state-wide movement is entitled Recovery is Beautiful and is being led by the Ohio Association of County Behavioral Health Authorities (OACBHA). We are following a blueprint that contains guiding principles, five specific goals, action steps and a way to measure success.

The ADAMHS Board of Cuyahoga County, along with all the other county ADAMHS Boards, is the key to ensuring that individuals and families have access to high-quality recovery services. Through strong community partnerships, we will lead this plan and advance efforts to ensure that Cuyahoga County is healthy, safe, and drug-free, while assuring accountability and effectiveness.

In 2014, we were introduced to the Five Goals of the Recovery is Beautiful Blueprint which we began to use in decision making to ensure that Cuyahoga County succeeds in developing its ROSC:

1. Fully involve clients and families in orienting Ohio toward a ROSC encompassing mental health and addiction prevention, treatment, and recovery supports.
2. Engage all clients in needed mental health and addiction treatment in a timely manner with sustained recovery management.
3. Strengthen a culture of partnership and collaboration with local providers, businesses, law enforcement, criminal justice, faith-based and veteran's organizations, schools, child welfare, public health, and healthcare systems, to provide community education and prevention, reduce stigma, and allow for greater opportunities for individuals and families to achieve wellness and thrive in their communities.
4. Improve the performance of recovery supports by increasing the effective and efficient use of resources, and,
5. Work with local partners, to plan for and manage a local system that provides individuals with access to a holistic model of care and wellness that integrates physical and mental health and addiction services with the social and emotional supports necessary to achieve and maintain recovery.

We have continued our quest to recognize and advocate for spirituality in the recovery process, to connect the spiritual perspective with other interventions and best practices. Our Faith-based Outreach Sub-committee created a solid Action Plan that consists of recommendations that incorporate spirituality into treatment and recovery services that should be fully accomplished

A Message from the Chair... *Eugenia Cash, LSW, MSSA, CDCA*



at the provider level. Because of its excellent work, this community sub-committee was recently dissolved and the Board's Faith-based Outreach Committee will be issuing a Request for Information to engage with providers and/or faith-based organizations to advocate and deliver faith-based direct services to clients.

Heroin continues to be a problem throughout Ohio and Cuyahoga County. In 2014, the epidemic continued as the Cuyahoga County Medical Examiner says it claimed the lives of 198 people – with the deaths equally split between the city and the suburbs – a slight increase from 194 deaths in 2013. However, of the nearly 350 overdose deaths in 2014, heroin as a percentage fell for the first time since 2009. Since March 2013, Project DAWN (Deaths Avoided with Naloxone) has saved 120 lives through overdose reversals. Unfortunately, deaths by Fentanyl rose from 8 deaths in 2013 to 39 in 2014. And sadly, deaths by heroin overdose in many areas of Southern Ohio and the United States have continued to rise. As we think about these statistics, we will continue to collaborate with our partners to develop new ways to save lives.

Masks were further removed at the beginning of 2015 when we assembled the Mental Health Task Force in response to issues pertaining to mental health that were identified through the U.S. Department of Justice Investigation of the Cleveland Division of Police. It is our hope that these recommendations provide elements of training, continued practice and oversight that will ensure all Clevelanders with mental illness – and all citizens – are treated safely with dignity and respect.

The Mental Health Task Force, consisting of representatives from over 50 organizations, organized its recommendations by three topic areas:

1. Community Involvement/Engagement to establish a Citizen Police Relationship Committee to foster relationships, review effectiveness of the CIT program, provide general oversight of the consent decree to ensure its implementation and suggest further improvements.
2. CIT (Crisis Intervention Team) to guide all aspects of CIT Training for Cleveland police officers and dispatchers.
3. Internal Collaboration to address the working relationships between police officers, dispatch, and the court and behavioral health systems.

Our QPR (Question, Persuade, Refer) Suicide Prevention Training is helping healthcare providers and the faith-based community see beyond the masks by teaching three simple steps to identify a crisis and the warning signs that someone may be contemplating suicide. The trainings are made possible with a grant from The Margaret Clark Morgan Foundation and the support of The Academy of Medicine of Cleveland and Northern Ohio and St. Vincent Charity Medical Center. A special grant from Mike's S.A.F.E. fund allowed us to reach the faith-based community.

We ask you to join us in continuing to change the perception of people living with mental illnesses and/or addictions. We encourage you to look beyond the masks and eliminate the stigma so that people can accept themselves and achieve true recovery.



A Message from the CEO... William M. Denihan

Today's challenges are opportunities for tomorrow, as we are in the midst of an exciting transition of our Behavioral Health System to a Recovery Oriented System of Care that will benefit all clients.

Consistent with our vision to develop a Recovery Oriented System of Care in

partnership with our provider agencies, we asked our agencies to support recovery principles such as:

- Access to timely services.
- Recognition of art therapy.
- Community psychiatric supportive treatment (CPST) services provided in a client's home.
- Employment of individuals in recovery.
- Safe, decent and affordable housing.
- Integration of physical and behavioral healthcare.
- Utilization of peer support.
- Recognizing spirituality as an element of recovery that should be encouraged.
- Smooth transition of youth from the children's system to the adult system.
- Wellness in all aspects of life to cope with a mental illness and/or addiction.

In the past year, we addressed the Heroin epidemic as the single greatest killer of all accidental deaths. From tackling this devastating social issue we have learned that our system of care was not ready to handle a large crisis and meet the needs of people seeking help from addictions. As clients were requesting detoxification services, the response was to be placed on a waiting list for up to two weeks. Waiting for treatment once a person decides to get help is a major deterrent to getting sober – which could often be a death sentence.

We have learned that sending an individual with an addiction back home after 30 days of treatment is not enough to keep a person on the road to recovery. People in recovery gave us the answer – long-term sober living. We listened and launched a pilot program for sober living beds that offer residents of Cuyahoga County a chance to save and restart their lives from addiction to opiates and heroin.

We introduced an evaluation process for most of the services we provide. We will keep our Board informed of how funding is being used by our providers. Metrics will be developed and reports will be regularly provided on such measures as waiting times for access to treatment, number of people being served and treatment outcomes.

The future of our funding continues to be of great concern. Today, we are facing cuts from the State amounting to \$2.3 million -- the funding granted to us last year. We are told that because of Medicaid Expansion the Boards do not warrant this funding. There is a misperception that ADAMHS Boards have received an influx

of new cash as a result of Medicaid Expansion that could be used for recovery support services. This is not the case. It is true that Board funding from other resources, such as local levies, has been reallocated from mental health treatment services for people who were not previously covered by Medicaid. The State estimated that we would save \$6 million in the first 12 months and \$9 million in the first 18 months. Today, after 17-1/2 months, our savings total \$4 million, which is \$5 million less than the State's projection. Had we saved the \$9 million, I would be happy.

Regarding our State funding, I'm very disappointed. Our funding for mental health recovery services is only \$405,000 out of an available \$51 million – that is just \$.32 per capita. The statewide average per capita is \$4.46 per person. We have tried to address this at the State level to no avail. Hopefully, the Ohio Senate will hear our concern and address this in the upcoming State Fiscal Year 2016/17 Budget.

Even with limited funding we are able to create innovative programs that will make a difference in the lives of the clients we serve. We are in the process of funding a program to provide temporary job placement services and addiction treatment services. Individuals who have been denied jobs because of failing a pre-employment drug test will be offered employment on the condition of receiving treatment.

We are all partners and make a difference in what is being done in our system to stabilize individuals and save lives. No matter what position you have within our system – from the first face a person sees at an agency to a psychiatrist seeing the last patient well after hours, to first responders on the streets or in the emergency room, to board members and government officials, to case workers who insure that the client is connected to services or the clerk making the last entry, to the clients and family members -- you all play a role in making a difference. And making a difference is what this is all about and each and every one of you makes a difference and we thank you.



Accomplishments & Challenges

2014 Funding:

- Our Calendar Year 2014 Budget totaled \$66,580,921 and allowed the Board to continue funding important recovery services. The budget included \$39,363,656 in county health and human services levy funding, \$9,462,533 in State funding, \$15,621,919 in Federal funding and \$2,125,813 in grant and other funding.
- With an increase of \$5 million in levy funding and \$5 million in State funding for 2014, we were able to provide one-time funding for new and increased services, including prevention, a domestic violence and family helpline, mental health treatment services with a focus on the lesbian, gay, bisexual and transgender (LGBT) population, alcohol and other drug addiction outpatient and residential treatment, and Crisis Text.
- Four years ago our budget reflected a 22% reduction in funding, three years ago an 11% reduction and flat funding for the last two years. In 2014, we were able to provide a modest 2% increase to our providers.

2015 Funding Planning:

- We began planning for our Calendar Year 2015 Base Budget in the fall of 2014 and had to consider the State Fiscal Year 2014-2015 Mid-Biennium Budget Review when OhioMHAS repurposed \$50 million that was previously provided to Boards. In SFY 2014, the ADAMHS Board received \$7.6 million of the \$50 million. In SFY 2015, the ADAMHS Board received \$2.2 million of \$20.1 million that was available to the ADAMHS Boards.
 - The Northeast Ohio Collaborative, consisting of Boards from Cuyahoga, Summit, Lake, Lorain, Geauga and Ashtabula counties submitted a request to OhioMHAS for funding of projects from the \$20.1 million in Community Collaborative Resources outlined in the Mid-Biennium Budget Review. Our collaborative submitted requests totaling over \$4.4 million for 15 projects focused on crisis services for adults and children, sober and supportive housing, residential addiction treatment, recovery coaches and supported employment. Most of the projects were collaborative and crossed county lines.
 - Our projects requested a total investment of \$2.2 million to develop a team of professionals to respond to child and adolescent mental health crisis and trauma 24 hours per day 7 days per week; the development of a 16-bed AOD Non-Medical Community Residential Treatment facility for adult men at an existing provider agency, and for coordination of sober beds to serve about 75-100 individuals per month.

• The ADAMHS Board previously received \$1.8 million in one-time funding for the development of a 72-hour crisis bed facility. Several plans that were developed and submitted by members of the Greater Cleveland Hospital Association workgroup and other area hospitals were rejected. In August of 2014, the CEO of the ADAMHS Board and OhioMHAS Director agreed to award the one-time \$1.8 million in CY15 as follows:

- \$457,000 to Pinnacle Partners, a partnership of community behavioral health providers, including Connections: Health, Wellness, Advocacy; Signature Health; Stella Maris and ORCA House, to build and operate a multi-county crisis unit. This crisis unit will be located in Lake County very near the Cuyahoga County border and serve the residents of Cuyahoga, Lake and Geauga Counties.
- \$1,313,000 to the ADAMHS Board for crisis related programs and services. The Executive Management Team reviewed earlier submitted requests for funding to make recommendations for awarding the \$1,313,000 for related crisis and continuum of care services. We were able to expand residential addiction treatment, launch a sober bed pilot program, and expand drug court.

Grant Funding:

- Late in 2013 we submitted a proposal to the Margaret Morgan Clark Foundation designed to bring Question, Persuade, Refer (QPR) suicide prevention training to Cuyahoga County. In May 2014 the Board was awarded a \$10,000 grant from the foundation to create a team of locally based instructors certified in the QPR model as taught by the QPR Institute of Spokane, Washington. The Board matched this grant with \$10,000. This grant is enabling the Board to reach its projected goal of training gatekeepers in primary health care and other settings who are most likely to encounter persons considering suicide.
- In August 2014, the Board prepared a successful proposal for the use of 505 Hotspot funding from OhioMHAS. Over \$1.4 million was awarded to ensure the establishment of a Children's Crisis Stabilization Unit, an increase in AOD residential treatment beds with Medical/Somatic services, and an expansion of Opioid Agonist programs in response to the heroin epidemic.
- As of December 2014, the ADAMHS Board was in its fifteenth month of its \$600,000 grant from the US Department of Justice Bureau of Justice Assistance Second Chance Act Reentry Program for Adult Offenders with Co-occurring Disorders. This project is designed to reach women in the Cuyahoga County Corrections Center, providing IDDT treatment both pre and post release, along with housing, supported employment and intensive case management post release. FrontLine Services is the direct service provider. As of November 2014, 41 of the target of 60 women were enrolled. Through judicious use of resources, FrontLine has been under budget in conducting this work. A revision to the budget enabled the funding to expand the resources available to participants to include bus tickets, housing kits and bridge funding for psychotropic medications. The Project hosted a successful day-long site visit with the National Reentry Resource Center at FrontLine Services in October 2014. In addition to meeting the staff, touring the agency and learning the details about the program, all FrontLine case management staff took part in a training regarding both gender issues in treatment and the specific issues around criminal justice involvement which impact clients.

Early Childhood & Youth:

- Central Intake for Early Childhood continued and 745 children throughout Cuyahoga County were referred for treatment and/or community-based consultation.
- Through a successful and collaborative relationship with the Cuyahoga County Juvenile Court we were able to better serve juvenile offenders with co-occurring disorders through the Behavioral Health Juvenile Justice (BH/JJ) Project. During the 2014 grant period, program modifications were recommended by Board staff to ensure fidelity to the model and enhance placement of youth in residential treatment facilities. A dedicated stabilization bed was added to the program to meet the goal of community retention. This addition allowed youth to continue engagement with family, pursue educational resources and vocational opportunities to reduce recidivism.

Faith-based:

• The ADAMHS Board Faith-based Outreach Committee sponsored the *1 Prayer 4 Recovery* conference for the faith-based community on September 6, 2014. More than 100 representatives of the faith community participated in the event that raised awareness among faith leaders, congregations and the general community on the importance of reducing the stigma of mental illness and addiction. The focus was on building a coalition of hope, healing and support and discussions included the heroin epidemic and suicide prevention.

Peer Support:

• The ADAMHS Board believes in the benefits of peer support and provided funding for various training peer support positions:

- 30 clients were able to participate in Peer Support/Recovery Coach Training from the Ohio Empowerment Coalition, which was held at the Board offices in February 2014.
- In partnership with OhioMHAS and Opportunities for Ohioans with Disabilities, four clients received Peer Support Training and jobs through the Peer Employment Project.
- The Board participated in the OhioMHAS Peer Supporter Supervisor Training that was held at the Board in November 2014.
- Murtis Taylor Human Services System was able to provide forensic peer support services at Tanaka House.
- The Living Miracles provided peer support services through Frontline's Crisis Unit.
- Peer support services were provided by clients at various providers and consumer operated services: Connection, Compeer Program, Future Directions, Life Exchange Center, Links Cleveland, Living Miracles, NAMI Greater Cleveland, and the Warmline.

Employment:

• ADAMHS Board contracted with the following employment services providers: Catholic Charities; Cuyahoga Employment Partnership; Magnolia Clubhouse; Jewish Family Services Association; and Recovery Resources. In addition, under the VRP3 Contract, the ADAMHS Board contracted with Opportunities for Ohioans with Disabilities for the provision of vocational rehabilitation services. Jewish Family Services and Recovery Resources are subcontractors for the project.

• 1700 consumers were enrolled in employment services programs, 385 consumers were employed; 357 were work ready; wages ranged from \$7.95 per hour to \$25.00 per hour; and length of jobs range from one month to over 90 days. Examples of types of jobs include: bill collector, clerical assistant, customer service representative, dishwasher, janitor, job coach, peer supporter, sales clerk, tax analyst, telemarketer, and van driver.

Continuing to Combat the Heroin Epidemic:

• The Board cosponsored, organized and spoke at several community events and forums throughout the year to raise awareness of the heroin epidemic and its devastating effects on the community. We partnered with The Heroin Awareness Team -- a group of young people in recovery from opiate and heroin addiction -- to reach middle and high school and college students, as well as other members of the community, to increase awareness of the destructive consequences of opiate and heroin abuse.

• Our heroin prevention campaign used radio, TV, billboards, RTA placards and social media to reach the community. The campaign asked those who are thinking about using, are currently using or who may know someone who is using to call our 24-hour hotline number operated by FrontLine Services – 216-623-6888. Over 942 calls, or an average of five calls per day, were received everyday of the 180 days of the campaign. Forty-nine percent of the calls came from the person addicted to heroin, while 51% of the calls were from someone calling on behalf of the person with the addiction.

• Armond Budish, then Cuyahoga County Executive-elect, participated in a November 2014 meeting at the ADAMHS Board of Cuyahoga County offices with William M. Denihan, CEO of the ADAMHS Board; U.S. Attorney Steven M. Dettelbach; Judge Michael K. Astrab, Cuyahoga County Common Pleas Court; Dr. Gregory B. Collins, Cleveland Clinic; Dr. Thomas Gilson, Cuyahoga County Medical Examiner; Judge Joan Synenberg,

Cuyahoga County Common Pleas, and other leaders to discuss the heroin epidemic. Mr. Budish indicated that the heroin epidemic is an important issue he plans to meet head-on and partner with the community to help stem the problem.

DOJ Involvement:

• The United States Department of Justice Civil Rights Division and the United States Attorney's Office Northern Ohio District of Ohio released the findings of an investigation of the Cleveland Division of Police in December 2014. The report identified issues pertaining to the treatment of individuals living with mental illness and also highlighted the importance of the Board's Crisis Intervention Team (CIT) training program. A Mental Health Task Force, consisting of individuals representing over 50 organizations, was convened by the Board in response to the findings. The Task Force submitted its recommendations in March 2015 by three topic areas:

1. Community Involvement/Engagement to establish a Citizen Police Relationship Committee to foster relationships, review effectiveness of the CIT program, provide general oversight of the consent decree to ensure its implementation and suggest further improvements.
2. CIT (Crisis Intervention Team) to guide all aspects of CIT Training for Cleveland police officers and dispatchers.
3. Internal Collaboration to address the internal working relationships between police officers, dispatch, and the court and behavioral health systems.

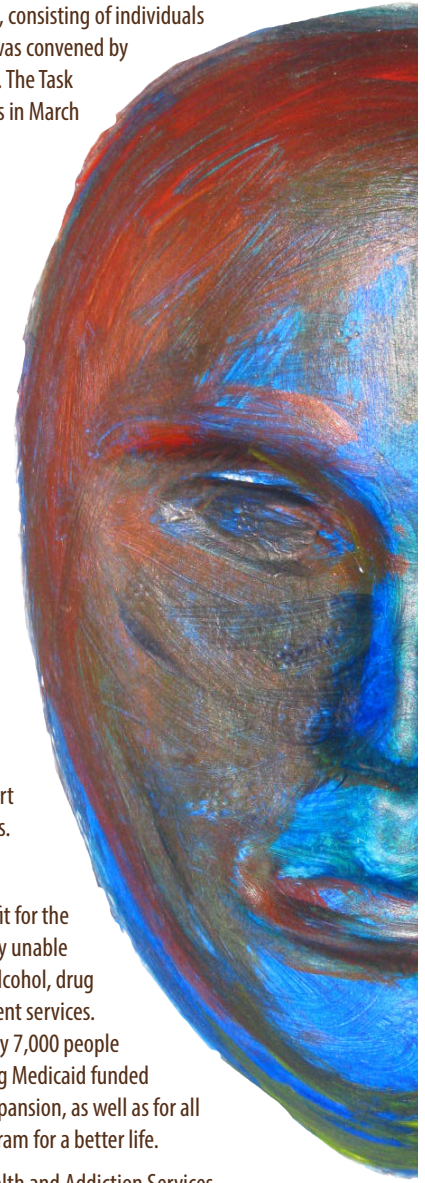
Medicaid Expansion:

• Medicaid Expansion is a huge benefit for the residents of Ohio who were previously unable to access healthcare and necessary, alcohol, drug addiction, and mental health treatment services. Its continuation is critical to the nearly 7,000 people in Cuyahoga County who are receiving Medicaid funded treatments solely due to Medicaid Expansion, as well as for all Ohioans who are relying on this program for a better life.

• The Ohio Department of Mental Health and Addiction Services (OhioMHAS) projected that Cuyahoga County would be able to redirect over 50% of claims processed – or \$6 million annually to recovery support services. Our analysis indicates that the actual amount of funds we were able to redirect was just over \$4 million.

Visit from SAMHSA:

• Pamela S. Hyde, J.D., Administrator of the Substance Abuse and Mental Health Services Administration (SAMHSA), visited Cleveland on June 5, 2014. She started her day at the City Club before a sold-out crowd of faith-based leaders, providers and people living life with mental illness and/or addictions. Her topic was Spiritual and Recovery Communities Working Together. She spent the rest of the day touring Magnolia Clubhouse, Lutheran Metropolitan Ministry and Stella Maris. She even appeared live on WEWS TV 5 noon news talking about the heroin epidemic.



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Photo Review of Calendar Year 2014



Dr. Joan Papp, Project DAWN Medical Director at MetroHealth (second from left) had a chance to talk with Pam Hyde about the success of the Project DAWN program. Eugenia Cash, ADAMHS Board First Vice-Chair and William M. Denihan, CEO of the ADAMHS Board, are also pictured at the City Club on June 5, 2014.



Then County Executive Edward FitzGerald looks on as William M. Denihan, CEO, explains the consequences of HB 369: SFY 14-15 Mid-Biennium Budget Review during an April 29, 2014 press conference calling for lawmakers to restore funding for mental health services after the House voted earlier in the month to cut more than \$47 million to pay for heroin drug treatment services at the expense of mental health.



Co-Chairs of the Greater Cleveland Reentry Leadership Coalition Judge K. J. Montgomery, Shaker Heights Municipal Court, and William M. Denihan, CEO of the ADAMHS Board of Cuyahoga County, preparing for the next coalition meeting in September 2014. The group was established to provide structured leadership to the Greater Cleveland Reentry Strategy and membership is reflective of all stakeholders.



More than two dozen people representing court and partner systems participating in the Cleveland Municipal Court Mental Health Court Advisory Board meeting on June 17, 2014. The Board is led by Cleveland Municipal Court Judge Ed Wade.



Armond Budish (far left), then Cuyahoga County Executive-elect, listens intently as William M. Denihan, CEO of the ADAMHS Board of Cuyahoga County, (not pictured) talks about measures to reduce deaths by heroin overdose. Dennis Madden, CEO of Stella Maris (bottom left); Dr. Thomas Gilson (center), Cuyahoga County Medical Examiner and Judge Joan Synenberg (far right), were among the other officials that participated in the meeting held at the ADAMHS Board offices on Friday, November 14, 2014.



Harvey A. Snider, Esq., 2014 ADAMHS Board Chair and Tracy Plouck, Director of the Ohio Department of Mental Health and Addiction Services at the NAMI Ohio Northeast Ohio Appreciation Reception on March 11, 2014. Mr. Snider and his late wife Lois were recognized with NAMI Ohio's highest honor - the 2014 Herb Reisenfeld Hall of Fame Award.

(Not Pictured) Chris Morgan, Jr., a Resource Specialist at the ADAMHS Board, and his father Chris Morgan, Sr., were also honored for sharing their personal story and testifying before the Ohio House and Senate on several occasions in 2014. Carole Ballard, the Board's Forensic Specialist was recognized for her commitment and work with the Crisis Intervention Team (CIT) training program.



The ADAMHS Board of Directors and the Executive Staff gathered on Saturday morning September 13, 2014 for the annual Board Retreat. Cheri Walter, CEO of the Ohio Association of County Behavioral Health Authorities (OACBHA), and Liz Henrich, Associate CEO, traveled from Columbus to discuss the role and responsibilities of a Board Member, provide an update on the current state of mental health and addiction in Ohio including funding and legislation, and introduce the Board of Directors to the new Recovery Oriented System of Care (ROSC) movement.



Congresswoman Marcia Fudge (D, OH-11) with Congressman Tim Ryan (D, OH-13) (left) and William M. Denihan, CEO of the ADAMHS Board of Cuyahoga County, after a press conference where she announced HR 5136 - The Breaking Addiction Act of 2014 on July 18, 2014.

UPDATE: Congresswoman Fudge, Representative Tim Ryan, and Representative Marcy Kaptur -- introduced the Breaking Addiction Act of 2015, HR 1988, which like the Act of 2014, is designed to address a significant barrier to accessing inpatient addiction treatment by directing the Secretary of the U.S. Department of Health and Human Services to accept applications to waive the Institutions for Mental Diseases (IMD) exclusion from states that seek to provide comprehensive addiction treatment in their jurisdictions.

Do you know someone thinking about suicide?
For help call:
216-623-6888
 Crisis Chat online at www.adamhsc.org
 Crisis Text "FLS" to 741741

If you are thinking about suicide, or suspect that a friend or family member is thinking about suicide, tell someone and get help immediately by calling Cuyahoga County's 24-Hour Suicide Prevention Hotline: 216-623-6888, Crisis Chat online at www.adamhsc.org, or Crisis Text to 741741

The ADAMHS Board of Cuyahoga County also offers free anonymous online depression and other screenings on its website that allow individuals to identify warning signs and learn about local treatment resources.



The Cuyahoga County Suicide Prevention Hotline, Crisis Chat and Crisis Text are emotional supports for anyone depressed or thinking about suicide and are operated by FrontLine Service, a contract agency of the ADAMHS Board of Cuyahoga County.

In observance of September as National Suicide Prevention Month, the Board mailed more than 150,000 post-cards with suicide prevention information to Cuyahoga County residents in September 2014. The postcard encouraged individuals that may be thinking about suicide, or those who may know someone who is, to tell someone and seek help immediately by calling Cuyahoga County's 24-hour Suicide Prevention Hotline at 216-623-6888, or entering into a Crisis Chat through www.adamhsc.org, or texting "FLS" to 741741. Free anonymous online depression and other screenings on our website that allow individuals to identify warning signs and learn about local treatment resources were also highlighted.

William M. Denihan (l), CEO of the ADAMHS Board of Cuyahoga County, stops in to congratulate the new QPR (Questions, Persuade, Refer) Certified Instructors while Dennis Walsh from the National QPR Institute looks on in October 2014. We are marketing the QPR Training to the 1,500 members of the Academy of Medicine of Cleveland and Northern Ohio. The Board is sending e-mail marketing messages to nearly 6,000 healthcare professionals in Cuyahoga County. To date, we have trained more than 200 healthcare and behavioral health professionals with more trainings being scheduled daily.



Calendar Year 2014 ADAMHS Board Financial Summary

Note: All financial and program data included in this report reflects a 12-month time period:
January 1, 2014 - December 31, 2014.

Revenue:

County Health & Human Services Levy	\$39,363,656
Federal Funds	\$15,621,919
State Funds	\$9,469,533
Grants/Other	\$ 2,125,813
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TOTAL BOARD REVENUE	\$66,580,921



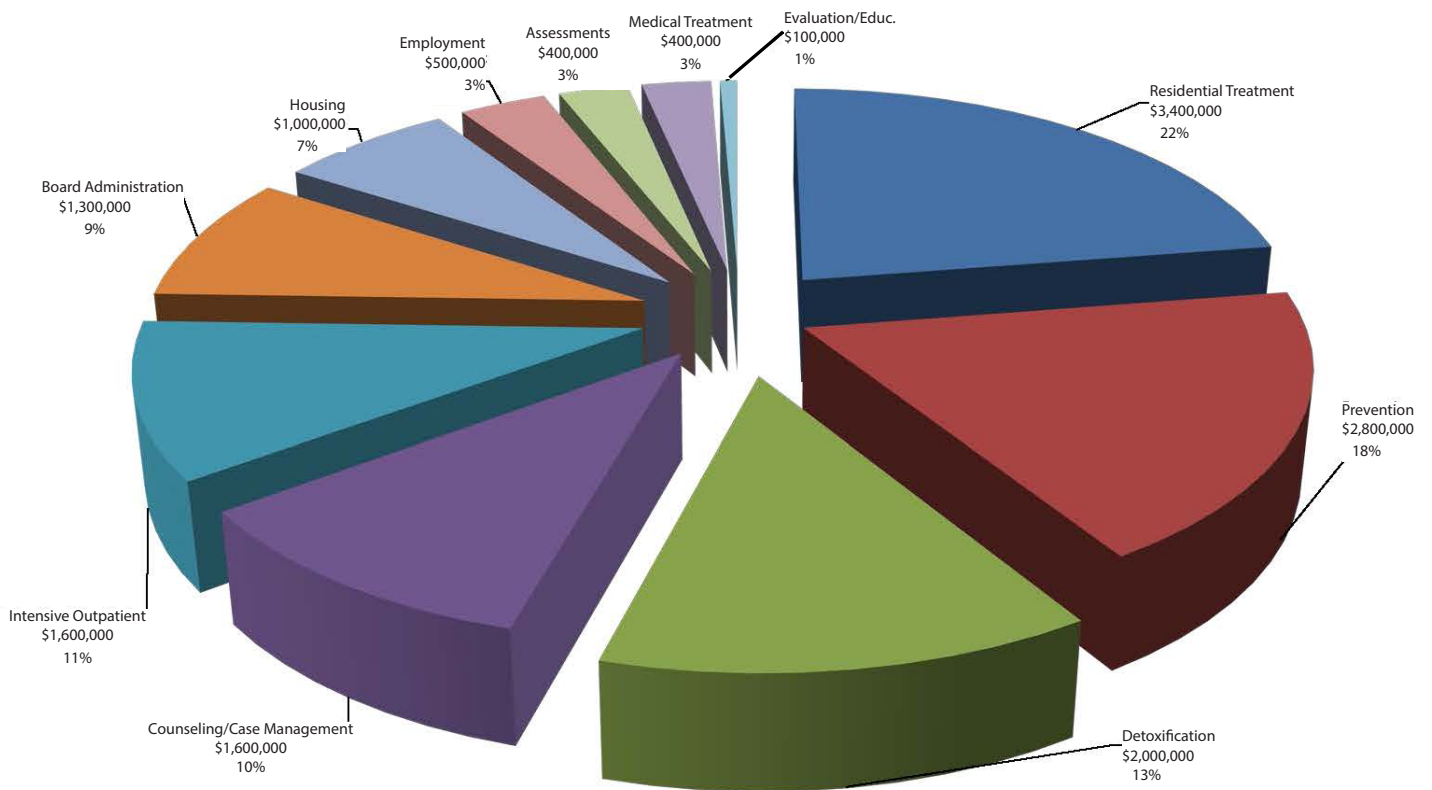
Expenses:

Disbursements to Provider Agencies:	\$53,509,047
○ Medicaid	\$3,045,496
○ Non-Medicaid Fee for Service	\$50,463,551
Carry Over Funding Allocated for Future Projects:	\$7,925,783
Board Administrative Budget*	\$5,146,091
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TOTAL BOARD EXPENDITURES	\$66,580,921

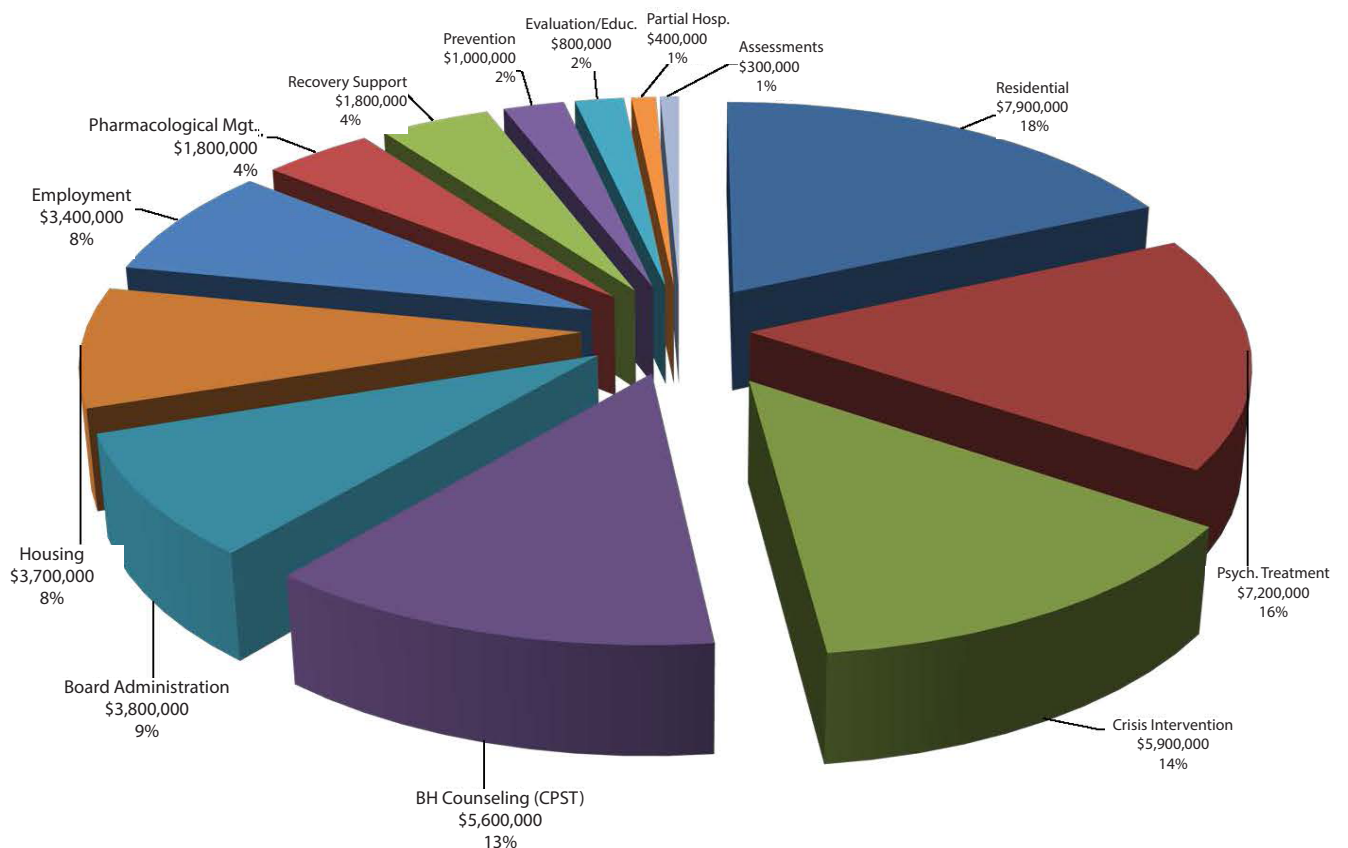
**Administrative Budget was 7.7% of total ADAMHS budget.*

Calendar Year 2014 ADAMHS Board Expenses by Service Category

\$15.1 Million Addiction Expenses by Service Category



\$43.6 Million Mental Health Expenses by Service Category



Calendar Year 2014 Demographics: Treatment & Recovery Services

Individuals Receiving Addiction Services

Individuals Receiving Mental Health Services

City	Under 18		18 - 64		65 & Over		Total		Statistical Percent of Total	
Unknown	1	42	126	233	1	12	128	287	3%	3%
Bay Village	0	14	12	30	0	3	12	47	0%	0%
Beachwood	0	4	4	28	0	4	4	36	0%	0%
Bedford	2	40	34	88	1	4	37	132	1%	1%
Bedford Heights	2	20	12	42	0	1	14	63	0%	1%
Berea	2	24	22	77	0	7	24	108	0%	1%
Bratenahl	0	0	0	1	0	0	0	1	0%	0%
Brecksville	0	3	6	13	0	0	6	16	0%	0%
Broadview Heights	1	9	19	31	0	2	20	42	0%	0%
Brook Park	2	23	57	72	0	2	59	97	1%	1%
Brooklyn	1	10	26	36	2	4	29	50	1%	1%
Brooklyn Heights	0	0	1	1	0	2	1	3	0%	0%
Chagrin Falls Village	0	0	0	0	0	0	0	0	0%	0%
Cleveland	53	876	2,670	4,717	45	316	2,768	5,909	65%	57%
Cleveland Heights	3	49	49	227	1	18	53	294	1%	3%
Cuyahoga Heights	0	0	0	1	0	0	0	1	0%	0%
East Cleveland	1	29	64	200	1	17	66	246	2%	2%
Euclid	2	61	103	307	3	28	108	396	3%	4%
Fairview Park	1	12	18	48	1	7	20	67	0%	1%
Garfield Heights	4	42	70	108	0	5	74	155	2%	1%
Gates Mills	0	4	0	2	0	0	0	6	0%	0%
Glenwillow	0	0	0	0	0	0	0	0	0%	0%
Highland Heights	0	0	3	4	0	0	3	4	0%	0%
Highland Hills	0	0	2	4	1	0	3	4	0%	0%
Independence	0	6	15	6	1	0	16	12	0%	0%
Lakewood	2	57	171	428	2	39	175	524	4%	5%
Linndale	0	0	0	0	0	0	0	0	0%	0%
Lyndhurst	0	5	8	28	0	5	8	38	0%	0%
Maple Heights	2	51	53	147	2	10	57	208	1%	2%

	AOD	MH	Combined Total Served*	Total Individuals Served**
Fiscal Year 2009 Total	9,707	38,742	Total FY2009 48,449	45,960
Fiscal Year 2010 Total	9,123	40,314	Total FY2010 49,437	46,954
Fiscal Year 2011 Total	9,185	42,649	Total FY2011 51,834	49,173
Ext. Fiscal Year 2012 Total	10,522	45,337	Ext. Total FY2012 55,859	52,462
Calendar Year 2013 Total	5,273	10,859	Total CY2013 16,132	15,488
Calendar Year 2014 Total	4,272	10,373	Total Calendar Year 2014 14,645	14,187

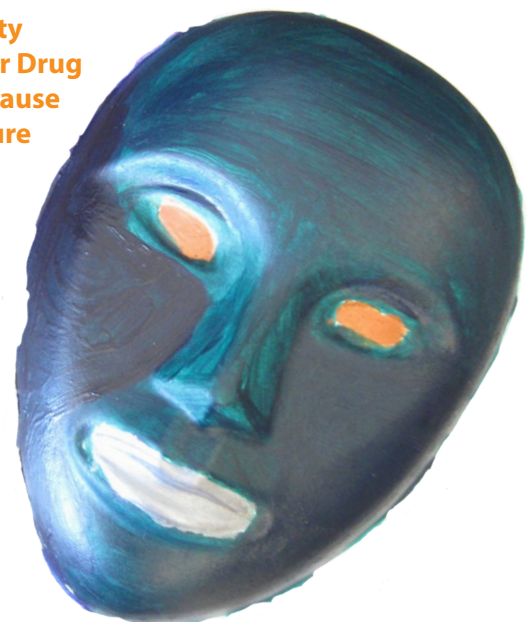
***Combined Total Served** includes people that were dually diagnosed and received both mental health and alcohol and other drug addiction treatment services. 458 people in Calendar Year 2014 received both types of services.

** **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. 14,645 - 458 = 14,187 individuals.

City	Under 18		18 - 64		65 & Over		Total		Statistical Percent of Total	
Mayfield	0	1	0	2	0	0	0	3	0%	0%
Mayfield Heights	5	20	28	72	0	9	33	101	1%	1%
Middleburg Heights	1	4	13	13	0	2	14	19	0%	0%
Moreland Hills	0	1	2	2	0	0	2	3	0%	0%
Newburgh Heights	0	1	8	6	0	0	8	7	0%	0%
North Olmsted	2	14	49	131	0	9	51	154	1%	1%
North Randall	0	2	0	7	0	1	0	10	0%	0%
North Royalton	2	18	42	42	0	5	44	65	1%	1%
Oakwood	0	2	6	13	1	0	7	15	0%	0%
Olmsted Falls	0	9	15	34	0	1	15	44	0%	0%
Olmsted Township	0	5	13	22	0	1	13	28	0%	0%
Orange	0	0	1	1	0	0	1	1	0%	0%
Parma	4	74	150	296	0	16	154	386	4%	4%
Parma Heights	2	11	25	68	0	8	27	87	1%	1%
Pepper Pike	0	1	1	5	0	0	1	6	0%	0%
Richmond Heights	0	14	10	35	0	2	10	51	0%	0%
Rocky River	1	7	21	91	0	7	22	105	1%	1%
Seven Hills	0	6	8	12	0	2	8	20	0%	0%
Shaker Heights	2	32	27	89	1	13	30	134	1%	1%
Solon	2	12	12	32	0	0	14	44	0%	0%
South Euclid	2	14	29	69	0	7	31	90	1%	1%
Strongsville	2	19	45	47	0	4	47	70	1%	1%
University Heights	0	8	8	29	0	2	8	39	0%	0%
Valley View	0	0	0	2	0	0	0	2	0%	0%
Walton Hills	0	1	3	2	0	0	3	3	0%	0%
Warrensville Heights	0	5	6	20	0	3	6	28	1%	1%
Westlake	0	17	35	79	1	10	36	106	1%	1%
Woodmere	0	2	2	4	0	0	2	6	0%	0%
Total	104	1,681	4,104	8,104	64	588	4,272	10,373		

Nearly 17,000 school-aged children were helped in Cuyahoga County through the Mental Health in the Schools and the Alcohol and Other Drug prevention programs. This number is not reflected in this chart, because we do not have the addresses of the children served due to the nature of the services provided through these prevention programs.

All financial and program data included in this report reflects a 12-month time period: January 1, 2014 - December 31, 2014. Statistics regarding the number of people served only includes individuals who received services paid for with Non-Medicaid dollars; therefore the statistics are lower than in previous annual reports.

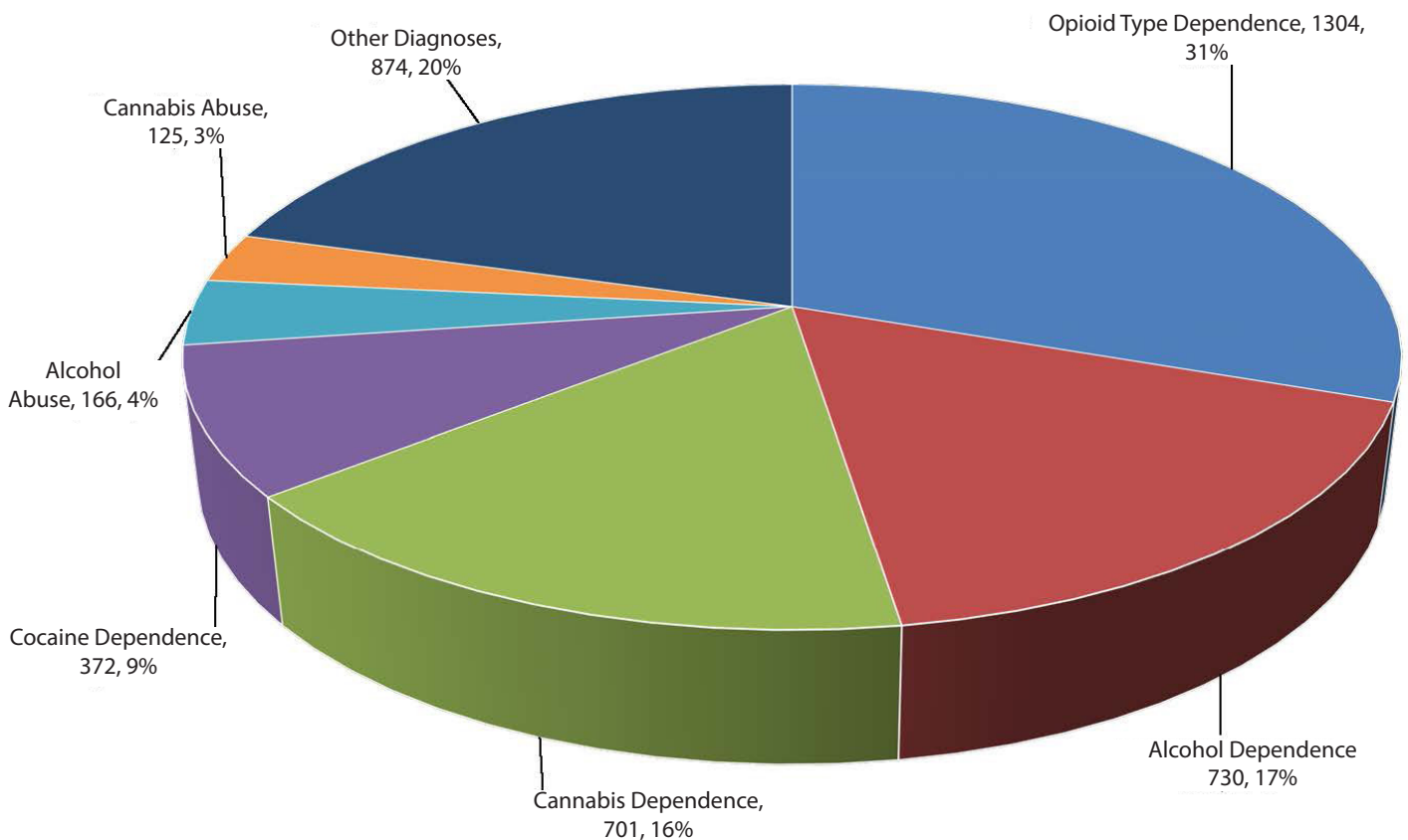


Calendar Year 2014 Demographics, continued

Individuals Receiving Addiction Services

Race/Ethnicity	Client Count	Percent of Total	Gender	Client Count	Percent of Total
Asian/Pacific Islander	7	.5%	Female	1,326	31%
Black/African American	1,676	39%	Male	2,946	69%
Hispanic/Latino	253	6%	Grand Total	4,272	
Multi-Racial	124	3%			
Native American	9	.5%			
Unknown	61	1%			
White	2,142	47%			
Grand Total	4,272				

Calendar Year 2014 Primary Addiction Diagnoses of People Served

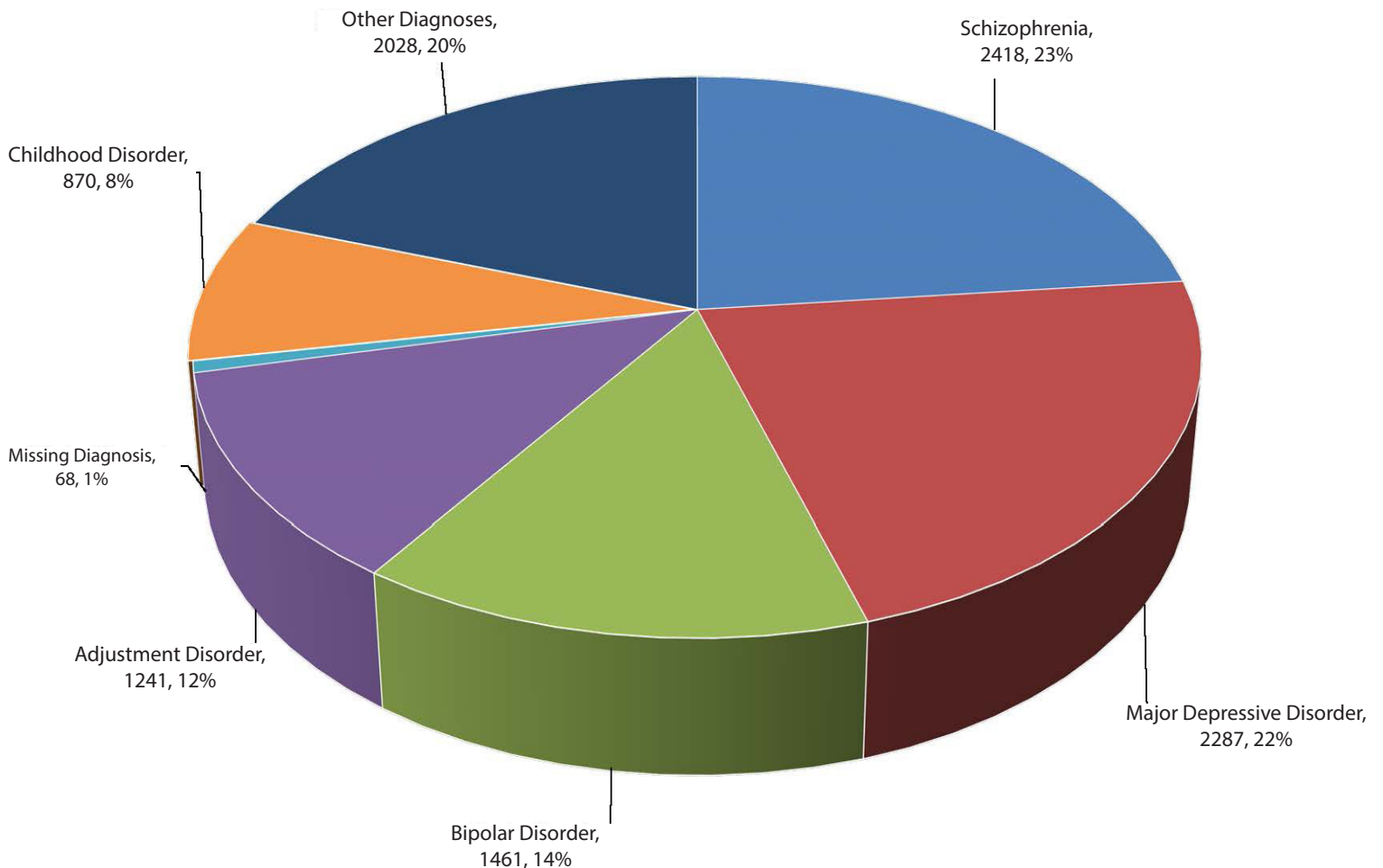


Individuals Receiving Mental Health Services

Race/Ethnicity	Client Count	Percent of Total
Asian/Pacific Islander	50	.5%
Black/African American	4,784	46%
Hispanic/Latino	353	3%
Multi-Racial	698	7%
Native American	22	.5%
Unknown	352	3%
White	4,114	40%
Grand Total	10,373	

Gender	Client Count	Percent of Total
Female	4,707	45%
Male	5,666	55%
Grand Total	10,373	

Calendar Year 2014 Primary Mental Health Diagnosis of People Services



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Achievement Centers for Children
Applewood Centers, Inc.
Asian Services in Action, Inc.
Beech Brook
Bellefaire Jewish Children's Bureau
Catholic Charities Services of Cuyahoga County
Centers for Families and Children
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, Far West Center
Connections: Health • Wellness • Advocacy
Consumer Protection Association
Cuyahoga County Court of Common Pleas
Court Psychiatric Clinic
Corrections Planning Board Treatment Alternatives to Street Crime
East Cleveland Neighborhood Center
Eldercare Services Institute, LLC
Emerald Development and Economic Network, Inc.
Epilepsy Association
Far West Center
Free Medical Clinic of Greater Cleveland
FrontLine Service
Front Steps Housing and Services
Future Directions
Golden Ciphers, Inc.
Hispanic UMADAOP
Hitchcock Center for Women
Jewish Family Service Association of Cleveland
Life Exchange Center
Links
Living Miracles Peer Empowerment Center
Lutheran Metropolitan Ministry
Magnolia Clubhouse
May Dugan
Murtis H. Taylor Human Services System
NAMI Greater Cleveland
New Directions, Inc.
Northcoast Behavioral Healthcare
Northeast Ohio Recovery Association
Ohio Guidestone
ORCA House
Positive Education Program
Recovery Resources, Inc.
Rosary Hall at St. Vincent Medical Center
Salvation Army - Harbor Light
Scarborough House For Women
Shaker Heights Youth Center
Stella Maris, Inc.
United Way's First Call for Help
University Settlement
Visiting Nurse Association
Women's Alliance for Recovery Services, Inc.
Women's Recovery Center

Question, Persuade, Refer:

- Through a \$10,000 matching grant from The Margaret Clark Morgan Foundation we are able to provide QPR (Questions, Persuade, Refer) Suicide Prevention trainings to healthcare workers throughout Cuyahoga County. To date, we have trained 29 instructors and have provided QPR skills to more than 200 healthcare and behavioral health professionals.

SHARES:

- The ADAMHS Board of Cuyahoga County continued to collaborate with the ADAMHS Boards of Franklin and Hamilton Counties on the design of a new software system known as Shared Healthcare and Recovery Enterprise System (SHARES). SHARES will support management of client enrollment, benefits management, provider contracting, payment processes, and utilization and outcomes management. The Board will be able to share in the administrative costs associated with this system, but allows each Board to operate as an independent entity. The target date for product launch is August 2015.

CIT:

- The ADAMHS Board Crisis Intervention Team (CIT) Training program trained 120 officers in 2014, with 59 from the Cleveland Division of Police. That brings the total number of officers trained in CIT since the Board started the program in 2004 to 749. We also conducted Mental Health 101 training for 190 officers, bailiffs, magistrates and other court personnel, along with an Addiction 101 training to 30 Cuyahoga County judges and staff of the Community-based Correctional Facility (CBCF)

Training Institute:

- The Board's Training Institute offered 59 workshops and provided trainings to over 1,798 members of our behavioral health system and provided 7,386.5 hours of continuing education credits in 2014.

Federal Legislation Introduced:

- Congresswoman Marcia Fudge (D,OH-11) introduced the Breaking Addiction Act of 2014, co-sponsored by Congressman Tim Ryan, (D, OH-13) during a press conference at the ADAMHS Board on July 18, 2014. This legislation introduces a five year demonstration project with \$300 million to fund the legislation and study the impact of allowing federal Medicaid reimbursement of substance abuse treatment provided in community-based Institutions for Mental Diseases (IMD). Congresswoman Fudge reintroduced the legislation in 2015.

Suicide Prevention:

- In observance of September as National Suicide Prevention Month, we mailed more than 150,000 post-cards with suicide prevention information to Cuyahoga County residents in September 2014. The postcard encouraged individuals that may be thinking about suicide, or those who may know someone who is, to tell someone and seek help immediately by calling Cuyahoga County's 24-hour Suicide Prevention Hotline at 216-623-6888, or entering into a Crisis Chat through www.adamhsc.org, or texting "FLS" to 741741. These emotional supports are operated by FrontLine Services (FLS). We also highlighted our free anonymous online depression and other screenings on our website that allow individuals to identify warning signs and learn about local treatment resources.

- The post-cards were distributed to areas of Cleveland and the following suburbs: Bedford Heights, Bedford, Brecksville, Broadview Heights, Brook Park, Fairview Park, Highland Heights, Lakewood, Brooklyn, Mayfield Heights, Middleburg Heights, Newburgh Heights, North Royalton, Olmsted Falls, Parma, Rocky River, Strongsville and Warrensville Heights.

- We had 25,817 visitors to the Board's website: www.adamhsc.org during the same time period who looked at a total of 51,730 pages, with 652 online screenings completed.

- The Board provided funding for Crisis Chat and a Crisis Text pilot program. Both are emotional supports that utilize technology for anyone who is depressed, despaired or thinking about suicide. In Calendar Year 2014, FrontLine Services engaged in 1,854 chat sessions and from May to November 2014, engaged in 566 text sessions.



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Improving lives through wellness, recovery and independence

About the artwork: *The masks showcased in this annual report were created by clients of Front Steps Housing and Services through an art therapy project. The outside of each mask represents how the client wants the world to see them. The inside of the masks reflect how the client is truly feeling. You will notice a contradiction in design representing the emotional struggle of wearing masks to fit in to avoid the discrimination of mental illness and/or addictions.*

Calendar Year 2014 Annual Report

