Process for Recommendation of 2018 Funding

The ADAMHS Board of Cuyahoga County has a policy for the awarding of contracts for Non-Medicaid Services. The CEO, staff and the Board of Directors follow this policy when establishing its budget and awarding service contracts, when a community mental health, alcohol and/or other addiction need is identified, and when funding is available.

2018 Funding Policy Timeline:

- Board staff identifies the need to issue a Request for Information (RFI), Request for Proposal (RFP) or Request for Qualifications (RFQ) seeking providers to fulfill the community's service needs. *CEO and Executive Staff determined not to issue an RFI, RFP or RFQ for 2018 since the Board's budget will be strained to continue to support individuals in need of mental health and addiction recovery services - especially in the midst of combating this opioid crisis - with $39 million in flat funding recommended by the Cuyahoga County Executive for 2018 & 2019, and $3.5 million of discretionary State funding for prevention, mental health and addiction treatment and recovery support services.*

- CEO requests approval from the Board to issue the RFI, RFP or RFQ. Approval may be granted from the Executive Committee, or the Board Committee that is most closely related to the subject of the RFI, RFP or RFQ. *The CEO did not request approval to issue and RFI, RFP or RFQ.*

- Board staff receives and spends a great deal of time reviewing the submissions that may include ranking of the responses and meeting personally with the responder to further discuss the proposal. *Although there were no proposals to consider, staff spent a great deal of time reviewing program and outcomes reports and budgets and spending trends of 2016 & 2017 provider programs to determine recommendations for 2018 funding.*

- Executive Staff makes a recommendation to the CEO to review and approve for recommendation to the Board.

- The CEO presents the funding and contract recommendations to the Board of Directors seeking additional input through the extensive committee process. *The CEO is presenting the 2018 Proposed Funding Recommendations to the Board during the Committee of the Whole Meeting on November 15, 2017.*

- When the recommendations have been vetted through the committee process, the recommendations are presented to the Full Board during the General Meeting for approval, and sometimes ratification, if timing of the contract does not permit for the month-long committee process, however, before any contract is in need of ratification it has been thoroughly reviewed by at least one Board committee. *The CEO will present the 2018 Funding Recommendations to the Full Board for approval during the November 29, 2017 General Meeting.*

Provider/Program Outcomes Review Process to Determine 2018 Funding:

- The ADAMHS Board seeks to fund high quality, cost efficient, appropriate and accessible client care. To achieve these goals the Board employs a number of review processes for the programs it fund, such as Quality Performance Review and Program Review, which may periodically include a more intensive level of Performance Improvement Plan. Additionally, Board Finance staff monitor provider agency spending throughout the year to make sure providers are spending in line with contract funding allocations.

- Providers agree in their contracts to work towards achieving quality outcomes for their Board–funded programs based on the ADAMHS Board Quality Performance Indicators.

- Indicators are designed to align the local behavioral health system with state and national strategic indicators and includes the Substance Abuse and Mental Health Services (SAMHSA) National Outcomes Measures (NOMs).

- **SAMHSA National Outcomes Measures (NOMs):**
    - Abstinence from drug use and alcohol abuse.
    - Decreasing symptoms of mental illness, and improving functioning.
    - Resilience and sustaining recovery such as:
        1. Getting and keeping a job or enrolling and staying in school.
        2. Decreased involvement with the criminal justice system.
        3. Securing a safe, decent, and stable place to live.
        4. Social connectedness to and support from others in the community such as family, friends, co-workers, and classmates.
    - Increased access to services for both mental health and substance abuse.
    - Retention in services for substance abuse.
    - Decreased inpatient hospitalizations for mental health treatment.
    - Quality of services provided including:
        1. Client perception of care.
        2. Cost-effectiveness.
        3. Use of evidence-based practices in treatment.

- Providers submit targeted outcomes data as part of their response to the Board's Request for Information.

- As stipulated in the 2016 & 2017 contracts, agencies are required to report follow-up data of the outcomes achieved for all of their Board–funded programs at 6 and 12 month intervals which includes the following information:
    1. Number of persons served in a program.
    2. Number and percent of individuals successfully completing program (including the definition of "success," and explanation of how and when it is measured).
    3. Whether program is on target to reach goals, and if not, the reasons for this and the corrective actions to be put into place to reach targets.
    4. Comparisons to the prior year if possible.
    5. Treatment Agencies also report the results of any clinical measure of improvement used such as the Ohio Scales for Adults, Ohio Scales for Youth, Brief Addiction Monitor, or others approved by Board.

- The agency summaries presented in this binder for Treatment Programs are based on the full 12 months of data for Calendar Year 2016, which gives a complete rather than partial view of the programs. Board staff have also reviewed the 6-month preliminary outcomes reports for 2017 to monitor that agencies are on track to meet their 2017 goals.

- The agency summaries presented in this binder for Prevention, Faith-Based, Early Childhood, and School-Based Programs are for the first 8 to 9 months of 2017. These are either newer programs (Faith-Based) or programs that have adopted new outcomes. These summaries are included to provide a more complete view of the outcomes for these programs.

- Agencies that are being recommended for 2018 funding have all submitted outcomes that are considered to be appropriate for funding.

- Board staff continue to work with agencies to increase the quality of outcomes for funding received, as well as the quality and comprehensiveness of reporting.