

**I'm In Transition
(IIT)**

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
I'm In Transition			
SUD Recovery Housing	\$ 225,000	\$ 225,000	Housing
Total	\$ 225,000	\$ 225,000	

CY22 Program Highlights and Outcomes

I'm in Transition (IIT)

I'm In Transition (IIT) provides a drug-free recovery residence setting and redirection housing program where clients are provided with a multitude of resources to sustain their recovery.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

Recovery Housing

Offers safe, structured and supportive drug and alcohol-free housing, equipped with comprehensive care and medical monitoring. 12-step meetings, evidence-based practices and recovery-oriented activities are also implemented to meet each client's specific needs. Additional services also include the following: fully furnished and remodeled homes, equipped with full kitchens, laundry facilities, game rooms, workout areas, Wi-Fi and computer access, air conditioner/heat and COVID sanitation stations; mental health treatment via group and individual housing; 24-hours per day, 7-days per week residential support and security; personal, workforce and educational development services. IIT utilizes an Interdisciplinary (IDT) Team (same as Care Responder Team) to carry out a strategic framework for prevention and maintain sobriety such as: Assessment: identify the needs of our clients; Capacity: build resources to address prevention needs; Planning: determine what works best and how to do it effectively; Implementation: delivery of our evidence-based programs and practices; Evaluation: analyze outcomes and processes; make the necessary adjustments. IIT addresses the following addiction risk factors: unstable living conditions; lack of nutrition; inequitable medical and mental health care; lack of high-quality employment opportunities. IIT will increase the frequency of scheduled meetings and assessments to reinforce program compliance and protective factors.

- **Target Population:**
 - Adults 18 years and older experiencing opioid use disorder (OUD), stimulant and other co-occurring substance use disorders
- **Anticipated Number of Clients to be Served: 72**
- **Number of Staff Required to Implement Program: 12**
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - IIT's Executive and Human Resources department makes valiant efforts to ensure effective leadership and high morale is evident within the organization. Should staffing vacancies occur, the agency has a large network of qualified part-time staff and volunteers on standby that are cross-trained and willing to execute the duties of our Recovery Housing Staff.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - High Quality Housing

CY22 Program Highlights and Outcomes

- Care Responder Teams
- Recovery and Treatment Services to Specialized Populations
- Peer Support
- Prevention and early intervention
- Employment Programs
- Transportation
- **Program Goals:**
 - Reduce overdose related fatalities within Cuyahoga County
 - Promote sustainable recovery
 - Reduce the risk of relapse by providing a continuum of care within the diverse phases of recovery while promoting self-sufficiency
 - Maintain safe, drug free housing for clients and staff
 - Maintain grants, to afford low to no income SUD individuals an opportunity for stress-free and a quality recovery
- **Program Metrics:**
 - Introducing the different facets of Medicated Assistant Treatment, such as Vivitrol, Suboxone, Methadone and Naltrexone Implant
 - Promote recovery by using social media, YouTube, podcasts, Facebook, etc.
 - Always discuss the importance of maintaining a regiment of AA/NA meetings and making recovery a priority
 - Make sure agency complies with and enforces the rules to maintain a safe and drug-free Recovery Homes
 - Seek funding to help underprivileged individuals receive qualitative housing while recovering from addiction

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 65
 - **ADAMHS Funded Unduplicated Clients Served:** 32
 - **Total Number of Clients Served:** 45
 - **Total Number of Clients that Completed this Program/Service:** 24
- **Average Cost Per Client:** \$1,212
- **Additional Information:**
 - IIT will have a total of 64 beds for recovery housing soon. The agency has been approved by Ohio Mental Health and Addiction Services to implement PHP, IOP, and Aftercare in program.

CY22 Program Highlights and Outcomes

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 50-60
 - **Total Number of Clients that were Served:** 37
 - **Total Number of Clients that Completed this Program/Service:** 21
- **Goals Met:**
 - Twenty-one clients successfully completed the IIT program. They take this as “lives were saved.” Clients received medical, food stamps, ID, etc. This assisted in becoming healed from years of hepatitis C and more. Three completed GED/diploma online and four were planning to test for their driver’s license.
- **Metrics Used to Determine Success:**
 - IIT measures the success of its clients by compliant releases, deficit in relapses and overdoses/deaths and sends a monthly report to the ADAMHS Board as well as inputs data in the ORH Portal.
- **Program Successes:**
 - Program outcomes are not what as anticipated because of the in-house order related to COVID-19.
- **Average Cost Per Client in CY20:** \$891
- **Additional Information:**
 - The home had two cases of COVID; three program participants received their GED/diploma; four residents anticipated testing for their drivers’ license; and two moved into their own place.

**Jewish Family
Services
Association (JFSA)**

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
Jewish Family Services Association			
Supported Employment	\$ 142,368	\$ 156,600	Employment
Employment Staffing	\$ 38,400	\$ 44,804	Employment
Residential	\$ 116,160	\$ 125,000	Housing
Peer Support for Living Services	\$ 30,000	\$ 30,000	Peer Support
Peer Support for Employment Services	\$ 30,000	\$ 30,000	Peer Support
Transportation	\$ 4,500	\$ 3,544	Transportation
Total	\$ 361,428	\$ 389,948	
Pooled Funding:			
Achieving Potential Core Mental Health Services	\$ -	\$ -	

CY22 Program Highlights and Outcomes

Jewish Family Services Association (JFSA)

Jewish Family Services (JFSA) serves people with mental health and cognitive disorders and provides evidence-based, recovery oriented therapeutic and supportive living services.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

Transportation

Transportation Assistance is designed to get adults with severe mental illness to mental health appointments, physical health appointments and other necessary locations (grocery store, bank, etc.). The program uses a variety of ways to meet the need, including bus passes and tickets, JFSA's Shuttle-on-the-Go (a door-to-door service that acts similarly to Uber), the JFSA COVID car (designed to transport clients that have had exposure to someone with COVID or are symptomatic and need testing), as well as the use of Fare-Cle (another Uber type service that utilizes specially trained in BH drivers) and Lyft. During the pandemic, additional essential elements of the program has included having masks available for client use, installing plexiglass partitions and extra time and supplies for cleaning the vehicles between riders.

- **Target Population:**
 - Clients served with Transportation Assistance are adults living in Cuyahoga County with severe mental illness linked with mental health services at JFSA
- **Anticipated Number of Clients to be Served: 86**
- **Number of Staff Required to Implement Program: 2**
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - The vehicles can be driven by multiple agency staff. While the Shuttle-on-the-Go has a full-time driver, other agency staff can fill in as necessary. Facilities staff are also available to assist as needed.
- **Funding Priority:**
 - Transportation
- **Program Goals:**
 - Provide necessary transportation services to 86 clients with severe mental illness to access mental health and other necessary appointments.
- **Program Metrics:**
 - A log is kept for the vehicles used as well as a log for bus passes or other transport purchases.

CY22 Program Highlights and Outcomes

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 75
 - **ADAMHS Funded Unduplicated Clients Served:** 70
 - **Total Number of Clients Served:** 70
 - **Total Number of Clients that Completed this Program/Service:** 0
- **Average Cost Per Client:** \$32
- **Additional Information:**
 - The funds are used to provide rides via JFSA Shuttle-on-the-GO service. This a funding has proven to be beneficial to our clients who need transportation to physician, counseling and psychiatry appointments.

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 1,470 rides
 - **Total Number of Clients that were Served:** 1,388 rides
 - **Total Number of Clients that Completed this Program/Service:** N/A
- **Goals Met:**
 - 94% (1,388/1,470 rides provided) of CY20 goal was met (GOAL: 1,470 rides).
- **Metrics Used to Determine Success:**
 - The success of this service is measured by monitoring the number of rides provided, the amount of assistance provided, and evaluation of the impact of this service on the no show/cancellation rate for psychiatry appointments.
- **Program Successes:**
 - The anticipated outcome was met for CY20 (94%) in being able to provide transportation assistance. On average, over 100 rides were provided each month. Staff knows that many of clients would not be able to access their psychiatry appointments without transportation assistance.
- **Average Cost Per Client in CY20:** \$3
- **Additional Information:**
 - N/A

Supported Employment Program

Provide client-centered comprehensive employment services that result in recovery and integration into the workforce. The program is designed to address barriers preventing clients from working and helping them to obtain and maintain employment. The program also assists employed individuals continue building skills and/or finding better, more challenging and often higher paying jobs. It incorporates job readiness skills, skill assessment, job trials, resume building, job development, job coaching and job retention services.

CY22 Program Highlights and Outcomes

- **Target Population:**
 - Adults living in Cuyahoga County that have a mental health diagnosis
- **Anticipated Number of Clients to be Served: 65**
- **Number of Staff Required to Implement Program: 3**
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Team members can cover for each other during staff leaves or vacancies. Managers also will work directly with clients to cover for vacancies, as needed. JFSA has a robust HR department that is constantly marketing to the community and hiring staff. Contract workers are used when needed.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Employment Programs
- **Program Goals:**
 - Assist individuals in gaining employment
 - Assist individuals in retaining employment
 - Client Satisfaction
- **Program Metrics:**
 - At least 25% of individuals served with obtain employment
 - At least 25% will retain employment for at least 90 days
 - 90% of clients will self-report satisfaction with services on the satisfaction survey

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served: 60**
 - **ADAMHS Funded Unduplicated Clients Served: 58**
 - **Total Number of Clients Served: 58**
 - **Total Number of Clients that Completed this Program/Service: 2**
- **Average Cost Per Client: \$1,227**
- **Additional Information:**
 - The Supported Employment Services program provides professional, client-centered, comprehensive employment services to help promote recovery and employment stability. During COVID-19, staff recognized the need for a supportive ear, resources and coping skills for individuals to become ready for employment. Many times, fear and difficulty getting vaccinated or fear of becoming vaccinated were barriers. Staff spent time building up self-confidence and adjusting to re-entering the workforce for individuals that lost employment because of COVID-19. Services are goal-oriented, ability-based, and incorporate individual choice in securing and maintaining employment. Services identify and address serious barriers to employment. Lives are changed and recovery goals are met

CY22 Program Highlights and Outcomes

through job placement. Several clients have chosen to work in the social services field, sharing their recovery process with others.

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 545
 - **Total Number of Clients that were Served:** 477
 - **Total Number of Clients that Completed this Program/Service:** 51
- **Goals Met:**
 - The goal of employing a highly qualified, strong supervisor not available on a part-time basis for the OOD program was met (100%). The goals of the Supported Employment and Peer Support programs were met except in total number served.
- **Metrics Used to Determine Success:**
 - Supervisor stability resulting in stable contract management was achieved for the OOD Contract Supported Employment metrics are Job Placement and Retention-clients who have desire to work placed in employment, clients placed in employment will receive job retention services for job placement success. Average wage-clients placed in competitive employment will receive an hourly wage above state minimum Satisfaction with services - 100% of clients satisfied with services.
- **Program Successes:**
 - No changes in the supervisor position and although successful completion of all contract deliverables was not met, stable leadership allowed for transitioning to the changes in service delivery to be implemented with significant progress made. Supported Employment – 48% of individuals who have desire to work were placed in employment exceeding our goal of 25%. 46% of individuals received retention services, exceeding our goal of 25%. 100% of clients obtained positions meeting or exceeding Ohio minimum wage with an average wage of \$12.37 per hour. 95% of clients were satisfied with services. All individuals who received peer support services have either become employed or retained employment.
- **Average Cost Per Client in CY20:** \$298
- **Additional Information:**
 - JFSA's Employment program continues to be successful despite the barriers of the past year. Staff demands have been very high in both programs and the agency continues to believe that having a full time supervisor for each program in the contract is best practice and needed in order to adequately supervise the programs and continue to adjust service delivery among significant changes within the OOD contract. Continued funding continues to be necessary, especially with the significant changes in expectations for the OOD contract. The peer support specialist is invaluable in assisting clients, giving them hope and optimism while walking through the challenges in obtaining and maintaining employment, especially during COVID-19. They provide a unique service by being able to model recovery and share their own life experiences.

CY22 Program Highlights and Outcomes

Core Mental Health Services

Core Mental Health Services include individual and group counseling, nursing, psychiatry, TBS, PSR and CPST. JFSA can integrate these services with many other JFSA services such as homecare, housing, primary care, domestic violence services, home delivered meals, life planning, payee services, and recreational services so that most needs are met in one location with one trusted agency. Multiple family members often receive services from the agency across generations. Service differentiators include: small caseloads (typically 30 or less), which allow personalized and trusting relationships; evidence-based practices such as EMDR, Cognitive Enhancement Therapy, Motivational Interviewing, Art Therapy, and Permanent Supportive Housing, which helps ensure the best science-based service possible; strong family supports are embraced by the program, with the understanding that staff come and go but family is forever. Nurturing natural supports provides better outcomes for those served as well as more efficient services.

- **Target Population:**
 - Adults with severe and persistent mental illness
- **Anticipated Number of Clients to be Served: 70**
- **Number of Staff Required to Implement Program: 25**
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Core Mental Health Services are provided by a team that can cover for the absence or loss of several team members. During vacancies, the team divides and covers the caseload of the absent staff. Additionally, supervisors can assist with coverage as needed. Lastly, when necessary, JFSA has relationships with several contract staff that may fill-in short term until new staff are hired and trained.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
- **Program Goals:**
 - Client Satisfaction
 - Decrease symptom distress
 - Improve level of functioning
- **Program Metrics:**
 - Using the Ohio Scales, clients will self-report being satisfied with services
 - Using the Ohio Scales, clients will self-report decreased symptom distress at the one-year mark
 - Counselor/case manager will assess functional improvement based on increased DLA scores

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served: 22**
 - **ADAMHS Funded Unduplicated Clients Served: 33**
 - **Total Number of Clients Served: 300**

CY22 Program Highlights and Outcomes

- **Total Number of Clients that Completed this Program/Service:** 1
- **Average Cost Per Client:** \$1,257
- **Additional Information:**
 - Mental Health Treatment (Achieving Potential BH) aims to serve non-Medicaid GOSH clients per year. The number of qualifying GOSH clients (needing ADAMHS Board funding) has decreased significantly over the past several years due to Medicaid Expansion.

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 45
 - **Total Number of Clients that were Served:** 46
 - **Total Number of Clients that Completed this Program/Service:** 0
- **Goals Met:**
 - Goal of 45 clients (46/45 = 102%) was exceeded during CY20.
- **Metrics Used to Determine Success:**
 - JFSA's Mental Health Treatment (Achieving Potential BH) works to decrease symptom distress, improve quality of life, and treat client with dignity and respect (client satisfaction). In addition, JFSA works to promote wellness and resilience as measured across key areas of adult life by reporting percentage of non-Medicaid clients with improved DLA-20 Functional Assessment Scores annually. JFSA also documents overall client service satisfaction.
- **Program Successes:**
 - 75% of the participants gained knowledge to develop healthy relationships.
- **Average Cost Per Client in CY20:** \$1,450
- **Additional Information:**
 - JFSA Mental Health Treatment (Achieving Potential BH) aims to serve 45 non-Medicaid GOSH clients per year. The number of qualifying GOSH clients (needing ADAMHS Board funding) has decreased significantly due to Medicaid Expansion. JFSA's mental health services differ from other agencies in three ways: small caseloads maintained to promote strong provider/client relationships; focus on severe and persistent mental illness (>90% of JFSA are diagnosed with Schizophrenia Spectrum Disorder, Bipolar Disorder, or Recurrent Major Depressive Disorder); and family inclusion services to the best of our ability are provided. JFSA serves a very diverse non-Medicaid clientele.

Peer Support for Supportive Housing

Peer Support is an evidence-based practice to improve quality of life and whole health. Having Peer Support Specialists available to the individuals living in Supportive Housing has made an important impact especially during the pandemic. Modeling healthy behaviors such as mask wearing and handwashing, providing education around the virus and vaccination, assisting with transportation to medical appointments, and providing a listening ear during some very scary months has been invaluable. While case managers or counselors could also provide some of this support, evidence shows that it is often better received from a peer, particularly someone with lived mental health

CY22 Program Highlights and Outcomes

experience. Anxiety has ramped up during the health crisis and having someone model coping skills or share ways to self-soothe has helped those receiving the service to self-manage their illness, stay in the community, and not need hospitalization. Peer Supporters also help with communication between the client and team or medical staff, especially now when so much occurs by telehealth; peer supporters can assist with use of technology.

- **Target Population:**
 - Adults with severe mental illness living in Supportive Housing
- **Anticipated Number of Clients to be Served: 20**
- **Number of Staff Required to Implement Program: 1**
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - It is very difficult to find and keep Peer Supporters. Staffing in general has been difficult over the past year and to find someone with certification further narrows the pool. Often Peer Supporters have to manage the number of hours worked so as not to interfere with their benefits. When unable to staff a Peer Support Coach, case managers fill the gaps.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Peer Support
 - Transportation
- **Program Goals:**
 - Improved functioning
 - Increased participation in community activities
- **Program Metrics:**
 - Improved functioning as measured by the DLA 20 Housing Anchor
 - Increase in community activities as measured by staff report via progress notes

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served: 10**
 - **ADAMHS Funded Unduplicated Clients Served: 17**
 - **Total Number of Clients Served: 33**
 - **Total Number of Clients that Completed this Program/Service: 0**
- **Average Cost Per Client: \$1,765**
- **Additional Information:**
 - JFSA provides independent living with supports to clients with severe mental illness. These individuals desire to live independently and have some of the necessary skills to do so, with support. Some are obtaining supported employment services. While JFSA uses non-peers to provide some of the supports, a peer is uniquely able to share real life experiences and problem-solving tactics with clients to help them live independently successfully.

CY22 Program Highlights and Outcomes

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 16
 - **Total Number of Clients that were Served:** 16
 - **Total Number of Clients that Completed this Program/Service:** 0
- **Goals Met:**
 - CY20 Goal (Goal = 10 clients) was exceeded with 16 clients served during CY20.
- **Metrics Used to Determine Success:**
 - Goal success is measured by increased frequency of contact with residents, increased participation in community activities as noted in progress notes, and improved functionality measured via the DLA-20 Housing Maintenance anchor.
- **Program Successes:**
 - 70% of the participants learned skills to increase self-worth to enhance their internal beliefs and values.
- **Average Cost Per Client in CY20:** \$1,900
- **Additional Information:**
 - JFSA provides independent living with supports to clients with severe mental illness. These individuals desire to live independently and have some of the necessary skills to do so, with support. While JFSA uses non-peers to provide some of the supports, a peer is uniquely able to share real life experiences and problem-solving tactics with these clients to help them live independently successfully.

University House Residential Treatment MH/DD/Deaf Services

These individuals live in Eden Housing in University Heights. Direct Service Professionals funded by Medicaid Waivers provide 24-hours per day, 7-days per week supports, including assistance with ADLs, cooking and shopping, linkage and transportation to medical appointments, management of medication (delegated nursing) and other HPC (Homemaker/Personal Care) services. Mental health staff provide counseling, assistance with interpersonal issues, and coping skills as needed. Psychiatry is also provided. OhioMHAS and the county provide the room and board as well as needed mental health services, and DODD provides for the in-home services/staffing 24-hours per day, 7-days per week, 365-days per year.

- **Target Population:**
 - The program provides residential treatment (class one) to four men that are deaf and have severe mental illness and developmental disabilities
- **Anticipated Number of Clients to be Served:** 4
- **Number of Staff Required to Implement Program:** 10
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - While the management staff have been very stable, finding staff with the specialization of sign language and comfort in both the DD and MH world, especially during the pandemic,

CY22 Program Highlights and Outcomes

has been daunting. However, JFSA has multiple back-up systems in place and a direct service staff of over 200 to pull from. This system has been effective and will continue.

- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Mental Health Residential Treatment
- **Program Goals:**
 - Community tenure
 - Client satisfaction
- **Program Metrics:**
 - This goal is measured by continuing community residence without need for hospitalization or increased level of care (ICF, nursing home, etc.)
 - Using the Ohio Scales, clients will self-report client satisfaction

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served: 4**
 - **ADAMHS Funded Unduplicated Clients Served: 4**
 - **Total Number of Clients Served: 4**
 - **Total Number of Clients that Completed this Program/Service: 0**
- **Average Cost Per Client:** \$29,040
- **Additional Information:**
 - The needs of the residents of University House are very complex on many levels. JFSA aims to provide stability in community residential services and provide high quality of life. Additional funding is necessary to keep the residents safe and stable and to provide them with access to appropriate mental health supports and services for the deaf.

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served: 4**
 - **Total Number of Clients that were Served: 4**
 - **Total Number of Clients that Completed this Program/Service: 0**
- **Goals Met:**
 - 4 clients were served during CY20 (100% of goal met).
- **Metrics Used to Determine Success:**
 - Success is measured by continued community residential tenure as well as reported satisfaction among the residents and their families.
- **Program Successes:**
 - N/A

CY22 Program Highlights and Outcomes

- **Average Cost Per Client in CY20:** \$29,040
- **Additional Information:**
 - Same as CY21.

Employment Staffing Support

JFSA partners with OOD to provide employment services with a broader array of resources than a typical supported employment program.

- **Target Population:**
 - Job-seeking adults living in Cuyahoga County, being served by OOD, and having a mental illness
- **Anticipated Number of Clients to be Served:** 300
- **Number of Staff Required to Implement Program:** 5
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - The program functions with a team approach, with coordinators filling in for each other as necessary. The supervisor can step in as needed. Additionally, the contract also allows for the two provider agencies to cover across the contract, as needed. Any vacancies are filled ASAP with ADAMHS Board and OOD approval.
- **Funding Priority:**
 - Employment Programs
- **Program Goals:**
 - Provide necessary stable supervision for the OOD/ADAMHS Board contract employment services
 - Meet contract deliverables indicating a successful program
- **Program Metrics:**
 - Retention of Supervisor will be stable
 - As measured by Aware Performance Statistics Report

First Six Months of CY21 Provider Outcomes: N/A

Peer Support for Employment Services

The essential elements of our Peer Support Program include emotional support, sharing knowledge and lived experiences, teaching skills, providing practical assistance like finding job interview clothing or hygiene products, and connecting people with resources and opportunities. Peer Support Coaches can model successful recovery in ways professional staff cannot, including living with mental illness while successfully working (coming in daily and timely, dressing appropriately, behaving and communicating well).

- **Target Population:**
 - Adults that have a mental health diagnosis (80% Schizophrenia, Schizoaffective, or Bipolar disorder) and who can benefit from the guidance and support of a Peer Support coach
- **Anticipated Number of Clients to be Served:** 15

CY22 Program Highlights and Outcomes

- **Number of Staff Required to Implement Program: 1**
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - When a Peer Support Coach is unavailable, the service is not offered and the funding is not utilized.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Peer Support
 - Employment Programs
- **Program Goals:**
 - 75% of Peer Service recipients will improve functioning associated with successful employment
- **Program Metrics:**
 - Improve functioning associated with successful employment as measured by the DLA 20 Productivity Anchor

First Six Months of CY21 Provider Outcomes: N/A

Provider:	Jewish Family Services Association	2020 First Outcome Count:	78	2021 First Outcome Count:	0
Instrument:	Ohio Scales Adult	2020 Final Outcome Count:	3	2021 Final Outcome Count:	0
Program:	Mental Health Treatment for Adults	2020 % of Final:	3.85%	2021 % of Final:	0

The Ohio Scales Adult version is an assessment instrument for measuring the progress for Adults (18+ years) in the treatment process for mental health. The instrument was a collaboratively designed instrument for use by Ohio Department of Mental Health funded providers.

Population	Evaluation Year	Subscale	First Outcome Average	Final Outcome Average	Average Difference	Significance
Adults (18+ years)	2020	Financial Quality of Life	2	2.56	0.56	Not Significant
Adults (18+ years)	2020	Housing Quality of Life	2.78	3.44	0.67	Not Significant
Adults (18+ years)	2020	Overall Empowerment	1.89	2.07	0.18	Not Significant
Adults (18+ years)	2020	Overall Quality of Life	2.44	2.94	0.5	Not Significant
Adults (18+ years)	2020	Overall Symptom Distress	24.67	20	-4.67	Not Significant
Adults (18+ years)	2020	Social Connectedness	2.5	2.92	0.42	Not Significant
Adults (18+ years)	2021	Financial Quality of Life				Not Significant
Adults (18+ years)	2021	Housing Quality of Life				Not Significant
Adults (18+ years)	2021	Overall Empowerment				Not Significant
Adults (18+ years)	2021	Overall Quality of Life				Not Significant
Adults (18+ years)	2021	Overall Symptom Distress				Not Significant
Adults (18+ years)	2021	Social Connectedness				Not Significant

**Jordan
Community
Residential Center**

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
Jordan Community Residential Center			
Transportation	\$ 4,500	\$ 10,000	Transportation
Recovery House	\$ 75,000	\$ 75,000	Housing
Total	\$ 79,500	\$ 85,000	

CY22 Program Highlights and Outcomes

Jordan Community Residential Center

Jordan Community Residential Center (Jordan CRC) provides women with recovery housing, employment preparation and other supportive services since its inception in 2004.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

Transportation

Provides transportation to clients. Each transportation specialist has gone through a background check and has a clean driving record as well as HIPAA and vehicle operation training. Staff also shadow an experienced transportation specialist before transporting participants. Transportation staff are also trained in Motivational Interviewing to facilitate communication in a non-confrontational manner. Vehicles used to transport participants are owned by Jordan CRC so both the driver and the vehicle are covered by the agency's insurance. The agency has two well-maintained passenger vehicles (15- and 8-passenger) and policies and procedures outline the rules and regulations of the transportation program including safety and maintenance expectations.

- **Target Population:**
 - Women receiving outpatient treatment, recovery housing and other related recovery support services from Jordan CRC.
- **Anticipated Number of Clients to be Served:** 100
- **Number of Staff Required to Implement Program:** 2
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - In the event of staff vacancies, Recovery Monitors assume the responsibility to provide transportation services to ensure continuity of services.
- **Funding Priority:**
 - Transportation
- **Program Goals:**
 - By the end of CY22, 100 participants of Jordan CRC services will be provided transportation services to substance use disorder treatment, recovery housing and other community-based services to reduce barriers and improve participant satisfaction.
- **Program Metrics:**
 - Number of participants provided transportation services
 - Number of trips for substance use disorder treatment
 - Number of trips for recovery housing
 - Number of trips for community-based recovery support services

First Six Months of CY21 Provider Outcomes: N/A – Not provided

CY22 Program Highlights and Outcomes

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 52
 - **Total Number of Clients that were Served:** 36
 - **Total Number of Clients that Completed this Program/Service:** 36
- **Goals Met:**
 - The goals were met however, the number served declined due to COVID-19
- **Metrics Used to Determine Success:**
 - Outcomes are measured using the Agency's administrative forms (e.g. enrollment applications, screening questionnaires, surveys, staff reports, team meetings, etc.)
- **Program Successes:**
 - 100% of clients participated in sober support activities during their time with the agency, with 67% completing IOP. 100% of program participants increased attendance to doctor's appointments, treatment and court without being exposed to environmental triggers (areas they are trying to stay away from) and 100% of program participants expressed satisfaction with services and demonstrated improvement in behavioral symptoms and management.
- **Average Cost Per Client in CY20:** \$125
- **Additional Information:**
 - N/A

Recovery Housing

Jordan CRC's Housing Program is certified by Ohio Recovery Housing and based on best-practice guidelines. Expertly trained project staff with the knowledge, values and skills necessary to achieve project goals, objectives and resident outcomes. The Board of Directors, Management and project staff reflect the cultural and racial diversity of the recovery housing residents. Access to an array of community-based substance use disorder and mental health treatment, including Medication Assisted Treatment, and other recovery support services are available to residents. This program incorporates the principles of a Recovery Oriented System of Care (ROSC) by facilitating access to multiple pathways for recovery for residents. Residents receive orientation, access to supports, and recovery housing. Program embraces sensitivity, awareness, understanding and responsiveness to the beliefs, values and customs of its residents.

- **Target Population:**
 - Adult women diagnosed with a substance use disorder and experiencing other co-morbid conditions including trauma and mental health issues or who are involved in a specialty docket in the courts.
- **Anticipated Number of Clients to be Served:** 100
- **Number of Staff Required to Implement Program:** 5
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**

CY22 Program Highlights and Outcomes

- Director will assume the responsibilities of the program coordinator and the three resident monitors will share responsibilities until another monitor is hired.
- **Funding Priority:**
 - High Quality Housing
- **Program Goals:**
 - By the end of CY22, 100 women diagnosed with a substance use disorder will receive recovery housing and access to treatment and other recovery support services in an effort to address an identified gap in the continuum of services available to these women in Cuyahoga County.
- **Program Metrics:**
 - Number of women receiving recovery housing services
 - Number of women who access other recovery support services
 - Number of women who participate in substance-use disorder treatment
 - Number of women involved in social support network

First Six Months of CY21 Provider Outcomes: N/A – No Provided

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 52
 - **Total Number of Clients that were Served:** 36
 - **Total Number of Clients that Completed this Program/Service:** 27
- **Goals Met:**
 - The goals of the Jordan CRC Recovery Housing program were met; however, the amount of referrals declined due to COVID-19.
- **Metrics Used to Determine Success:**
 - Outcomes are measured using the agency's administrative forms (e.g. enrollment applications, screening questionnaires, surveys, staff reports, team meetings, etc.)
- **Program Successes:**
 - Of the 36 participants in the Recovery Housing program funded by the ADAMHS board, 89% followed agency policies and procedures and 76% were successfully discharged from the program. 100% of clients participated in sober support activities during their time with the agency and zero participants received new criminal charges upon discharge. 91% of all program participants maintained sobriety, with 67% completing IOP. 55% of all participants received a sponsor and 89% of those participants maintained a relationship with their sponsor after three months. 11% of all program participants found employment during their time with the agency.
- **Average Cost Per Client in CY20:** \$2,083
- **Additional Information:** N/A

Joseph's & Mary's Homes

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
Joseph's Home			
Recovery Support Services	\$ 25,000	\$ 60,000	Housing
Total	\$ 25,000	\$ 60,000	

CY22 Program Highlights and Outcomes

Joseph's & Mary's Homes

The mission of Joseph's & Mary's Homes is to provide a nurturing, caring environment to individuals without resources who have acute medical needs, helping them heal and achieve independence. They are the only homeless provider in Cuyahoga County exclusively focused on delivering medical respite care.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

Medical Respite Care for Individuals Experiencing Homelessness (Recovery Support Services)

As a medical respite provider, Joseph's & Mary's Homes sit at the nexus between health and housing, helping medically fragile individuals experiencing homelessness recover and achieve housing stability. Joseph's Home provides culturally appropriate, evidence-based services to strengthen existing peer recovery support; utilize trauma informed care; implement harm reduction efforts and strategies; and connect residents to critical treatment services, including providing transportation. Joseph's Home will continue to focus on helping residents and alumni build self-sufficiency and maintain positive health outcomes. There are plans to expand by opening Mary's Home and doubling service capacity.

- **Target Population:**
 - Medically fragile individuals who no longer require hospitalization, but are too frail or sick to be discharged to the streets or a traditional shelter serving hundreds of people
- **Anticipated Number of Clients to be Served:** 100
- **Number of Staff Required to Implement Program:** 13
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - The COVID-19 pandemic forced Joseph's Home to grapple with staffing shortages and changes. Joseph's Home is guided by the Board of Directors and has implemented a solid organizational structure to help ensure services remain consistent despite potential vacancies or staff changes. Joseph's Home utilizes PRN positions, which offer flexibility to cover shifts when needed.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Trauma Informed Care Treatment, Recovery and Prevention Services
 - Harm Reduction Efforts and Strategies
 - Recovery and Treatment Services to Specialized Populations
 - Peer Support
 - Transportation

CY22 Program Highlights and Outcomes

- **Program Goals:**

- At least 90% of residents who receive Peer Recovery Support services will have a post-discharge plan
- 100% of residents who need it will receive some form of travel training (travel safety and independence on a bus or ride system) during their admission. All alumni will be evaluated for travel training needs
- At least 50% of residents and alumni receiving behavioral health and peer support services will have an increase by at least one stage of readiness by discharge
- At least 50% of program alumni with a SUD or SMI will remain medically/behaviorally stable as evidenced by participating in routine healthcare appointments, abstaining from harmful substances, taking medications as prescribed and engaging/accessing community resources
- At least 80% of program alumni will attain and maintain permanent housing

- **Program Metrics:**

- The Peer Recovery Supporter will assist residents/alumni with effectively transitioning to Community Care and independently accessing community resources
- As a result of Peer Recovery Support, it is expected that residents/alumni will increase their stage of readiness for treatment as measured by the Substance Abuse Treatment Scale (SATS) for Mental Illness and Substance Use Disorders
- As a result of the Peer Recovery Supporter's routine follow-up and connection with program alumni, graduates of the program will have improved outcomes for remaining medically stable and maintaining permanent housing

First Six Months of CY21 Provider Outcomes:

- **Highlights:**

- **Number of Clients that were Anticipated to be Served: 90**
- **ADAMHS Funded Unduplicated Clients Served: 52**
- **Total Number of Clients Served: 52**
- **Total Number of Clients that Completed this Program/Service: 33**

- **Average Cost Per Client:** \$240

- **Additional Information:**

- In December 2021, Joseph's Home will be opening a medical respite facility serving medically fragile women experiencing homelessness (Mary's Home). With this expansion, the agency will double the number of people helped to regain their stability, attain permanent housing, connect to community supports and rebuild their lives.

CY20 Provider Outcomes:

- **Highlights:**

- **Number of Clients that were Anticipated to be Served: 90**
- **Total Number of Clients that were Served: 76**
- **Total Number of Clients that Completed this Program/Service: 76**

CY22 Program Highlights and Outcomes

Goals Met:

- Joseph's Home met most of its program/service goals during 2020. The agency continued to support residents and program alumni, even though it had to modify services and make greater use of technology. Clients were more quickly adapted to greater transportation independence. Clients also accessed housing quicker, reducing the average length of stay to 78 days.
- **Metrics Used to Determine Success:**
 - Percentage of individuals attaining and maintaining medical/behavioral health stability
 - Percentage of individuals exiting to a stable setting, such as permanent housing
 - Percentage of individuals attaining and maintaining housing stability
 - Percentage of individuals increasing their income/benefits
 - Percentage of individuals attaining transportation independence
 - Percentage of residents provided with a discharge plan
- **Program Successes:**
 - 100% of residents received a discharge plan
 - 100% of residents received assistance with transportation; 95% achieved transportation independence by discharge
 - 93% of alumni independently transported themselves to appointments
 - 100% of residents were screened for behavioral health conditions, offered Motivational Interviewing and were linked to services
 - 88% of alumni with SUD/SMI remained medically stable
 - 90% of alumni maintained permanent housing
 - 57% of residents exited to a stable setting, including 45% who exited directly to permanent housing of their own
- **Average Cost Per Client in CY20:** \$329
- **Additional Information:**
 - Peer Recovery Supporters help residents utilize a myriad of resources with their main focus being social support and housing stability. They help individuals find housing and access resources they need to maintain housing. The agency's Peer Recovery Supporters were essential in supporting clients during the pandemic. Whether one-on-one interaction, phone calls or ensuring that virtual music and art therapy can take place, peers have helped clients cope, work through trauma and build resilience.

Journey Center for Safety & Healing

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
Journey Center for Safety & Healing			
Domestic Violence & Family Help Line	\$ 8,640	\$ 15,000	24/7 Access
Trauma Services	\$ -	\$ 50,000	Trauma Informed
Total	\$ 8,640	\$ 65,000	

CY22 Program Highlights and Outcomes

Journey Center for Safety and Healing

Journey Center for Safety and Healing (JCSH) is the result of a merger between the Domestic Violence Center and Bellflower Center for Prevention of Child Abuse. Its mission is to end child abuse and domestic violence, empowering victims, educating the community, and advocating for justice. JCSH offers a wide variety of prevention and intervention services.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

Domestic Violence & Family Helpline

The Helpline offers crisis support, safety planning, information and referrals to survivors of domestic violence and child abuse via calls/texts/chats. Prospective shelter clients access Journey's services via the Helpline. When a help seeker identifies a need for immediate shelter, staff conducts a phone intake to verify the caller as a survivor of domestic violence and help them to assess their safety and to develop an escape plan. This is why it is so important for domestic violence shelters to provide an intake process 24-hours per day and accept survivors in the middle of the night or any time of day. Hospitals, safe rooms, and police departments use this resource at any hour. It also functions as a child abuse prevention line, helping parents cope, and offering tools and support to parents looking to increase their parenting skills. It is where the intake process for Journey's trauma therapy program begins. The Helpline is answered 24-hours per day; 365 days per year by trained professionals and volunteer Advocates with knowledge of child development, child abuse, domestic violence, teen dating violence, stalking, and community resources. Helpline Advocates utilize trauma-informed skills to maintain a calming, patient, non-judgmental and supportive relationship with the caller to help in their decision-making. Through use of two evidence-based crisis intervention models - Motivational Interviewing and Safety, Security, Ventilate, Validate, Prepare, and Predict (SSVPPP) - Advocates help clients to feel safe, heard, and, most importantly, believed. The models incorporate the basic tenants of crisis management with a victim-centered approach. The confidential nature of the Helpline is crucial, and it encourages individuals who are embarrassed or ashamed of their situation to reach out for help.

- **Target Population:**
 - The 24-Hour Domestic Violence and Family Helpline (Helpline) offers crisis support, information and referrals to domestic violence victims, former/current child abuse survivors, parents, families, and professionals via calls/text/live chat.
- **Anticipated Number of Clients to be Served:** 7,500
- **Number of Staff Required to Implement Program:** 3
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Staff members in the same program fill in, distributing tasks as necessary to avoid disruption to client services. Journey advertises for open positions on its own website and job boards to recruit qualified candidates as quickly as possible.

CY22 Program Highlights and Outcomes

- **Funding Priority:**
 - Trauma Informed Care Treatment, Recovery and Prevention Services
 - 24 Hours/Seven Days Access
- **Program Goals:**
 - The goal of the Helpline is to provide practical information, emotional support, and referrals to those accessing the Domestic Violence & Family Helpline 24-hours a day via calls/texts/chats.
- **Program Metrics:**
 - Over the course of one year, the Domestic Violence and Family Helpline will provide support and information to an average of 7,000 help seekers including, but not limited to, survivors of domestic violence and child abuse, law enforcement, and professionals.

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 7,500
 - **ADAMHS Funded Unduplicated Clients Served:** 2,218
 - **Total Number of Clients Served:** 2,218
 - **Total Number of Clients that Completed this Program/Service:** 2,218
- **Average Cost Per Client:** \$3
- **Additional Information:** N/A

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 5,500
 - **Total Number of Clients that were Served:** 5,529
 - **Total Number of Clients that Completed this Program/Service:** 5,529
- **Goals Met:**
 - Journey Center exceeded the goal outlined in the RFP by approximately 29 clients (goal: 5,500, actual: 5,528)
- **Metrics Used to Determine Success:**
 - Journey accounts for each person seeking crisis intervention or information/referral services through the Helpline. Calls, texts, and live chats are documented in a data management system (Osnum). This system is used by many other domestic violence advocacy agencies throughout the state of Ohio.
- **Program Successes:**
 - The Domestic Violence and Family Helpline received 5,529 crisis intervention and information/referral calls during this reporting period.
- **Average Cost Per Client in CY20:** \$2

CY22 Program Highlights and Outcomes

- **Additional Information:**

- During COVID-19, the Helpline experienced many periods of increase in call capacity as well as many periods of decrease in call capacity. Journey saw an increase in severity of abuse from the callers seeking services and often, from survivors fearful to seek services.

Trauma Services

Journey provides trauma therapy for children and adults in Cleveland/Cuyahoga County who are, or have been, victims of child abuse and/or domestic violence. Many have incomes below poverty level, making it difficult to afford trauma treatment. Journey's Trauma Therapy Services focus solely on short and long-term healing for survivors. Therapists are trained in and utilize: Trauma-Focused Cognitive Behavioral Therapy (TF-CBT), Eye Movement Desensitization and Reprocessing (EMDR) and the Trauma, Recovery, and Empowerment Model (TREM).

- **Target Population:**

- Individuals (adults and children) and families with a history of trauma caused by exposure to domestic violence and child abuse

- **Anticipated Number of Clients to be Served:** 170

- **Number of Staff Required to Implement Program:** 4

- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**

- Any vacancies in staff will result in the Program Director taking on a case load while the position is being filled to avoid a lapse in services for clients.

- **Funding Priority:**

- Recovery and Treatment Services to Specialized Populations

- **Program Goals:**

- To help survivors of /individuals impacted by domestic violence and/or child abuse to understand the trauma, develop skills for dealing with the effects of the trauma
- To improve the mental health and well-being of individuals impacted by child abuse and domestic violence, regardless of financial resources, by providing comprehensive trauma-informed group therapy services
- To provide skills to increase safety planning for individuals impacted by domestic violence and/or child abuse

- **Program Metrics:**

- The Ohio Outcome Measures (Ohio Scales) track program effectiveness.
- Group therapy services utilize evidenced-based curriculums and interventions including self-report pre- and post-test to measure client outcomes and satisfaction.
- Safety planning is completed when services begin. A Danger Assessment is administered at the onset of services as well. Clients will be asked during their post-test if they feel that they have increased safety planning skills for themselves and their families.

First Six Months of CY21 Provider Outcomes: N/A – New Program

**Kingdom
Developers
Consulting, Inc.**

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
Kingdom Developers Consulting Inc			
STOP (Strength to Obtain Purpose) Program	\$ -	\$ 47,500	Prevention
Total	\$ -	\$ 47,500	

CY22 Program Highlights and Outcomes

Kingdom Developers Consulting, Inc.

Provides the help and support an individual needs to get through the issues that seem too hard to face alone. The team works with individuals from the very young to the very old, individually, with their families or in a group.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

Strength to Obtain Purpose (STOP) Program

Kingdom Developers Consulting (KDC) STOP program focuses on STOP(ping) ACEs (Adverse Childhood Experiences) now. The STOP program assists participants in ending generational cycles of abuse, neglect, addiction, mental health disorders and premature death. Prevention strategies utilized include education, alternative activities, and problem identification and referral. KDC uses Building Healthy Life Skills (ACE Overcomers), an evidence-based program. The program consists of a 12-week, two-hour group sessions, one to two times per week where participants are taken through each of the 12 curriculum lessons from the Building Healthy Life Skills curriculum. This curriculum is utilized in its faith-based and traditional versions. The curriculum will be delivered in age-appropriate groups when family cohorts are registered. Where appropriate, some lessons and guest speakers, will present to gender specific groups.

- **Target Population:**
 - Individuals and families who have a history of Adverse Childhood Experiences (ACEs)
- **Anticipated Number of Clients to be Served:** 150
- **Number of Staff Required to Implement Program:** 9
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Management closely monitors staff to ensure that they are utilized to their capacity, happy with program assignments, and have opportunities to be challenged and stretched toward their interests and potential.
- **Funding Priority:**
 - Prevention and Early Intervention
- **Program Goals:**
 - Reduce the number of ACEs qualifying incidents for enrolled participants and families
 - Increase the social-emotional competence of participants as evidenced by increased overall scores on selected evaluation tools (DESSA and DARS)
- **Program Metrics:**
 - Participant/family self-report at start of program, midway through the program, and at the end of the program

CY22 Program Highlights and Outcomes

- Pre- and post-program evaluation instrument scores

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 75
 - **ADAMHS Funded Unduplicated Clients Served:** 24
 - **Total Number of Clients Served:** 24
 - **Total Number of Clients that Completed this Program/Service:** 16
- **Average Cost Per Client:** \$738
- **Additional Information:** N/A

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 75
 - **Total Number of Clients that were Served:** 47
 - **Total Number of Clients that Completed this Program/Service:** 24
- **Goals Met:**
 - The STOP program achieved 60% of its goal of serving 75 individuals. Of this 60%, there was a 50% program completion rate.
- **Metrics Used to Determine Success:**
 - Increased scores on the Devereaux Adult Resiliency Survey (evaluation tool)
 - Number of individuals who completed the program
- **Program Successes:**
 - There were 47 participants in the program with a DARS one and 24 participants completed the DARS two (completed the program). Out of those who completed the program:
 - 75% of the participants gained knowledge to develop healthy relationships
 - 70% of the participants learned skills to increase self-worth to enhance their internal beliefs and values
 - 70% of the participants learned strategies to develop/enhance self-motivation to increase independence
 - 60% of the participants learned how to self-regulate without the use of substances and negative influences
 - 83% of participants showed overall improvement
- **Average Cost Per Client in CY20:** \$753

CY22 Program Highlights and Outcomes

- **Additional Information:**

- Individuals served through the STOP program have complex needs and may be involved with multiple systems. Given these complex needs, stressful and traumatic upbringing for some, poor choices and decision making, and maladaptive coping strategies, there is often greater effort to engage and retain those served by the program. The education gained through the curriculum impacts not only the immediate life of the participant, but carries the potential to impact their entire family system as well, with the hope of breaking negative cycles.

Life Exchange Center (LEC)

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
Life Exchange Center			
Art Therapy	\$ 36,840	\$ 37,640	Peer Support
Peer Support	\$ 365,000	\$ 389,430	Peer Support
Transitional Youth Housing	\$ 165,000	\$ 173,250	Transitional Youth
Total	\$ 566,840	\$ 600,320	

CY22 Program Highlights and Outcomes

Life Exchange Center (LEC)

The Life Exchange Center (LEC) is a peer-oriented, member-driven drop-in center that offers peer support services and other recovery-oriented services to persons with a mental illness and/or addiction in Cuyahoga County.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

Art Therapy

The Life Exchange Center (LEC) will contract with the Art Therapy Studio (ATS) to facilitate three workshops per week. Classes are designed to engage participants in a healthy leisure activity and provide a support system that encourages recovery and reintegration into the community. Peer support staff is involved with the work shop to invite, guide, and encourage class participants to rediscover themselves and take control of their journey toward recovery and wellness through the art-making process. The groups will provide a non-threatening medium that can facilitate communication and self-expression, especially when words are inadequate or unavailable. The emphasis will be decreasing maladaptive behaviors and identifying positive coping skills. The therapist will become a trusted advisor and the studio will become a welcoming, accessible “safe place” where class members can learn, create and openly express and share their problems.

- **Target Population:**
 - Adults 18 years and older with mental health and/or substance use disorders residing on the Eastside of Cuyahoga County who are on a journey of mental health/substance use recovery
- **Anticipated Number of Clients to be Served: 50**
- **Number of Staff Required to Implement Program: 2**
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - The agency and the ART Therapy Studio will reassign classes to other ART Therapy Studio staff if there is a vacancy. In the event, the ART Therapy Studio therapists are unable to attend, Peer Support Specialist will facilitate a group and sessions will be rescheduled.
- **Funding Priority:**
 - Recovery and Treatment Services to Specialized Populations
 - Peer Support
- **Program Goals:**
 - Provide innovative avenues for persons in recovery, by offering art therapy resources to clients. The art therapy program offered will encourage self-expression, self-discovery and emotional growth. As a form of psychotherapy, the art therapy program will involve both the creation of art and the discovery of its meaning. Individuals will be encouraged to visualize, and then create, the thoughts and emotions that they cannot talk about.

CY22 Program Highlights and Outcomes

- Provide therapeutic art therapy that will provide a safe place for creative expression in support of emotional expression; facilitate therapeutic art interventions that address managing traumatic stress; create art-based opportunities and experiences that allow self awareness and insight; and restore one's power to create personal change.
- Provide group connectedness and cohesion.
- **Program Metrics:**
 - Quarterly evaluations are completed by participants to measure the impact of the program, surveys and self-report

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 52
 - **ADAMHS Funded Unduplicated Clients Served:** 40
 - **Total Number of Clients Served:** 40
 - **Total Number of Clients that Completed this Program/Service:** 0
- **Average Cost Per Client:** \$461
- **Additional Information:**
 - N/A

CY20 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 70
 - **Total Number of Clients that were Served:** 48
 - **Total Number of Clients that Completed this Program/Service:** 7
- **Goals Met:**
 - Despite the impact of COVID-19, which led to a reduced level of participation, the participants that remained engaged in the program virtually were able to meet program goals and reported significant benefits such as reduced feelings of distress and decreased isolation. Evidence of group progression towards goals was shown through group members increased participation and openness to share artwork with the group, their use of art outside of the group as a coping skill, growth of emotional vocabulary, and increased group cohesion.
- **Metrics Used to Determine Success:**
 - Program measurements include quarterly self-evaluations conducted with participants, participants' verbal self-report and therapist report. Evaluations asked participants to rate 11 questions on a scale from one (the worst) to five (the best). A program intern assisted with evaluation completion to keep results confidential from the therapist and assist with questions about survey content.
- **Program Successes:**
 - COVID restrictions hindered the ability to complete evaluations in the first half of CY20. Of the evaluations completed, 100% of respondents rated all items with a three or better

CY22 Program Highlights and Outcomes

and 75% of respondents rated all items with a four or higher. These self reports were consistent on therapist observations about participation and engagement in sessions and client progress.

- **Average Cost Per Client in CY20:** \$1,080
- **Additional Information:**
 - Due to a concentrated effort from Life Exchange Center and Art Therapy Studio staff, clients at risk for negative behavioral health outcomes remained engaged in programming during the pandemic. Art kits were distributed to clients along with other resources by LEC staff and art supplies were provided to participants in the in-person sessions who may have been unable to participate in virtual programming. The agency will continue to monitor public health advisories and adapt to best meet the needs of the clients that are currently or able to be served by this program.

Peer Support Drop-In Center

There are five elements of the client-operated program that differ from traditional mental health services: control by clients, voluntary participation, mutual benefit, natural (i.e., peer) support, and experiential learning. Members are involved in personal and group decision-making at the agency. Individuals have access to a computer room, a quiet room and outside activities; no one is ever forced to participate in any activity. Members developed the rules for the center, and if a member is displaying problematic behaviors, the rules are applied. Mutual benefit occurs as a result of a supportive environment where staff emphasize opportunity through group empowerment, equal relationships, member activity and participation and practice in improved skills. Peer support provides positive role modeling and the sharing of life experiences that have and have not resulted in their role in recovery. Opportunities for experiential learning take place routinely, such as teaching members the proper way to wash clothes by bringing laundry to the center to properly wash and dry. Hygiene products are also available at the center for members who want to take a shower at the center or take them home. Women and men can also get their hair done and women often bring in nail care products to do each other's nails.

- **Target Population:**
 - Adults age 18 and older with mental health and/or substance use disorders residing on the Eastside of Cuyahoga County, primarily the Mount Pleasant community
- **Anticipated Number of Clients to be Served:** 50
- **Number of Staff Required to Implement Program:** 10
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Staff will adjust schedules to ensure sufficient peer support for clients and/or change programming as necessary. Full details are outlined in the agency's business continuity plan and the COVID-19 pandemic operation guidelines established by the Board and management staff to ensure services are streamlined.
- **Funding Priority:**
 - Peer Support
- **Program Goals:**
 - 75% of members will rate their satisfaction with LEC services as either good or very good

CY22 Program Highlights and Outcomes

- Serve 50 members a minimum of twice a week during CY22
- **Program Metrics:**
 - This data will be collected by direct report by member, mental health provider or family member and documented in member file and transferred to internal agency data base with built-in security features.
 - A standardized client satisfaction survey will be administered during the fall of 2022 to determine levels of program satisfaction. The survey will be administered by a client who is not a member of the agency to increase confidence in the process.
 - Data will be collected utilizing daily sign-in sheets.

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 75
 - **ADAMHS Funded Unduplicated Clients Served:** 45
 - **Total Number of Clients Served:** 45
 - **Total Number of Clients that Completed this Program/Service:** 0
- **Average Cost Per Client:** \$4,056
- **Additional Information:**
 - There have been three psychiatric hospitalizations thus far this year. Given that the primary method of contact has been via telehealth for most of the year, LEC is pleased that the numbers were not higher. Experience and research shows that when clients have relationships with peer support workers, their engagement with treatment providers is greater. Thus, psychiatric hospitalizations get reduced. Some use of crisis and psychiatric hospitalizations are expected while members are encouraged to be their most healthy selves.

CY20 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 150
 - **Total Number of Clients that were Served:** 71
 - **Total Number of Clients that Completed this Program/Service:** N/A
- **Goals Met:**
 - On-going, one-to-one peer support provided information to members on COVID care, access to COVID care program screening, and behavioral health support. Also, participation in school, jobs and employment services and hospitalization usage.
- **Metrics Used to Determine Success:**
 - Bi-monthly surveys were completed with members via telephone. Members were asked about program activities, voter registration, completing the census, basic needs, COVID-19 exposure or need of PPE.

CY22 Program Highlights and Outcomes

- **Program Successes:**
 - 30% of members report participating in vocational training or employment programs
 - 95% of members enjoyed program services and pandemic recovery bags
 - 33% of members received a wellness check
 - 56% participated in the Ohio COVID Cares Program
 - 25% of members were hospitalized for one of the following: mental health, substance use, physical health
 - Fewer than 10% of members were hospitalized for behavioral issues
- **Average Cost Per Client in CY20:** \$4,437
- **Additional Information:**
 - The agency was able to transition from in-person peer support groups to online Zoom sessions. Staff remained in contact with members on a daily, weekly and monthly basis. The agency received additional funding to support individuals during COVID-19. These funds were used to implement two community food giveaways. Information about Life Exchange Center programs was distributed at the food bank as well as CDC's COVID-19 staying safe guidelines. The agency provided monthly 'Pandemic Recovery Bags' to members, which included PPE, resources and activities to combat social isolation and support behavioral health. Additionally, inexpensive cell phones were purchased for members to participate in Zoom sessions.

Transitional Youth Housing Program

LEC provides support to vulnerable youth who are transitioning out of the foster care system or who have faced chronic homelessness in the Transitional Youth Housing Program. This program ensures that these youth have stable housing to help them live more productive lives by limiting homelessness and justice system involvement and increasing access to education and mental health and substance use treatment services. The Transitional Youth Housing Program assists young adults (18-24 years) in gaining independent living skills and self-sufficiency through a non-clinical peer support model with the ultimate goal of permanent housing and financial stability. Each young adult will work one-on-one with a Peer Recovery Support Specialist to provide encouragement and assistance to achieve permanent housing and long-term recovery. Individuals must demonstrate the potential to living independently and have a source of income to participate in the program.

- **Target Population:**
 - Young adults, 18-25 years of age that have aged out of foster care and have a mental health and/or substance use disorder diagnosis
- **Anticipated Number of Clients to be Served:** 5
- **Number of Staff Required to Implement Program:** 5
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Staff will adjust schedules and provide additional peer support to clients, as needed, if vacancies occur.
- **Funding Priority:**
 - Recovery Supports and Services to Transitional Youth

CY22 Program Highlights and Outcomes

- Peer Support
- **Program Goals:**
 - Maintain behavioral health symptoms effectively
 - Provide tools and social support resources to achieve one or more of the following goals: social interaction, increased community engagement, reduce denial of treatment and institutional confinement
 - Become financial stable and obtain permanent housing upon completion of the program
- **Program Metrics:**
 - Youth complete surveys, provide monthly feedback during house meetings, reported by case manager and individual peer sessions
 - Financial stability and the ability to obtain permanent housing is measured when a young adult has completed the program (as reported by Case Manager) and has obtain housing (verified with lease agreements and move-out dates)

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served: 5**
 - **ADAMHS Funded Unduplicated Clients Served: 5**
 - **Total Number of Clients Served: 5**
 - **Total Number of Clients that Completed this Program/Service: 2**
- **Average Cost Per Client:** \$16,500
- **Additional Information:**
 - Two youth successfully completed the program and upon graduating from high school, will continue with post-secondary education. One will be attending college and the other will attend a vocational program. A minimum of five young adults will be served by TYHP and 33% are expected to successfully complete the program, as measured by one or more of the following: maintain behavioral health symptoms effectively; complete educational goals, if indicated; obtain employment and obtain permanent housing. These young adults will also demonstrate independent living skills inclusive of self-care and increased pro-social skills.

CY20 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served: 5**
 - **Total Number of Clients that were Served: 2**
 - **Total Number of Clients that Completed this Program/Service: 2**
- **Goals Met:**
 - 40% of the program participants completed monthly goals in the following areas: education, housing, behavioral health management, successfully completed the program within one year and obtained permanent housing

CY22 Program Highlights and Outcomes

- 100% manage behavioral health symptoms effectively
- 60% completed educational goals, if indicated
- 100% demonstrated independent living skills inclusive of self-care, as well as, increased pro-social skills
- 80% obtained employment
- **Metrics Used to Determine Success:**
 - Monthly recording of home inspections, goal and budget sheets
 - Daily recording of time and activity sheets, contact and progress notes.
- **Program Successes:**
 - The program had optimal success with two young adults completing the program and one youth being accepted to college.
- **Average Cost Per Client in CY20:** \$82,500
- **Additional Information:**
 - N/A

Life Long Transportation

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
Life Long Transportation, LLC			
Non-Emergency Medical Transportation	\$ 60,000	\$ 75,000	Transportation
Total	\$ 60,000	\$ 75,000	

CY22 Program Highlights and Outcomes

Life Long Transportation, LLC.

Life Long Transportation, LLC., is a transportation service for clients residing in ADAMHS Board funded group homes and residential facilities needing non-emergency transportation for behavioral health services. Each driver has gone through a background check, has a clean driving record and goes through training before driving clients. Transportation team members participate in HIPAA training, vehicle operation training and shadow an experienced transportation specialist before driving the passenger van or other automobiles. Transportation staff is also trained in Motivational Interviewing.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

Non-Emergency Medical Transportation

Life Long offers quality transportation services by qualified drivers who are not only trained in the safe use of their assigned vehicles, they are also trained in the area of CPR, First Aid and administering Narcan. Life Long prides themselves on hiring employees who are compassionate about helping others and being of service to their fellow man. Emphasis is placed on the importance of open communication, trust, honesty and a willingness to help others. An expectation for Life Long employees is to continue to increase their knowledge with completion of trainings with a focus on addiction/mental health issues/trends. Life Long has added an additional focus on environmental health and safety due to the COVID protocols. Life Long Transportation employs a team of professionals that follow up and follow through on each and every transaction. Life Long staff are trained in Motivational Interviewing, preparing them to converse with clients during the trips in a non-confrontational manner because it is important to interact with clients professionally and compassionately. This program offers non-emergency medical transportation for individuals with substance use disorders and mental illness.

- **Target Population:**
 - Cuyahoga County residents receiving treatment and/or recovery support services for mental illness and/or substance use disorders that need non-emergency medical transportation.
- **Anticipated Number of Clients to be Served:** 1,728
- **Number of Staff Required to Implement Program:** 8
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Life Long transportation will continue to provide services when vacancies occur by assigning remaining drivers to scheduled transports when they do not have assignments. The Project Manager will also assist with coverage of vacant positions.
- **Funding Priority:**
 - Transportation

CY22 Program Highlights and Outcomes

- **Program Goals:**
 - Increasing accessibility for all people
 - Enhance quality of life
 - Meet customer expectations
 - To improve mental health of clients
 - To improve physical health of participants by decreasing stressors that initiate chronic physical health concerns
- **Program Metrics:**
 - Documented number of individuals and locations using transportation service
 - Request feedback from partnering organizations and clients through electronic or documented surveys
 - Self-reported documentation of ongoing MH and/or SUD recovery by program participants
 - Provide customer service surveys
 - Number of transports by each individual to MH appointments will be documented

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 432
 - **ADAMHS Funded Unduplicated Clients Served:** 10
 - **Total Number of Clients Served:** 10
 - **Total Number of Clients that Completed this Program/Service:** (not provided)
- **Average Cost Per Client:** \$806
- **Additional Information:** N/A

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 1,378
 - **Total Number of Clients that were Served:** 1,325
 - **Total Number of Clients that Completed this Program/Service:** 1,325
- **Goals Met:**
 - Successfully provided rides to expend funding by November of 2020.
- **Metrics Used to Determine Success:**
 - Client name, Number of rides, Ride Information (to and from)
- **Program Successes:**
 - Transportation was in high demand from January 1-December 31, 2020. Services were ceased during the months of April, May, November and December, leaving clients in need of transportation for their non-emergency medical transportation.

CY22 Program Highlights and Outcomes

- **Average Cost Per Client in CY20:** \$30
- **Additional Information:**
 - Drivers have been able to encourage participants to get vaccinated for COVID-19 because of the open communication it has with clients.

**Lutheran
Metropolitan
Ministries (LMM)**

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
Lutheran Metropolitan Ministries			
Adult Guardianship	\$ 215,000	\$ 221,450	24/7 Access
Women's Reentry Program	\$ 43,200	\$ 43,200	Prevention
Youth Afterschool Prevention	\$ 76,500	\$ 76,500	Prevention
Wrap Around Case Management	\$ -	\$ 100,000	24/7 Access
Total	\$ 334,700	\$ 441,150	
Pooled Funding:			
Non-Medicaid Treatment Services	\$ -	\$ -	

CY22 Program Highlights and Outcomes

Lutheran Metropolitan Ministry (LMM)

Lutheran Metropolitan Ministry (LMM) provides Behavioral Health Services, that empower individuals to overcome barriers, obtain job skills, gain employment, locate stable housing, access counseling and support services, secure second chances and become self-sufficient, productive members of our community.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

Youth Afterschool Prevention Program

The program includes selective prevention strategies, consisting of education, alternatives, information dissemination and problem identification and referral for youth residing in the group home, enrolled in one of the independent living programs or participating in the youth drop-in center. Utilizing evidence-based curriculums, to include but not limited to All-Stars, Teen Resiliency Building, Teen Practical Life Skills, and Teen Communications Skills, the overarching goal of the program is to mitigate risk factors that put youth at risk for alcohol, tobacco and other drug use, suicide, violence, early sexual activity and teen pregnancy by building resilience and increasing protective factors. The risk factors addressed by the program include but are not limited to: child abuse and neglect, early aggressive behavior, difficult temperament, low commitment to school, undiagnosed mental health problems, poverty, peer substance use, drug availability and favorable attitudes toward drugs. The protective factors include but are not limited to: emotional self-regulation, good coping and problem-solving skills, improved communication and language skills, ability to make friends and get along with others, stable, secure attachment to childcare provider, engagement and connections at school and with peers, clear expectations for behavior, physical and psychological safety.

- **Target Population:**
 - Youth in the custody of the Department of Children and Family Services, youth experiencing homelessness and youth who have run away from home. Youth may be admitted into the group home or enrolled in pre-independent or advanced-independent living programs.
- **Anticipated Number of Clients to be Served:** 48
- **Number of Staff Required to Implement Program:** 4
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - In the event of a staff departure, the agency will seek to recruit a replacement as quickly as possible; however, in the interim, the Program Manager and/or the VP, HWS will provide administrative and direct service support as needed to ensure staffing shortages do not interfere with our ability to provide contracted services.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services

CY22 Program Highlights and Outcomes

- Trauma Informed Care Treatment, Recovery and Prevention Services
- Prevention and Early Intervention
- **Program Goals:**
 - Increase youth awareness and knowledge about the consequences of alcohol, tobacco and other drug use
 - Increase resiliency and protective factors to mitigate risk factors associated with ATOD use
- **Program Metrics:**
 - Pre-/Post- Testing; demonstration of skill, youth self-report and feedback from peers and staff
 - Screening for Adverse Childhood Experiences (ACEs), Pre-/Post- Testing and utilize the Conner-Davidson Resilience Scale (CD-RISC) pre-programming and to measure change in skills

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 70
 - **ADAMHS Funded Unduplicated Clients Served:** 25
 - **Total Number of Clients Served:** 42
 - **Total Number of Clients that Completed this Program/Service:** 25
- **Average Cost Per Client:** \$328
- **Additional Information:**
 - LMM had less youth participating in prevention programming than projected. However, this is the result of having youth in the facility for longer stays. Typically, youth stay for approximately 14 – 21 days; however, during this period, a number of youth stayed well over 30 days. Although fewer youth participated in programming, the longer stays allowed additional time to reinforce prevention messaging, observe behavior and develop programming that is in alignment with client interests. During this period, more youth, primarily male but some females, self-reported experimentation with cannabis. As a result, staff spent more time discussing attitudes around the use of cannabis and educating them on the consequences of its use. Although the youth continued to view cannabis use as less harmful than other drugs, pre- and post- tests indicate that they gained knowledge about the consequences of cannabis use and a better understanding of its harmfulness.

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 70
 - **Total Number of Clients that were Served:** 21/350
 - **Total Number of Clients that Completed this Program/Service:** 21/350

CY22 Program Highlights and Outcomes

- **Goals Met:**
 - During the period of January 1 - March 16, 2020; LMM provided prevention services consisting of Education and Alternative strategies for 21 unique youth. Effective March 16, 2020, prevention staff were enlisted to assist with essential services. Staff assisted in providing daily support for individuals experiencing homelessness and supported food service department with meal preparation and delivery through December 31, 2020.
- **Metrics Used to Determine Success:**
 - These objectives were used to measure the success of the program: Attends set number of sessions; Demonstrates drug refusal skills; Demonstrates positive communication skills; Identifies drug free alternative activities; Identifies harmful effects of substance use; Perceives drug use as harmful; and Signs pledge to abstain from ATOD use after program.
- **Program Successes:**
 - Of the 21 youth receiving services during the period of January 1 - March 16, 2020; 73% (15) met 100% of the program objectives; 27% (six) youth met 67% of program objectives. Based upon the number of youth served during the first three months of CY20; if it were not for COVID-19; it is likely that LMM would have achieved its projected outcomes.
- **Average Cost Per Client in CY20:** \$215.57
- **Additional Information:**
 - During CY20, the prevention services staff were instrumental in providing support to essential services. Prevention staff were enlisted to provide management and support to the hotel hub project; an effort to reduce the spread of COVID-19 within homeless shelters by moving residents from the adult men and women's shelters into less congregated settings. Prevention staff provided daily support to residents ensuring that their basic needs were met as well as performing COVID-19 screenings, providing prevention education, training and conducting wellness checks. Additionally, prevention staff assisted residents with accessing resources and addressing myriad issues that arose as a result of COVID-19 and its impact on their ability to manage their personal affairs, mental/physical health and overall well-being. During the period of March 16, 2020 - December 31, 2020, prevention staff assisted approximately 350 residents. For the period of January 1 - March 16, average cost per client was \$303.57. From March 16 - December 31, the average cost per client was \$18.21.

Women's Re-entry Program

A 12-week trauma education/intervention program, consisting of trauma education groups sessions, individual counseling and yoga classes is provided to women returning from incarceration. Trauma education groups are conducted four days per week for three hours per session; individual counseling is provided on an as needed basis for participants requiring a trauma intervention and/or additional support; and yoga classes are offered two to three times per week. The program utilizes an evidence-based curriculum, Beyond Trauma: A Healing Journey for Women, with accompanying participant workbooks and videos. This program is one component of a comprehensive pre-release employment training program that provides women currently incarcerated at the Northeast Reintegration Center in Cleveland an opportunity to come into the community to gain employment skills and a meaningful work experience; empowering them to rejoin the workforce upon release and helping to reduce the likelihood of future involvement with the criminal justice system.

CY22 Program Highlights and Outcomes

- **Target Population:**
 - Incarcerated adult females fulfilling their sentence obligations at the Northeast Reintegration Center in Cleveland and participating in LMM's Chopping for Change (C4C) culinary training program
- **Anticipated Number of Clients to be Served: 30**
- **Number of Staff Required to Implement Program: 5**
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - In the event of a staff departure, a replacement will be recruited as quickly as possible and during the interim, the VP will be available to provide administrative and direct service support as needed.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Trauma Informed Care Treatment, Recovery and Prevention Services
 - Prevention and Early Intervention
 - Employment Programs
- **Program Goals:**
 - To develop and implement effective coping skills to carry out day to day responsibilities
 - To reduce maladaptive coping mechanisms and promote healing, acceptance of past events and responsible living
 - Increase resiliency
- **Program Metrics:**
 - Pre-/Post-Testing and evaluation to determine whether objectives of sessions have been met; resiliency assessment; client self-report; and feedback from peers and staff
 - The Brief Coping Inventory to Problems Experienced (COPE) will be used to assess each participant's coping response prior to engaging in programming to identify maladaptive coping mechanisms and to measure change at program completion.
 - The Conner-Davison Resilience Scale (CD-RISC) will be utilized to measure participant's resiliency pre- and post-programming

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served: 40**
 - **ADAMHS Funded Unduplicated Clients Served: 14**
 - **Total Number of Clients Served: 14**
 - **Total Number of Clients that Completed this Program/Service: 14**
- **Average Cost Per Client: \$501**

CY22 Program Highlights and Outcomes

- **Additional Information:**

- As reported previously, the distance learning platform is less than ideal for addressing the topic of trauma and its impact, especially for this population, which research has shown to have a high prevalence of trauma. However, during the pandemic, participants have reported receiving a real benefit from participation in the classes. Many have expressed feeling as if they have missed out because of not being able to share in the in-person group experience. However, each participant has been able to share positive takeaways from their participation and verbalize how they plan to utilize the skills learned in their daily lives; pre- and post-release. Additionally, they have shared that the classes have provided them with skills that they can use to deal with the isolation and stress brought about because of the pandemic. In CY20, there was a study of the program conducted by John Carroll University that found of the 183 women that had completed the program, only four (2%) had returned to prison; which is significant when compared to the state recidivism rate of approximately 18%. In addition to reporting a change in attitudes and behaviors, participants have consistently reported that they have felt welcomed, safe and respected.

CY20 Provider Outcomes

- **Highlights:**

- **Number of Clients that were Anticipated to be Served:** 40
- **Total Number of Clients that were Served:** 28
- **Total Number of Clients that Completed this Program/Service:** 27

- **Goals Met:**

- During the reporting period, staff was able to achieve program objectives; however, the number of individuals served were less than anticipated. Given that staff was able to serve 27 individuals despite the constraints of COVID-19, without the pandemic, the program would have been able to exceed the number projected to serve.

- **Metrics Used to Determine Success:**

- The metrics used to measure success of the program consist of improvement on the DARS post-survey when compared to the pre-survey. Additionally, participants are expected to achieve the following objectives: attend a set number of events, gain knowledge of trauma and its impact, demonstrate positive coping skills, gain knowledge of domestic violence, satisfactorily complete a significant amount of homework and/or assignments, gain knowledge of sexual violence and report satisfaction with the program.

- **Program Successes:**

- Of the 28 individuals enrolled in the program, 96% (27) completed the program. Of the 27 completing the program, 93% (25) achieved all program objectives and 88% (24) had an improved score on the DARS post-survey.

- **Average Cost Per Client in CY20:** \$1,543

- **Additional Information:**

- Although services were interrupted and the groups were not permitted to meet in-person as a result of COVID-19, participants shared that they received benefit from participation and were able to utilize the skills learned to effectively cope with the impact of the

CY22 Program Highlights and Outcomes

pandemic. Traditionally, this program is provided in the community for women that are currently incarcerated. Having the participants come into the community and work together through a group process is an integral component of the work that is done. LMM was grateful to be able to continue the work through a distance learning platform (Lantern), but this arrangement was far from ideal as it did not provide for real-time, video or audio interaction and at times the process felt disjointed. Nevertheless, given the reported feelings of isolation by participants as a result not being permitted to have visits during this period coupled with their concerns about themselves and their loved ones contracting the virus, having the ability to communicate with the outside world, process their feelings, and increase their coping skills during this period proved to be both critical and therapeutic. Survey responses from participants indicate that despite the unorthodox format, they found the program to be extremely helpful in getting them through a very difficult and stressful period.

Adult Guardianship Services

Guardianship Services (GS) operates under the Council on Accreditation (COA) and National Guardianship Association's Standards of Practice. Referrals to the program come from a variety of sources and throughout the referral, intake and assessment process, and GS works closely with referral sources to ensure that all community alternatives have been exhausted and that guardianship is the less restrictive alternative. The program provides trained legal guardians to serve as concerned, caring advocates and surrogate decision-makers. Individuals referred are often in crisis and have a pending medical and/or placement decision after suffering from abuse, neglect or exploitation. During the intake process, an initial assessment is made to determine if an individual is appropriate for guardianship and alternatives are explored. These assessments are conducted virtually or in-person as appropriate to ensure safety protocols are in place during the COVID-19 pandemic. Intake information is collected and along with a guardianship application is submitted to the probate court. Through due process and after further investigation, the court makes the determination that an individual (ward) is incompetent and assigns a guardian. A legal guardian makes decisions such as authorizing medical treatment or hospital admission. Guardianship provides a means of stabilizing the individual in the short-term. In the long-term, the individual's overall well-being is impacted by addressing compliance with a mental health plan of care. Specifically, guardianship is a part social and part legal relationship and guardians are responsible for managing all aspects of care for the life of the ward, including basic living necessities, timely and appropriate medical care, placement in safe, stable housing, securing benefits to which wards are entitled, making appropriate legal/financial decisions, implementing advanced directives to ensure proper end-of-life care, and funeral planning. Guardians manage symptoms, coordinate medical care, weigh the benefits of treatment versus no treatment and enroll wards in hospice care. Guardians are available 24-hours per day, 7-days per week and provide services where the person under guardianship resides. Within five days of a guardianship appointment, an individualized, person-centered Guardian Service Plan is implemented. This plan guides the guardian for service delivery and is annually reviewed. Services are monitored through the Guardian Service Plan to ensure needs are identified, appropriate interventions applied, and attention given to the health, safety and quality of life of clients. Medical decision-making is a primary responsibility of guardianship, as incompetent individuals may be unable to seek appropriate care and are not able to make their own medical decisions due to lack of understanding and/or comprehension of such complex issues as their diagnosis, disease processes, or disease management. As advocates, guardians encourage collaboration between health care providers for continuity of care.

CY22 Program Highlights and Outcomes

- **Target Population:**
 - Services are provided to adults of Cuyahoga County who are indigent, deemed incompetent and are without family or friends
- **Anticipated Number of Clients to be Served: 93**
- **Number of Staff Required to Implement Program: 18**
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - When a vacancy occurs, the supervisor guardian takes over the caseload and cases are transferred to other guardians until the vacancy is filled. No services will be disrupted to any of the wards during a vacancy. LMM has a full HR department that assists each program with recruitment, hiring and orientation to fill vacancies in a timely manner.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Trauma Informed Care Treatment, Recovery and Prevention Services
- **Program Goals:**
 - All persons under guardianship, who have a mental health disorder, have proper access to and coordination of physical and behavioral healthcare to meet their individualized needs and significantly improve their quality of life. A person-centered care approach will be used to develop and monitor the service plan to ensure individual needs are identified, appropriate interventions applied identifying least restrictive options, and attention given to the health, safety, quality of life and dignity for the clients.
 - To ensure adults diagnosed with severe and persistent mental illness have their basic needs met, can access timely and appropriate medical care, receive entitled benefits, live in safe affordable housing, have advanced directives in place, a funeral plan, and appropriate legal decisions made on their behalf. Guardians will coordinate, assess, and monitor interventions that are made using the principles of best interest consistent with ethical guardianship practice resulting in improved quality of life.
- **Program Metrics:**
 - These interventions are implemented through the lens of a person-centered care approach. Within 90 days after guardianship is appointed, 90% of the goals outlined in the individual guardianship service plan will implemented.
 - Medical decision making is most paramount and 35% of guardianship decision-making is focused on medical needs. Guardians will visit 100% of their wards at least monthly when residing within the county and quarterly if residing out of county. These visits will be in-person or virtual as appropriate to ensure safety protocols are in place during the COVID-19 pandemic.

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served: 93**
 - **ADAMHS Funded Unduplicated Clients Served: 82**
 - **Total Number of Clients Served: 489**

CY22 Program Highlights and Outcomes

- **Total Number of Clients that Completed this Program/Service:** 0
- **Average Cost Per Client:** \$1,271
- **Additional Information:**
 - N/A

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 93
 - **Total Number of Clients that were Served:** 86
 - **Total Number of Clients that Completed this Program/Service:** 86
- **Goals Met:**
 - 92% of the goal to serve unduplicated clients and 176% of the goal to provide 1,500 hours of guardianship decision-making has been achieved. New guardianships are appointed by the court within four to six weeks of filing. During COVID, court hearings are conducted virtually. Individualized Guardianship Service Plan (GSP) developed within two working days of court appointment. Within 90 days after the guardianship is appointed, 90% of the goals outlined in the client's GSP are implemented.
- **Metrics Used to Determine Success:**
 - Guided by an annual work plan, GS utilizes the following metrics: 35% of guardianship decision-making is focused on meeting physical and behavioral health needs; 100% of clients residing in the county receive at least monthly visits; and 100% of clients residing outside of the county receive quarterly visits from the guardian or an agency representative.
- **Program Successes:**
 - 36% of guardianship decision-making was focused on meeting physical and behavioral health needs; 95% of clients residing in the county received a virtual or when possible an in-person social distanced monthly visit and 35% were visited two or more times; and 100% of clients residing outside of the county received a virtual or when possible an in-person quarterly visit from the guardian or an agency representative. Due to COVID restrictions, the virtual visitations were conducted where appropriate and allowed the guardian to speak with the facility's nursing and social work staff and if available, the ward themselves to assess the medical status and well-being of the ward. In-person visitations were conducted when available and if appropriate through social distanced procedures along with PPE worn by the guardian and ward at all times.
- **Average Cost Per Client in CY20:** \$2,500
- **Additional Information:**
 - Guardianship impacts individuals with severe mental illness and/or substance use disorders in significant ways, including providing access to services that can be life changing.

CY22 Program Highlights and Outcomes

Wraparound Case Management

This program proposes the front door engagement services which include outreach, engagement encounters to screen for appropriate linkage to behavioral health services, and warm hand-off to ongoing services either provided by LMM Health and Wellness Services or other community partners. Oftentimes, assisting participants with seeking housing, developing a path towards gainful employment or successful reentry to community from incarceration is negatively impacted when participants are not able to address unidentified needs that may be preventing them from achieving their goals. Concurrent and focused interventions targeting both behavioral health needs and housing plans can improve outcomes for those with BH related barriers and are experiencing homelessness. Engagement and screening are critical first steps to assist the participant with identifying issues that, if left unaddressed, are likely to interfere with their ability to be successful in achieving identified goals and rapid exit from shelter. It is at this early-stage staff is build rapport and offer services and support to participants. Although LMM is a Medicaid/Medicare provider and contracted with the ADAMHS Board to provide services, these vitally important front-end services are not eligible for reimbursement. Due to the transient nature of those served and the requirement for participants to have a diagnosis to bill for services, many interventions provided in effort to connect clients to behavioral health services are not reimbursable but are necessary for the client to obtain safety net behavioral health services. This program would increase protective factors including access to mental health and substance use services and improve likelihood for moving clients from homeless to housed.

- **Target Population:**

- Individuals and families experiencing homelessness, youth aging out of foster care and DCFS involved-youth, vulnerable adults requiring guardianship and justice involved adults.

- **Anticipated Number of Clients to be Served: 208**

- **Number of Staff Required to Implement Program: 4**

- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**

- This program is uniquely poised to cross multiple services areas including Housing and Shelter, Health and Wellness Services, and Workforce Development. Because these programs operate independent of this proposed program, participants will continue to receive critical safety net services regardless of the program. LMM intends to fill vacant positions immediately. However, if a position is vacant, other staff members involved in the program will be available for coverage to ensure clients receive the services and care for which the program is funded. Housing and Shelter will have one FTE dedicated to the program and a management level staff to assist in maintaining the program while the direct service position is vacant. Health and Wellness Services will have the equivalent of one FTE to serve clients over Health and Wellness programming, Workforce Development and will have a management level staff to assist in maintaining the program if the direct service position(s) is vacant.

- **Funding Priority:**

- Culturally Appropriate and Evidence-based Diverse Services
- Trauma Informed Care Treatment, Recovery and Prevention Services

- **Program Goals:**

- Program staff will outreach and make aware of available program to 1,940 clients in program year/reporting period

CY22 Program Highlights and Outcomes

- Program staff will meet with and enroll into caseload 208 unduplicated clients into program
- Program staff will have 416 encounters with enrolled clients over program/reporting year leading to linkage
- Program staff will ensure linkage to ongoing BH services with 52 clients of the total served in engagement services of program
- **Program Metrics:**
 - LMM staff will track number of people who are outreached, given information on how and when to access program and what program is, will be shared at intake
 - Program staff will track how many clients seek services and are enrolled into program for engagement services in effort to link
 - Program staff will track how many times clients are seen in program
 - Program staff will track number of clients who are linked to ongoing BH services by completing their intake/assessment with BH partner

First Six Months of CY21 Provider Outcomes: N/A – New Program

Magnolia Clubhouse

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
Magnolia Clubhouse			
Clubhouse Programs and Employment	\$ 579,840	\$ 579,840	Employment
Total	\$ 579,840	\$ 579,840	

CY22 Program Highlights and Outcomes

Magnolia Clubhouse

Magnolia Clubhouse, a center of psychiatric rehabilitation for people living with mental illness, is part of an international evidence-based, best practice Clubhouse Model recognized by the Substance Abuse and Mental Health Services Administration (SAMSHA). The clubhouse community supports employment, education, and health and wellness.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

Clubhouse Programs and Employment

The essential elements of the Clubhouse service are comprehensive psychiatric rehabilitation. Following the international evidence-based best practice Clubhouse Model, Magnolia Clubhouse offers high-quality mental health and recovery services in a comprehensive intentional therapeutic community of mental health professionals and peers working in partnership. The service supports employment, education, housing and includes advocacy and community education. Magnolia Clubhouse also offers onsite psychiatric and primary care services integrated with the Clubhouse. The services are trauma informed and are also preventive of more severe negative outcomes.

- **Target Population:**
 - Adults 18 years and older who live with mental illness
- **Anticipated Number of Clients to be Served:** 425
- **Number of Staff Required to Implement Program:** 24
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Staff are cross trained as much as is feasible, and members are reassigned when vacancies occur. The service is provided as a group service with an individual focus and the community functions very well as a team.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Trauma Informed Care Treatment, Recovery and Prevention Services
 - Recovery Supports and Services to Transitional Youth
 - Recovery and Treatment Services to Specialized Populations
 - Peer Support
 - Prevention
- **Program Goals:**
 - Recovery as defined by the individual and enhanced quality of life
 - Opportunities for vocational, educational and social success for each member

CY22 Program Highlights and Outcomes

- Improved overall health
- Program achievement of the highest quality and outcomes including accreditation at the highest levels
- Increased membership and Clubhouse services in our community
- **Program Metrics:**
 - Members reported progress on individual goals
 - Clubhouse Model and CARF accreditation including employment benchmarks
 - Strong outcomes of the Clubhouse Satisfaction and Outcomes Survey
 - Members reported progress and data from Clinic services
 - Increase of people served
 - Positive achievements in advocacy and community education (CAHOOTS program implementation, CIT training and Medicaid funding for the Clubhouse Model, as examples)
 - Increased referrals and increased connection with families, faith-based communities and youth in transition

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 376
 - **ADAMHS Funded Unduplicated Clients Served:** 307
 - **Total Number of Clients Served:** 307
 - **Total Number of Clients that Completed this Program/Service:** 0 (membership is lifelong)
- **Average Cost Per Client:** \$787
- **Additional Information:** N/A

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 400 total served by the Clubhouse, 115 for employment
 - **Total Number of Clients that were Served:** 376 total served by the Clubhouse, total members employed 120, members newly employed 41
 - **Total Number of Clients that Completed this Program/Service:** 0 (membership is lifelong)
- **Goals Met:**
 - Met 100% of service goals
- **Metrics Used to Determine Success:**
 - Employment is a part of the Psychiatric Rehabilitation that the Clubhouse offers, so the metrics used are Attendance, Employment, Education, Health and Wellness, Advocacy/Community Education and Accreditation by Clubhouse International and CARF (June 2019 Accreditations at the highest levels).

CY22 Program Highlights and Outcomes

Program Successes:

- Average Daily Attendance: 54, Number of members employed: 120, Number of members who were newly employed: 41, Number of members in educational pursuits: 51
- **Average Cost Per Client in CY20:** \$1,542
- **Additional Information:**

Magnolia Clubhouse continues to deliver a high quality of effective service, and continues to exceed model benchmarks for Employment. The Clubhouse is a leader in the international network of over 300 Clubhouses and is currently involved in leadership efforts to expand the Clubhouse model across the state of Ohio in partnership with NAMI and OhioMHAS. The Clubhouse is also actively involved in advocacy efforts to inform local police departments about CAHOOTS as an additional option to current efforts to provide safe and necessary crisis services to people living with severe mental illness. This fall, staff held a health fair with health and oral screenings and flu vaccines. The MetroHealth mobile mammogram unit participated and completed 16 mammograms.

May Dugan Center

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
May Dugan Center			
MH Prevention - Transitional Transgender Youth	\$ 6,000	\$ 6,000	Prevention
In-Home Coordinated Behavioral Health for Aging Adults	\$ -	\$ 19,208	Specialized Pop.
Total	\$ 6,000	\$ 25,208	
Pooled Funding:			
Behavioral Health Treatment Services	\$ -	\$ -	

CY22 Program Highlights and Outcomes

May Dugan Center

May Dugan Center (MDC) is certified to provide Mental Health Services to adults, adolescents and children. Mental Health Counseling, Case Management, Prevention Services and Wrap-Around Services are provided as well as trauma-informed services. Target populations are low-income individuals and the Lesbian, Gay, Bisexual and Transgendered (LGBT) Community in need of Counseling or Community Psychiatric Support Treatment.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

MH Prevention - Transitional Transgender Youth

To address the needs of transgender Cuyahoga County residents struggling with mental illness, especially transitional youth (up to age 25) who are at very high risk of poor outcomes due to untreated mental illness, May Dugan Center is developing an LGBTQ+ team for its Behavioral Health Services department. This specialized team will be comprised of persons with lived LGBTQ+ experience, and offer a mix of specialized prevention and behavioral health services, including psychotherapy (individual and group) and intensive CPST/ TBS support. To target the high-risk needs of transgender individuals, the current candidate for the newly created LGBTQ+ therapist is a non-binary transgender individual who has lived experience of homelessness and discrimination. As part of the LGBTQ+ Mental Health Prevention Services, May Dugan Center is currently exploring developing collaborations with School of One, the Cleveland Municipal School District and the LGBT Center to offer prevention services to at-risk LGBTQ+ youth and transitional youth (up to age 25). Additional opportunities to offer targeted LGBTQ+ Mental Health Prevention Services are anticipated to be identified through CY22, as part of planned targeted, intensive outreach efforts. Outreach is proposed to be provided by a planned non-binary, transgender therapist.

- **Target Population:**
 - Transgender and LGBTQ+ Cuyahoga County residents struggling with mental illness, especially transitional youth (up to age 25)
- **Anticipated Number of Clients to be Served: 70**
- **Number of Staff Required to Implement Program: 1**
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - In the event of a staff vacancy, the Director of Behavioral Health, who is an LISW-S, may provide counseling support until a new staff member is hired, to ensure continuity of care. Additionally, several case managers and therapists have LGBTQ+ experience, to ensure prevention and treatment services are uninterrupted.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Care Responder Teams

CY22 Program Highlights and Outcomes

- Trauma Informed Care Treatment, Recovery and Prevention Services
- Harm reduction efforts and strategies
- Wrap-around Behavioral Health Services for Youth
- Recovery Supports and Services to Transitional Youth
- **Program Goals:**
 - At least 70 LGBTQ+ youth/ transitional youth will receive mental health prevention services annually
 - Based on specialized and targeted, intensive outreach and prevention services offered in the community, at least 35 transgender individuals will be enrolled in specialized LGBTQ+ psychotherapy and TBS/CPST services
 - At least 70% of LGBTQ+ individuals enrolled in prevention services and 70% of transgender individuals receiving specialized LGBTQ+ behavioral health treatment will demonstrate improved functioning using a prevention pre- and post-assessment and/ or a pre- and post-PTSD CheckList - Civilian Version (PCL-C)
- **Program Metrics:**
 - Sign-in sheets from Prevention Services, including topics and education presented.
 - Number of intensive, targeted outreach attempts.
 - Number of at-risk transgender individuals who received outreach services.
 - Number of at-risk transgender individuals who are enrolled in LGBTQ+ specialized behavioral health treatment.
 - Prevention education pre- and post-assessment results. PCL-C pre- and post-assessment results.

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served: 50**
 - **ADAMHS Funded Unduplicated Clients Served: 6**
 - **Total Number of Clients Served: 6**
 - **Total Number of Clients that Completed this Program/Service: 6**
- **Average Cost Per Client:** \$500
- **Additional Information:**
 - Outcomes for the first half of 2021 are small for several reasons. The ability to outreach, build prevention groups and identify youth were limited due to COVID-19. Staff were not able to meet face-to-face with students or go to facilities to engage with youth. Most youth were in an online learning model of education and prevention was provided virtually. There was a significant change in attendance when Cleveland Metropolitan School District (CMSD) went back to a hybrid model of education on March 22, 2021. Students stopped attending the bi-weekly Zoom sessions. Additionally, prevention classes ended in late May, to correspond with the end of the school year. Staff met to try to determine ways to improve attendance when the fall term resumed. It was felt that once

CY22 Program Highlights and Outcomes

CMSD returns to an in-school learning model, staff would better be able to identify at-risk students and encourage them to actively attend the group. Staff is planning on creating t-shirts to increase the groups' visibility and offer more therapeutic games and other interactive activities to improve student participation. Additionally, May Dugan Center has been actively exploring ways to significantly increase behavioral health interventions (both psychotherapy and prevention) to the LGBTQ+ community. Staff is particularly committed to addressing the needs of adolescents/emerging adults and transgender individuals. The goal is to hire a dedicated LGBTQ+ therapist before the start of the next school year. The candidate who has been hired and is scheduled to begin providing services in the fall is transgender and non-binary. It is believed that this individual will be able to significantly enhance behavioral health services to the LGBTQ+ community, especially at-risk transitional youth. Further, staff recently met with Zerrine Bailey at CMSD to begin to discuss the needs of the School of One program and ways May Dugan Center can support the needs of this program and other CMSD buildings.

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 10
 - **Total Number of Clients that were Served:** 47
 - **Total Number of Clients that Completed this Program/Service:** 47
- **Goals Met:**
 - Staff planned to use the CRAFFT Screening Tool for adolescent substance abuse as well as a GSA screening inventory. The CRAFFT is a well-validated substance use screening tool for adolescents ages 12-21 and is recommended by the American Academy of Pediatrics Bright Futures. The Trauma Resiliency Survey measures the use of coping strategies, resiliency, anxiety and depression. Due to the fact that schools were closed in March 2020, staff was unable to administer these tools to obtain comparisons to the baseline. Staff expressed concern during the year that students were more depressed and anxious and appreciated the ability to refer students directly to the GSA facilitator (also an LPC) for one-on-one therapy as needed. Crisis therapy could be done on a limited basis without parental consent which was often presented as a concern for students.
- **Metrics Used to Determine Success:**
 - The CRAFFT is a well-validated substance use screening tool for adolescents ages 12-21 and is recommended by the American Academy of Pediatrics' Bright Futures. It measures the students abuse and their participation in activities where others abuse substances. The Trauma Resiliency Survey measures the use of coping strategies and resiliency, as well as the degree of anxiety and depression students are experiencing.
- **Program Successes:**
 - 47 students participated in 32 groups. This group also planned and implemented a discussion panel of five gay, lesbian and trans-sexual panel members who discussed what it was like to identify as they did in a school setting. This event was offered to the entire school.
- **Average Cost Per Client in CY20:** \$128

CY22 Program Highlights and Outcomes

- **Additional Information:**

- Jennifer Shaw, the Aerospace Science teacher who partners with May Dugan's staff (Alison Theurer) to facilitate the GSA group commented as follows: "The students who participated in the GSA had a totally dramatic shift in their demeanor, attendance, grades, attitude and depression. Without Alison's help, I would have disbanded GSA because of the deep issues some of the students had with their depression and horrible thoughts they were feeling, nightmare's, etc."

Behavioral Health Treatment Services

The May Dugan Center is a unique community-based behavioral health agency due to the large number of coordinated and wrap-around services offered. The agency has developed and implemented programs and services designed to address mental health, addictions, trauma, food insecurity, housing insecurity/ homelessness, unemployment, education, aging, pregnant teens and non-English speaking residents trying to learn English as a second language. May Dugan Center operates a Trauma Recovery Center that works with law enforcement and hospitals as a crisis stabilization program for victims of violent crimes. This program makes referrals to Behavioral Health Services to address the mental health and addiction needs of these clients. As a CARF-accredited agency, the May Dugan Center Behavioral Health Services operates using a comprehensive, coordinated and person-centered model, to ensure an integrated, holistic and individualized approach to helping persons struggling with mental health and/or substance abuse issues to achieve improved well-being and recovery. Services are tailored to the unique needs of each client. The agency provides coordinated, comprehensive mental health and substance abuse services, including: Diagnostic assessments (including SUD level of care assessments), Individual and group psychotherapy, Comprehensive case management services including, SUD case management, CPST and TBS services, Mental Health Day Treatment, SUD intensive outpatient services, SUD individual counseling, Crisis intervention services, Mental health prevention services, Dialectical Behavioral Therapy (DBT), Eye Movement Desensitization and Reprocessing Therapy (EMDR), Cognitive Behavioral Therapy (CBT), Trauma Focused Cognitive Behavioral Therapy (TFCBT), Cognitive Behavioral Therapy for Psychosis (CBT-p), Motivational Interviewing (MI), Solution Focused Behavioral Therapy (SFBT), and Integrated Dual Disorder Treatment (IDDT).

- **Target Population:**

- All individuals with behavioral health needs in Cuyahoga County, including mental illness, substance use disorders, trauma, co-occurring disorders, and/or chronic medical conditions

- **Anticipated Number of Clients to be Served: 550**

- **Number of Staff Required to Implement Program: 15**

- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**

- May Dugan Center has a sufficient number of staff to triage and address the needs of clients in the event of staff vacancies. In the event of a vacancy, affected clients will be temporarily re-assigned to other therapists, substance abuse counselors or case managers until the vacant position is filled.

- **Funding Priority:**

- Culturally Appropriate and Evidence-based Diverse Services
- Trauma Informed Care Treatment, Recovery and Prevention Services

CY22 Program Highlights and Outcomes

- Harm reduction efforts and strategies
- Wrap-around Behavioral Health Services for Youth
- Recovery Supports and Services to Transitional Youth
- **Program Goals:**
 - Provide CPST/TBS support to reduce the number of clients who are uninsured
 - 100% of non-Medicaid pooled services clients will receive either Ohio Scales or BAMS assessment
 - 80% of individuals receiving peer support services and/or extended trauma counseling will demonstrate improvement using a pre- and post-assessment Ohio Scales or BAMS
- **Program Metrics:**
 - Number of clients who attain Medicaid coverage during the program year
 - Number of ADAMHSCC-funded clients who completed an Ohio Scales or BAMS
 - Number of clients who received an Ohio Scales or BAMS pre- and post-assessment who demonstrated reduced distress and/or disability

In-Home Coordinated Behavioral Health for Aging Adults

This program provides outreach to meet the needs of older adults who are often isolated. Staff will be trained to identify at-risk seniors and refer them for psychiatric follow-up and linkage to a multi-disciplinary provider team. These supports are especially needed by older adults struggling with severe mental illness, as they experience substantially higher rates of diabetes, lung disease, cardiovascular disease and other comorbidities that are associated with early mortality, disability and poor functioning. To outreach and meet the needs of isolated older adults with mental illness, SAMHSA recommends the PATCH (Psychogeriatric Assessment and Treatment in City Housing) Model. This model draws on ACT and the Gatekeeper Model.

- **Target Population:**
 - Adults 55 years of age and struggling with mental illness
- **Anticipated Number of Clients to be Served: 75**
- **Number of Staff Required to Implement Program: 1**
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - The Director of Behavioral Health is an LISW-S with experience in crisis intervention, PSMI and aging. She will triage and address the needs of at-risk older adults in the event of a staff vacancy.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Care Responder Teams
 - Trauma Informed Care Treatment, Recovery and Prevention Services
 - Harm reduction efforts and strategies
 - Recovery and Treatment Services to Specialized Populations
 - Peer Support

CY22 Program Highlights and Outcomes

- **Program Goals:**

- To identify at least 75 at-risk seniors through outreach and triage of May Dugan Center food distribution, rental/utilities assistance and Seniors on the Move Program
- To complete an in-home assessment of the mental health and health-safety needs of at least 50 at-risk seniors
- To provide integrated home-based TBS/CPST and Psychotherapy (based on elements of the PATCH Model) to 35 assessed at-risk seniors

- **Program Metrics:**

- Number of at-risk seniors referred to Behavioral Health Service to conduct an outreach home visit during intake of other May Dugan Center basic needs or senior services
- Number of in-home at-risk senior screenings and assessments completed by Behavioral Health Services
- Number of at-risk seniors receiving in-home psychotherapy and TBS/CPST services through Behavioral Health Services, regardless of insurance status or ability to pay

First Six Months of CY21 Provider Outcomes: N/A – New Program

Provider:	May Dugan Center	2020 First Outcome Count:	0	2021 First Outcome Count:	1
Instrument:	Brief Addiction Monitor	2020 Final Outcome Count:	0	2021 Final Outcome Count:	0
Program:	Substance Use Disorder Treatment	2020 % of Final:	0	2021 % of Final:	0

The Brief Addiction Monitor (BAM) is a measurement instrument originally designed for the Veterans Administration to provide an assessment of substance use disorder among adults (18+ years). The instrument is used to monitor progress and help guide treatment.

Provider:	May Dugan Center	2020 First Outcome Count:	0	2021 First Outcome Count:	0
Instrument:	DESSA MINI	2020 Final Outcome Count:	0	2021 Final Outcome Count:	0
Program:	Youth Prevention	2020 % of Final:	0	2021 % of Final:	0

The Devereux Student Strength Assessment (DESSA) is an abbreviated assessment designed by the Devereux Advanced Behavioral Health organization for school age children. This instrument is used as a screening tool to identify children who are in need for additional social or emotional education. There are measurement instruments specific for children in Grades K – 8 and for children in Grades 9 – 12.

When the data contains both an initial (first) and follow-up (final) instrument administration, a paired t-test was used for comparing individual scores at those two different points in time. It is the most powerful test for showing changes in individuals. The green highlighted rows suggest that changes from the First Assessment to the Final Assessment did not happen by chance and that the change can be attributed to the program intervention.

Population	Evaluation Year	Subscale	First Outcome Average	Final Outcome Average	Average Difference	Significance
Grades 9 - 12	2020	No Scale				Not Significant
Grades K - 8	2020	No Scale				Not Significant
Grades 9 - 12	2021	No Scale				Not Significant
Grades K - 8	2021	No Scale				Not Significant

MetroHealth System

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
The MetroHealth System			
Jail Liaison Program - Wellness Re-Entry Assistance	\$ 75,000	\$ 78,000	Specialized Pop.
Specialized Recovery Housing	\$ 60,122	\$ 120,090	Housing
Total	\$ 135,122	\$ 198,090	

CY22 Program Highlights and Outcomes

The MetroHealth System

Founded in 1837, MetroHealth operates four hospitals, four emergency departments and more than 20 health centers and 40 additional sites throughout Cuyahoga County. MetroHealth also offers a wide array of behavioral health services. The System serves more than 300,000 patients, two-thirds of whom are uninsured or covered by Medicare or Medicaid.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

Jail Liaison Program - Wellness Re-entry Assistance

The jail liaison program provides fully integrated primary care, mental health care, substance use treatment, and case management necessary to coordinate comprehensive release planning. Rooted in the Agnew Beck, Institute for Healthcare Improvement, and SAMHSA's GAINS Center for Behavioral Health and Justice Transformation Sequential Intercept Model, the MetroHealth Wellness Re-entry Assistance Program (WRAP) program works to accomplish several goals within the model. By being incarcerated in the jail, patient/inmates will automatically be given an opportunity to engage and restore with MetroHealth's Correctional Health and WRAP program. At the point of discharge, the WRAP program works to ensure a smooth reentry for SPMI clients and helps to meet needs around the continuum of care. The WRAP program is a collaborative effort with other agencies and institutions to provide fully integrated care to the most seriously challenged patients moving from jail back to the community. The program draws together mental health care, addiction services, primary care, specialty medical care, medication, health education and case management. Community mental health agency (CMHA) partners provide all case management; MetroHealth provides medical care and medications and labs; mental health and addiction care is provided based on client preferences, need, history and accessibility. MetroHealth also provides Peer Recovery support for inmates with SUD during incarceration at the jail to stabilize and provide short-term treatment. MetroHealth has demonstrated that providing intensive, integrated care in coordinated partnership across agencies can dramatically reduce jail bed days and re-bookings, and increase and stabilize health care, in this highly vulnerable population. Once released, the Outpatient Navigator will engage with the clients to ensure continuity of care and reduction in recidivism. The program also reviews changes in sociodemographic characteristics, such as connections to family, living circumstances, and employment and education.

- **Target Population:**

- Adults with severe mental illness who have been incarcerated in the Cuyahoga County Jail, and who are reintegrating to community

- **Anticipated Number of Clients to be Served:** 600

- **Number of Staff Required to Implement Program:** 3

- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**

CY22 Program Highlights and Outcomes

- The team will cover for each other as well as utilize resources in the Correctional Health and outpatient facilities if needed.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Mental Health Residential Treatment
 - Trauma Informed Care Treatment, Recovery and Prevention Services
 - Recovery and Treatment Services to Specialized Populations
 - 24 Hours/Seven Days Access
- **Program Goals:**
 - Reduce client recidivism and jail bed days
 - Increase and improve outpatient care in the community
 - Ensure integration of primary and specialty medical care with psychiatric and substance use care and combine them with active case management
- **Program Metrics:**
 - Number of clients that return to jail in a given time frame will measure recidivism
 - Number of jail bed days of clients will be tracked and compared to prior incarcerations
 - Number of outpatient encounters for clients will be tracked
 - Number of clients engaging in multiple areas of care will be tracked and reported

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 440
 - **ADAMHS Funded Unduplicated Clients Served:** 290
 - **Total Number of Clients Served:** 290
 - **Total Number of Clients that Completed this Program/Service:** 71
- **Average Cost Per Client:** \$129
- **Additional Information:**
 - The program is intensive coordination of integrated services that begins before clients leave the jail and continue into the community. One of the goals of the program is to advocate for clients in the jail and assist with the release and release planning of these clients. Often this requires a lot of collaboration and collateral communication with family members, court personnel, treatment providers and sometimes guardians to ensure the most effective and successful transition of the client back into the community and to provide them with the tools and linkage for them to succeed and keep the community safe. From January to June 2021, the MetroHealth Liaison performed a monthly average of 403 collateral contacts to the above entities.

CY22 Program Highlights and Outcomes

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 440
 - **Total Number of Clients that were Served:** 739
 - **Total Number of Clients that Completed this Program/Service:** 182
- **Goals Met:**
 - Approximately 65% of inmates committed to the Cuyahoga County Jail suffer from mental illness and 50% of inmates suffer from Severe Mental Illness. The MetroHealth Jail Liaison program proposed the following goals for the program: reduction in jail bed days, increase in the use of outpatient services, and connection to medical services. With the average case load of 61 per month, 27% of clients were released from jail each month. Of the clients released, 100% were linked with at least one service in the community.
- **Metrics Used to Determine Success:**
 - Staff collected extensive screening data that included identifying and sociodemographic information, quality of life and living conditions (Ohio SOAR), drug use history (Brief Addiction Monitor), standardized symptoms of mental illness (MINI International Neuropsychiatric Interview), as well as Informatic data built into the electronic Medical record.
- **Program Successes:**
 - The average caseload of the MetroHealth Liaison is approximately 59 clients per month; approximately 37% of these clients are diagnosed with a Severe Mental Illness and 43% are diagnosed with a mental illness that does not meet criteria for a Severe Mental Illness. As a result of the work of the MetroHealth Jail Liaison, 81 new clients had a diagnostic/linkage assessment performed. On average, 16 clients were released per month, and prior to release, linkage to a variety of community resources is performed.
 - In CY20, the jail liaison program coordinated with various courts including CCP Mental Health/ Developmental Disabilities dockets, CCP regular dockets, and Cleveland Municipal Court. Of the 182 clients released, 8% were linked with housing, 84% were linked with CPST services, 93% were linked with outpatient Psychiatric Pharmacological services, 53% were linked with substance use treatment, including Medication Assisted Treatment, and 48% were linked with primary medical care, etc.
 - One of the goals of the program is to advocate for clients in the jail and assist with the release and release planning of these clients. Often this requires collateral communication with family members, court personnel, treatment providers and sometimes guardians to ensure the most effective and successful transition of the client back into the community and to provide them with the tools and linkage for them to succeed and keep the community safe. In CY20, the MetroHealth Liaison performed a monthly average of 259 collateral contacts to the above entities.
- **Average Cost Per Client in CY20:** \$101
- **Additional Information:**
 - The liaison program assists with medication/insurance gaps for both mental and physical health needs for clients upon release from the Cuyahoga County Correctional Facility. The

CY22 Program Highlights and Outcomes

jail liaison assists with the identification of Mental Health Court docket eligible clients and communicates mental health and medical stability for release and placement by conducting thorough discussions with clients and collaborating with correctional health medical staff. The jail liaison is the contact for MetroHealth Medical Center to collaborate with the court, treatment team, jail, MetroHealth internal treatment staff to coordinate mental health appointments, primary care appointments, linkage to trauma services and access to medications. The liaison provides follow up with clients post release as needed.

The Moms House (Specialized Recovery Housing)

The Moms House will provide a safe, supportive and convenient environment to complete pregnancy and continue recovery. The house is under the direction of Dr. Jennifer Bailit, Dr. Jessica Pippen, Monica Matia and Kimberly Glover. The program is directly connected with a tertiary medical center with expertise in high-risk pregnancies and substance abuse disorders. Staff will ensure that the women in the program will have immediate access to the health care services provided by this center. In addition, agency will provide other services, such as workshops on mindfulness, breastfeeding, preparing for a career and child development, that may nurture healthy mother-baby relationships and aide in the mother's long term recovery plans. The Moms House will provide care to three drug-dependent pregnant women and their children at any given time. The women will be identified through MetroHealth's Mother and Child Dependency Program and can join the program at any point during their pregnancy. They may live at The Moms House, as long as necessary. They must be in treatment and demonstrate a willingness to comply with program requirements. MetroHealth's Department of Public Safety will regularly round on the property to support a safe environment for both the residents and the neighbors.

- **Target Population:**
 - Pregnant and postpartum (within 12 months) women in recovery from substance use disorders (especially opioid use disorder).
- **Anticipated Number of Clients to be Served: 10**
- **Number of Staff Required to Implement Program: 6**
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - MetroHealth will continue to have a department of obstetrics and gynecology that focuses on high-risk pregnancies to provide care for the residents of The Moms House. If other staff vacancies occur, the human resources department with the talent acquisition team will assist in obtaining new staff for The Moms House.
- **Funding Priority:**
 - Women and their custodial children
 - LGBTQ+
 - Pregnant Women
 - Bilingual/Language
 - Speech/Hearing Impaired
 - Dual Diagnosed
 - High Quality Housing
 - Trauma Informed Care Treatment, Recovery and Prevention Services

CY22 Program Highlights and Outcomes

- Recovery and Treatment Services to Specialized Populations
- 24 Hours/Seven Days Access
- Peer Support
- Medication Assisted Treatment
- **Program Goals:**
 - The women will remain sober
 - The women will remain in good standing in a treatment center of their choice
 - The women will attend prenatal and post-partum appointments
- **Program Metrics:**
 - Continued sobriety of women
 - Continued custody of children, including newborn child
 - Continued services through a drug treatment center
 - Completion of prenatal and post-partum appointments
 - Readiness to transition from sober housing to a stable environment
 - Number of women who are not able to remain in housing (evictions)
 - Number of police interventions at home

First Six Months of CY21 Provider Outcomes: N/A – Previously funded through SOR

Mommy and Me Too, Inc.

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
Mommy and Me Too!			
Specialized Recovery Housing	\$ 143,758	\$ 143,758	Housing
Total	\$ 143,758	\$ 143,758	

CY22 Program Highlights and Outcomes

Mommy and Me Too, Inc.

Mommy and Me Too, Inc. has two main priorities, encouraging mothers in their recovery and fostering healthy relationships with them and their children. There is a sacred bond between a mother and a child and living together in a sober environment helps strengthen that bond.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

Family Ties (Specialized Recovery Housing)

The Family Ties Recovery Housing Initiative's purpose is to provide safe, supportive recovery housing and other recovery support programs and services based on individual or family needs. Essential elements include: case management and services coordination for families; benefits counseling and advocacy; mental health and treatment referrals; Medication Assisted Treatment (MAT) management and referrals; substance use education; recovery, and relapse support; money management and life skills training; transportation; child care referrals; support/certified Peer Support; workshops that promote relationship-building, mutual aid, and community building; mindfulness meditation to help fathers and mothers become aware of their mental health and substance use triggers; art therapy projects that promote wellness and facilitate individual change.

- **Target Population:**
 - Individuals ages 18 to 65, including women and their custodial children, fathers and their custodial children, pregnant women, and single men and women who have a primary or are dually diagnosed with mental health and substance use disorders.
- **Anticipated Number of Clients to be Served:** 14
- **Number of Staff Required to Implement Program:** Not requested from agency
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:** Not requested from agency
- **Funding Priority:**
 - Women and their custodial children
 - Fathers and their custodial children
 - Pregnant Women
 - Dual Diagnosed
 - MAT Friendly
- **Program Goals:**
 - Provide access to safe, stable, and supportive abstinence-based recovery housing and other recovery supports
 - Assist families with navigating complicated service systems that connect parents and children to services and supports that are available

CY22 Program Highlights and Outcomes

- **Program Metrics:**

- Number of inquiries/referrals for housing for mothers and fathers who are the custodial parents and/or pregnant women; individuals who have a dual diagnosis; and individuals utilizing Medication Assisted Treatment (MAT)
- Number of completed intake applications with confirmed move-in dates
- Number of completed assessments
- Number of individuals and families that remain in recovery housing after 30, 90, 120, and 180 days
- Number of individuals and families that graduate into permanent housing and remain on their own for 90 days and still working on their individual recovery plans and have retained primary custody and/or have been awarded custody of their minor children
- Number of families that have been connected to agencies that provide Temporary Assistance for Needy Families (TANF); and Supplemental Nutrition Assistance Program (SNAP) benefits
- Number of families that have been connected to local and county agencies that provide person-centered, complex care for health, behavioral health, and social needs

First Six Months of CY21 Provider Outcomes: N/A – Previously funded through SOR

**Moore Counseling
and Mediation
Services, Inc.**

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
Moore Counseling & Mediation Services			
Pooled Funding:			
Treatment Services	\$ -	\$ -	

CY22 Program Highlights and Outcomes

Moore Counseling & Mediation Services, Inc.

Moore Counseling & Mediation Services, Inc. (MCMS) is a confidential, compassionate, responsive and professional organization which provides services in mental health treatment, substance use disorder treatment, mediation, employee assistance programs and professional development. MCMS has been delivering services to the communities since 1999. It is their mission to provide the most comprehensive services possible to individuals, as well as to organizations committed to taking care of their employees. MCMS assists clients to achieve a healthy and productive lifestyle and seek outcomes that improve the status of the individual and the community.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

Pooled Funding for Treatment Services

The outpatient treatment program includes an extensive biopsychosocial assessment involving assessment for multiple behavioral health disorders. The findings from the assessment will determine if there is a DSM-5 diagnosis. From the assessment, ASAM criteria will be used including assessment of the client risk factors to determine the level of care to best address the client's treatment needs. Clients are provided individual counseling from a practitioner that holds a dual licensure for substance use and behavioral health, as well group therapy including levels of care Outpatient and Intensive Outpatient Program, case management, psychiatry, and MAT. The outpatient program also offers trauma informed therapy including EMDR, seeking safety for trauma informed care and also provides clients with equine therapy, art therapy, and meditation and relaxation.

- **Target Population:**
 - Adults aged 18 and older with mental illness and/or substance use disorders
- **Anticipated Number of Clients to be Served: 60**
- **Number of Staff Required to Implement Program: 26**
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - MCMS has a high retention and active recruitment program that includes master level interns who are in the process of licensure and have been trained to work with substance use disorders and other disorders. MCMS is the practicum and internship learning lab for John Carroll University, and trains and employs over 20 counselors per semester. This partnership with John Carroll University has allowed MCMS to have very little to no staffing vacancies.
- **Funding Priority:**
 - Recovery and Treatment Services to Specialized Populations

CY22 Program Highlights and Outcomes

- **Program Goals:**
 - To increase the number of clients entering treatment by 10% with the utilization of the pooled funding
 - To improve client's retention rates in treatment by 15%
 - To develop additional programming for Comorbid Disorders
 - Offering clients the use of MAT for Opioid Disorders
 - To increase the employment rate of our unemployed clients
- **Program Metrics:**
 - Measuring assessments completed and clients entering treatment monthly
 - Review of discharge summaries monthly measuring successful and unsuccessful outcomes
 - Measuring assessments completed for comorbid disorders and clients entering treatment monthly
 - Measuring assessment for opiate use disorders and clients entering treatment monthly
 - Measuring unemployed clients during assessments completed and clients entering treatment monthly

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served: 23**
 - **ADAMHS Funded Unduplicated Clients Served: 23**
 - **Total Number of Clients Served: 595**
 - **Total Number of Clients that Completed this Program/Service: 8**
- **Average Cost Per Client:** \$4,486
- **Additional Information:**
 - MCMS was able to continue serving clients throughout COVID by using a hybrid model utilizing telehealth and in-person services.

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served: 135**
 - **Total Number of Clients that were Served: 81**
 - **Total Number of Clients that Completed this Program/Service: 68**
- **Goals Met:**
 - MCMS met goals by having the pooled funding provided by the ADAMHS Board that allowed clients without insurance to attend treatment.

CY22 Program Highlights and Outcomes

- **Metrics Used to Determine Success:**
 - Multiple measurement categories were used at the time of assessment such as health coverage, employment, legal history, and others to assure the goals staff have set for the program are met. Staff also uses the BAM (Brief Addiction Monitor) as a measuring tool.
- **Program Successes:**
 - 81 clients were treated within the year reported. Out of those clients 100% were assessed and treated or offered co-occurring treatment. Staff screened 100% of the clients for Opioid Use Disorders and offered treatment including MAT. Throughout COVID-19, MCMS was able to keep clients engaged through telehealth and limited in-person sessions.
- **Average Cost Per Client in CY20:** \$2,469
- **Additional Information:** N/A

Provider:	May Dugan Center	2020 First Outcome Count:	0	2021 First Outcome Count:	1
Instrument:	Brief Addiction Monitor	2020 Final Outcome Count:	0	2021 Final Outcome Count:	0
Program:	Substance Use Disorder Treatment	2020 % of Final:	0	2021 % of Final:	0

The Brief Addiction Monitor (BAM) is a measurement instrument originally designed for the Veterans Administration to provide an assessment of substance use disorder among adults (18+ years). The instrument is used to monitor progress and help guide treatment.

Provider:	Moore Counseling and Mediation Services	2020 First Outcome Count:	32	2021 First Outcome Count:	2
Instrument:	Brief Addiction Monitor	2020 Final Outcome Count:	0	2021 Final Outcome Count:	0
Program:	Substance Use Disorder Treatment	2020 % of Final:	0	2021 % of Final:	0

The Brief Addiction Monitor (BAM) is a measurement instrument originally designed for the Veterans Administration to provide an assessment of substance use disorder among adults (18+ years). The instrument is used to monitor progress and help guide treatment.

Murtis H. Taylor

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
Murtis H. Taylor			
MH Residential	\$ 536,676	\$ 536,676	MH Residential
MH Suburban Jail Liaison	\$ 48,000	\$ 77,612	Specialized Pop.
Jail Liaison Program	\$ 75,000	\$ 78,000	Specialized Pop.
Peer Support at St. Clair House	\$ 90,000	\$ 90,391	Peer Support
MH Representative Payee	\$ 125,000	\$ 150,000	
School Based Prevention	\$ 115,020	\$ 125,693	Prevention
Transportation	\$ -	\$ 50,000	Transportation
Early Childhood Mental Health**	\$ -	\$ -	Prevention
Total	\$ 989,696	\$ 1,108,372	
Pooled Funding:			
Mental Health/DD Treatment Services	\$ -	\$ -	
Mental Health Treatment Program	\$ -	\$ -	
Prison Outreach	\$ -	\$ -	Specialized Pop.

** ECMH Providers Pooled Funding

CY22 Program Highlights and Outcomes

Murtis Taylor Human Services System (MTHSS)

Murtis Taylor is a comprehensive behavioral health organization that also provides a variety of other services in the community to both children and adults.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

MH Representative Payee Services

The Representative Payee Program provides competent financial management of a client's (beneficiary's) Social Security payments. Staff assists with budget revisions, bill paying, purchases, savings, maintaining Medicaid eligibility, financial education, etc. Face-to-face services are provided to clients and have necessary attributes of patience, being helpful and understanding of the feelings that clients will have in relation to their lack of control over their own money. Murtis Taylor Human Services System, as the Representative Payee, will help to ensure that benefit payments are used for basic needs first, providing the client with a more stable living environment. Clients will be provided services as needed, when requested by the client and on a quarterly. Staff will interface with the client's Case Manager (internal or external Case Manager) as needed. Services will include working with the client to educate them about the value of creating a budget and working to empower the client to begin self-management of his/her budget. The evidence-based model for the program approach is the Psychosocial Rehabilitation Model of Mental Health Recovery. Clients are linked to services, resources and peers that reduce the symptoms of psychiatric illness, build resilience and improve quality of life and re-integration into the community. Staff attempt to motivate clients to work toward more independent living which can improve their response to therapy, rehabilitation and a relationship with their family.

- **Target Population:**
 - Male and female adults 18 years and older, with a severe mental illness
- **Anticipated Number of Clients to be Served:** 260
- **Number of Staff Required to Implement Program:** 3
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Staff and/or supervisor will share duties and responsibilities previously assigned position. If there is a need to replace staff during the grant period, an MTHSS interview team, composed of HR representative, Department Director or Designee and/or other program/service staff will be part of the interview process. If requested by the Funder, a Funder representative will be invited to join the interview team.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Harm reduction efforts and strategies

CY22 Program Highlights and Outcomes

- **Program Goals:**
 - 260 clients will receive competent financial management of Social Security beneficiary's payments
 - 100% of clients will receive support and maintenance of stable housing by way of Representative Payee services
 - 100% of clients will receive support and maintenance of necessities (food, medication, shelter, electricity, water) by way of Representative Payee services
 - 100% of clients will receive support and maintenance of personal amenities (recreational, social) by way of Representative Payee services
 - 100% of clients will receive maintenance of Medicaid eligibility
 - 100% of clients will receive financial skills development and education
- **Program Metrics:**
 - MTHSS measures the success of its Representative Payee program by tracking and quantifying a set of metrics which includes number of clients referred, referral source, number of clients served, number of clients on the waiting list, number and percentage of clients who were terminated and the reason, timeliness of disbursements (number and percentage), number and percentage of client concerns addressed in a timely manner and to the client's satisfaction, number and percentage of clients receiving financial skill development and instruction. For all those goals, MTHSS is using the client counts as a metric to assess the goals achievement.

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 250
 - **ADAMHS Funded Unduplicated Clients Served:** 258
 - **Total Number of Clients Served:** 258
 - **Total Number of Clients that Completed this Program/Service:** 0
- **Average Cost Per Client:** \$64
- **Additional Information:**
 - N/A

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 250
 - **Total Number of Clients that were Served:** 202
 - **Total Number of Clients that Completed this Program/Service:** N/A
- **Goals Met:**
 - Agency received one referral from Social Security Administration and physicians on clients who are unable to adequately manage their funds.

CY22 Program Highlights and Outcomes

- Staff assisted 202 clients with budget revisions, bill paying, purchases, savings, maintaining Medicaid eligibility, financial education, etc. Staff assisted 202 clients.
- Staff were increased by adding a manager, entitlements specialist, and a payee specialist. In 2020, the Rep Payee department consists of one accounting clerk and one office clerk; both FTEs were 100% assigned to Rep Payee function. CFO served as manager for the department.
- **Metrics Used to Determine Success:**
 - MTHSS measures the success of its Representative Payee program by tracking and quantifying a set of metrics which includes number of clients served, number of clients on waiting list, number and percentage of clients who were terminated and the reason, timeliness of disbursements, number of client concerns addressed in a timely manner and to the client's satisfaction and number and percentage of clients receiving financial skills development and instruction
- **Program Successes:**
 - 100% of clients received support and maintenance of stable housing. 100% of clients received support and maintenance of basic necessities (electricity, water meds, food). 100% of clients received support and maintenance of personal amenities (recreational, social). 100% of clients received support with maintenance of Medicaid eligibility.
- **Average Cost Per Client in CY20:** \$99
- **Additional Information:**
 - N/A

School Based Prevention

The Mental Health School-based Prevention program provides identified students with mental health screenings, assessments and/or referrals to services. Prevention groups use evidence-based curriculums to increase resiliency, school success, increase protective factors, provide supports and decrease stigma. Services are provided under a behavioral health model that is driven by the needs and preferences of the individual (and family members, as appropriate) through a strength-based approach. The client and family members work as a team to develop a service plan with staff that addresses the needs and preferences of individuals and family members. Therapists provide prevention and treatment services to include case management, clinical intervention, support and advocacy. Specific tasks and activities include diagnostic assessment, child psychiatric interview, counseling/psychotherapy, psychological testing, pharmacological management, identification of barriers to functioning, preparation of and periodic review and update of Individual Treatment Plans. Additional services include support services, service coordination among service providers, school-community and family support. Case Managers work with youth clients and their families to implement the Individual Service Plan (ISP) goal(s) with measurable, achievable steps. Case Managers work with clients and families to address mental health symptoms and link clients and families to community-based services, supports, and transportation and/or coordination to and from appointments as needed. Case Managers work hard to make sure youth understood how their behavior impacts others and their future, and importance of doctor's appointments to their health and well-being. Youth are given help in understanding the need to follow directives and given positive reinforcement when there were even small and incremental demonstrations of changes in behavior and attitudes. Case Managers ensure that the youth have access to medical providers, such as the on-site psychiatrist and nurse practitioners, to support the goals of reducing symptoms.

CY22 Program Highlights and Outcomes

- **Target Population:**
 - Severely emotionally disturbed (SED) youth ages of 3 to 22 years and families who are enrolled in any school in Cuyahoga County where Murtis Taylor Human Services System provides services
- **Anticipated Number of Clients to be Served: 150**
- **Number of Staff Required to Implement Program: 25**
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Cases are assigned to existing staff, families will be contacted to make an introduction when there is a change in staff. The organization will continue to recruit, hire, and train additional staff.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Trauma Informed Care Treatment, Recovery and Prevention Services
 - Harm reduction efforts and strategies
 - Wrap-around Behavioral Health Services for Youth
 - Prevention and early intervention
- **Program Goals:**
 - Serve the 20+ schools assigned by CMSD
 - Serve 150 children for Consultation/Prevention
 - Refer 44 children to treatment after screening
- **Program Metrics:**
 - Service is provided to the assigned CMSD school
 - Completed consultation service with students, parents, staff. Also completed prevention group with students
 - Number of referrals that result in an admission into treatment

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served: 120**
 - **ADAMHS Funded Unduplicated Clients Served: 143**
 - **Total Number of Clients Served: 782**
 - **Total Number of Clients that Completed this Program/Service: 16**
- **Average Cost Per Client:** \$177
- **Additional Information:** N/A

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served: 120**

CY22 Program Highlights and Outcomes

- **Total Number of Clients that were Served:** 106
- **Total Number of Clients that Completed this Program/Service:** N/A
- **Goals Met:**
 - 8% of School-Based program/services were funded by ADAMHS Board. Serve the 20 schools assigned by CMSD (100% of assigned schools served); serve 120 children for Consultation/Prevention (106 served 88% achieved); and, refer 35 children to treatment after screening (109 referred. 100% achieved).
- **Metrics Used to Determine Success:**
 - Parent Strengths Assessment (Mini-DESSA) was implemented to identify and support youth who do not have evidence of mental health needs. Prevention groups were implemented to share the Evo-Socio Emotional Curriculum (Evo SEL) to more students. The metrics are: 1. Serve all schools assigned by Cleveland Metropolitan School District (CMSD) 2. The number of children served for Consultation/Prevention 3. The number of children referred to Treatment after Consultation and Prevention services.
- **Program Successes:**
 - Served the 20 schools assigned by CMSD (100% of assigned schools served); served 120 children for Consultation/Prevention (106 served 88% achieved); and, referred 35 children to treatment after screening (109 referred. 100% achieved).
- **Average Cost Per Client in CY20:** \$1,085
- **Additional Information:**
 - The funding allocation was not recognized until February 2020, and that delayed planning and service delivery. The pandemic and lack of in-person instruction/contact significantly challenged engagement and support to the assigned CMSD schools.

Prison Outreach

Prison Outreach is a specialized, intensive unit with a Case Management Team that works with clients who are released from prison and have a high number of contacts with the criminal justice system. Individuals are supported for reintegration back into the community with the goal of stabilizing their mental health and reducing recidivism back into prison. Clients are provided mental health treatment and linked to supports that focus on recovery and reduce their involvement in criminal activity. Rehabilitation and environmental support activities reduce the symptoms of psychiatric illness, build resilience and improve quality of life and re-integration into the community. Services are provided under a behavioral health model that is driven by the needs and preferences of the individual (and family members as appropriate) through a strength-based approach. Services are responsive to the cultural context and characteristics of participants and families who are partners in planning, implementation and evaluation. The client and family members work as a team to develop a service plan with staff that addresses the needs and preferences of the individual and family members.

- **Target Population:**
 - Adults 18 years and older with a severe and persistent mental illness, have a principal diagnosis with a history of incarceration and returning from the Ohio Department of Corrections and who have committed any level of felony offense and meet medical necessity for intensive Case Management services

CY22 Program Highlights and Outcomes

- **Anticipated Number of Clients to be Served:** 125
- **Number of Staff Required to Implement Program:** 6
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Existing staff will share duties and responsibilities. Human Resources will immediately and actively outreach and recruit, and with the help of Managers and Supervisor, interview, hire/provide training and orientation to new staff.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Harm reduction efforts and strategies
 - Recovery and Treatment Services to Specialized Populations
 - Employment Programs
- **Program Goals:**
 - Reduce recidivism/re-admissions to hospitals (Relapse Prevention)
 - Reduce recidivism/re-admissions to jail and prisons (Relapse Prevention)
 - Increase Employment
- **Program Metrics:**
 - Reduced recidivism/readmissions to hospitals (Relapse Prevention) - measured # and % of clients hospitalized and average # of days/month spent in hospital
 - Reduced recidivism/re-admissions to jail and prisons (Relapse Prevention) - measured by the # and % of clients jailed per month and # and % of those clients who went on to prison
 - Increased Employment measured by the average number of days employed per month, per client

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 122
 - **ADAMHS Funded Unduplicated Clients Served:** 88
 - **Total Number of Clients Served:** 88
 - **Total Number of Clients that Completed this Program/Service:** 3
- **Average Cost Per Client:** \$423
- **Additional Information:**
 - The program was very complimentary of the three clients who stepped down to less intensive Case Manager services, because of the positive outcome of the program. This program was combined into Pooled Funding along with Mental Health and Developmental Delays and Mental Health Treatment in 2021.

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 122 Clients

CY22 Program Highlights and Outcomes

- **Total Number of Clients that were Served:** 83 Clients
- **Total Number of Clients that Completed this Program/Service:** 2 Clients
- **Goals Met:**
 - Goals of the program/service were achieved. The program reduced recidivism/readmission to hospitals, reduced recidivism/readmission to jail and prisons, and relapse, by keeping more clients in the community.
- **Metrics Used to Determine Success:**
 - Reduced recidivism/readmissions to hospitals (Relapse Prevention): measured # and % of clients hospitalized and average # of days/months spent in hospital
 - Reduced recidivism/readmissions to jail and prisons (Relapse Prevention): measured by the # and % of clients jailed per month and # and % of those clients who went on to prison
 - Employment: measured by the average number of days employed per month by client
- **Program Successes:**
 - 83 clients received intensive case management services; two clients (2%) were hospitalized, with hospitalization duration of one day. Two clients (2%) were arrested and jailed for one day; 0% returned to prison; six clients (7%) received gainful employment and stayed employed for an average of six months.
- **Average Cost Per Client in CY20:** \$1,767
- **Additional Information:**
 - The COVID-19 pandemic had a temporary negative impact on the program's operation from the perspective of operating from the Justice Center Jail.

Mental Health/Developmental Delays Treatment Services

Rehabilitation and environmental support activities, designed to reduce the symptoms of psychiatric illness, build resilience and improve quality of life and re-integration into the community, will be provided. Clients are provided mental health treatment and linked to services that support recovery and reduce their involvement in criminal activity. The program aims to reduce symptoms of psychiatric illness, improve coping skills and foster community integration and successful completion of probation. Services are provided under a behavioral health model that is driven by the needs and preferences of the individual (and family members as appropriate) through a strength-based approach. Services are responsive to the cultural context and characteristics of participants and families who are partners in planning, implementation and evaluation. The client and family members work as a team to develop a service plan with staff that addresses the needs and preferences of the individual and family members. Case Managers provide more intense contact compared to those located in other program areas, but less contact than in an intensive unit. Case Managers will meet weekly with clients to provide support, link to services, track and monitor progress. Case managers meet monthly with the Probation Unit officers to review each client's treatment and services. Treatment planning includes the clients' goals and steps customized in measurable steps the client can achieve. Clients are encouraged to ask questions and to know and understand their medications. Services are delivered at community locations the client prefers.

CY22 Program Highlights and Outcomes

- **Target Population:**
 - Clients referred by the County MHDD Probation Department who are on active County probation with the County's MHDD unit are the most severely mentally disabled adults (SMD) 18 years and older
- **Anticipated Number of Clients to be Served:** 100
- **Number of Staff Required to Implement Program:** 6
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Current Case Managers share providing coverage. The Team Leader also assists with providing coverage.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Harm reduction efforts and strategies
 - Recovery and Treatment Services to Specialized Populations
 - Inpatient and Ambulatory/Outpatient Detoxification Services
- **Program Goals:**
 - Reduce symptoms of psychiatric illness and recidivism
 - Improve coping skills
 - Recovery and reduction of involvement in criminal activity in a community setting
 - Community integration and successful completion of probation
- **Program Metrics:**
 - Reduced symptoms of psychiatric illness and recidivism
 - Improved coping skills
 - Recovery and reduced involvement in criminal activity in a community setting
 - Community integration and successful completion of probation

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 53
 - **ADAMHS Funded Unduplicated Clients Served:** 90
 - **Total Number of Clients Served:** 90
 - **Total Number of Clients that Completed this Program/Service:** 4
- **Average Cost Per Client:** \$423
- **Additional Information:**
 - The program was very complimentary of the four clients who participated in the FREE Program. They participated in a special graduation ceremony, an event which was motivating for these clients, as well as other clients who were not participants in the

CY22 Program Highlights and Outcomes

graduation ceremony. This program was combined into Pooled Funding along with Mental Health Treatment and Prison Outreach in 2021.

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 53
 - **Total Number of Clients that were Served:** 86
 - **Total Number of Clients that Completed this Program/Service:** 5
- **Goals Met:**
 - Five clients from the MHDD docket completed probation and graduated from the FREE Program (Fighting Recidivism by Elevating Excellence; Judge Gayle Williams-Byers, South Euclid Municipal Court Mental Health Docket).
 - The program reduced symptoms of psychiatric illness by providing intervention which reduced the frequency of both hospitalizations and involvement in criminal activities. Coping skills were used to enhance the abilities of clients to both cope with their illnesses and remain in the community. The program also assisted and motivated clients to successfully complete probation and graduate from the FREE program. Program assisted seven clients with securing and maintaining employment.
- **Metrics Used to Determine Success:**
 - Reduced symptoms of psychiatric illness and recidivism
 - Recovery and reduced involvement in criminal activity in a community setting
 - Improved coping skills
 - Community integration and successful completion of probation
- **Program Successes:**
 - The program/service served 86 clients. Two clients (2%) were hospitalized for a duration of 1 day; two clients (2%) were arrested and in jail for a duration of 1 day. 0 clients returned to prison; 7 clients (8%) were assisted with employment, which they maintained for more than 8 months of the year; 5 clients (4%) successfully completed probation and graduated successfully from the FREE Program.
- **Average Cost Per Client in CY20:** \$3,304
- **Additional Information:**
 - The FREE Program in the South Euclid Court, in which several clients participated, was instrumental in enhancing the self-esteem of the clients, helping them to develop character, and importantly, enhancing client's involvement and participation in treatment.

Mental Health Treatment Program

The Mental Health Treatment Program services are provided under a behavioral health model that is driven by the needs and preferences of the individual (and family members as appropriate) through a strength-based approach. Services are responsive to the cultural context and characteristics of participants and families who are partners in planning, implementation and evaluation. The client and family members work as a team to develop a service plan with staff that addresses the needs and preferences of the individual and family members. Services to be provided

CY22 Program Highlights and Outcomes

under the Mental Health Treatment Program are Day Treatment (Mental Health Partial Hospitalization), PDE (Psychiatric Diagnostic Evaluation) without Medical (Mental Health Assessment), PDE (Psychiatric Diagnostic Evaluation) with Medical (Pharmacological Management-Psyc DA), Psychotherapy (MH Counseling and Therapy), Nurse Injection (Pharm Management), Nurse Service (Pharm Management), Office Visit Existing (Pharm Management), Office Visit New (Pharm Management), Psychotherapy (Pharm Management), Case Management-Psychosocial Rehab (CPST), Case Management-Therapeutic Behavioral Services (CPST), Case Management-CPST (CPST) and Individual Service Plan (ISP). Individualized Service Plans (ISP) provide the clinical framework for comprehensive care and contains goals reflective of the expectations of the person served, diagnosis, strengths, presenting issues, criteria for discharge, limitations, long/short term objectives, interventions, frequency of service, and target dates.

- **Target Population:**
 - Adults ages 18 and older with severe mental illness
- **Anticipated Number of Clients to be Served:** 600
- **Number of Staff Required to Implement Program:** 90
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - MTHSS will use existing Supervisors to provide coverage.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Trauma Informed Care Treatment, Recovery and Prevention Services
 - Harm reduction efforts and strategies
 - Recovery and Treatment Services to Specialized Populations
 - Medication Assisted Treatment
- **Program Goals:**
 - Change in Satisfaction: Client and Provider Satisfaction will report an overall 75%-100% satisfaction rating for the mental health services they receive from MTHSS
 - Symptom Distress: Clients receiving services between one and five years will experience a 0%-25% decrease in Symptom Distress; between five and nine years a 0%-25% decrease; between nine and nineteen years a 0%-10% decrease
 - Quality of Life: Clients receiving services between one and five years will experience an increase in Quality of Life of 0%-25%. Clients receiving services between nine and nineteen years will experience an increase in Quality of life of 0% -25%
 - Rate of State Re-hospitalizations: 75% of clients discharged will not be readmitted to the hospital within 14-90 days of discharge during the report period
 - Days to Appointment: Days from Post-Hospital Discharge to Case Management Appointment will be less than 21
- **Program Metrics:**
 - Change in Satisfaction Client and Provider Satisfaction as measured by an annual Client Satisfaction Survey
 - Symptom Distress as measured over time using the Ohio Scales measure

CY22 Program Highlights and Outcomes

- Quality of Life as measured over time across all core mental health programs by a modified version of the Ohio Scales measures
- Rate of State Re-hospitalizations - the total number of clients discharged from NBH Hospital and admitted to MTHSS divided into the total number of clients readmitted to NBH Hospital
- Days from Post-Hospital Discharge to Case Management Appointment

First Six Months of CY21 Provider Outcomes:

- Highlights:
 - **Number of Clients that were Anticipated to be Served:** 300
 - **ADAMHS Funded Unduplicated Clients Served:** 514
 - **Total Number of Clients Served:** 3158
 - **Total Number of Clients that Completed this Program/Service:** 0
- Average Cost Per Client: \$423
- Additional Information:

CY20 Provider Outcomes

- Highlights:
 - **Number of Clients that were Anticipated to be Served:** 300
 - **Total Number of Clients that were Served:** 427
 - **Total Number of Clients that Completed this Program/Service:** N/A
- Goals Met:
 - The percentage of program/services goals funded by the ADAMHS Board is 8%. Change in Satisfaction: Client and Provider Satisfaction will report an overall 75%-100% satisfaction rating for the mental health services they receive from MTHSS; Symptom Distress: Clients receiving services between one and five years will experience a 0%-25% decrease in Symptom Distress; between five and nine years a 0%-25% decrease; between nine and nineteen years a 0%-10% decrease; Quality of Life: Clients receiving services between one and five years will experience an increase in Quality of Life of 0%-25%. Clients receiving services between nine and nineteen years will experience an increase in Quality of life of 0%-25%.
- Metrics Used to Determine Success:
 - The Change in Satisfaction Client and Provider Satisfaction as measured by an annual Client Satisfaction Survey, Symptom Distress as measured over time from one year and beyond, and Quality of Life as measured over time from one year and beyond are measured across all core mental health programs by a modified version of the Ohio Scales measures. The Rate of State Re-hospitalizations is the total number of clients discharged from NBH Hospital and admitted to MTHSS divided into the total number of clients readmitted to NBH Hospital and the number of Days from Post-Hospital Discharge to Case Management Appointment.

CY22 Program Highlights and Outcomes

- **Program Successes:**
 - Rate of State Re-Hospitalizations: 0 (100%) of clients discharged, were not readmitted to the hospital within 14-90 days of discharge during the report period. Days from Post-Hospital Discharge to Case Management Appointment: a total of 7 clients were seen by Case Management after admission. 42% of clients received a Case Management appointment within 14 days of post-hospital discharge during the reporting period. 81% were seen within 30 days, 81% were seen within 60 days and 81% being seen within 90 days.
- **Average Cost Per Client in CY20:** \$511
- **Additional Information:**
 - N/A

Jail Liaison Program

Clients are provided mental health treatment and linked to community services that support recovery and reduce their involvement in criminal activity. The level of intensity of service provision is a feature of this service. Rehabilitation and environmental support activities reduce the symptoms of psychiatric illness, build resilience and improve their quality of life and integration into the community. After the Release of information is signed by the client, copies will be distributed to the named individuals, departments in the jail in the form of a hard copy and/or electronically as well as verbally. Information will also be shared in scheduled meetings such as Case Coordination and Compliance Meetings and all other meetings organized by the jail and court coordinators. The Jail Liaison will also prepare reports as requested/required and/or needed on client status as well as share information via other appropriate and secured (confidentiality) and established lines of communication.

- **Target Population:**
 - Adults 18 years and older with severe and persistent mental illness, or dually diagnosed with a substance use disorder, who are incarcerated on a felony offense and without past or current involvement (more than 90 days) with a community-based provider
- **Anticipated Number of Clients to be Served:** 200
- **Number of Staff Required to Implement Program:** 2
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Existing staff will share responsibilities and HR will outreach and recruit for new hires immediately.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Harm reduction efforts and strategies
 - Recovery and Treatment Services to Specialized Populations
 - Employment Programs
- **Program Goals:**
 - Serve 200 clients

CY22 Program Highlights and Outcomes

- Provide initial contact and/or follow-up to 300 clients
- Assess and/or screen 300 clients
- Provide 100% of client assessments at the Cuyahoga County Jail
- Complete re-entry checklists for 300 clients
- **Program Metrics:**
 - 200 clients will be served
 - Initial contact and/or follow-up will be provided to 300 clients
 - Assessment and/or screening will be provided to 300 clients
 - 100% of client assessments will be provided at the Cuyahoga County Jail

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 200
 - **ADAMHS Funded Unduplicated Clients Served:** 75
 - **Total Number of Clients Served:** 75
 - **Total Number of Clients that Completed this Program/Service:** 0
- **Average Cost Per Client:** \$508
- **Additional Information:**
 - During this COVID-19 period it will continue to be critical that safety precautions are maintained regarding direct contact with inmates at the Justice Center.

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 200
 - **Total Number of Clients that were Served:** 84
 - **Total Number of Clients that Completed this Program/Service:** N/A
- **Goals Met:**
 - 84 clients were served. This client count was impacted by the COVID-19 related factors at the Justice Center Jail. Staff was able to maintain participation in designated meetings. All 84 clients were provided with screenings, assessments initial and follow-up contacts as well as linkages to community MH service providers.
- **Metrics Used to Determine Success:**
 - 200 clients will be served; Initial and follow-up contacts will be provided to 200 clients; Assessment and/or screening will be provided to 200 clients; and 100% of client assessments will be provided at the Cuyahoga County Jail - the Justice Center.
- **Program Successes:**
 - 84 clients were served. Initial and follow-up contacts were provided to all 84 clients. Assessment and/or screening was provided to all 84 clients, including SUD assessments. 100% of all the assessments were provided at the Justice Center Jail.

CY22 Program Highlights and Outcomes

- **Average Cost Per Client in CY20:** \$893
- **Additional Information:**
 - More active involvement and participation of the probation officers in enforcing court ordered participation of clients in treatment is needed. Also, would like better response times to messages left for probation officers by case managers.

Peer Support at St. Clair House

Peer Support provides stable, short-term, specialized, intensive residential treatment services. Case Management Teams work with clients who have been released from prison and have a high number of contacts with the criminal justice system. Services are designed to stabilize their mental health, reduce recidivism back into prison and support re-integration back into the community. Peer support service is provided to self-identified individuals in recovery from mental illness, substance abuse, or both. Individuals who receive the peer support service are committed to their own recovery. Peer support staff or Peer Supporters give and receive support and education from individuals with similar or comparable life experiences. Peer Supporters encourage, inspire, and empower their peers to reach their recovery goals through modeling the recovery way of life. They assist in exploring options and overcoming barriers and provide person-driven support that taps into peer strengths related to illness self-management. Peer Supporters do not provide clinical care or tell their peers what to do. A Peer Supporter is certified by the Ohio Department of Mental Health and Addiction Services and has declared that s/he is in recovery and has a lived experience of mental illness, substance abuse disorder, or co-occurring mental health and substance abuse disorders. MTHSS collaborates with Saint Clair House a 501c(3) community housing non-profit corporation to provide services to their residents. Services are provided under a behavioral health model that is driven by the needs and preferences of the individual (and family members as appropriate) through a strength-based approach. Services are responsive to the cultural context and characteristics of participants and families who are partners in planning, implementation and evaluation. The client and family members work as a team to develop a service plan with staff that address the needs and preferences of the individual and family members.

- **Target Population:**
 - Adults 18 years and older, who have a primary diagnosis of mental illness or have a dual diagnosis, but do not qualify as having a Substance Use Disorder (SUD) diagnosis under Medicaid; and adults with severe mental disabilities 18 years and older who have been released from treatment from the Mental Health and Developmental Delays MHDD (formerly MDO) Court of the Cuyahoga Common Pleas Court.
- **Anticipated Number of Clients to be Served:** 12
- **Number of Staff Required to Implement Program:** 2
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Existing staff will assume duties and responsibilities and Agency will continue to recruit, interview and hire new staff as quickly as possible.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - High Quality Housing
 - Mental Health Residential Treatment

CY22 Program Highlights and Outcomes

- Community and Crisis Residential Services
- Harm reduction efforts and strategies
- Recovery and Treatment Services to Specialized Populations
- **Program Goals:**
 - Reduction in homelessness
 - Retention of benefits
 - Reduction in hospitalization
 - Reduction in arrests
- **Program Metrics:**
 - Number of unduplicated males served
 - Number of unduplicated males with medical and financial support
 - Number of hospitalizations during this period
 - Number of arrests during the period

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served: 10**
 - **ADAMHS Funded Unduplicated Clients Served: 7**
 - **Total Number of Clients Served: 7**
 - **Total Number of Clients that Completed this Program/Service: 1**
- **Average Cost Per Client:** \$6,601
- **Additional Information:** N/A

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served: 10**
 - **Total Number of Clients that were Served: 11**
 - **Total Number of Clients that Completed this Program/Service: 1**
- **Goals Met:**
 - 11 unduplicated males were served; reduction in homelessness; retention of benefits; reduction in hospitalization; reduction in arrest
- **Metrics Used to Determine Success:**
 - Peer support
 - Reduction in homelessness
 - Retention of benefits
 - Reduction in hospitalization
 - Reduction in arrests

CY22 Program Highlights and Outcomes

- **Program Successes:**
 - # Unduplicated males served = 11; average length of stay = 12 months; occupancy rate = 83%; benefits = 9; hospitalizations = 2; arrests = 0; number employed = 2.
- **Average Cost Per Client in CY20:** \$8,182
- **Additional Information:**
 - The peer support staff showed a commitment to providing quality service and residence showed resilience and commitment to protocols to remain safe during the 10 months of pandemic service in 2020.

Mental Health Residential

The Mental Health Residential program, provides treatment in a residential setting and teaches clients how to live independently. Residential care provides the structure, treatment and support needed to individuals at risk for hospitalization and reduces the rate of hospital admissions/re-admissions for individuals stepping down from in-patient stays. The program includes rehabilitation and environmental support activities that assist in reducing the symptoms of psychiatric illness, build resilience and improve the quality of life and re-integration into the community. Group sessions focus on de-institutionalization, self-awareness, relationships with others, community socialization, and daily living skills, medication monitoring and education. Residents assist with menu planning, cooking, cleaning and gain day-to-day personal care skills. Services are relevant to the diversity of the persons served.

- **Target Population:**
 - Adults 18 years and older with severe mental illness who are currently unable to live independently
- **Anticipated Number of Clients to be Served:** 16
- **Number of Staff Required to Implement Program:** 11
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Existing staff will share duties and responsibilities and the Human Resource Department will outreach and recruit, interview and onboard as soon as potential candidates are identified.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - High Quality Housing
 - Mental Health Residential Treatment
 - Community and Crisis Residential Services
 - Harm reduction efforts and strategies
 - Recovery and Treatment Services to Specialized Populations
- **Program Goals:**
 - Improve environmental supports that reduce symptoms of psychiatric illness
 - Improve resilience
- improve quality of life

CY22 Program Highlights and Outcomes

- Improve integration into the community
- **Program Metrics:**
 - Number of Medication Refusals
 - Number of incidents involving rehospitalizations and police assistance
 - Number of Medication Refusals
 - Number of incidents involving rehospitalizations and police assistance
 - Number of times per month Activities of Daily Living (ADL) and rules/regulations are disregarded
 - Number of times per month ADLs and rules/regulations are disregarded

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served: 14**
 - **ADAMHS Funded Unduplicated Clients Served: 9**
 - **Total Number of Clients Served: 9**
 - **Total Number of Clients that Completed this Program/Service: 0**
- **Average Cost Per Client:** \$241
- **Additional Information:** N/A

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served: 15**
 - **Total Number of Clients that were Served: 14**
 - **Total Number of Clients that Completed this Program/Service: 1**
- **Goals Met:**
 - Residential goals: improved environmental supports that reduce symptoms of psychiatric illness, improved resilience, improved quality of life, and improved integration into the community.
- **Metrics Used to Determine Success:**
 - For Residential goals, metrics include improved environmental supports that reduce symptoms of psychiatric illness, improved resilience, improved quality of life, and improved integration into the community.
- **Program Successes:**
 - Buckeye T.C./Therapeutic Community Total number served = 14 during CY20, 12 males and 2 females with an average length of stay of 7.64 months (107 mos/14 mos). Occupancy rate was 64% during CY20 (openings are being filled are dependent on the CARR referral process). Number of Successful/Unsuccessful Case Closures: 1 Successful and 6 Unsuccessful. Diagnoses of residents include: 7 with MH only, 7 co-morbid disorders of MH/SUD. 14 Community Linkages established with CMHC, Day Treatment was received

CY22 Program Highlights and Outcomes

by four, PCP was received by 14, Pharmacy services received by 14, Payee services received by 7, and Residential SUD provided to three.

- **Average Cost Per Client in CY20:** \$1,632
- **Additional Information:**
 - The program and residence showed resilience and commitment to protocols to remain safe during the 10 months of pandemic service.

MH Suburban Jail Liaison

The Suburban/Municipal Jail Liaison meets with clients who are arrested by an eastside municipality on a misdemeanor offense; screens/assesses a client's mental state and need for medication and communicates with the Courts and/or Probation Department to facilitate mental health and Substance and Other Drug (SUD) treatment needs. The program includes intensive treatment and support of individuals re-entering the community. Clients are provided mental health treatment and linked to supports that focus on recovery and reduce their involvement in criminal activity. Rehabilitation and environmental support activities reduce the symptoms of psychiatric illness, build resilience and improve quality of life and re-integration into the community. Services are provided under a behavioral health model that is driven by the needs and preferences of the individual (and family members as appropriate) through a strength-based approach. Services are responsive to the cultural context and characteristics of participants and families who are partners in planning, implementation and evaluation. The client and family members work as a team to develop a service plan with staff that addresses the needs and preferences of the individual and family members.

- **Target Population:**
 - Adults 18 years and older with severe mental illness and are incarcerated in a suburban jail on a misdemeanor offense and without past or current involvement with MTHSS.
- **Anticipated Number of Clients to be Served:** 125
- **Number of Staff Required to Implement Program:** 2
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Existing staff will provide services and the Human Resources department will work to recruit and hire to fill the vacancy(s).
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Care Responder Teams
 - Harm reduction efforts and strategies
 - Recovery and Treatment Services to Specialized Populations
- **Program Goals:**
 - 125 clients will be served
 - Initial contact and/or follow-up will be provided to 125 clients
 - Assessment and/or screening will be provided to 125 clients
- **Program Metrics:**
 - Number of Clients Served

CY22 Program Highlights and Outcomes

- Follow-up will be provided to Clients served
- Assessment and/or screening will be provided Clients served

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 100
 - **ADAMHS Funded Unduplicated Clients Served:** 64
 - **Total Number of Clients Served:** 64
 - **Total Number of Clients that Completed this Program/Service:** 0
- **Average Cost Per Client:** \$624
- **Additional Information:**
 - During this COVID-19 period, it will continue to be critical that safety precautions are in place during contacts with the clients.

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 100
 - **Total Number of Clients that were Served:** 117
 - **Total Number of Clients that Completed this Program/Service:** N/A
- **Goals Met:**
 - 117 clients were served, resulting in 117% of the projected goal being met. All clients served were provided with initial and follow up contacts, screenings, assessments, linkage, and referrals. Assessment sites were expanded.
- **Metrics Used to Determine Success:**
 - 100 clients will be served, initial contact and/or follow-up will be provided to 100 clients, assessment and/or screening will be provided to 100 clients.
- **Program Successes:**
 - There were 117 clients were served and provided initial and follow up contacts. Assessments including PDE w/o Medical, for MH/SUD were completed. Assessment sites included South Euclid, Bedford Heights, Cleveland Heights, Cleveland Municipal Court, East Cleveland, Cleveland Police Department, Cleveland Jail, Warrensville Heights, Bedford, Lyndhurst, Garfield Heights, and Solon.
- **Average Cost Per Client in CY20:** \$669
- **Additional Information:**
 - Referrals from the Suburban Court System decreased during the peak of the COVID-19 pandemic.

CY22 Program Highlights and Outcomes

Transportation

Murtis Taylor Human Services System's (MTHSS) Transportation Program will consist of three components or ways that mental health clients can be transported at no charge, round-trip to/from MTHSS sites for in-person appointments including but not limited to Psychotherapy Sessions, Pharmacological Management Visits, Medication Injections, Blood Monitoring Visits, and Vital Sign Monitoring visits. The three ways are: leased MTHSS vans with MTHSS drivers, bus tickets, or a voucher through a partnership with Lyft transportation service. A process is in place for each mode of transportation provided for each client, based on that individual's needs.

- **Target Population:**
 - Adults 18 years and older with severe mental illness and/or co-occurring disorders
- **Anticipated Number of Clients to be Served:** 2,000
- **Number of Staff Required to Implement Program:** 5
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Current drivers will share routes of vacant position, hiring of temporary driver(s) if needed, qualified existing program staff, if available.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Transportation
- **Program Goals:**
 - Appointment Show-Rate: Participating clients will achieve an appointment show rate of 80% for office-based appointments including but not limited to Psychotherapy sessions, Pharmacological Management Visits, Medication Injections, Blood Monitoring visits, and Vital Sign Monitoring visits. As measured by Electronic Health Record data.
 - Average Days from Post-Hospital Discharge to Pharmacological Management Visits: Participating clients will experience an average of 7 or fewer days between hospital discharge and the next pharmacological management visit. As measured by Electronic Health Record data analysis.
 - Symptom Distress: Participating clients will experience a 0%-25% decrease in Symptom Distress as measured by the Ohio Scales Adult Consumer Outcomes instrument.
 - Quality of Life: Participating clients will experience a 0%-25% increase in Quality of Life as measured by the Ohio Scales Adult Consumer Outcomes instrument.
 - Rate of State Re-hospitalizations: Participating clients will experience a decrease in the number of psychiatric hospitalizations as measured by Incident Report analysis.
- **Program Metrics:**
 - Appointment Show-Rate: Using the Electronic Health Record, the dates/times of office-based appointments scheduled will be compared to the dates/times of office-based appointments completed.
 - Average Days from Post-Hospital Discharge to Pharmacological Management Appointment: Using the Electronic Health Record the dates/times of hospital discharges and pharmacological management visits will be analyzed to determine the average number of days between Post-Hospital Discharge to Pharmacological Management visits.

CY22 Program Highlights and Outcomes

- Symptom Distress: Symptom distress related metrics in the standardized Ohio Scales Adult Consumer Outcomes Instrument will be used to determine percentage change in symptom distress. The most recently administered pre-test and the most recently administered post- Ohio Scales instruments will be utilized to perform the pre-and post-analysis.
- Quality of Life: Quality of life related metrics in the standardized Ohio Scales Adult Consumer Outcomes Instrument will be used to determine percentage change in Quality of life. The most recently administered pre and the most recently administered post-test.

First Six Months of CY21 Provider Outcomes: N/A – New Program

Early Childhood Mental Health (ECMH) Programming:

Offers consultation and treatment services, provided by the Early Childhood Mental Health (ECMH) Agency Work Group, delivered as a family driven, strength-based community service to aid parents and caregivers with early intervention support to divert and avoid deeper involvement into the behavioral health system. The program provides early intervention services that address early emotional, social and behavioral development.

- **Target Population:**
 - Children ages birth to six-years-old
- **Anticipated Number of Clients to be Served:** 270
- **Number of Staff Required to Implement Program:** 17
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Staff are cross-trained to cover vacancies and supervisors can take cases when necessary.
- **Funding Priority:**
 - Prevention and Early Intervention
- **Program Goals:**
 - Children will show significant clinical improvement on DECA Resiliency scales.
 - Children will show significant clinical reduction in problems on DECA Behavior Scale.
 - Children will show significant clinical improvement on the DECA-Infant Toddler (IT) Scale when utilized.
- **Program Metrics:**
 - Pre- and post-assessment and demonstrated improvement on all the DECA resilience subscales

First Six Months of CY21 Provider Outcomes: N/A – New Program

Provider:	Murtis H. Taylor	2020 First Outcome Count:	3	2021 First Outcome Count:	16
Instrument:	DESSA MINI	2020 Final Outcome Count:	0	2021 Final Outcome Count:	0
Program:	Youth Prevention	2020 % of Final:	0	2021 % of Final:	0

The Devereux Student Strength Assessment (DESSA) is an abbreviated assessment designed by the Devereux Advanced Behavioral Health organization for school age children. This instrument is used as a screening tool to identify children who are in need for additional social or emotional education. There are measurement instruments specific for children in Grades K – 8 and for children in Grades 9 – 12.

When the data contains both an initial (first) and follow-up (final) instrument administration, a paired t-test was used for comparing individual scores at those two different points in time. It is the most powerful test for showing changes in individuals. The green highlighted rows suggest that changes from the First Assessment to the Final Assessment did not happen by chance and that the change can be attributed to the program intervention.

Population	Evaluation Year	Subscale	First Outcome Average	Final Outcome Average	Average Difference	Significance
Grades 9 - 12	2020	No Scale				Not Significant
Grades K - 8	2020	No Scale				Not Significant
Grades 9 - 12	2021	No Scale				Not Significant
Grades K - 8	2021	No Scale				Not Significant

Provider:	Murtis H. Taylor	2020 First Outcome Count:	418	2021 First Outcome Count:	0
Instrument:	Ohio Scales Adult	2020 Final Outcome Count:	62	2021 Final Outcome Count:	0
Program:	Mental Health Treatment for Adults	2020 % of Final:	14.83%	2021 % of Final:	0

The Ohio Scales Adult version is an assessment instrument for measuring the progress for Adults (18+ years) in the treatment process for mental health. The instrument was a collaboratively designed instrument for use by Ohio Department of Mental Health funded providers.

Population	Evaluation Year	Subscale	First Outcome Average	Final Outcome Average	Average Difference	Significance
Adults (18+ years)	2020	Financial Quality of Life	2.46	2.56	0.1	Not Significant
Adults (18+ years)	2020	Housing Quality of Life	3.49	3.52	0.03	Not Significant
Adults (18+ years)	2020	Overall Empowerment	2.12	2.14	0.01	Not Significant
Adults (18+ years)	2020	Overall Quality of Life	3.04	3.15	0.12	Not Significant
Adults (18+ years)	2020	Overall Symptom Distress	24.55	20.02	-4.53	Significant at p<.05
Adults (18+ years)	2020	Social Connectedness	2.97	3.13	0.16	Not Significant
Adults (18+ years)	2021	Financial Quality of Life				Not Significant
Adults (18+ years)	2021	Housing Quality of Life				Not Significant
Adults (18+ years)	2021	Overall Empowerment				Not Significant
Adults (18+ years)	2021	Overall Quality of Life				Not Significant
Adults (18+ years)	2021	Overall Symptom Distress				Not Significant
Adults (18+ years)	2021	Social Connectedness				Not Significant

The Music Settlement

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
Music Settlement Center for Music Therapy			
Music Therapy Svs for Detox and Recovery	\$ 10,000	\$ 13,300	Prevention
Total	\$ 10,000	\$ 13,300	

CY22 Program Highlights and Outcomes

The Music Settlement

Established in 1966, the Music Settlement Center for Music Therapy positively impacts the lives of children and adults facing a wide range of life's challenges.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

Music Therapy Services for Detox and Recovery at Stella Maris

This program provides evidence-based practices in music therapy at all phases of the detox/recovery process. Assessment, treatment planning/implementation and documentation occur for individual and group sessions, primarily within settings of community partners. Just as art therapy has been shown to be effective with individuals with substance use disorders, so too has music therapy proven beneficial with this population. There is a growing evidence base for music therapy interventions in the treatment of substance use disorders. In addition, awareness of harm with music use is a key component music therapists address since music listening may be tied directly to and/or may act as a trigger for substance use. Music therapy interventions utilized in detox/recovery include but are not limited to lyric analysis, songwriting, music rituals, instrument playing, music sharing, music facilitated discussion, and music assisted relaxation.

- **Target Population:**
 - Adults 18 years and older with a substance use disorder and/or dually diagnosed individuals in detox.
- **Anticipated Number of Clients to be Served:** 460
- **Number of Staff Required to Implement Program:** 3
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - If and when vacancies occur, the Chair for the Center of Music Therapy will first look to fill the position utilizing Music Therapists currently on staff who have experience working with the specified population. If there are no available music therapists on staff, the Chair will post a position to hire a new music therapist. The Music Settlement has staff retention as one of its agency goals under its Strategic Plan. The Chair for the Center of Music Therapy has identified specific objectives to meet this goal such as increasing salaries and hourly rates and increasing agency contract hours to help minimize the number of agency assignment given to therapists.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Recovery and Treatment Services to Specialized Populations
- **Program Goals:**
 - 60% of the group participants will engage in the therapeutic process, whether verbally, musically, demonstratively or interactively (all programs)

CY22 Program Highlights and Outcomes

- 60% of the clients will express having a decrease in withdrawal symptoms following music therapy sessions (Detox)
- 60% of the group participants will demonstrate an increase in motivation for therapy following music therapy services (all programs)
- 60% of the group participants will engage in problem solving as noted by identify either a solution to a problem or identify a coping strategy to assist in managing a problem (Residential program)
- **Program Metrics:**
 - Event Recording- The music therapist will tally how many individuals were engaged in the session at least one time and take an average from the total participants.
 - Pre- and Post- Likert Scale (zero to 10/ least to worse): zero- no withdrawal symptoms, five- Moderate symptoms, 10- Severe symptoms
 - Pre- and Post- Rating scale (four- points/ least to greatest)- One) Not motivated, Two) Somewhat motivated, Three) Motivated, Four) Highly motivated
 - Event Recording- The music therapist will tally how many individuals participate in problem solving at least one time and take an average from the total participants.

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 160
 - **ADAMHS Funded Unduplicated Clients Served:** 342
 - **Total Number of Clients Served:** 805
 - **Total Number of Clients that Completed this Program/Service:** see additional information
- **Average Cost Per Client:** \$13
- **Additional Information:**
 - Out of 805 clients seen (including repeat clients), 87% stayed for the entire group; 75% of 480 clients showed an increase in mood; 59% of 463 clients showed an increase in relaxation; 71% of 805 clients engaged in collaborative experiences; and 244 solutions were provided for 138 problems identified by group members.

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 964
 - **Total Number of Clients that were Served:** 964
 - **Total Number of Clients that Completed this Program/Service:** 964
- **Goals Met:**
 - Only 16% of the adults projected to be served through Music Therapy at Stella Maris completed the pre-/post-DARS assessment, which was 44% lower than projected. The target total number of participants was 160, the actual number of participants was 964, which was 83% higher than what was projected. Of those individuals who completed the

CY22 Program Highlights and Outcomes

pre-/post-DARS assessment (159 total scores), relationship scores were 14% higher than projected, internal beliefs 5% higher, initiative was 11% higher, and self-control was 2% higher than projected (projected goals were 60%).

- **Metrics Used to Determine Success:**

- The Devereux Adult Resiliency Survey (DARS) was utilized. The music therapist administered Likert scales for mood and relaxation and collected data on participation, and attendance.

- **Program Successes:**

- Primary Outcome Measure- 159 total reports for CY20: DARS one and two- 74% of the participant reported an improvement in their relationships scores, 65% improvement in internal beliefs, 71% improvement in initiative, 62% improvement in self-control, and 86% improvement overall.
- Additional Outcome Measures:
 - 964 total attendees
 - Number of attendees that stayed for entire group- 91%
 - Percentage of attendees who verbally contributed within group process- 80%
 - Percentage of attendees who participated in collaborative experiences- 65%
 - Percentage of solutions identified out of problems identified- 97%
 - Out of the 964 attendees, 37% completed the mood and relaxation reports
 - Percentage of attendees with increase in mood ratings- 66%
 - Percentage of attendees with increase in relaxation ratings- 70%

- **Average Cost Per Client in CY20:** \$10

- **Additional Information:**

- Although The Music Settlement had two staff resignations during CY20, there was no break in service. New music therapists were immediately assigned to take over the program. In addition to detox and partial hospitalization, men's rehab began music therapy in October of 2020. Client and staff feedback was extremely positive, and the program was considered a valuable addition to the programs being offered at Stella Maris. The Music Settlement and Stella Maris are working with Thomas William, Data Research Specialist at the ADAMHS Board, and Felicia Eckstein, a graduate student majoring in Nonprofit Leadership and Management School of Community Resources and Development, Watts College of Public Service and Community Solutions at Arizona State University, to evaluate group outcome measures in music therapy. In addition, the staff at Stella Maris is committed to finding the best tools possible to evaluate the benefits of music therapy to ensure program continuation and potential growth of services.

Provider:	The Music Settlement	2020 First Outcome Count:	359	2021 First Outcome Count:	247
Instrument:	DARS	2020 Final Outcome Count:	194	2021 Final Outcome Count:	69
Program:	Adult Prevention	2020 % of Final:	54.04%	2021 % of Final:	27.94%

The Devereux Adult Resilience Scale (DARS) is a measurement instrument designed by the Devereux Advanced Behavioral Health organization for adults (18+ years). The instrument is utilized to identify an individual's personal strengths in four domains.

Providers currently report aggregated data for programs utilizing the DARS instrument. Results reflect the percentage of individuals for whom there was an increased score from the initial (first) and follow-up (final) instrument administration

Population	Evaluation Year	Subscale	% Who Improved	Significance
Adults (18+ years)	2020	Initiatives	70.62%	Significant at p<.05
Adults (18+ years)	2020	Internal Belief	64.43%	Significant at p<.05
Adults (18+ years)	2020	Overall	87.11%	Significant at p<.05
Adults (18+ years)	2020	Relationship	70.62%	Significant at p<.05
Adults (18+ years)	2020	Self Control	58.25%	Significant at p<.05
Adults (18+ years)	2021	Initiatives	55.07%	Not Significant
Adults (18+ years)	2021	Internal Belief	50.72%	Not Significant
Adults (18+ years)	2021	Overall	63.77%	Significant at p<.05
Adults (18+ years)	2021	Relationship	43.48%	Not Significant
Adults (18+ years)	2021	Self Control	42.03%	Not Significant

Naaleh Cleveland

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
Naaleh Cleveland			
High Risk Teen Mentorship Program	\$ 30,000	\$ 35,400	Prevention
Total	\$ 30,000	\$ 35,400	

CY22 Program Highlights and Outcomes

Naaleh Cleveland

Naaleh is an organization specifically geared to helping Jewish individuals in the Cleveland area experiencing mental health issues. Naaleh's expert guidance assists individuals in navigating the resources available in the community.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

High-Risk Teen Mentorship Program

One of Naaleh's main goals for this program is to provide high quality mentorship by building healthy relationships with struggling teens. Due to the profound stigma surrounding mental health concerns, parents are often hesitant to allow their children to join this programming. Naaleh networks with community Rabbis and school principals to best identify the kids that are most in need and they help encourage parents to enroll children for mentorship. Naaleh aims to engage the community and build rapport with these teens to help them get the professional help that they need, so they can lead happier and more productive lives. The High-Risk Teen Mentorship Program builds skills in self-awareness and emotional intelligence. Naaleh focuses on minimizing risky behavior and helping prevent relapses for individuals with addictions. Through projects and thought-provoking discussion, Naaleh uses the time with teens to build self esteem and a sense of value. Naaleh's teen program focuses on ensuring the completion of high school or GEDs and on building job skills. These are vital components towards being a productive member of society. Mentors work on construction projects, art projects and vocational skills, taking the teens to job interviews and helping them find gainful employment. Participants are also taught to implement basic cleanliness and personal hygiene. Physical fitness goals are set for the teens, helping them enroll and train for marathons. In order to participate in these highly coveted events, participants must pass drug tests and avoid all types of smoking so the lungs will be able to endure prolonged running. These are basic life skills and when combined with emotional intelligence training, and goal setting techniques, Naaleh sets the path for a much brighter future for these struggling teens.

- **Target Population:**
 - Teens most in need who were identified via calls to Naaleh as well as through school principals, Rabbis and therapists
- **Anticipated Number of Clients to be Served: 40**
- **Number of Staff Required to Implement Program: 5**
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Naaleh currently has three interns that are working for them and are ready to step in and volunteer in our teen program should the need arise.
- **Funding Priority:**
 - Harm reduction efforts and strategies
 - Wrap-around Behavioral Health Services for Youth

CY22 Program Highlights and Outcomes

- Prevention and early intervention
- **Program Goals:**
 - This program aims to provide mentorship to struggling teens in our community having a difficult time with substance use, mental health issues, and family dysfunction
 - Creating a safe place for teens to feel free to express themselves with supervision and guidance
 - Aid with academics and education of life skills
 - Build teens self esteem and self confidence through learning life skills and physical fitness
- **Program Metrics:**
 - Naaleh actively uses the DESSA system to measure social and emotional improvement. Additionally, Naaleh consistently assesses sobriety rates, employment, and engagement with mental health professionals.
 - Naaleh assesses participants frequency of engagement with program leadership, consistent communication with teens parents to hear feedback about child's feelings about the program.
 - Naaleh reviews high school academic achievements and enrollment rates; also, commitment to volunteer and employment opportunities.
 - Naaleh staff consistently processes with the teens and parents about how they view themselves, commitment to fitness achievements, willingness to participate in opportunities to learn new skills or use them.

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 40
 - **ADAMHS Funded Unduplicated Clients Served:** 45
 - **Total Number of Clients Served:** 45
 - **Total Number of Clients that Completed this Program/Service:** 45
- **Average Cost Per Client:** \$333
- **Additional Information:**
 - In order to highlight the success and importance of the Naaleh teen mentorship program, it's important to look at least one case example that embodies the type of success we see routinely. One boy who became involved with the program over a year ago has been living with his mother in a dysfunctional home, not working, not going to school, isolated and without friends. Through working with the teen mentorship program, he was able to avoid homelessness, gain employment, move into an inexpensive apartment, and receive mental health services. The relationship that was built between the mentorship leader and this boy was the foundation through which this success was able to be built. He is happy and has found the confidence to assert himself into conversations, advocate for himself, and for the first time, seems to be motivated to pursue meaningful change.

CY22 Program Highlights and Outcomes

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 35
 - **Total Number of Clients that were Served:** 45
 - **Total Number of Clients that Completed this Program/Service:** 0
- **Goals Met:**
 - Naaleh's teen mentorship program was overwhelmingly successful. Through the use of "The Living Room," many teens from the community have found a space to build confidence, feel accepted, learn independent living skills, and feel supported in a healthy and supervised environment. Several teens have successfully sustained sobriety by engaging in self esteem building, positive, fitness focused and life skills developing activities.
- **Metrics Used to Determine Success:** N/A
- **Program Successes:**
 - There were 1,200 mentorship services. Also, 50 teens received drug education, 20 have never tried drugs, seven former substance abusers are now in recovery, and 42 parents received support and drug education. In addition, 15 teens were referred to a mental health provider, 35 are engaged with a mental health provider, 30 teens have year-round/summer employment, and 15 teens successfully completed course material expected of their year in school.
- **Average Cost Per Client in CY20:** \$667
- **Additional Information:** N/A

Provider:	Naaleh Cleveland	2020 First Outcome Count:	85	2021 First Outcome Count:	57
Instrument:	DESSA MINI	2020 Final Outcome Count:	81	2021 Final Outcome Count:	54
Program:	Youth Prevention	2020 % of Final:	95.29%	2021 % of Final:	94.74%

The Devereux Student Strength Assessment (DESSA) is an abbreviated assessment designed by the Devereux Advanced Behavioral Health organization for school age children. This instrument is used as a screening tool to identify children who are in need for additional social or emotional education. There are measurement instruments specific for children in Grades K – 8 and for children in Grades 9 – 12.

When the data contains both an initial (first) and follow-up (final) instrument administration, a paired t-test was used for comparing individual scores at those two different points in time. It is the most powerful test for showing changes in individuals. The green highlighted rows suggest that changes from the First Assessment to the Final Assessment did not happen by chance and that the change can be attributed to the program intervention.

Population	Evaluation Year	Subscale	First Outcome Average	Final Outcome Average	Average Difference	Significance
Grades 9 - 12	2020	No Scale	44.01	46.63	2.62	Significant at p<.05
Grades K - 8	2020	No Scale				Not Significant
Grades 9 - 12	2021	No Scale	46.94	51.24	4.3	Significant at p<.05
Grades K - 8	2021	No Scale				Not Significant

NAMI Greater Cleveland

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
NAMI of Greater Cleveland			
Community Prevention Education Program	\$ 118,366	\$ 154,068	Prevention
Family Caregivers Education Program	\$ 21,344	\$ 42,028	Prevention
Peer Support	\$ 57,675	\$ 85,417	Peer Support
Diversion Center Peer Support	\$ -	\$ 25,254	Peer Support
Faith Based Program	\$ 10,000	\$ 10,000	Prevention
Teen and Young Adult Community Awareness Campaign	\$ -	\$ 19,343	
Total	\$ 207,385	\$ 336,110	

CY22 Program Highlights and Outcomes

NAMI Greater Cleveland

NAMI Greater Cleveland is dedicated to empowering persons affected by mental illness and their family members to achieve a better quality of life by providing them with mutual support, practical information, referrals, advocacy and educational resources.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

Peer Support Groups

NAMI offers multiple support groups for people to learn from each other's experiences, share coping strategies, and offer each other encouragement. The groups address risk factors such as lack of support, coping mechanisms and communication skills, and increases protective factors such as participants' capacity to cope, communicate their needs for themselves to caregivers and treatment providers, engage in self-care, and support the recovery process for themselves or a family member. Groups include: Connections, Family Support Groups, Peer to Peer, In Our Own Voice, and Caring Calls.

- **Target Population:**
 - NAMI Connection Recovery Support Group for adults who have experienced symptoms of a mental health condition
 - NAMI GC Connection peer support groups serve specialized groups including LGBT elders, LGBT youth, and African Americans
 - Family Support Groups for any family member of a person who has a mental health condition
 - Peer to Peer for adults with mental health conditions
 - Caring Calls: isolated individuals who have mental illness
- **Anticipated Number of Clients to be Served:** 2,130
- **Number of Staff Required to Implement Program:** 5
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - NAMI GC relies on cross-training staff and its pool of volunteers to ensure services are consistent should staff vacancies occur.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Peer Support
 - Prevention and early intervention
- **Program Goals:**
 - Peer Wellness and Family Support Group: 150 meetings serving 600 individuals

CY22 Program Highlights and Outcomes

- Hospital Network Program: 100 visits to 650 patients in psychiatric facilities in Cuyahoga County
- Peer to Peer Program: two courses serving 10 individuals.
- In Our Own Voice: six presentations to 280 individuals
- Peer Support Services (Caring Calls): Provide 600 contacts
- **Program Metrics:**
 - Peer Wellness and Family Support Group: number of groups held and number of individuals in attendance
 - Hospital Network Program: number of visits and number of patients visited
 - Peer to Peer Program: Number of courses held, number of individuals served
 - In Our Own Voice: number of presentations and number of individuals in attendance
 - Peer Support Services (Caring Calls): number of contacts made

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 905
 - **ADAMHS Funded Unduplicated Clients Served:** 968
 - **Total Number of Clients Served:** 968
 - **Total Number of Clients that Completed this Program/Service:** 968
- **Average Cost Per Client:** \$45
- **Additional Information:**
 - NAMI GC developed a new partnership with Northcoast Behavioral Healthcare of Northfield, Ohio, to provide the Peer to Peer course via Zoom to people who were inpatient at that hospital during the pandemic.

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 2,980
 - **Total Number of Clients that were Served:** 1,559
 - **Total Number of Clients that Completed this Program/Service:** 1,559
- **Goals Met:**
 - Provided 17 Peer and Family Support Groups serving a total of 495 unique individuals (and with a total utilization of 1,279 meetings/visits) achieving 55% of our 2020 program goal.
 - Made 104 Hospital Network Program visits to 504 patients, which was 42% of our 2020 program goal.
 - Provided three Peer to Peer courses and served 14 people (47% of our 2020 program goal).
 - Provided 14 In Our Own Voice presentations to 283 individuals, which was 113% of the program goal.

CY22 Program Highlights and Outcomes

- NAMI GC provided 263 contacts (including 52 Caring Calls), for 44% of the 2020 program goal.
- **Metrics Used to Determine Success:**
 - Peer Wellness and Family Support Groups: 20 Peer Wellness and Family Support Groups serving 900 individuals.
 - Hospital Network Program: 220 visits to 1,200 patients in psychiatric facilities in Cuyahoga County.
 - Peer to Peer Program: four courses serving 30 individuals.
 - In Our Own Voice (IOOV): 10 presentations to 250 individuals.
 - Peer Support Services: Complete 600 contacts.
- **Program Successes:**
 - Peer and Family Support Groups: During this reporting period, NAMI GC provided 17 Peer and Family Support Groups serving a total of 495 unique individuals (and with a total utilization by 1,279 participants), achieving 55% of our 2020 program goal; compared to 24 Peer and Family Support Groups serving 833 individuals for the same period in 2019. NAMI GC exceeded outcome goals in all domains measured.
 - Hospital Network Program: NAMI GC made 104 Hospital Network Program visits to 504 patients, which was 42% of our 2020 program goal; compared to hospital visits to 1,185 patients for the same period in 2019. NAMI GC exceeded outcome goals in all domains measured.
 - Peer to Peer: NAMI provided three Peer to Peer courses and served 14 people (47% of our 2020 program goal); compared to three Peer to Peer courses serving 23 individuals in 2019. During this reporting period, NAMI GC met or exceeded 5 out of 9 Peer-to-Peer outcome goals in all domains measured. Other outcome goal results (e.g., coping, managing crisis, self-care) may have been affected by the magnitude of the impact of experiencing simultaneous, multiple national crises, on participants' overall mental health (e.g., 100-year pandemic, social isolation, significant racial trauma related to police violence, civil unrest, polarized national election, etc.).
 - In Our Own Voice (IOOV): NAMI Greater Cleveland provided 14 presentations to 283 individuals, which was 113% of our program goal. NAMI exceeded outcome goals in all domains measured.
 - Peer Support Services: NAMI Greater Cleveland provided 263 contacts (including 52 Caring Calls), for 44% of our 2020 program goal of 600 contacts.
- **Average Cost Per Client in CY20:** \$37
- **Additional Information:**
 - NAMI adapted programs during COVID-19, cross-trained staff as NAMI-certified family support group leaders to respond to the pandemic and provide coverage for currently certified staff to take time off. In Q3, NAMI began offering "Caring Calls," a service that pairs isolated individuals who have mental illness with trained volunteers for regular check-ins and support. Community agencies typically refer clients; individuals may also refer themselves for phone outreach, support, and symptom monitoring by trained NAMI GC volunteers.

CY22 Program Highlights and Outcomes

Community Prevention Education

This program addresses the risk factors of untreated mental illness and lack of knowledge of signs and symptoms through community outreach and education presentation and webinars, programming including Ending the Silence (for middle and high school students) and Mental Health First Aid (MHFA), and promoting NAMI's helpline for referrals to service and care for individuals with mental illness and their families.

- **Target Population:**

- Webinars, speakers bureau, MHFA, Information and Referral Helpline, community outreach, and the website will serve the general public, including people living with mental illness and family members.
- Ending the Silence serves middle and high school students and/or their teachers, parents and guardians.
- Staff presentations serve selected audiences, e.g., human services organizations, community mental health agencies, hospital staff, nursing and medical students and faculty at area schools, local businesses and other community organizations, by providing informative presentations about NAMI and its programs/services.

- **Anticipated Number of Clients to be Served:** 459,000

- **Number of Staff Required to Implement Program:** 5

- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**

- NAMI relies on cross-training staff and its volunteer pool to ensure that programs and services are consistent with our contract, should staff vacancies occur.

- **Funding Priority:**

- Culturally Appropriate and Evidence-based Diverse Services
- Peer Support
- Prevention and early intervention

- **Program Goals:**

- Provide Community Prevention Education events, to consist of 12 education webinars serving 120 individuals; 2 Ending the Silence events serving 30 individuals; 15 Speakers Bureau events serving 300 individuals; three Mental Health First Aid events serving 30 individuals.
- Program objectives for Community Prevention Education events are as follows: 80% will find information presented useful to their position and/or everyday life; 80% will report an increased understanding of symptoms, resources and treatment options for mental health conditions; 80% will report an increased understanding of the effects of stigma on persons with mental illness and their families.
- Helpline will serve 1,370 contacts including calls, emails, etc.
- Record and distribute 12 mental health radio shows and 12 podcasts on community prevention education topics.
- Provide 30 staff presentations on NAMI's mission, programs and services that will serve 450 individuals.

CY22 Program Highlights and Outcomes

- Provide and maintain a website to make mental health information and resources available to persons with mental illness, their family members and the community and achieves 20,000 hits and 16,000 visitors to the website.
- **Program Metrics:**
 - Number of Community Prevention Education events provide and the number of individuals in attendance at education webinars, Ending the Silence, Speakers Bureau events, and Mental Health First Aid events
 - Number of calls, emails and contacts made to the Helpline
 - Number of podcasts and mental health radio shows recorded and distributed.
 - Number of staff presentations and number of individuals in attendance at the presentations
 - Number of visitors and hits to the website

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 1,150
 - **ADAMHS Funded Unduplicated Clients Served:** 1,901
 - **Total Number of Clients Served:** 1,901
 - **Total Number of Clients that Completed this Program/Service:** 1,901
- **Average Cost Per Client:** \$52
- **Additional Information:**
 - NAMI updated and translated its education program Understanding Mental Illness (Entendiendo Los Problemas de Salud Mental, a one-hour educational overview of mental health diagnoses and symptoms, current therapies and treatments, communication strategies, and self-care/coping skills) into Spanish; NAMI's Hispanic Outreach Specialist delivered this program to two Hispanic organizations in the first half of 2021.

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 8,685
 - **Total Number of Clients that were Served:** 3,074
 - **Total Number of Clients that Completed this Program/Service:** 3,074
- **Goals Met:**
 - NAMI provided nine psychoeducation sessions serving 142 individuals (95% of program goal); four Ending the Silence sessions serving 76 individuals (7% of program goal); 15 community education sessions serving 173 individuals (144% of program goal); 15 Speakers Bureau presentations serving 487 individuals (153% of program goal); three MHFA courses serving 62 individuals (248% of program goal); 1,042 helpline calls, 280 emails, and 46 live chats for a total of 1,368 contacts (62% of program goal); participated in 10 health fairs serving 308 individuals at table with information and resources (36% of

CY22 Program Highlights and Outcomes

program goal); 38 staff presentations to 487 individuals (49% of program goal); and the website had 29,735 hits (sessions) by 21,461 visitors (users).

- **Metrics Used to Determine Success:**

- Number of sessions held and number of individuals served in Community Psychoeducation sessions
- Number of schools and students that participated in Ending the Silence sessions
- Number of Community Education Nights held and number of individuals in attendance
- Number of Speakers Bureau presentations and individuals served
- Number of Mental Health First Aid (MHFA) courses provided and number of individuals served
- Number of calls, chats and emails to the Helpline
- Number of participants and number of outreach events held
- Number of staff presentations held and number of individuals served
- Number of hits and visitors to the website

- **Program Successes:**

- Community Psychoeducation: NAMI GC conducted 9 community psychoeducation sessions serving 142 individuals (95% of program goal); compared to 17 sessions serving 344 individuals, for the same period in 2019. During this reporting period, NAMI GC exceeded outcomes goals in all domains measured, apart from “respondents will have a more positive perception of persons with mental illness and the potential for recovery” (79% versus program goal of 85%). In 2021, NAMI GC staff will work closely with presenters to ensure that program content clearly and consistently aligns with this objective.
- Ending the Silence: NAMI GC provided four Ending the Silence sessions serving 76 individuals (program goal eight sessions serving 1,000 individuals); compared to nine sessions serving 5,205 individuals, for the same period in 2019. During this reporting period, NAMI GC exceeded outcomes goals in all domains measured, apart from “learning new information about mental illness.”
- Community Education Nights: NAMI GC conducted 15 community education sessions serving 173 individuals (exceeding our program goal of four sessions serving 120 individuals); compared to three sessions serving 138 individuals, during this same period in 2019. NAMI GC exceeded outcomes goals in all domains measured.
- Speakers Bureau: NAMI GC provided 15 presentations serving 487 individuals, exceeding our program goal; compared to 16 presentations serving 458 individuals for the same period in 2019. NAMI GC exceeded outcome goals.
- Mental Health First Aid (MHFA): NAMI GC provided three MHFA courses serving 62 individuals, exceeding our 2020 program goal; compared to four courses serving 36 individuals for the same period in 2019. NAMI GC exceeded outcome goals.
- Helpline: NAMI GC provided information and referral to 1,042 Helpline calls, 280 emails, and 46 live chats for a total of 1,368 contacts (62% of our program goal), compared to 1,993 helpline calls and mailings for the same period in 2019.

CY22 Program Highlights and Outcomes

- Outreach: NAMI GC participated in 10 health fairs serving 308 individuals at table with information and resources (36% of program goal), compared to 28 health fairs serving 1,315 individuals, compared to 45 health fairs/community events serving 2,428 individuals at table with information and resources for the same period in 2019.
- Staff Presentations: NAMI GC provided 38 staff presentations to 487 individuals (49% of program goal); compared to 18 staff presentations serving 801 individuals for the same period in 2019.
- Website: information from the website revealed a total of 29,735 hits (sessions) by 21,461 visitors (users), exceeding our program goals by 198% and 195% respectively, compared to 25,002 hits by 17,473 visitors for the same period in 2019. NAMI GC exceeded outcome goals.
- **Average Cost Per Client in CY20:** \$39
- **Additional Information:**
 - With schools overwhelmed issues related to the pandemic, NAMI GC adapted the Ending the Silence program to a virtual format for educators, parents and the public. The agency also sponsored a Facebook Live event called “The Root of It All: Self Love in the Time of Quarantine,” which had over 10,000 views. NAMI began a new collaboration with Portia Booker of WOVU.org to create and broadcast a monthly mental health radio show. NAMI provided virtual COVID-19 safety education to 26 group home residents in three presentations.

Faith-based Program

NAMI GC’s faith-based project builds relationships with faith-based organizations and encourages inclusion of families and persons with mental illness within their ministries.

- **Target Population:**
 - NAMI GC’s faith-based project reaches out to a broad, diverse range of faith-based institutions, including churches, temples, mosques, synagogues, and other places of worship in the Greater Cleveland community to build relationships and encourage inclusion of families and persons with mental illness within their ministries, share information about mental illness and community resources, and decrease stigma.
- **Anticipated Number of Clients to be Served:** 100
- **Number of Staff Required to Implement Program:** 5
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - NAMI GC relies on cross-training its staff and volunteer pool to ensure services are consistent should staff vacancies occur. NAMI GC can also enlist assistance from other NAMI affiliates should another Mental Health First Aid-certified instructor be needed.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Peer Support
 - Prevention and early intervention

CY22 Program Highlights and Outcomes

- **Program Goals:**
 - Educational presentations to serve total of 90 individuals (psychoeducation)
 - Mental Health First Aid education to serve 10 individuals
- **Program Metrics:**
 - Number of education presentations provided and number of individuals in attendance
 - Number of Mental Health First Aid trainings presented and number of individuals trained

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 300
 - **ADAMHS Funded Unduplicated Clients Served:** 37
 - **Total Number of Clients Served:** 37
 - **Total Number of Clients that Completed this Program/Service:** 37
- **Average Cost Per Client:** \$135
- **Additional Information:**
 - NAMI GC updated and translated Understanding Mental Illness (Entendiendo Los Problemas de Salud Mental, a one-hour educational overview of mental health diagnoses & symptoms, therapies and treatments, communication strategies, and self-care/coping skills) into Spanish; and delivered the program to two Hispanic organizations. NAMI GC's Hispanic Coordinator continues to outreach Spanish-speaking congregations; some are resuming in-person activities and are willing to consider future education programming. NAMI hired a new Support and Education Coordinator, who coordinated "Blessed Assurance: Leaning on Faith and Mental Health in the Black Church" in April 2021. The new coordinator is working with local faith-based organizations on interfaith education events in August and September with the Jewish and Muslim faith communities.

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 300
 - **Total Number of Clients that were Served:** 93
 - **Total Number of Clients that Completed this Program/Service:** 93
- **Goals Met:**
 - In 2020, NAMI GC engaged in outreach/relationship building activities that served 93 individuals. This total includes nine individuals who attended a psychoeducation presentation, Understanding Mental Illness.
- **Metrics Used to Determine Success:**
 - NAMI GC's target for the faith-based program was to serve a total of 300 individuals in psychoeducation courses (including Understanding Mental Illness, custom presentations, or Mental Health First Aid).

CY22 Program Highlights and Outcomes

- Understanding Mental Illness (psychoeducation course): # of individuals served; and SAMHSA Domain goals met.
- **Program Successes:**
 - Understanding Mental Illness (UMI): NAMI GC conducted one course serving nine individuals. Although pandemic conditions interfered with meeting the goal to serve up to 300 individuals through mental health education, NAMI GC is proud to report that they successfully adapted UMI for the Spanish-speaking community in Greater Cleveland and offered this program in Spanish to a Spanish-speaking faith-based organization. NAMI GC exceeded outcomes goals in all domains measured.
 - No Mental Health First Aid courses were delivered in 2020.
- **Average Cost Per Client in CY20:** \$108
- **Additional Information:**
 - NAMI GC pivoted this program in response to the pandemic and launched a mental health awareness campaign on December 14, 2020, to reach underserved African-American communities in Greater Cleveland. NAMI also provided mental health education to underserved communities, especially those without access to technology, via a monthly mental health radio segment.

Family and Caregiver Education

NAMI Family-to-Family is a free, evidence-based, eight-week educational program taught by NAMI-trained volunteer leaders who have lived experience as family members of a person with a mental illness. The course provides information about mental health diagnoses/symptoms, current therapies/treatments, communication strategies, coping skills, and self-care. The course addresses risk factors such as stigma, lack of support, lack of information about accessing treatment, and increases protective factors such as participant's capacity to support their loved one's recovery process while sustaining themselves as caregivers.

- **Target Population:**
 - NAMI Family-to-Family: family, significant others and friends of people with mental health conditions
- **Anticipated Number of Clients to be Served:** 60
- **Number of Staff Required to Implement Program:** 5
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - NAMI GC will rely on cross-training staff and its volunteer pool to ensure that services are consistent with our contact should staff vacancies occur.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Peer Support
 - Prevention and early intervention
- **Program Goals:**
 - Number of individuals served in Family to Family: 20 individuals

CY22 Program Highlights and Outcomes

- Number of individuals served in Understanding Mental Illness: 40 individuals
- 30% of participants will report an increase in their knowledge of community mental health services and resources
- 50% will report an increase in their knowledge of mental health conditions, signs and symptoms
- 50% will report an increase in their knowledge of coping skills and techniques
- 70% will report improving their understanding of the importance of self-care
- 75% will report a better understanding of the effects of stigma on persons with mental illness and their families
- **Program Metrics:**
 - Number of individuals served in Family to Family
 - Number of individuals served in Understanding Mental Illness
 - Percent of participants that reported an increase in their knowledge of community mental health services and resources
 - Percent of participants that reported an increase in their knowledge of mental health conditions, signs and symptoms
 - Percent of participants that reported an increase in their knowledge of coping skills and techniques
 - Percent of participants that reported improving their understanding of the importance of self-care
 - Percent of participants that reported will report a better understanding of the effects of stigma on persons with mental illness and their families

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 30
 - **ADAMHS Funded Unduplicated Clients Served:** 62
 - **Total Number of Clients Served:** 62
 - **Total Number of Clients that Completed this Program/Service:** 62
- **Average Cost Per Client:** \$318
- **Additional Information:**
 - N/A

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 60
 - **Total Number of Clients that were Served:** 78
 - **Total Number of Clients that Completed this Program/Service:** 78

CY22 Program Highlights and Outcomes

- **Goals Met:**
 - Family to Family: four courses serving 43 individuals (96% of program goal). UMI: four courses serving 35 individuals (233% of program goal).
- **Metrics Used to Determine Success:**
 - Metrics for Family to Family (F2F) and Understanding Mental Illness (UMI): Number of courses and individuals served: four courses serving 45 individuals (F2F) and two courses serving 15 individuals (UMI). 30% of participants will increase knowledge of community mental health services and resources; 50% will increase knowledge of mental health conditions, signs and symptoms; 75% will be able to cope with the signs and symptoms of mental illness; and 80% will understand the importance of medication adherence (UMI Only). In addition, 50% will increase their knowledge of coping skills and techniques; 80% will be able to communicate needs to persons experiencing mental illness (caregivers/professionals); 70% will understand the importance of self-care. Finally, 75% will report increased understanding of the effects of stigma; and 80% will be able to advocate for their loved one experiencing mental illness (F2F only).
- **Program Successes:**
 - Outcome data for Family to Family (F2F) and Understanding Mental Illness (UMI): During the grant reporting period, NAMI GC conducted four Family to Family courses serving 43 individuals (96% of program goal), compared to three courses serving 38 individuals, during the same period in 2019. For UMI, four courses serving 35 individuals (233% of program goal), compared to two courses serving 13 individuals during the same period in 2019. Family to Family: NAMI GC exceeded outcomes goals in all domains measured.
- **Average Cost Per Client in CY20:** \$274
- **Additional Information:**
 - N/A

Diversion Center Peer Support Program

Peer Support Groups provide emotional support, promote problem-solving strategies, and assist in developing a support network outside the formal mental health system. Utilizing a proven support group model developed by NAMI National, the group follows a support group curriculum that helps participants to navigate common barriers to maintaining recovery. Support Groups include resource presentations on topics such as reentry, housing and employment, and provide information and referral for relevant services and providers. Inform & Inspire (I&I) presentations are modeled on NAMI GC's Hospital Network Program (HNP), and provide the opportunity to inspire hope among participants, share information about participating in NAMI GC programs, and provide additional resources for SMI/SA recovery and maintenance. Presentations are facilitated by NAMI-trained volunteers who share powerful personal stories of recovery, resilience, and hope. During these one-hour presentations, NAMI GC volunteers and staff provide an overview of NAMI GC programming, including the benefits of expressing oneself within the safety of a support group. Participants are encouraged to engage in community-based programming such as the support groups as well as education courses, and to volunteer with NAMI GC, when they are in a healthier position to do so. Finally, I&I presentation participants also each receive a paper folder filled with information about connecting to community resources, navigating a behavioral health crisis, communicating with behavioral healthcare professionals, and how to advocate for themselves for better outcomes.

CY22 Program Highlights and Outcomes

- **Target Population:**
 - Adult individuals experiencing serious mental illness/mental health crises and who are currently engaged in treatment at the Cuyahoga County Diversion Center
- **Anticipated Number of Clients to be Served:** 120
- **Number of Staff Required to Implement Program:** 5
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - NAMI will rely on cross-training its staff and volunteer cohort to ensure services are consistent with contract should staff vacancies occur.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Peer Support
 - Prevention and early intervention
- **Program Goals:**
 - Diversion Center Peer Support Group will serve 60 individuals; 50% of participants will report they better understand the importance of developing skills to cope with symptoms of mental illness.
 - Diversion Center Inform and Inspire sessions will serve 60 individuals; 50% of participants will report they see themselves living with mental illness in a more positive light after attending presentation.
- **Program Metrics:**
 - Number of individuals served in the Diversion Center Peer Support Group; percentage of participants that reported a better understanding of the importance of developing skills to cope with symptoms of mental illness
 - Number of individuals served in the Diversion Center Inform and Inspire sessions; percentage of participants reporting that they see themselves living with mental illness in a more positive light after attending presentation

First Six Months of CY21 Provider Outcomes: N/A – New Program

Teen and Young Adult Community Awareness Campaign

NAMI GC will contract with a creative professional to develop a concept, serve as art and photography director and copywriter of an awareness campaign that targets youth and young adults. The campaign will include billboards and transit, social media, radio and digital ads as well as print materials to be shared with community partners. The ads, billboards and print materials will be shared in low-income household communities that experience prejudice, racism, exclusion or marginalization.

- **Target Population:**
 - Youth and young adults 16 to 25 years of age and their parents, guardians, and caregivers
- **Anticipated Number of Clients to be Served:** 2,504,733 (total number of people to see the campaign in any platform)
- **Number of Staff Required to Implement Program:** 1

CY22 Program Highlights and Outcomes

- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - As part of NAMI GC's Strategic Plan, the Ad Hoc Marketing Committee will provide consistent oversight to this initiative.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Peer Support
 - Prevention and early intervention
- **Program Goals:**
 - Raise awareness of mental illness, community mental health resources and reduce stigma in teen and young adult populations, parents, guardians and caregivers.
- **Program Metrics:**
 - Number of billboards installed
 - Number of individuals reached with social media, radio, digital and transit ads
 - Number of posters distributed

First Six Months of CY21 Provider Outcomes: N/A – New Program

New Directions

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
New Directions			
Boys and Girls Empowerment (BaGE)	\$ 109,242	\$ 150,000	Specialized Pop.
SUD Young Adult Outpatient Support Services	\$ 40,000	\$ -	
Young Adult Recovery Housing	\$ 50,000	\$ 100,000	Transitional Youth
Total	\$ 199,242	\$ 250,000	
Pooled Funding:			
Adolescent & Young Adult Residential Treatment	\$ -	\$ -	
Adolescent & Young Adult Outpatient Services	\$ -	\$ -	

CY22 Program Highlights and Outcomes

New Directions

New Directions has been providing a continuum of quality life-changing behavioral health services to children, adolescents, young adults, adults and families, including specialized treatment for chemically dependent adolescents. The agency offers a vast array of programs and services that evaluate, educate, strengthen and support thousands of children, adults and their families each year.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

Adolescent and Young Adult Outpatient Services

Provides access to care and/or support when in crisis, family/caregiver involvement, ability to connect with adolescent/young adults using methods familiar to them (via technology), all within a well-established provider focused on the use of evidence-based practices. New Directions offers same day-virtual appointments, clinical staff available for after-hours and weekend contacts, including responding to family and referral source requests via email or by phone. Additionally, the incorporation of evidence-based practices including cognitive behavioral therapy, trauma therapy, gender responsive programming, motivational enhancement, reality therapy, strengths-based treatment, and the inclusion of family/caregiver in the program model are critical to the client's success in treatment. We incorporate effective and culturally appropriate treatment, which is family driven, and builds on support systems to strengthen the family system.

- **Target Population:**
 - Adolescents and young adults who are experiencing behavioral health needs, whether due to substance use, mental health issues or a combination of both.
- **Anticipated Number of Clients to be Served:** 155
- **Number of Staff Required to Implement Program:** 15
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - One crucial step New Directions has taken is to cross train therapeutic staff in the program/services provided. Treatment are trained to work in either residential program as well on various shifts, thereby preparing them to be ready and competent to provide the needed service. As an agency, efforts have been made over the last few years to “hire one up” (meaning hiring, onboarding and training) with the most frequently vacated position (treatment specialist). This approach has allowed the agency to have the appropriate number of staff to meet staffing requirements and ensure ongoing delivery of services and safety.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Trauma Informed Care Treatment, Recovery and Prevention Services
 - Wrap-around Behavioral Health Services for Youth

CY22 Program Highlights and Outcomes

- Recovery Supports and Services to Transitional Youth
- Recovery and Treatment Services or Specialized Populations
- **Program Goals:**
 - Ensure individuals have prompt access to assessments and ongoing treatment services
 - Engagement in ongoing drug-free status, sober environment and sober supports
 - Completion of education/vocation goals
 - No new legal charges and/or relief of current legal charges
 - Client/family/caregiver satisfaction in the follow areas: atmosphere supportive of growth and recovery; culturally sensitive; obtaining needed services while in program
- **Program Metrics:**
 - Wait time from initial contact to assessment will be less than five calendar days; wait time from assessment to admission/first provider meeting will be less than five calendar days
 - At discharge: 60% or greater number of clients will be drug-free, engaged in sober environments and have sober supports
 - At discharge: 60% or greater number of clients will be complete their education/vocation goals
 - At discharge: 60% or greater number of clients will have no new legal charges and/or relief of current legal charges

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 0
 - **ADAMHS Funded Unduplicated Clients Served:** 120
 - **Total Number of Clients Served:** 129
 - **Total Number of Clients that Completed this Program/Service:** 11
- **Average Cost Per Client:** \$750
- **Additional Information:**
 - During the first half of the year, staff saw a significant increase in requests for assessments, which appears to correlate with the vaccination roll out. Youth in IOP averaged 10-15 youth per session. Parents and caregivers reported preferring that the Parent Empowerment Groups sessions are done virtually, and many have commented on the positive learning experience.

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 40
 - **Total Number of Clients that were Served:** 105
 - **Total Number of Clients that Completed this Program/Service:** 46
- **Goals Met:**

CY22 Program Highlights and Outcomes

- Cuyahoga County clients served: Assessed = 105; IOP = 45; Outpatient = 41; Aftercare = 12. Staff assessed significantly more Cuyahoga clients during the year (+162%); slightly fewer (-18% of projection) in OP; slightly more in IOP (+50%) and slightly more in Aftercare (+33%). Staff partially attributes the increase to COVID and the agency's ability to quickly move to virtual appointments. Additionally, the agency's ongoing commitment and ability to offer assessments and admissions typically within days of first contact; and flexibility in appointment times.
- **Metrics Used to Determine Success:**
 - Access/Treatment Engagement: Wait time for initial contact to assessment less than seven calendar days, and from assessment to treatment admission less than 14 calendar days; 50% or greater will be admitted into recommended service within seven calendar days or less from assessment. Treatment Completion/Retention Rate: 50% or more clients will complete treatment. Client/Caregiver Satisfaction: 70% or higher and/or greater client satisfaction scores in the following areas: atmosphere supportive of growth and recovery; cultural sensitivity and feeling therapists have adequate time for them; 70% or higher parent/caregiver satisfaction.
- **Program Successes:**
 - Wait from contact to assessment: 85% of individuals could have received an assessment in less than seven calendar days. 100% of individuals received assessment within 14 days. Wait from assessment to admission: 88% of individuals could have been admitted into treatment within seven days of assessment; admissions were at times delayed due to parent concerns related to COVID; 24 clients were referred to other agencies; 17 clients refused recommendations or stopped contact with the agency. Treatment completion: OP = of the 18 discharges, 10 or 56% successfully completed. IOP = of the 36 discharges, 21, or 58%, were successful. The 32% who did not complete often made progress in many areas, including no new legal charges, and improving school; however, often total abstinence from substance was often a challenge.
- **Average Cost Per Client in CY20:** \$715
- **Additional Information:**
 - Assessment and outpatient programming made adjustments during the year due to COVID. At times, staff was told by families seeking services that this was one of the few adolescent providers operating IOP. Overall IOP census has been 18-20 youth (regardless of county) per session. Agency was able to pivot to add staff as well as to continue with offer all services virtually. In the most recent atmosphere survey of IOP clients, 82% reported the atmosphere is supportive of growth and recovery and 92% feel that the staff is culturally sensitive and considerate of their needs. Parent satisfaction with overall services and cultural sensitivity were 88-95% high satisfaction range. Additionally, 65% reported preferring the use of virtual services. As with the use of the app, the opening of various forms of technology (Zoom, Teams) and telehealth appears to allowed for clients and families to access services and communicate more freely.

Boys and Girls Empowered (BaGE) Residential Treatment

Provides high quality, evidenced based residential treatment and family/caregiver involvement, all within a well-established provider focused on the use of evidence-based practices especially trauma-informed care. To ensure high-quality residential services, New Directions incorporates

CY22 Program Highlights and Outcomes

evidence-based practices including: cognitive behavioral therapy, trauma therapy, gender responsive programming, motivational enhancement, reality therapy, strengths-based treatment and the inclusion of family/caregiver in the program model are critical to the client's success in treatment. Effective and culturally appropriate treatment elements, which are family driven, and builds on support systems to strengthen the family system, are also part of the overall program model. Given the multi-system involvement and multiple needs of the youth in residential, this can take 45-60 days depending on the youth. Education attainment and family recovery are key components and must be included.

- **Target Population:**
 - Adolescents who are diagnosed with substance use disorders and meet ASAM Level of Care placement criteria for 3.5 Clinical Managed Medium Intensity Residential Treatment.
- **Anticipated Number of Clients to be Served: 60**
- **Number of Staff Required to Implement Program: 22**
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Cross training therapeutic staff in the program/services provided is effective in addressing staff vacancies.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Mental Health Residential Treatment
 - Community and Crisis Residential Services
 - Trauma Informed Care Treatment, Recovery and Prevention Services
 - Wrap-around Behavioral Health Services for Youth
 - Recovery and Treatment Services to Specialized Populations
- **Program Goals:**
 - Provide timely access to ASAM 3.5 Residential Treatment for Adolescents and Young Adults
 - Successful treatment completion as evidenced by reduction in ASAM criteria including: ongoing drug-free status, stabilization of mental health challenges, engagement in sober support system, completion of educational goals, no legal charges and/or relief of current legal charges
 - Positive client/caregiver experience and satisfaction with services
- **Program Metrics:**
 - Number of admission into residential treatment. Prompt access to treatment = 100% of admission within fourteen days 60% within seven calendar days of assessment
 - 70% or higher successful treatment completion as evidenced by reduction in ASAM criteria including: ongoing drug-free status, decrease in mental health challenges and medication management if indicated, engagement in sober support system, completion of educational goals, no legal charges and/or relief of current legal charges
 - 70% or higher positive client and caregiver satisfaction with services received

CY22 Program Highlights and Outcomes

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 60
 - **ADAMHS Funded Unduplicated Clients Served:** 18
 - **Total Number of Clients Served:** 18
 - **Total Number of Clients that Completed this Program/Service:** 10
- **Average Cost Per Client:** \$4,081
- **Additional Information:**
 - Residential programs continue to provide trauma-informed services in the ever-changing landscape of COVID, workforce shortages and the challenges of working with adolescents. New Directions continues to have success in working with highly traumatized youth as well as those within the LGBT community. The agency worked hard in both areas to best meet the needs of clients served. The addition of a full-time RN has also lead to improved health outcomes for youth, many having not addressed their health issues for some time.

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 60
 - **Total Number of Clients that were Served:** 35
 - **Total Number of Clients that Completed this Program/Service:** 22
- **Goals Met:**
 - The agency fell short of their projection related to admissions of Cuyahoga County youth into residential/BAGE (35 of 60 anticipated or 58% of projection). COVID-19 was the main factor.
- **Metrics Used to Determine Success:**
 - Access/Treatment Engagement: Wait time for initial contact to assessment less than seven calendar days and from assessment to treatment admission less than 14 calendar days; 50% or greater will be admitted into Residential Treatment service within seven calendar days or less from assessment
 - Treatment Completion/Retention Rate: 70% or more clients will complete Residential Treatment
 - Client/Caregiver Satisfaction: 70% or higher and/or greater client satisfaction scores in the following areas: atmosphere supportive of growth and recovery; cultural sensitivity and feeling therapists have adequate time for them; 70% or higher parent/caregiver satisfaction.
- **Program Successes:**
 - Wait from contact to assessment: 85% of individuals could have received an assessment in less than seven calendar days, with many individuals not taking the first available appointment. 100% of individuals received assessment within 14 days regardless of taking first available appointment.

CY22 Program Highlights and Outcomes

- Wait from assessment to admission: 86% of individuals could have been admitted into treatment within seven days of assessment; four admission delayed due to parent concerns related to COVID, three were delayed due to the individual legal situations of clients (need for magistrate approval; arrangements for transport from DH).
- Treatment completion: Of the 34 discharged clients, 22, or 65%, successfully completed. Of note, three clients were removed from treatment by legal authorities due to ongoing behavior issues; one client required quarantine at home due to positive COVID, and three left treatment against staff advice with efforts made with family to continue treatment.
- Client Satisfaction: 96% (23 of 24) of those who completed surveys at discharge reported definitely or somewhat yes.
- Family Caregiver Satisfaction: 93% (28 of 30) of those who completed surveys at discharge, reported definitely yes to overall satisfaction with services received.
- **Average Cost Per Client in CY20:** \$3,121
- **Additional Information:**
 - Residential treatment was greatly impacted by COVID and at the same time, the agency continued to admit clients and delivered safe and quality treatment to adolescents and their families. They saw a trend during the year of increased female referrals as well as a trend in referrals from hospitals. In the most recent atmosphere survey of Residential clients, 85% reported the atmosphere is supportive of growth and recovery and 92% feel that the staff is culturally sensitive and considerate of their needs. Parent satisfaction with overall services and cultural sensitivity were in the 83-91% high satisfaction range.

Adolescent and Young Adult Recovery Housing

Provides access to care, access to support when in crisis, ability to connect with adolescent/young adults using methods familiar to them (via technology), all within a well-established trauma informed provider focused on the use of evidence-based practices. New Directions is a certified Level IV Recovery House with Ohio Recovery Housing (ORH). New Directions has adopted National Association of Recovery Residences (NARR) standards and is committed to providing high quality recovery housing to adolescents/transitional age youth, including those on psychotropic medications, those who may be involved with Medication Assisted Treatment with other providers, and those who may be pregnant. Additionally, access to treatment services within the agency and the incorporation of evidence-based practices including cognitive behavioral therapy, trauma-informed care, gender-specific programming, motivational enhancement, reality therapy, strengths-based treatment within the recovery housing program are critical to the resident's success in their ongoing recovery journey.

- **Target Population:**
 - Adolescents and young adults who are transitioning from residential treatment programs or from the community who are demonstrating early recovery
- **Anticipated Number of Clients to be Served:** 12
- **Number of Staff Required to Implement Program:** 24
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Cross training therapeutic staff in the program/services provided is effective in addressing staff vacancies.

CY22 Program Highlights and Outcomes

- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - High Quality Housing
 - Trauma Informed Care Treatment, Recovery and Prevention Services
 - Wrap-around Behavioral Health Services for Youth
 - Recovery Supports and Services to Transitional Youth
 - Recovery Supports and Treatment Services for Specialized Populations
- **Program Goals:**
 - Ensure adolescents and young adults have stable, supportive housing
 - Engagement in ongoing drug-free status, sober environment and sober supports
 - Completion of education/vocation goals
 - No new legal charges and/or relief of current legal charges
 - Client/Family/Caregiver satisfaction in the following areas: atmosphere supportive of growth and recovery; culturally competent; obtaining needed services including: mental health services and medications; trauma-informed care, and family reunification when possible.
- **Program Metrics:**
 - 85% or higher adolescents and young adults will have stable, supportive housing and time of program completion
 - 85% or higher will demonstrate ongoing drug-free status, and engagement with sober environments and sober supports
 - 85% or higher will demonstrate completion of education/vocation goals
 - 85% or higher will demonstrate no new legal charges and/or relief of current legal charges

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served: 12**
 - **ADAMHS Funded Unduplicated Clients Served: 2**
 - **Total Number of Clients Served: 2**
 - **Total Number of Clients that Completed this Program/Service: 1**
- **Average Cost Per Client:** \$4,560
- **Additional Information:**
 - The recovery housing program continues to be successful in working with adolescents and young adults who need extended stays in a supportive, recovery environment. One current Cuyahoga County recovery housing youth who has been in the program since the end of April graduated from high school and is enrolling in college. He was referred through the Drug Court and has been making tremendous strides in addressing his substance use, mental health/trauma, family and legal issues. There has been a slight

CY22 Program Highlights and Outcomes

increase in referrals from Cuyahoga County with the vaccination roll out and return to in-person services by agencies and schools.

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 12
 - **Total Number of Clients that were Served:** 12
 - **Total Number of Clients that Completed this Program/Service:** 10
- **Goals Met:**
 - Agency anticipated serving 12 Cuyahoga County clients in Transitional/Recovery Housing and met that goal. Additionally, goals for completion, transition to stable housing, ongoing recovery plan and increased sober supports were also achieved.
- **Metrics Used to Determine Success:**
 - Transitional/Recovery Housing Completion/Retention rate of 83% or higher will successfully complete the program demonstrating the following: transition to stable housing, being drug-free, completing education goals, ongoing recovery lifestyle, no new legal charges, and/or relief of current legal charges. Additionally, greater than 75% or higher “yes” responses in client satisfaction scores in the following areas: atmosphere supportive of growth and recovery, cultural sensitivity, and obtaining needed services while in the program.
- **Program Successes:**
 - Transitional/Recovery Housing Completion/Retention = 10 of 12, or 83%, demonstrated all of the following: stable housing, being drug-free, completing education goals and plans for ongoing services; demonstrating ongoing recovery lifestyle including meeting attendance and sober supports; no new legal charges, and/relief of current legal charges (e.g. being off probation). Of the two youth who did not complete: one did not return from a Court hearing as the magistrate remanded her to the Detention Home due to significant violation of her ODYS parole. The other youth and family decided to have him leave recovery housing after two days, which may in part have been due to COVID-19 and his recent court hearing where he was taken off probation. 92% of those discharged from the program reported significant satisfaction in the following areas: atmosphere supportive of growth and recovery, cultural sensitivity, and obtaining needed services while in the program.
- **Average Cost Per Client in CY20:** \$4,167
- **Additional Information:**
 - The Transitional/Recovery Housing program served a more diverse group of clients this year: 42% identified as Hispanic/Latino; and 17% of the youth identified as LGBTQ+. As in prior years, 100% of the youth have had traumatic experiences with all having an Adverse Childhood Experience (ACE) score of four or higher. About half the youth in recovery housing have an ACE score of 10 or more, with many experiencing losses of a parent from substance use overdose, parental incarceration and/or abuse and violence. 100% have co-occurring mental health issues. The recovery housing programs provide the avenue for youth to build on their strengths, talents and allow for additional time to engage in pro-social and supportive activities and environments.

Northcoast Behavioral Healthcare

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
Northcoast Behavioral Health			
Community Support Network-MH Residential	\$ 3,600,000	\$ 3,903,519	MH Residential
Total	\$ 3,600,000	\$ 3,903,519	

CY22 Program Highlights and Outcomes

Northcoast Behavioral Healthcare

Northcoast Behavioral Healthcare Community Support Network (NBH/CSN) provides services to those with severe and persistent mental illness, as well as Intensive Outpatient (IOP) Treatment Programs and residential treatment services. The CSN MH Subsidized Housing consists of 62 beds, across six residential sites, that are designed to provide 24-hour per day supervised transitional housing to persons diagnosed with severe mental illness.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

Community Support Network (CSN) - Mental Health Residential

The Community Support Network (CSN) MH Residential Housing program consists of 62 beds, across six Class 1 residential sites designed to provide 24-hour per day, 7-days per week supervised transitional housing.

- **Target Population:**
 - Adults ages 18 and older diagnosed with acute mental health and/or substance use diagnosis. Priority is given to clients residing in inpatient psychiatric hospitals who require the highest level of care offered in the community to ensure successful transition from the hospital and increased tenure in the community upon discharge.
- **Anticipated Number of Clients to be Served:** 96
- **Number of Staff Required to Implement Program:** 59
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Floating staff from other Cuyahoga MH Residential sites; utilizing ETA's (Part-Time Therapeutic Program Workers).
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - High Quality Housing
 - Mental Health Residential Treatment
 - Recovery and Treatment Services to Specialized Populations
 - 24 Hours/Seven Days Access
- **Program Goals:**
 - CSN residential clients will successfully reintegrate into the community, reducing the need for psychiatric re-hospitalization
 - CSN residential facilities will ensure tenure of clients in the community
 - CSN residential clients will step down to clinically appropriate housing within 18 months from admission

CY22 Program Highlights and Outcomes

- CSN residential clients will develop and improve ADL skills
- **Program Metrics:**
 - 90% of CSN residential clients will successfully reintegrate into the community, reducing the need for psychiatric re-hospitalization
 - CSN residential facilities will ensure a readmission rate of 10% or less within 90 days of discharge
 - 90% of clients will step down to less restrictive housing within 18 months from admission
 - Skill Scale Measurement scores will increase by 20% at discharge

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 96
 - **ADAMHS Funded Unduplicated Clients Served:** 71
 - **Total Number of Clients Served:** 71
 - **Total Number of Clients that Completed this Program/Service:** 40
- **Average Cost Per Client:** \$19,868
- **Additional Information:**
 - The primary goals of the programs are to provide assistance, support and aid in the development of adult daily living skills. The target population for residential programming are persons diagnosed with a severe mental illness, who are age 18 years or older, and residents of Cuyahoga County. Priority is given to clients residing in inpatient psychiatric hospitals who require the highest level of care offered in the community to ensure successful transition from the hospital and increased tenure in the community upon discharge. Clients who have co-occurring substance abuse problems, developmental disorders, multiple medical needs, and/or a physical handicap will not be excluded from eligibility to the residential program. Additionally, the MH Residential Program serves as the “safety net” of the community and will not turn away clients who present with difficult to manage behaviors.

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 107-109
 - **Total Number of Clients that were Served:** 96
 - **Total Number of Clients that Completed this Program/Service:** 42
- **Goals Met:**
 - Outcomes data reveal program goals for MH Residential were successfully met, with improvement needed in stepping clients down from the program within 18 months of admission.
- **Metrics Used to Determine Success:**
 - MH Residential clients will have a current Annual Residential Service Plan (RSP) and it will be reviewed every 90 days.

CY22 Program Highlights and Outcomes

- MH Residential clients will complete Functional Assessments.
- MH Residential clients will have a Skill Scale Measurement updated every 90 days in the RSP.
- MH Residential facilities will ensure a readmission rate of 10% or less.
- Number of clients will step down to lesser restrictive housing within 18 months from admission.
- **Program Successes:**
 - 99% of MH Residential clients have completed Functional Assessments. 97% of MH Residential clients have Skill Scale Measurement scores present and updated every 90 days in the RSP. 99% of MH Residential clients have a current Annual Residential Service Plan (RSP). 97% of MH Residential clients had a RSP review every 90 days. 99% of MH Residential clients had a physical exam upon admission. 100% of MH Residential clients have current TB testing. 99% of MH Residential admitted clients had benefits initiated within the first 30 days of admission. 82% of MH Residential clients successfully reintegrated into the community, reducing the need for psychiatric re-hospitalization. MH Residential facilities ensured a readmission rate of 10% or less with 1 client readmitted to Cato House during the calendar year. 58% of MH Residential clients stepped down to lesser restrictive housing within 18 months from admission.
- **Average Cost Per Client in CY20:** \$37,500
- **Additional Information:**
 - Same as CY21.

**Northeast Ohio
Neighborhood
Health Services,
Inc. (NEON)**

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
Northeast Ohio Neighborhood Health Services, Inc.			
The B.E.S.T Me	\$ -	\$ 125,000.00	24/7 Access
Total	\$ -	\$ 125,000.00	

CY22 Program Highlights and Outcomes

Northeast Ohio Neighborhood Health Services, Inc. (NEON)

NEON is a Federally Qualified Health Center (FQHC) network dedicated to improving access to health care and reducing health disparities in Greater Cleveland.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

The B.E.S.T. (Behavioral Wellness (B), Education (E), Screening (S), and Fitness Training (T)) Me Program

The B.E.S.T program addresses overall health and wellness and provides a safe environment for children from the neighborhoods of Cleveland to get physical exercise and social engagement through sport and recreation activities. Participants that engage in these recreational activities will have the opportunity to complete screens for depression (Patient Health Questionnaire, PHQ-9), childhood adversity/trauma (Adverse Childhood Experiences Questionnaire, ACE-Q), and substance use (Alcohol Use Disorder Identification Test Concise, AUDIT-C). The screens will be given pre-test and post-test from participation in a program to evaluate improvement in these areas that can lead to health issues both immediately and in adulthood. Additionally, a NEON case manager will track the screening results, and linkage to services through the NEON Behavioral Health Department. In the efforts of prevention, a curriculum or series focusing on psychoeducation of emotional regulation and social skills will be offered at each session. By offering a safe environment and psychoeducation directed and improved self-esteem, the program builds emotional skills for the children in the community. Participants not experiencing these risk factors at the current time, will still gain skills on emotional regulation to prevent the development of mental health obstacles in the future. Participants struggling with more substantial mental health or environmental obstacles, can be linked to the appropriate services.

- **Target Population:**
 - Youth ages 5 to 17 years who reside within the cities of Cleveland and East Cleveland
- **Anticipated Number of Clients to be Served:** 1,440
- **Number of Staff Required to Implement Program:** 5
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - NEON has a total of 194 employees and a complement of licensed and credentialed Case Managers, Behavioral Health Counselors, and Social Workers who can assume interim responsibility for all program services in the event of a vacancy.
- **Funding Priority:**
 - Prevention and Early Intervention
- **Program Goals:**
 - Provide and complete the full panel (PHQ-9, ACE-Q, AUDIT-C) of screens for each program participant

CY22 Program Highlights and Outcomes

- Provide psychoeducation on self-esteem and emotional regulation to each program participant
- Engage each participant in fitness training to bolster body confidence
- Conduct pre- and post-evaluation of the PHQ-9, ACE-Q, AUDIT-C screen scores
- Provide continuity of care for each program participant referred to NEON's Behavioral Health Services Department
- **Program Metrics:**
 - Total number of program participants compared to the number of completed screens; objective is 80% of all participants to complete the screening panel
 - The number of individuals receiving psychoeducation; objective is 100% of participants who complete screening panel will receive psychoeducation
 - Improved self-report of body confidence by program participants; objective is 70% of participants will report self-perceived improvement on the pre- and post-body confidence questionnaire
 - Pre- and post-evaluation of the PHQ-9, ACE-Q, AUDIT-C screen scores; objective is a 25% reduction in depression and substance use, and greater stability in adverse experiences

First Six Months of CY21 Provider Outcomes: N/A – New Program

**Northern Ohio
Recovery
Association
(NORA)**

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
Northern Ohio Recovery Association, Inc. (NORA)			
Pooled Funding:			
SUD Outpatient Treatment Program	\$ -	\$ -	

CY22 Program Highlights and Outcomes

Northern Ohio Recovery Association

Northern Ohio Recovery Association, Inc. (NORA) is a community-based substance abuse prevention and peer recovery support organization. NORA provides culturally relevant chemical dependency services with dignity and respect to youth, adults and families in Northeast Ohio.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

SUD Outpatient Treatment Program

Northern Ohio Recovery Association (NORA) provides treatment and prevention services including assessments, group counseling, individual counseling, peer support, urinalysis, nurse services, medical services, family services, outreach services and Medication Assisted Treatment (MAT). The agency also provides life skills and job readiness programs to adult men and women in treatment at the facility. The program will base client care on clinical analysis and recommendations from the team. The medical doctor and clinical director work with the counseling staff to ensure the best care for clients. The purpose is to ensure that the men and women receiving treatment at our agency can navigate through day-to-day obstacles. The agency's mission is to equip adults and youth participants with the necessary skills to become independent adults, allowing them to take care of themselves and their families. The year-long program is multi-dimensional and teaches skills such as interview prep, reading and writing 101, managing savings accounts, 20-dollar family meal demos, and Conscious Discipline, a method of de-escalating conflict for parents and children taught by Dr. Rebecca Bailey. LIFE classes will help those who participate in the program become better prepared for the real world. The risk factors of the youth staff targets include: poverty, low academic success, family history of addiction, mental health, trauma, sexual abuse.

- **Target Population:**
 - Adults 18 years and older with substance use disorders, transitional aged youth and women with children
- **Anticipated Number of Clients to be Served: 25**
- **Number of Staff Required to Implement Program: 8**
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - NORA has multiple employees in place who are capable of picking up the duties of a staff member who should leave. In addition, the agency is a host site for Cleveland State University, Case Western Reserve University, John Carroll, and Cuyahoga Community College.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - High Quality Housing
 - Community and Crisis Residential Services

CY22 Program Highlights and Outcomes

- Trauma Informed Care Treatment, Recovery and Prevention Services
- Harm reduction efforts and strategies
- Wrap-around Behavioral Health Services for Youth
- **Program Goals:**
 - Increase long-term recovery and improve health outcomes by providing personal and workforce development activities to increase employment and vocational opportunities to individuals in recovery
 - Reduce youth substance use and delay age of onset for substance use by targeting at-risk minority youth, in prevention and intervention programming in partnership with community coalitions
 - Expand peer recovery supportive services that will incorporate pre-employment readiness assessment, employment soft and hard skill sets, training and enhance the client's employment connections for self-sufficiency
 - Expand, enhance and incorporate additional peer recovery supportive services that will eliminate client social isolation, learn new coping strategies and build healthy social support networks and relationships necessary for recovery
 - Decrease mental health symptoms among adults and youth on medications and decrease the need for hospitalizations
 - Provide safe and reliable shuttle transportation for clients to attend LIFE classes, community events, medical appointments and group meetings
 - Decrease substance use among adults and youth
 - Increase Medication Assisted Treatment for individuals with opioid use disorders
- **Program Metrics:**
 - Percentage of participants who successfully complete the year-long program
 - Percentage of program participants who received employment or joined a vocational program after completion of the program
 - Percentage of program participants who are in recovery or actively going through the recovery process
 - Number of at-risk youth reached, measured by unique touchpoints; and the percentage of youth that return for additional programs
 - Percentage of participants who successfully complete the year-long LIFE program, measuring improvement rate with a post-test and mock interview scores to gauge readiness for job placement and effectiveness of interview prep workshops
 - Measure peer support by periodically significant touchpoints with recovery-peer and recovery support mentors
 - Percentage of program participants who utilize the shuttle service
 - Collect urinalysis and conduct pre- and post-test surveys with indicators for substance use
 - Collect data and compare census with historical data to compare number of MAT clients

CY22 Program Highlights and Outcomes

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 21
 - **ADAMHS Funded Unduplicated Clients Served:** 2
 - **Total Number of Clients Served:** 2
 - **Total Number of Clients that Completed this Program/Service:** 1
- **Average Cost Per Client:** \$19,814
- **Additional Information:** N/A

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 12
 - **Total Number of Clients that were Served:** 9
 - **Total Number of Clients that Completed this Program/Service:** 2 completed, 7 currently engaging in treatment
- **Goals Met:**
 - All of the goals were met except medical enrollment for clients, and clients seen by a nurse
- **Metrics Used to Determine Success:**
 - Assessment availability: 100% of non-Medicaid clients will be seen for assessment within 72 hours of initial contact
 - Treatment Engagement: 80% of non-Medicaid clients will successfully engage in treatment
 - Treatment initiation: 90% of non-Medicaid clients will engage in two treatment service visits within 14 days of completion of assessment
 - Treatment appropriateness: 100% of non-Medicaid funded clients will be appropriate for the level of care
 - Medical: 80% increase in attention to physical health needs by having non-Medicaid funded clients seen by a nurse to review health history and needs
 - Individualized services: 80% of non-Medicaid funded clients will receive individualized services
 - Evidence-based practices: 100% of non-Medicaid funded clients that entered treatment will receive evidence-based services
 - Treatment retention: 70% of non-Medicaid funded clients will complete treatment without leaving treatment AMA or rejecting services
 - Client satisfaction: 70% of clients will be satisfied with care they received
 - Documentation compliance: Medical records will meet an 80% level of compliance with documentation requirements

CY22 Program Highlights and Outcomes

- SUD reportable incidents: meet the ADAMHS Board standards for timely initial reports and follow up on reportable incidents (MUIs)
- Medical benefits: increase the number of initially non-Medicaid funded clients who obtain Medicaid or other health coverage by the time of discharge
- **Program Successes:**
 - Assessment availability: 100% (9 of 9) of all non-Medicaid clients served received an assessment within 72 hours of their initial call to the agency - Goal met
 - Treatment Engagement: 100% (9 of 9, three N/A) of non-Medicaid clients successfully engaged in treatment. The non-applicable clients left AMA – Goal exceeded
 - Treatment initiation: 100% (9 of 9) of non-Medicaid clients who entered treatment engaged in at least two treatment service visits within 14 days completing their assessment - Goal exceeded
 - Treatment appropriateness: 100% (9 of 9) of non-Medicaid funded clients were appropriate for the level of care - Goal met
 - Medical: 44% (4 of 9) of non-Medicaid funded clients were seen by a nurse to review health history and needs - Goal not met
 - Individualized services: 100% (9 of 9) of non-Medicaid funded clients received individualized services – Goal exceeded
 - Evidence-based practices: 100% (9 of 9) of non-Medicaid funded clients who entered treatment received evidence-based services (Motivational Interviewing, Trauma Informed Care, and the Matrix model) - Goal met
 - Treatment retention: 100% of non-Medicaid funded clients completed treatment without leaving ASA or rejecting services. Of those nine admitted to treatment, two have completed successfully, and seven remain in treatment – Goal exceeded
 - Client satisfaction: Based on post-treatment satisfaction surveys, the average level of satisfaction of all NORA clients was 88% and would recommend the services of NORA to others – Goal met
 - Documentation compliance: the average percentage for record completeness and compliance for all NORA records reviewed was 88% - Goal exceeded
 - AOD reportable incidents: There were zero reportable incidents (MUIs) for this reporting period
 - Medical benefits: 33% (3 of 9) of initially non-Medicaid funded clients who entered treatment were enrolled in Medicaid or Medicaid expansion prior to discharge - Goal not met
- **Average Cost Per Client in CY20:** \$2,222
- **Additional Information:**
 - NORA provided services to 12 non-Medicaid clients between January 1 and December 31, 2020. Of those 12 served, two completed successfully, and seven are remain engaged in treatment, and the other three clients did not complete the program.

OhioGuidestone

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
OhioGuidestone			
Early Childhood Mental Health**	\$ 225,000	\$ -	Prevention
School Based Prevention	\$ 74,578	\$ 74,578	Prevention
Spiritual Care as a Bridge to Mental Health	\$ 52,500	\$ 52,500	Prevention
Paternal Depression	\$ 10,000	\$ 10,000	Prevention
Total	\$ 362,078	\$ 137,078	
Pooled Funding:			
Non-Medicaid Treatment	\$ -	\$ -	

** ECMH Providers Pooled Funding

CY22 Program Highlights and Outcomes

OhioGuidestone

OhioGuidestone is one of the leading children's behavioral health agencies in Northeast Ohio for children, adolescents and transitional youth.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

Father's Feelings Project, formerly Paternal Depression Program

The program will train 100 child-serving, male-serving, and family-serving professionals (e.g. home visiting professionals, early childhood educators, medical health providers) in fatherhood services and paternal depression screening, and offer two additional consultation coaching sessions for 10-member cohort implementing screening-referral protocol with fathers in their programs. The program will screen 100 perinatal fathers for paternal depression using the Yates Screening Tool and a clinical diagnostic assessment; and conducting brief intervention session with fathers; and refer to health, community-based, and safety net resources to improve childhood and family outcomes (e.g. educational, health, economic).

- **Target Population:**
 - Fathers ages 14 and older during perinatal period (with children 12 months or younger or are expectant fathers)
- **Anticipated Number of Clients to be Served:** 100
- **Number of Staff Required to Implement Program:** 4
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Progress, procedures, and participants are tracked in departmental documentation and written protocols for continuity in the event of staff turnover. All staff in department will be cross trained even if no staff assigned to project to ensure continuation of services. Positions are rehired if vacancies occur. Any changes to staffing will be communicated to clients/participants, as possible and appropriate.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Trauma Informed Care Treatment, Recovery and Prevention Services
 - Prevention and early intervention
- **Program Goals:**
 - Offer three 90-minute virtual professional development trainings between March and October 2022 to train 100 professionals (capacity is 40-50 per virtual session) with CEUs offered.
 - Facilitate 10-person consultation cohort with two additional one-hour professional development sessions that focus on implementing the screening-referral protocol to serve

CY22 Program Highlights and Outcomes

perinatal fathers; cohort members will identify 10 perinatal fathers to serve as part of their cohort implementation. Cohort members will be offered CEUs and receive \$150 stipend for completing both sessions and implementing protocol with 10 perinatal fathers.

- Implement perinatal paternal depression screening, brief intervention, and referral protocol with 100 fathers.
- **Program Metrics:**
 - Facilitate three 90-minute professional development trainings for up to 100 professionals.
 - 10 professionals complete two additional professional development session; each identifies and refers 10 perinatal fathers for paternal depression screening.
 - 100 fathers receive paternal depression screening. Track outcomes from screenings. Track number of visits/sessions completed for each client. Track referrals for any client who receives them. Track parent stress levels (through Parent Stress Index) and parent-child social and emotional health (through DESSA) pre-and post-program participation

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 75
 - **ADAMHS Funded Unduplicated Clients Served:** 14
 - **Total Number of Clients Served:** 14
 - **Total Number of Clients that Completed this Program/Service:** 4
- **Average Cost Per Client:** \$315
- **Additional Information:**
 - A father served in the program was interviewed by 10WBNS around Father's Day and shared his experiences.

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 100
 - **Total Number of Clients that were Served:** 2
 - **Total Number of Clients that Completed this Program/Service:** 2
- **Goals Met:**
 - COVID-19 severely impacted the intended goals to screen up to 100 fathers during the perinatal period (pre- and post-partum) for paternal depression. Project activities were halted in February, by which only one father had completed his visit, and the pending eight fathers to have been screened in February and March had to be postponed indefinitely. One father remained eligible (within first year of child's birth) once the project was able to be safely re-opened using telehealth in September.
- **Metrics Used to Determine Success:**
 - Metrics include the count of fathers screened for paternal depression, fathers meeting diagnostic criteria for paternal depression (DSM-V major mood disorder facilitated

CY22 Program Highlights and Outcomes

diagnostic interview), fathers at increased risk of paternal depression (Edinburgh Postpartum Depression Scale), and count of fathers referred for mental health services to local providers.

- **Program Successes:**

- Count of fathers screened for paternal depression: 2
- A broad radio and social media campaign was launched in December to coincide with holiday seasons and related risk of depression to raise awareness about paternal depression and the project.

- **Average Cost Per Client in CY20:** \$5,000

- **Additional Information:**

- This is not a traditional service program, but a ongoing pilot study, so some items on this report are still not applicable. 2020 presented an unexpected opportunity to transition the project to a virtual platform to better serve more fathers, hopefully mitigate stigma and reluctance, and to respond to COVID-19. Down time related to the pandemic was used to redesign the program based on client input and data. Fathers had been expressing the need to have more space to reflect and process their affective states that are connected to anxiety and depression. Fathers also noted how limited they felt seeking out and connecting with community resources for fathers, parents, and for special needs related to areas that moderate successful fatherhood (e.g. job opportunities, insurance coverage, child support). The project's program now screens fathers for paternal depression, refers via "warm hand-offs" for clinical mental health treatment as well as father/male-specific community programs, and offers coaching sessions that boost fatherhood pride, self-efficacy, parenting skills, and space for fathers to speak freely and openly about their feelings (hence the new title "The Father's Feelings Project"). The program reopened late summer/early fall but did not have a strong response for enrollment (just the one father still eligible). Enrollment picked up in early 2021. OGS also boosted recruitment via radio ads after doing market research that demonstrated RadioOne and iHeart stations as critical audiences for men. The new, virtual program includes:

- A mental health screening that will occur during the first and fifth sessions to ensure that risk factors are not missed should they develop within a few weeks of the initial screening. Screening sessions will be completed by a licensed and project-trained mental health therapist.
- Brief interventions, utilizing coaching to introduce fathers to Joyful Together (a parent-implemented play-based resiliency prevention program) activities, will be provided during sessions two through four. During these sessions, infants and children will participate with their father and receive Joyful Together activities. These activities will be closely linked with daily infant care routines that fathers often need support to improve these skill sets. These specific sessions will be facilitated by professionals with unique strengths in coaching parents with young children, supporting parents during perinatal periods, and who have been trained in the Joyful Together model and other play-based attachment building interventions.
- Referrals to mental health treatment providers and additional fatherhood resources will be offered and if able, provided to participating fathers during every

CY22 Program Highlights and Outcomes

session. Project staff will follow-up with all fathers one week after participation to remind them of the emergency information received, and to generally check-in. For participants with an indicated diagnosis of depression, a two-week follow-up call and letter will be made to remind and check the status of contacting and scheduling with a mental health provider. A final one-month follow-up call and letter will be made as well.

Workforce 360° - Faith-Based Services, formerly Spiritual Care as a Bridge to Mental Health

The Workforce 360° model provides job readiness training, occupational skills training, academic remediation, case management services, and wraparound supportive services tailored to meet the needs of each individual participant to reduce and eliminate barriers to self-sufficiency. Staff embedded academic, entrepreneurship, and occupational components into a contextualized employability skills training, which culminates in stackable credentials. These credentials facilitate entry and/or advancement into in-demand opportunities. All OhioGuidestone programs and services are geared towards providing clients with the care, support, and resources to rise above their challenges and move forward on a path to recovery and lifelong success. The Cuyahoga Workforce 360° supplements workforce soft skills and credential training with the Faith-Based Services Program. Resiliency and self-determination are important life skills that Faith-Based programming entwines in lesson plans. The Faith-Based Program offers a deep dive into soft skills, self-care, healthy relationships, and internal-regulation capacity. OhioGuidestone supplements workforce education and preparation activities with resiliency coaching and spiritual guidance group and individual sessions. Through the Faith-Based initiative, OhioGuidestone utilizes spiritual care as a bridge to mental health services and uses both group and individual sessions to promote resiliency, supportive relationships, and healthy coping mechanisms. The Community Chaplain provides weekly group sessions for each class, and is accessible for one-on-one sessions by appointment or drop in. The Community Chaplain collaborates with other staff at Workforce 360° to provide resources and special support in the classroom when needed. The Community Chaplain is available to support clients, whether individually or in a group, in situations of crisis or high emotion. These services have often been utilized for individual sessions when participants have experienced recent trauma, loss, or when determining important life decisions.

- **Target Population:**
 - Individuals of 18 to 24 years of age
- **Anticipated Number of Clients to be Served:** 115
- **Number of Staff Required to Implement Program:** 2
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - If there is a staff vacancy during the contract period, the Program Manager and/or OhioGuidestone Workforce 360° staff will step in and continue offering the Faith-Based Program to individuals until the position is filled. In addition, the Community Chaplain works closely with the other instructors within the workforce department to deliver services. The Faith-Based curriculum and lesson plans are consistent and kept in a shared location for all instructors to utilize and have access to. All program lessons and the pre- and post-DARS assessments can be facilitated by Workforce 360° instructors if needed.
- **Funding Priority:**
 - Prevention and early intervention

CY22 Program Highlights and Outcomes

- **Program Goals:**

- Workforce 360° will enroll 115 individuals in faith-based services that include a spiritual care component, spirituality lessons in both group settings and individual spiritual counseling sessions, and support resiliency, healthy relationships, and increased healthy coping skills
- 60% of participants will gain knowledge in healthy relationships
- 60% of participants will gain skills to increase self-worth and enhance internal beliefs and values
- 60% of participants will learn strategies to develop/enhance self-motivation to increase independence
- 60% of participants will learn how to self-regulate and control without the use of substance and negative influences

- **Program Metrics:**

- The metrics for enrollment is based on the number of individuals who want to enroll in the program and are engaged and participating in faith-based services.
- Based on the results from the pre- and post-DARS assessments, staff measures percentage of increased capacity for participants in the area of relationships. These measures are based on individual self-perceptions when taking the pre- and post-assessments.
- Based on the results from the pre- and post-DARS assessments, staff measures percentage of increased capacity for participants in the area of internal beliefs and values.
- Based on the results from the pre- and post-DARS assessments, staff measures percentage of increased capacity for participants in the areas of self-motivation and independence. These measures are based on individual self-perceptions when taking the pre- and post-assessments.
- Based on the results from the pre- and post-DARS assessments, staff measures percentage of increased capacity for participants in the area of self-control/regulation. These measures are based on individual self-perceptions when taking the pre- and post-assessments.

First Six Months of CY21 Provider Outcomes:

- **Highlights:**

- **Number of Clients that were Anticipated to be Served:** 115
- **ADAMHS Funded Unduplicated Clients Served:** 42
- **Total Number of Clients Served:** 42
- **Total Number of Clients that Completed this Program/Service:** 42

- **Average Cost Per Client:** \$625

- **Additional Information:**

- OhioGuidestone Faith-Based Services have become an integral part of our Workforce programming and prove an important value-add to our holistic approach. The Community Chaplain engages in programming and provides life skills lessons throughout participant

CY22 Program Highlights and Outcomes

programming and is available to participants for services after program completion and offers services both virtually and in-person for group and individual sessions. The Faith-Based Services also opens a referral pathway to mental health and behavioral health service referrals.

CY20 Provider Outcomes

- **Highlights:**

- **Number of Clients that were Anticipated to be Served:** 115
- **Total Number of Clients that were Served:** 102
- **Total Number of Clients that Completed this Program/Service:** 70

- **Goals Met:**

- The program's goals were funded 100% by the ADAMHS Board; however all of our goals as directed by the ADAMHS Board were not met. As outlined in our RFP, 60% of participants were expected to show an increase on each subscale on the DARS. This goal was not met. Further, the agency only served 102 clients when the goal was 115.

- **Metrics Used to Determine Success:**

- DARS

- **Program Successes:**

- Of the 70 clients who completed both DARS 1 and 2, 49% of the participants gained knowledge to develop healthy relationships, 36% of the participants learned skills to increase self-worth to enhance their internal beliefs and values, 56% of the participants learned strategies to develop/enhance self-motivation to increase independence (initiative), and 34% of participants learned how to self-regulate without the use of substances and negative influences (self-control). 75% of clients reported an overall increase from DARS 1 to DARS 2 during quarter 1, 66% during the third quarter, and 89% during the fourth quarter.

- **Average Cost Per Client in CY20:** \$515

- **Additional Information:**

- The goal of the program is to create a bridge to mental health services. During CY20, 30 participants received both mental health services in addition to spiritual care services and 72 received spiritual care services only.

Non-Medicaid Treatment

The services for which the agency utilizes funding for uninsured clients include Evaluation and Management Services, Individual SUD or MH Psychotherapy, Diagnostic Evaluation services, RN/LPN services, Family Therapy, Group Counseling, Intensive Outpatient, Community Psychiatric Supportive Treatment (CPST), Psychological Testing, Psychosocial Rehabilitation Services (PSR), Therapeutic Behavioral Services (TBS), Psychotherapy for Crisis, Case Management, ACT services, SUD Targeted Case Management, Medication Assisted Treatment, and various add-on services including Prolonged Services and Interactive Complexity. In 2012, OhioGuidestone began offering an Integrated Treatment Program, providing (in-home) simultaneous mental health and substance abuse treatment. The agency's full-time client advocate is on-call 24-hours per day to respond to client or referral source concerns, and has a well-established and long-term relationship with Board staff. The frequency and duration of services is variable by service type, practice model, and client

CY22 Program Highlights and Outcomes

need. All services are provided in accordance with OhioMHAS certification standards, Council on Accreditation practice requirements, and medical necessity guidelines. The delivery strategy for services is variable, based upon service type, practice model, and client need. Most of the work is done after hours and on weekends, as needed, to accommodate client schedules and improve engagement.

- **Target Population:**
 - Cuyahoga County residents with significant mental health challenges and/or substance use disorders
- **Anticipated Number of Clients to be Served:** 100
- **Number of Staff Required to Implement Program:** 100
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Participant progress is tracked in departmental documentation and written protocols for continuity exist in the event of staff turnover. All staff in the department will be cross trained even if not staff assigned to project to ensure continuation of services. Additionally, supervisors are required to provide regular outreach until a primary care provider can be re-assigned. Positions are rehired if vacancies occur. Any changes to staffing will be communicated to clients/participants, as possible and appropriate. Staffing needs for this program are prioritized by OhioGuidestone's Talent Acquisition Department, to ensure timely replacement of staff.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Trauma Informed Care Treatment, Recovery and Prevention Services
 - Recovery Supports and Services to Transitional Youth
 - Medication Assisted Treatment
- **Program Goals:**
 - Determination of eligibility and secured payment for mental health services
 - Identification of behavioral health needs
 - Improved relationships and performance
 - Increased understanding of mental health symptoms
 - Increased management of mental health symptoms
 - Development of coping strategies
 - Improved self-esteem
 - Stabilization/amelioration of symptoms
 - Increased resiliency
- **Program Metrics:**
 - 100% of clients are evaluated, intake and assessment process
 - 100% of individuals referred will be offered a diagnostic evaluation

CY22 Program Highlights and Outcomes

- 60% of individuals will demonstrate improvement, on Patient Reported Outcome Measures (PROMs)
- Psychoeducation provided for all appropriate, Individual Treatment Plan, PROMs
- 60% of individuals will demonstrate improvement, on Patient Reported Outcome Measures (PROMs)
- Coping skill enhancement for all appropriate, Individual Treatment Plan, PROMS
- 60% of individuals will demonstrate improvement, on Patient Reported Outcome Measures (PROMs)

First Six Months of CY21 Provider Outcomes:

- Highlights:
 - **Number of Clients that were Anticipated to be Served:** 100
 - **ADAMHS Funded Unduplicated Clients Served:** 16
 - **Total Number of Clients Served:** 1,081
 - **Total Number of Clients that Completed this Program/Service:** 8
- Average Cost Per Client: \$900
- Additional Information:
 - OhioGuidestone has historically utilized non-Medicaid funding from the ADAMHS Board for clients in Cuyahoga County lacking Medicaid or other insurance coverage, or those who subsequently lose coverage while being treated. Without this critical support, individuals in Cuyahoga County may go untreated and the agency would face financial hardship. The agency works diligently with clients to recover their Medicaid coverage so that these funds are used for the shortest duration possible. OhioGuidestone provides a continuum of service for clients with SUD or co-occurring behavioral health concerns, often providing team approaches to these issues.

CY20 Provider Outcomes

- Highlights:
 - **Number of Clients that were Anticipated to be Served:** 50
 - **Total Number of Clients that were Served:** 10
 - **Total Number of Clients that Completed this Program/Service:** 10
- Goals Met:
 - Clients receive a continuum of integrated care at OhioGuidestone. As a dually certified agency in both Mental Health and Substance Use Disorder Treatment, OGS provides complete treatment services in the outpatient setting for the dually diagnosed with Mental Health and Substance Use Disorder (SUD) treatment. SUD treatment is based on American Society of Addiction Medicine (ASAM) criteria and offer all levels of outpatient care available. The goal is to provide services for the uninsured while facilitating connection to insurance.

CY22 Program Highlights and Outcomes

- **Metrics Used to Determine Success:**
 - The agency collects outcome measures on all clients, however, measures can vary depending on the individual and their treatment needs. For many clients, OhioGuidestone measures symptom change around anxiety, depression and anger through the Patient Reported Outcome Measures (PROMs). This also includes a Functioning Outcome Tool to capture changes in functioning across key domains such as family and community, interpersonal interactions, delinquency, education and employment, health and wellness, spirituality and life satisfaction. Satisfaction surveys are also administered quarterly to all clients.
- **Program Successes:**
 - Ten clients were served through this program. Services provided include Diagnostic Evaluation, Psychiatry, Community Psychiatric Support Treatment and Psychotherapy. As this funding is used across Cuyahoga County programs and services depending on need, outcome measures vary. Overall, in Cuyahoga County, for in-home and outpatient adult clients, scores improved on Patient Reported Outcome Measure subscales, with an engagement rate of 80 percent. For the five adult clients who closed from the program, scores improved on at least one Patient Reported Outcome Measure (PROMs) subscales (anger, anxiety, and depression) for all of clients served. Adult clients reported, on average, an improvement (indicated by a decrease in scores) in their anxiety, anger, and depression symptoms with between 40-100% of clients reporting a reliable improvement in a category. Further, clients reported, on average, anxiety, anger and depression symptom levels to be in the normal (non-clinical) range at their last PROMs assessment. On average, over 90% of clients strongly agreed or agreed with satisfaction questions across all categories: communication, service, professionalism, respect, and experience.
- **Average Cost Per Client in CY20:** \$5,000
- **Additional Information:**
 - N/A

School Based Prevention

OhioGuidestone's School-Based Mental Health, Support and Prevention Services work with children and adolescents from pre-kindergarten through high school to provide mental health and other support services primarily in the school environment. Therapists also maintain connections to parents and families, meeting monthly in the home or community settings to help keep families involved with their child's academic environment. The program is custom designed to meet the needs of each school and can include individual, group, parent/family psychotherapy, therapeutic behavioral services (TBS), case management, consultation, and prevention. OhioGuidestone works from a trauma-informed systemic approach with the goal of building resiliency in the face of trauma and toxic stress. On-site services allow providers the ability to collaborate and consult with school personnel and parents to increase services for students and reduce or eliminate barriers that can prevent families from accessing needed services for their children. Consultation and prevention services provided adhere to the Georgetown Model of consultation to interact with and triage students in need; meet with school personnel; assist teachers with developing behavior intervention strategies; and enlighten school personnel and parents on the signs, symptoms, and management of students behavioral, and social and emotional issues. Consultation can be provided to school staff, students, parents and families and can include: education on mental health and behavioral issues,

CY22 Program Highlights and Outcomes

communication issues, classroom behavioral interventions, individual student adjustment issues and small group or classroom settings to address student issues or topics identified by school staff.

- **Target Population:**
 - Children and adolescents, pre-kindergarten through high school, displaying social, emotional, and mental health symptoms
- **Anticipated Number of Clients to be Served:** 1,000
- **Number of Staff Required to Implement Program:** 80
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Participant progress is tracked in departmental documentation and written protocols for continuity exist in the event of staff turnover. All staff in this department will be cross trained even if not assigned to the project to ensure continuation of services. Additionally, supervisors are required to provide regular outreach until a primary care provider can be re-assigned. Positions are rehired if vacancies occur. Any changes to staffing will be communicated to clients/participants, as possible and appropriate. Staffing needs for this program are prioritized by OhioGuidestone's Talent Acquisition Department, to ensure timely replacement of staff. Additionally, OhioGuidestone can utilize telehealth services to access additional students in need by assigning workers to cover additional schools in order to eliminate a waitlist. During the 2020-2021 school year, there was no waitlist for school services at OhioGuidestone.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Trauma Informed Care Treatment, Recovery and Prevention Services
 - Wrap-around Behavioral Health Services for Youth
- **Program Goals:**
 - Provide licensed or trained Mental Health Specialists for the provision of Mental Health Education Services
 - Inform the ADAMHS Board of any changes relative to capacity, scheduling, etc., that may impact programming
 - Deliver consultation services through the Ohio Consultation Model and deliver mental health and trauma prevention groups to assigned schools as requested
 - Maintain communication with faculty and administrative staff at each assigned schools regarding the agencies scheduling, capacity, etc.
 - Adhere to the assigned school list provided by CMSD's Flexible Content Expert Humanware Liaison
 - Submit program outcome data through Devereux's Center for Resilient Children's Assessment instruments for grades K-12 for individual consultations and prevention groups through the Devereux Student Strengths Assessment (DESSA) web-based system
 - Submit Consultation and Prevention School Based Tracking Reports for services not represented in DESSA
 - Have a representative present to attend the scheduled Mental Health Education Services meetings to discuss, plan and develop goals regarding school-based programming

CY22 Program Highlights and Outcomes

- **Program Metrics:**

- Ohio Licensed Clinician or Qualified Behavioral Health Specialist Certification. Outcome: OhioGuidestone employs Licensed Social Workers and Licensed Professional Counselors as well as Behavioral Health Specialists who complete a Qualified Behavioral Health Specialist competency training.
- Submit school roster with staff assignments and communicate with liaison on staffing. Outcome: OhioGuidestone provides regular updates on staffing, placements, and capacity to complete services at monthly meetings. Meets with ADAMHS staff in monthly meeting as well as Zerrine Bailey to specifically discuss capacity to serve CMSD schools.
- Tracking services provided at schools. Outcome: OhioGuidestone provides consultation and prevention services to all assigned schools as requested by staff, students, or parents.
- Regular liaison check-ins and satisfaction surveys. Outcome: OhioGuidestone has a supervisor assigned as the School Liaison for all schools. Liaisons complete regular communications, either in-person, by phone, email or video. Communication is to assure services are being met at highest standard and to problem-solve any concerns. Mid year and end of year satisfaction surveys are also given to teaching and non-teacher staff.
- Adhere to assigned list as agreed upon by CMSD. Outcome: OhioGuidestone provides mental health services only to assigned CMSD schools and refers students from other CMSD schools to the appropriate provider.
- Enter DESSA's into system. Outcome: Entered all DESSA's for on-going consultation and groups.
- Reporting to ADAMHS and CMSD as requested. Outcome: OhioGuidestone submits all monthly and quarterly reports requested by ADAMHS staff to accurately represent all services provided outside of DESSA data.
- Attendance at meetings. Outcome: School Services Director and Assistant Director are present for all ADAMHS Board School Based meetings.

First Six Months of CY21 Provider Outcomes:

- **Highlights:**

- **Number of Clients that were Anticipated to be Served:** 350
- **ADAMHS Funded Unduplicated Clients Served:** 195
- **Total Number of Clients Served:** 1,920
- **Total Number of Clients that Completed this Program/Service:** 0

- **Average Cost Per Client:** \$127.43

- **Additional Information:**

- This year there was a large number of one-time consultations with students as well as a large increase in prevention and consultation work with educators and parents. All of these categories do not get captured in the data because a DESSA is not completed with one-time consults or with teachers or parents, and yet valuable services were delivered. 195 Unique Students in 267 sessions; 26 Class Presentations to 278 students; four Professional Development sessions for 68 staff; 96 Teacher Consultations; 48 Parent Consultations; eight Groups for 111 Students; and total Medicaid Clients: 1,725.

CY22 Program Highlights and Outcomes

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 350
 - **Total Number of Clients that were Served:** 455
 - **Total Number of Clients that Completed this Program/Service:** 455
- **Goals Met:**
 - Provided individual consultation to 136 students, 32 classroom presentations, 188 teacher consultations, 64 parent consultations and 35 resource deliveries to families.
- **Metrics Used to Determine Success:**
 - Georgetown model of consultation/prevention uses the Devereux Student Strengths Assessment (DESSA)
 - OhioGuidestone services are measured by the following outcomes: Client Satisfaction; Teacher and Non-teaching Satisfaction, and Patient Report Outcomes Measures (PROMS). PROMS includes three symptom subscales (Anger, Depression, and Anxiety).
- **Program Successes:**
 - Based on DESSA ratings 46% of students were in the Need Range, 45% were in the Typical Range and 11% were in the Strength Range. There were a much lower number of DESSAs completed this calendar year due to a reduced number of multiple session consultations. Due to lack of referrals for on-going support, most services provided were one-time supports, which means no DESSA data is collected. For the seven students with two DESSA ratings, 86% showed improvement from pretest and posttest.
 - During the first half of 2020, 71 program specific satisfaction surveys were received. On average, 91% of clients strongly agreed or agreed with satisfaction questions across all categories: communication, service, professionalism, respect, and experience.
- **Average Cost Per Client in CY20:** \$163.84
- **Additional Information:**
 - This year served especially difficult to obtain referrals for on-going consultation support with students. A large majority of OhioGuidestone's support was provided to students consultation (136), whole classroom lessons (32), teacher support (188), and parent support (64). Many these services were provided virtually. OhioGuidestone also provided 35 supportive resource drop offs for families in need. DESSAs are only collected for ongoing consultation sessions. This limits the data that can be collected to measure all the work that is done for teachers, parents and one-time support for students. This past year provided a lot of opportunities for clinicians to provide social emotional support and education to school staff and parents.

Early Childhood Mental Health (ECMH) Programming:

Offers consultation and treatment services, provided by the Early Childhood Mental Health (ECMH) Agency Work Group, delivered as a family driven, strength-based community service to aid parents and caregivers with early intervention support to divert and avoid deeper involvement into the behavioral health system. The program provides early intervention services that address early emotional, social and behavioral development.

CY22 Program Highlights and Outcomes

- **Target Population:**
 - Children ages birth to six-years-old
- **Anticipated Number of Clients to be Served:** 200
- **Number of Staff Required to Implement Program:** 15
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Staff are cross-trained to cover vacancies and supervisors can take cases when necessary.
- **Funding Priority:**
 - Prevention and Early Intervention
- **Program Goals:**
 - Children will show significant clinical improvement on DECA Resiliency scales.
 - Children will show significant clinical reduction in problems on DECA Behavior Scale.
 - Children will show significant clinical improvement on the DECA-Infant Toddler (IT) Scale when utilized.
- **Program Metrics:**
 - Pre- and post-assessment and demonstrated improvement on all the DECA resilience subscales

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 200
 - **ADAMHS Funded Unduplicated Clients Served:** 108
 - **Total Number of Clients Served:** 481
 - **Total Number of Clients that Completed this Program/Service:** 32
- **Average Cost Per Client:** \$1,041.67
- **Additional Information:**
 - The supervisors and clinicians have found and implemented innovative ways to provide quality treatment to the early childhood clients and families. The sharing of ideas and client success stories have been inspiring and a reminder of the value of quality clinical care. Average caseload size 40; approximately 10 are served under prevention.

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 200
 - **Total Number of Clients that were Served:** 244
 - **Total Number of Clients that Completed this Program/Service:** 97
- **Goals Met:**
 - The Prevention Benefit covers clients zero to five and a half years of age who reside within Cuyahoga County and do not have active Medicaid (Medicaid inactive or private insurance). Prevention Benefit is also assigned for all ECMH clients ages zero to two years.

CY22 Program Highlights and Outcomes

The agency met 100% of goals as outlined in the CY20 RFP from January 1, 2020-December 31, 2020.

- **Metrics Used to Determine Success:**

- Devereaux Early Childhood Assessment - Infants and Toddler Form (DECA I/T)
- Devereaux Early Childhood Assessment - Clinical Form (DECA-C)
- Achenbach Child Behavioral Checklist (CBCL 1.5-5)
- OhioGuidestone Parent Satisfaction Survey

- **Program Successes:**

- 90% of clients showed improvement on at least one of the DECA I/T subscales
- 88% of clients assessed with the DECA-C Protective Factors at open and closure showed improvement on one or more of the subscales
- 92% of clients assessed with the DECA-C Behavioral Concerns at open and closure showed improvement on one or more of the subscales
- 93% of caregivers were satisfied with services
- 17 clients were assessed on the CBCL1.5-5:
 - 77% of clients show an improvement on the CBCL1.5-5 total problems scale,
 - 59% of clients show an improvement on the CBCL 1.5-5 internalizing problems scale,
 - 77% of clients show an improvement on the CBCL 1.5-5 externalizing problems scale.
 - 82% of clients showed an improvement on at least two or more of the CBCL 1.5-5 subscales.

- **Average Cost Per Client in CY20:** \$922.13

- **Additional Information:**

- The agency has maintained a strong commitment to provide quality services to Cuyahoga clients and families throughout the Pandemic.

Oriana House, Inc.

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
Oriana House, Inc.			
Healthy Families	\$ 142,000	\$ 142,000	Specialized Pop.
Total	\$ 142,000	\$ 142,000	
Pooled Funding:			
MAT - Vivitrol Injections	\$ -	\$ -	MAT

CY22 Program Highlights and Outcomes

Oriana House, Inc.

Oriana House supports an individual's continuous commitment to recovery over the course of his or her life. Its programming sends individuals on a multi-step journey to rehabilitation through their own admission of a problem, abstinence, avoidance of relapse, and a daily dedication to recovery.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

Healthy Families Build Strong Communities

The Healthy Families Program is an innovative, collaborative endeavor between Oriana House, Inc. (OHI) and FrontLine Service that will enhance the assistance to incarcerated fathers, their children, and the custodial parents/caregivers through the addition of the following services: program coordination including bi-weekly program/case meetings; expanded family orientation at the County Community Based Correctional Facility (CBCF); co-parenting classes; in-home trauma-informed assessment and intensive case management; increased visitation and communications among all family members; transportation; specialized family reentry services; wrap-around services as needed addressing basic needs, mental health and substance abuse treatment, etc. CBCF clients are in the program for four to six months where they are closely monitored, participate in extensive programming, and are subject to routine and random alcohol and drug testing. Soon after CBCF admission and intake, the OHI Family Development Specialist and the FrontLine Family Development Coordinator will participate in the bi-weekly CBCF orientation for family members and begin recruitment into the program. Once a family is successfully engaged, the Intake Assessment Coordinator will meet with the family to complete the basic needs assessment, as well as the Family Assessment Needs and Strengths Trauma Exposure and Adaptation tool (FANS-TEA), which will be reviewed with the family and a family reunification plan will be developed to address each family member's unique needs. All expectant fathers and those with children under 18 years of age will participate in an eight-week curriculum on fathering and a MetroHealth program for expectant fathers. Visitation between parents and children will be supported by reliable transportation scheduled and managed by FrontLine Service staff. Once the father demonstrates readiness to be in the community his CBCF caseworker, appointments for job searching, school, 12-step programs, etc., will be verified and approved. Fathers prepare to reenter the community by establishing housing and fiscal responsibility and by enrolling at the North Star Neighborhood Reentry Resource Center for continued aftercare and family reunification.

- **Target Population:**
 - Adult incarcerated parents sentenced for felony and misdemeanor offenses that enter Oriana House, and their children and/or custodial parent/caregiver
- **Anticipated Number of Clients to be Served:** 250
- **Number of Staff Required to Implement Program:** 5
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**

CY22 Program Highlights and Outcomes

- In order to ensure clients services are not interrupted due to staff vacancies, the Family Services Supervisor and Family Development Specialist, who are funded separately through the United States Department of Justice, Office of Juvenile Justice and Delinquency Prevention, will step in to provide coverage to continue client services. Additionally, the in-kind services of case management provided by Oriana House, Inc., case managers at the CBCF, fatherhood programming provided by the Healthy Fathering Collaborative at the CBCF and the reentry services provided at the North Star Neighborhood Reentry Resource Center will all work in conjunction to fill any gaps in programming experienced due to staff vacancies.
- **Funding Priority:**
 - Community and Crisis Residential Services
- **Program Goals:**
 - Implement regular and meaningful activities to strengthen the relationships between incarcerated fathers and their children
 - Reduce the incarcerated father's behavioral infractions during incarceration and recidivism post-release
 - Provide assistance to children of incarcerated fathers and the custodial parent/caregiver to achieve a more stable and healthy situation
- **Program Metrics:**
 - Number of contacts between incarcerated father and child through in-person visits, writing, video conferencing, audio recordings, community activities, etc.
 - Number of sessions attended on healthy fathering, number of behavioral infractions while in the CBCF, and number of new incarcerations after release to the community
 - Number of in-home assessments and case plans, number of services receiving/participating in, number of successful completions of case plans

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 375
 - **ADAMHS Funded Unduplicated Clients Served:** 112
 - **Total Number of Clients Served:** 112
 - **Total Number of Clients that Completed this Program/Service:** 30
- **Average Cost Per Client:** \$478
- **Additional Information:**
 - The needs of children and families is complex and differs between families. Creating a streamline process between all programs involved in this project has increased referrals. Staff has a quicker assessment system to engage families more efficiently. COVID-19 hinders face-to-face interactions, so technology resources are used.

CY22 Program Highlights and Outcomes

CY20 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 375
 - **Total Number of Clients that were Served:** 184
 - **Total Number of Clients that Completed this Program/Service:** 116
- **Goals Met:**
 - Provided Child Safe facilities and Zoom capabilities for parents to engage with child and provided ongoing parenting programs for fathers through FrontLine and Oriana House staff. Also, provided ongoing activities for parents and children, completed intake screenings and Family Assessments, conducted Family Orientations, and conducted bi-weekly program/case meetings.
- **Metrics Used to Determine Success:**
 - Evaluations forms, numbers served, reduced behavioral issues with the children, reduced recidivism for the incarcerated father, improved behavioral health, and number of in-house violations.
- **Program Successes:**
 - Implementation of services for incarcerated parent, child, and caregivers. Also, a streamline of the assessment process for Oriana House and FrontLine. There were 104 individuals served, and engaging research to assist in developing tracking systems for outcome measures.
- **Average Cost Per Client in CY20:** \$772
- **Additional Information:**
 - The needs of children of incarcerated parents and their family members are complex and differ between families. Creating a streamline process between all programs involved has assisted in increasing client participation. With a quicker assessment turn around, staff are able to engage family members quicker. COVID-19 hindered a lot of face-to-face interactions, but other technological resources were used to link families (Zoom visitations). Staff is looking to increase Zoom activities this coming year (i.e. Zoom field trips, Zoom family events).

Medication Assisted Treatment (MAT) - Vivitrol Injections

In addition to receiving MAT, clients also are involved in substance use disorder (SUD) treatment while incarcerated at the County Community Based Correctional Facility (CBCF). Group and individual sessions are available to each client. Upon release, clients are referred to the Rigel Recovery Services in Cleveland to continue with MAT and SUD services. While incarcerated, funding is required to pay for the Vivitrol medication. Prior to release, staff assists each client in obtaining Medicaid so that ongoing payment for the medication is possible while in the community. Every client is involved in a discussion with both treatment and medical staff about the benefits of MAT.

- **Target Population:**
 - Incarcerated males at the McDonnell Center, a Community Based Correctional Facility (CBCF)

CY22 Program Highlights and Outcomes

- **Anticipated Number of Clients to be Served: 75**
- **Number of Staff Required to Implement Program: 1**
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Each LPN at the CBCF is trained and equipped to provide the Vivitrol injections in the event the one of the positions is vacant. Additionally, OHI provides outpatient treatment services including MAT at its Rigel location in Cleveland. The Certified Nurse Practitioner would also be available to deliver the clients Vivitrol injections while they are at the CBCF.
- **Funding Priority:**
 - Medication Assisted Treatment
- **Program Goals:**
 - Clients will reduce positive opiate drug screens during CBCF
 - Clients will maintain engagement for four months after successful release from CBCF
 - The Vivitrol program will reduce positive opiate drug screens during four months of community treatment phase
- **Program Metrics:**
 - Number of negative opiate drug screens while at CBCF
 - Number of clients who maintain engagement for four months after successful release from CBCF
 - Number of negative opiate drug screen after successful release from CBCF

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served: 75**
 - **ADAMHS Funded Unduplicated Clients Served: 1**
 - **Total Number of Clients Served: 1**
 - **Total Number of Clients that Completed this Program/Service: 0**
- **Average Cost Per Client: \$2,243**
- **Additional Information:**
 - Although some clients elect not engage in Rigel Recovery Services after release, clients are linked with appointments for follow-up to assist with on-going sobriety goals.

CY20 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served: 75**
 - **Total Number of Clients that were Served: 46**
 - **Total Number of Clients that Completed this Program/Service: 3**

CY22 Program Highlights and Outcomes

- **Goals Met:**
 - 87% of clients engaged in MAT services earned a successful release from the program and 100% of clients who received the Vivitrol injection maintained sobriety from opiates.
- **Metrics Used to Determine Success:**
 - Evaluations forms, numbers served, urine drug screen results, the success rates of CBCF clients engaged in MAT programming, and maintenance of community engagement after release from the program.
- **Program Successes:**
 - Implementation of services for incarcerated parent, child and caregivers. Also, the streamline of the assessment process for Oriana House and FrontLine. 104 individuals served; also saw engaging research to assist in developing tracking systems for outcome measures.
- **Average Cost Per Client in CY20:** \$1,739
- **Additional Information:**

Although some clients elect not to engage in services through Rigel Recovery Services at release, clients are linked with appointments for treatment follow-up and community resources to assist with ongoing sobriety goals. Client's supervising officers are also given the appointment information to assist with encouraging clients to continue engagement at the time of release from CBCF.

Provider:	Ohio Guidestone	2020 First Outcome Count:	84	2021 First Outcome Count:	42
Instrument:	DARS	2020 Final Outcome Count:	70	2021 Final Outcome Count:	10
Program:	Adult Prevention	2020 % of Final:	83.33%	2021 % of Final:	23.81%

The Devereux Adult Resilience Scale (DARS) is a measurement instrument designed by the Devereux Advanced Behavioral Health organization for adults (18+ years). The instrument is utilized to identify an individual's personal strengths in four domains.

Providers currently report aggregated data for programs utilizing the DARS instrument. Results reflect the percentage of individuals for whom there was an increased score from the initial (first) and follow-up (final) instrument administration

Population	Evaluation Year	Subscale	% Who Improved	Significance
Adults (18+ years)	2020	Initiatives	54.29%	Not Significant
Adults (18+ years)	2020	Internal Belief	37.14%	Not Significant
Adults (18+ years)	2020	Overall	70.00%	Significant at p<.05
Adults (18+ years)	2020	Relationship	45.71%	Not Significant
Adults (18+ years)	2020	Self Control	31.43%	Not Significant
Adults (18+ years)	2021	Initiatives	50.00%	Not Significant
Adults (18+ years)	2021	Internal Belief	60.00%	Not Significant
Adults (18+ years)	2021	Overall	60.00%	Not Significant
Adults (18+ years)	2021	Relationship	70.00%	Not Significant
Adults (18+ years)	2021	Self Control	50.00%	Not Significant

Provider:	OhioGuidestone	2020 First Outcome Count:	121	2021 First Outcome Count:	111
Instrument:	e-DECA	2020 Final Outcome Count:	52	2021 Final Outcome Count:	40
Program:	Early Childhood Mental Health	2020 % of Final:	42.98%	2021 % of Final:	36.04%

The Devereux Early Childhood Assessment (DECA) is a set of assessment instruments designed by the Devereux Advanced Behavioral Health organization for pre-school age children that focuses on identifying key social and emotional strengths. The instruments are tailored to specific age categories and vary in the number of Subscales.

When the data contains both an initial (first) and follow-up (final) instrument administration, a paired t-test was used for comparing individual scores at those two different points in time. It is the most powerful test for showing changes in individuals. The green highlighted rows suggest that changes from the First Assessment to the Final Assessment did not happen by chance and that the change can be attributed to the program intervention.

Population	Year	Subscale	First Outcome Average	Final Outcome Average	Average Difference	Significance
Child (2 - 5 years)	2020	AG- Aggression	59	56	-3	Not Significant
Child (2 - 5 years)	2020	AP- Attention Problems	66	63	-3	Significant at p<.05
Child (2 - 5 years)	2020	AT- Attachment	47	50	3	Not Significant
Child (2 - 5 years)	2020	ECP- Emotional Control Problems	65	63	-2	Not Significant
Child (2 - 5 years)	2020	IN- Initiative	41	44	3	Significant at p<.05
Child (2 - 5 years)	2020	SC- Self Regulation	39	42	3	Significant at p<.05
Child (2 - 5 years)	2020	TBC- Total Behavioral Concerns	65	61	-4	Significant at p<.05
Child (2 - 5 years)	2020	TPF- Total Protective Factors	40	43	3	Significant at p<.05
Child (2 - 5 years)	2020	WD- Withdrawal/Depression	57	53	-4	Significant at p<.05
Toddler (18-36 months)	2020	AT- Attachment	40	46	6	Significant at p<.05
Toddler (18-36 months)	2020	IN- Initiative	39	45	6	Significant at p<.05
Toddler (18-36 months)	2020	SC- Self Regulation	35	42	7	Significant at p<.05
Toddler (18-36 months)	2020	TPF- Total Protective Factors	37	44	7	Significant at p<.05
Infant (1-18 months)	2020	AT- Attachment	45	46	1	Not Significant
Infant (1-18 months)	2020	IN- Initiative	41	60	19	Not Significant
Infant (1-18 months)	2020	TPF- Total Protective Factors	37	53	16	Not Significant
Child (2 - 5 years)	2021	AG- Aggression	56	53	-3	Not Significant
Child (2 - 5 years)	2021	AP- Attention Problems	61	59	-2	Not Significant

Child (2 - 5 years)	2021	AT- Attachment	46	53	7	Significant at p<.05
Child (2 - 5 years)	2021	ECP- Emotional Control Problems	65	61	-4	Not Significant
Child (2 - 5 years)	2021	IN- Initiative	45	49	4	Significant at p<.05
Child (2 - 5 years)	2021	SC- Self Regulation	41	46	5	Significant at p<.05
Child (2 - 5 years)	2021	TBC- Total Behavioral Concerns	61	58	-3	Significant at p<.05
Child (2 - 5 years)	2021	TPF- Total Protective Factors	43	48	5	Significant at p<.05
Child (2 - 5 years)	2021	WD- Withdrawal/Depression	54	51	-3	Not Significant
Toddler (18-36 months)	2021	AT- Attachment	41	42	1	Not Significant
Toddler (18-36 months)	2021	IN- Initiative	42	46	4	Not Significant
Toddler (18-36 months)	2021	SC- Self Regulation	37	39	2	Not Significant
Toddler (18-36 months)	2021	TPF- Total Protective Factors	39	41	2	Not Significant
Infant (1-18 months)	2021	AT- Attachment	52	64	12	Not Significant
Infant (1-18 months)	2021	IN- Initiative	32	52	20	Not Significant
Infant (1-18 months)	2021	TPF- Total Protective Factors	38	58	20	Not Significant

Provider:	OhioGuidestone	2020 First Outcome Count:	80	2021 First Outcome Count:	27
Instrument:	DESSA MINI	2020 Final Outcome Count:	37	2021 Final Outcome Count:	6
Program:	Youth Prevention	2020 % of Final:	46.25%	2021 % of Final:	22.22%

The Devereux Student Strength Assessment (DESSA) is an abbreviated assessment designed by the Devereux Advanced Behavioral Health organization for school age children. This instrument is used as a screening tool to identify children who are in need for additional social or emotional education. There are measurement instruments specific for children in Grades K – 8 and for children in Grades 9 – 12.

When the data contains both an initial (first) and follow-up (final) instrument administration, a paired t-test was used for comparing individual scores at those two different points in time. It is the most powerful test for showing changes in individuals. The green highlighted rows suggest that changes from the First Assessment to the Final Assessment did not happen by chance and that the change can be attributed to the program intervention.

Population	Evaluation Year	Subscale	First Outcome Average	Final Outcome Average	Average Difference	Significance
Grades 9 - 12	2020	No Scale	48.8	47.2	-1.6	Not Significant
Grades K - 8	2020	No Scale	43.03	46.19	3.16	Not Significant
Grades 9 - 12	2021	No Scale	56	57	1	Not Significant
Grades K - 8	2021	No Scale	54.67	63.67	9	Significant at p<.05

People, Places, and Dreams

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
People, Places, and Dreams			
LGBTQ Recovery Housing	\$ -	\$ 100,000	Specialized Pop.
Total	\$ -	\$ 100,000	

CY22 Program Highlights and Outcomes

People, Places, and Dreams

People, Places and Dreams provides Peer Supportive Services, Recovery Housing, Substance Use Disorder Treatment and Gambling Addictions Treatment.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

LGBTQ+ Recovery Housing

Recovery Housing is a sober, safe, and healthy living environment that promotes recovery from alcohol and other drug use and associated problems. Individuals build resources while living in a recovery house that will continue to support their recovery as they transition to living independently and productively in the community. The strength of PPD's recovery-focused housing is its ability to provide ongoing peer support while promoting sobriety in a natural home environment. The agency's mission is to collaborate with local housing authorities to find recovery housing participants permanent housing. PPD operates five recovery houses (50 beds total), one of which is dedicated to the LGBTQ+ population.

- **Target Population:**
 - LGBTQ+ individuals with co-occurring substance abuse and/or mental health disorders
- **Anticipated Number of Clients to be Served:** 152
- **Number of Staff Required to Implement Program:** 9
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - PPD maintains a staff depth and flexibility that results from its unique approach to training all staff across multiple functions. For example, the organization's CEO and Clinical Director are both capable of providing all of the agencies training classes and conducting groups, as well as receiving back-up from the Director of Peer Support Services. To support that cross-training, PPD also employs a core staff of five independently licensed social workers and professional counselors. PPD is also in the process of hiring additional Case Managers and Certified Peer Supporters to manage its continued and projected growth in providing critical substance abuse and mental health services to some of the areas' most vulnerable populations.
- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - High Quality Housing
 - Trauma Informed Care Treatment, Recovery and Prevention Services
 - Harm reduction efforts and strategies
 - Recovery and Treatment Services to Specialized Populations

CY22 Program Highlights and Outcomes

- Peer Support
- **Program Goals:**
 - Provide safe, secure and supportive recovery housing to 152 of individuals (number assumes bed rotations during the year)
 - Provide affordable recovery housing to 152 of individuals
 - Provide mental health and substance use outpatient support to 152 in recovery housing
 - Provide peer support to all individuals in PPD recovery housing
- **Program Metrics:**
 - Number of individuals provided safe, secure and supportive recovery housing by PPD
 - Number of individuals provided affordable recovery housing by PPD
 - Number of individuals provided sliding scale payments in PPD recovery housing
 - Number of individuals in PPD recovery housing that received mental health and substance use outpatient services by PPD
 - Number of individuals in PPD recovery housing that received mental health services from PPD
 - Number of individuals in PPD recovery
 - Number of individuals in PPD recovery housing receiving peer support services from PPD

First Six Months of CY21 Provider: N/A – New Provider

Positive Education Program (PEP)

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
Positive Education Program (PEP)			
Early Childhood Mental Health**	\$ 334,290	\$ -	Prevention
MH Children's WRAP	\$ 603,000	\$ 603,000	Wrap Around
Total	\$ 937,290	\$ 603,000	
Pooled Funding:			
PEP Connections	\$ -	\$ -	Wrap Around

** ECMH Providers Pooled Funding

CY22 Program Highlights and Outcomes

Positive Education Program

Positive Education Program (PEP) Connections is a cooperative effort between PEP and the child-serving systems designed to provide intensive mental health Community Psychiatric Supportive Treatment (CPST) utilizing the wrap-around and trauma-informed care models.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

PEP Connections Wraparound and Treatment

PEP Connections will provide an Intensive Care Coordination service using a High Fidelity Wraparound approach for PEP Connections non-Medicaid youth. PEP Connections services are strengths-based and trauma-informed, delivered in the child's natural environment with a keen focus on mobilizing the natural supports available to the child and family. PEP uses the Vroon VDB High Fidelity Wraparound model, which provides services and coordination of supports through a wide variety of services. PEP Connections care managers are on-call 24-hours a day, 7-days a week to address crises in the home, emergency rooms, etc., and work with lower caseloads and manage all system integration and collaboration for these multi-system youth. Flexible rehabilitative services allow the client the opportunity to succeed within the framework of the community to overcome disabilities associated with normal developmental and community interactions. These services help us to create a lasting infrastructure that can maintain continued growth and development for each child.

- **Target Population:**
 - Youth ages 3 to 17 (up to age 17 if enrolled by age 17) who have been diagnosed with a serious emotional disturbance (SED), have mental health issues, are involved in multiple systems, are at risk of out-of-home placement or are returning to their families/community from out-of-home placement, and their families
- **Anticipated Number of Clients to be Served:** 135 (treatment);
- **Number of Staff Required to Implement Program:** 40
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - PEP Connections has always been able to manage for these vacancies by shifting coverage for the clients to other care managers and/or to the care manager supervisor.
- **Funding Priority:**
 - Wraparound Behavioral Health Services for Youth
- **Program Goals:**
 - Youth demonstrate decreased problem severity
 - Youth demonstrate improved functioning level
 - Preventing out-of-home placements

CY22 Program Highlights and Outcomes

- **Program Metrics:**
 - Measurement tool will be Ohio Scales

First Six Months of CY21 Provider Outcomes (Treatment):

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 135
 - **ADAMHS Funded Unduplicated Clients Served:** 105
 - **Total Number of Clients Served:** 574
 - **Total Number of Clients that Completed this Program/Service:** 31
- **Average Cost Per Client:** \$3,151
- **Additional Information:**
 - Each youth served meets PEP Connections enrollment criteria, which means these children are at imminent risk of out-of-home placement and are multi-system involved. This service has been able to maintain these youth, who otherwise may have required some form of residential treatment within the community. PEP Connections continues to prevent out-of-home placements for youth in the community, saving both human costs and financial costs, while producing better life outcomes.

CY20 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 135
 - **Total Number of Clients that were Served:** 145
 - **Total Number of Clients that Completed this Program/Service:** 62
- **Goals Met:**
 - All three program goals (100%) were met during CY20.
- **Metrics Used to Determine Success:**
 - Ohio Scales measures three goals: decreased problem severity, increased functioning, and decreased out-of-home placements. Data from the agency computer system was used to generate the number of clients served during CY20.
- **Program Successes:**
 - 89% of Connections clients demonstrated decreased scores on the Problem Severity Scale; 89% of Connections clients demonstrated increased scores on the Functioning Scale; and, there was a reduction of out-of-home placements by 80%.
- **Average Cost Per Client in CY20:** \$4,159
- **Additional Information:**
 - N/A

Early Childhood Mental Health (ECMH) Programming:

Offers consultation and treatment services, provided by the Early Childhood Mental Health (ECMH) Agency Work Group, delivered as a family driven, strength-based community service to aid parents and caregivers with early intervention support to divert and avoid deeper involvement into the

CY22 Program Highlights and Outcomes

behavioral health system. The program provides early intervention services that address early emotional, social and behavioral development.

- **Target Population:**
 - Children ages birth to six-years-old
- **Anticipated Number of Clients to be Served:** 340
- **Number of Staff Required to Implement Program:** 8
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Staff are cross-trained to cover vacancies and supervisors can take cases when necessary.
- **Funding Priority:**
 - Prevention and Early Intervention
- **Program Goals:**
 - Children will show significant clinical improvement on DECA Resiliency scales.
 - Children will show significant clinical reduction in problems on DECA Behavior Scale.
 - Children will show significant clinical improvement on the DECA-Infant Toddler (IT) Scale when utilized.
- **Program Metrics:**
 - Pre- and post-assessment and demonstrated improvement on all the DECA resilience subscales

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 300
 - **ADAMHS Funded Unduplicated Clients Served:** 154
 - **Total Number of Clients Served:** 154
 - **Total Number of Clients that Completed this Program/Service:** 32
- **Average Cost Per Client:** \$1,085.34
- **Additional Information:**
 - Created new client engagement strategies via telehealth, emailing resources, mailing and delivering activity packets to promote positive relationships and strengthen social emotional development. These new ways of engaging families will continue to be helpful after the health concerns of the pandemic have eased. The agency has collaborated more with child care consultants and other service providers through virtual meetings, which helped to wrap families in coordinated support. The agency participated in virtual training to expand staff skillset and work toward obtaining Infant Mental Health Credentials.

CY20 Provider Outcomes

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 300
 - **Total Number of Clients that were Served:** 261

CY22 Program Highlights and Outcomes

- **Total Number of Clients that Completed this Program/Service:** 142
- **Goals Met:**
 - Three of the five goals were met during CY 2020.
- **Metrics Used to Determine Success:**
 - 80% of IPS clients will move out of the "Need" category on the Total Protective Factors scale between the first and last administrations of the Devereaux Early Childhood Assessment Form (DECA-C).
 - 300 or more families will be engaged in program services on an annual basis.
 - 90% of cases will be successfully closed.
 - 95% of program parents/caregivers will rate community consultation services positively.
 - 80% of IPS caregivers/parents will report a decrease on the Total Stress scale using the Parenting Stress Index.
- **Program Successes:**
 - 13% of the agency's clients moved out of the "Need" category on the Total Protective Factors scale between the first and last administrations of the DECA-C.
 - 261 clients were engaged with agency during CY 2020, - close to the goal of 300 despite the COVID-19 pandemic.
 - 97% of cases were closed successfully
 - 90% of IPS caregivers/parents reported a decrease on the Total Stress scale using the Parenting Stress Index
 - 100% of program parents/caregivers rated community consultation services positively.
- **Average Cost Per Client in CY20:** \$1,280.80
- **Additional Information:**
 - N/A

Provider:	Positive Education Program	2020 First Outcome Count:	98	2021 First Outcome Count:	74
Instrument:	e-DECA	2020 Final Outcome Count:	3	2021 Final Outcome Count:	3
Program:	Early Childhood Mental Health	2020 % of Final:	3.06%	2021 % of Final:	4.05%

The Devereux Early Childhood Assessment (DECA) is a set of assessment instruments designed by the Devereux Advanced Behavioral Health organization for pre-school age children that focuses on identifying key social and emotional strengths. The instruments are tailored to specific age categories and vary in the number of Subscales.

When the data contains both an initial (first) and follow-up (final) instrument administration, a paired t-test was used for comparing individual scores at those two different points in time. It is the most powerful test for showing changes in individuals. The green highlighted rows suggest that changes from the First Assessment to the Final Assessment did not happen by chance and that the change can be attributed to the program intervention.

Population	Year	Subscale	First Outcome Average	Final Outcome Average	Average Difference	Significance
Child (2 - 5 years)	2020	AG- Aggression	71	51	-20	Not Significant
Child (2 - 5 years)	2020	AP- Attention Problems	72	67	-5	Not Significant
Child (2 - 5 years)	2020	AT- Attachment	41	52	11	Not Significant
Child (2 - 5 years)	2020	ECP- Emotional Control Problems	72	72		Not Significant
Child (2 - 5 years)	2020	IN- Initiative	29	51	22	Not Significant
Child (2 - 5 years)	2020	SC- Self Regulation	28	45	17	Not Significant
Child (2 - 5 years)	2020	TBC- Total Behavioral Concerns	72	70	-2	Not Significant
Child (2 - 5 years)	2020	TPF- Total Protective Factors	28	49	21	Not Significant
Child (2 - 5 years)	2020	WD- Withdrawal/Depression	72	69	-3	Not Significant
Toddler (18-36 months)	2020	AT- Attachment	47	47		Not Significant
Toddler (18-36 months)	2020	IN- Initiative	46	44	-2	Not Significant
Toddler (18-36 months)	2020	SC- Self Regulation	14	47.5	33.5	Not Significant
Toddler (18-36 months)	2020	TPF- Total Protective Factors	45	45.5	0.5	Not Significant
Infant (1-18 months)	2020	AT- Attachment				Not Significant
Infant (1-18 months)	2020	IN- Initiative				Not Significant
Infant (1-18 months)	2020	TPF- Total Protective Factors				Not Significant
Child (2 - 5 years)	2021	AG- Aggression	51	38	-13	Not Significant
Child (2 - 5 years)	2021	AP- Attention Problems	63	51	-12	Not Significant

Child (2 - 5 years)	2021	AT- Attachment	44	47	3	Not Significant
Child (2 - 5 years)	2021	ECP- Emotional Control Problems	59	46	-13	Not Significant
Child (2 - 5 years)	2021	IN- Initiative	47	55	8	Not Significant
Child (2 - 5 years)	2021	SC- Self Regulation	49	53	4	Not Significant
Child (2 - 5 years)	2021	TBC- Total Behavioral Concerns	59	41	-18	Not Significant
Child (2 - 5 years)	2021	TPF- Total Protective Factors	47	52	5	Not Significant
Child (2 - 5 years)	2021	WD- Withdrawal/Depression	60	38	-22	Not Significant
Toddler (18-36 months)	2021	AT- Attachment				Not Significant
Toddler (18-36 months)	2021	IN- Initiative				Not Significant
Toddler (18-36 months)	2021	SC- Self Regulation				Not Significant
Toddler (18-36 months)	2021	TPF- Total Protective Factors				Not Significant
Infant (1-18 months)	2021	AT- Attachment				Not Significant
Infant (1-18 months)	2021	IN- Initiative				Not Significant
Infant (1-18 months)	2021	TPF- Total Protective Factors				Not Significant

Project LIFT
Behavioral Health
Services

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
Project LIFT Behavioral Health Services			
Get LIFTED	\$ -	\$ 116,074	Prevention
Total	\$ -	\$ 116,074	

CY22 Program Highlights and Outcomes

Project LIFT Behavioral Health Services

Project LIFT is dedicated to improving the lives of at-risk teens and their families through treatment of substance use disorders, mental health counseling, mentoring and vocational skills training.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

Get LIFTED

The Get LIFTED Program includes 12 sessions facilitated over six weeks, with two group sessions per week. Each group will host between eight and 10 youth. Youth will receive education to develop life skills and emotional regulation tools to address the impact of isolation on their mental health, as well as healthy community engagement opportunities, which will include volunteerism, social programming, as well as self-empowerment training to promote sustainable independence. While this is not a treatment program for mental health, all youth will complete a behavioral health screening and will be provided options for treatment if appropriate. In addition to the group sessions, the participants will receive individual coaching and support to assist with obtaining their state ID/driver's license, obtaining their GED, and applying for Medicaid and SNAP benefits. Participants in good standing will receive financial assistance to cover the expenses of their ID/driver's license, GED portions or entire exam. The other aspect of programming is related to advocacy with adult males, ages 18 and older, who may have a criminal record impairing their wellness and independence. The plan is simple: go where they are. In the Black community, Barbershops are great conduits of information and networking, providing the greatest opportunity to connect with Black men who would otherwise not consider social services. Through community engagement and brief educational workshops, Project LIFT can increase awareness about the Expedited Pardon Project, the eligibility requirements, and resources to initiate the process. Project LIFT will also assist men with meeting the requirement for personal development. Men can participate for free in the Nurturing Fathers curriculum to improve parenting skills and men without children can participate in the Emotional Regulation group to develop problem-solving skills. This combination of services addresses several barriers to wellness and sustained independence: assistance with the Expedited Pardon Project application and process; support for healthy father-child relationships; and addressing and eliminating behavioral barriers.

- **Target Population:**
 - Black males ages 14 and older
- **Anticipated Number of Clients to be Served:** 240
- **Number of Staff Required to Implement Program:** 5
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Cross train all staff to ensure they can provide services, but also understand what services are provided and why. Agency currently employs a Program Specialist who is pursuing the OCPS and two community outreach staff.

CY22 Program Highlights and Outcomes

- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
- **Program Goals:**
 - Provide adult readiness and emotional regulation programming to youth ages 14-24 who are at risk of housing instability, emotional/behavioral disturbances, or contracting HIV/AIDS, to increase their capacity and knowledge for a successful transition into independence.
 - Participants will reduce risk factors related to poor health determinants by understanding the key components to nutrition, preventive medical care, mental health wellness, completing HIV/AIDS education, as well as accessing wellness supports for problem-solving.
 - Participants will engage in social events in partnership with First Tee, to support healthy socialization, while promoting the practice of emotional regulation and communication skills.
 - Educate barbers/staff at the identified barbershops about the Expedited Pardon Project and schedule bi-weekly educational workshops to increase their clients understanding of the Project and how the program can help.
 - Participants will complete the intake process to determine eligibility for the Pardon Project and be scheduled to the appropriate group that meets the personal development requirement. The groups are 13 sessions each.
 - Men with a disqualifying criminal offense will be referred to the appropriate community resource to assist with eliminating barriers related to their criminal history. All participants will be assessed for behavioral health and social needs and referred accordingly.
- **Program Metrics:**
 - Youth will complete a pre- and post-program survey to assess changes in what they have learned and their capacity to utilize the information.
 - Participant and First Tee staff self-reports will be utilized to assess their ability to utilize the skills learned in group. The program will also request parents/caregivers complete a report of observed changes in their youth's behavior.
 - Barbershop self-report through monthly feedback sessions.

First Six Months of CY21 Provider Outcomes: N/A – New Program

Providence House

CY2022 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2021 CONTRACT AMOUNT	2022 CONTRACT RECOMMENDATIONS	PRIORITY
Providence House, Inc.			
Children's Shelter	\$ 34,321	\$ 50,000	Crisis
Total	\$ 34,321	\$ 50,000	

CY22 Program Highlights and Outcomes

Providence House

Providence House is Ohio's first and one of the nation's longest operating crisis nurseries.

Agency Internal Diversity, Equity and Inclusion Team and/or Policy:

This agency submitted information ensuring a Diversity, Equity and Inclusion policy, plan or team is in place or in progress.

The ADAMHS Board Funding supports the following initiative(s):

Children's Shelter

Children receive emergency shelter in a trauma-informed setting and individualized, loving care for all of their needs while parents are involved in treatment services. Direct care is provided by trained, childcare staff, who reinforce attachment, provide individual nurturing, and enhance developmental, social-emotional, and educational milestone achievements. This addresses concrete support in times of need and social and emotional competence of children protective factors. Childcare and social work staff implement daily lessons and activities in a trauma-informed care environment to enhance early learning skills and reinforce developmental milestones to strengthen the social and emotional competence of children's protective factors. While children stay at Providence House, parents also receive case management services with a licensed social worker. Parents who participate in recommended services become eligible for the voluntary, 12-month Aftercare Program upon their child's discharge where they receive continued connection to case management, a peer support network, and referrals for additional services as needed. Parent education delivered during a child's stay or through the Aftercare program ensure parents understand child development and parenting strategies including forming secure attachment, having appropriate developmental expectations, and using positive discipline techniques to increase the knowledge of parenting and child development protective factors. These steps all serve as protective factors for families as they seek to achieve long-term family health, stability, and success.

- **Target Population:**
 - Infants and children of parents in need of inpatient treatment services
- **Anticipated Number of Clients to be Served: 50**
- **Number of Staff Required to Implement Program: 38**
- **Steps to Ensure Program Continuity if Staff Vacancies Occur:**
 - Each shift has a shift supervisor who, in addition to providing daily care, is also responsible for coordinating all shift responsibilities for staff and volunteers, including staff management, administrative tasks, and childcare provider support. Shift supervisors also administer and document medication, review all critical incident reports, make the shift schedules, and supervise the childcare providers on their team. In addition, five on-call childcare workers fill in on shifts where there is an opening and a staff person is needed to maintain mandated ratios. Nursery Operations Manager oversees the daily management and preparation of all staff schedules to ensure that the agency meets required staff-to-child ratios. The Nursery Operations Manager also oversees that the children's curriculum, daily activities, and care policies are consistently followed by each staff provider. This provides continuity across programs and services so that each child receives the highest

CY22 Program Highlights and Outcomes

level of care and that all of their individual needs are being attended to for the entirety of their stay at Providence House by all childcare providers.

- **Funding Priority:**
 - Culturally Appropriate and Evidence-based Diverse Services
 - Community and Crisis Residential Services
 - Trauma Informed Care Treatment, Recovery and Prevention Services
- **Program Goals:**
 - 80% of families will reunite after using Providence House services
 - 80% of families will be fully engaged in services
 - 90% of caregivers will strongly agree their children's daily care and medical needs were provided for while staying at Providence House
 - 80% of families who need additional services will receive a referral
 - 65% of caregivers will feel their family stability increased during their engagement with Providence House
 - 80% of eligible families will enroll in Aftercare
- **Program Metrics:**
 - Discharge placement summary as captured by social workers: Parents/Guardians, Kinship Placement, County Custody, Other
 - Program Services Documentation and Discharge Summary completed by social workers at time of discharge: % of families discharged from services due to non-compliance
 - Discharge Satisfaction Surveys completed by parent and/or guardian engaged in services with Providence House: five-point Likert scale (Strongly Agree, Agree, Neutral, Disagree, Strongly Disagree, n/a)
 - Program Services Summary and tracking of service referrals, developmental assessments and trauma assessments completed by social workers
 - Discharge Satisfaction Surveys completed by parent and/or guardian engaged in services with Providence House: three-point scale (Increased, Stayed the Same, Decreased)
 - Aftercare Enrollment Tracker completed by social workers

First Six Months of CY21 Provider Outcomes:

- **Highlights:**
 - **Number of Clients that were Anticipated to be Served:** 30
 - **ADAMHS Funded Unduplicated Clients Served:** 13
 - **Total Number of Clients Served:** 152
 - **Total Number of Clients that Completed this Program/Service:** 13
- **Average Cost Per Client:** \$1,320

CY22 Program Highlights and Outcomes

- **Additional Information:**

- Providence House has completed multiple outreach appointments and posted in the ADAMHS Board email about the Children's Shelter to support parents receiving inpatient treatment. Families have called for support for inpatient services but some had to find family members to support them since the agency cannot do immediate admissions with COVID-19 screenings.

CY20 Provider Outcomes:

- **Highlights:**

- **Number of Clients that were Anticipated to be Served:** 30
- **Total Number of Clients that were Served:** 13
- **Total Number of Clients that Completed this Program/Service:** 13

- **Goals Met:**

- In 2020, Providence House anticipated providing 150 days of care for 20 children from 10 families. Providence House supported 92 days of care for eight children from five families whose parents or guardians were engaged in inpatient mental health or substance abuse treatment.

- **Metrics Used to Determine Success:**

- Providence House currently uses Access and Excel databases to record data regarding service participation and parent self-evaluation to measure and report on outcomes. The goals are that 90% of children are reunited with their parent/guardian; 90% of parents/guardians will report that their child(ren)'s daily care and medical needs were met; 90% of children who need additional services will receive a referral; 80% of parents/guardians will feel their family stability increased; and 75% of families will enroll in the voluntary Aftercare Program.

- **Program Successes:**

- For the eight children and five families served: 100% of children were reunited with their parent/guardian; 100% of parents/guardians agreed that their child's daily care and medical needs were provided for; 100% of children were linked with additional services and supports they needed; 80% of parents/guardians enrolled in the Aftercare Program. While only 60% of parents/guardians felt their family stability increased, 20% felt their family stability stayed the same. For the parent/guardian that stated family stability decreased, the parent's treatment needs extended beyond the amount of time her child could stay due to licensing restrictions. She reported that not fully completing treatment during the child's stay contributed to feelings of instability.

- **Average Cost Per Client in CY20:** \$2,640

- **Additional Information:**

- Providence House only counts days of care provided while a parent is in an inpatient treatment program for mental health services as part of the shelter program funded by the ADAMHS Board. In 2020 overall, the agency supported 141 children and 71 families with 2,450 days of care. While eight children from five families receiving 92 days of care were directly funded by the ADAMHS Board, an additional 284 days of care at Providence House were provided to children while their parent/guardian continued in outpatient

CY22 Program Highlights and Outcomes

treatment settings and addressed other family crises such as homelessness and access to basic needs. In addition, Providence House provided 303 days of care to 22 children from 12 families who were engaged only in outpatient mental health treatment or for children's three- to five-day respite admissions to maintain mental health or sobriety.