99Treasures Arts & Culture, Inc.

CY2023 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program		2022 FINAL CONTRACT AMOUNT	2023 CONT RECOMMEND		PRIORITY
99 Treasures Arts and Culture					
Project Community Empowerment	\$	75,000	\$	98,000	Prevention
Total	\$	75,000	\$	98,000	

99Treasures Arts & Culture, Inc.

99Treasures Arts & Culture has been key in successfully implementing prevention programs designed to eradicate violence in Cleveland's inner city. This non-profit organization is also noted for promoting awareness of street violence in Cleveland and throughout the country.

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

Holistic Solutions for Holistic Problems

The essential elements of the program and services are to provide innovative expressive arts and lifelong lessons with support to persons that are sober or undergoing alcohol and drug recovery or mental health disorder, in addition to, early intervention and ongoing assessment strategies. The base-strategic program and art activities aid an intergenerational population of children five to eighteen, adolescents to adulthood, and the geriatric population. Specific programs for senior adults (including our two HUD locations) include Community Art Programs, solutions for our community (addressing drug and alcohol abuse, trauma, crime, etc.), as well as other needed resources and services.

Target Population:

- 99Treasures Arts & Culture serves clients who are primarily African American, residing in the Mt. Pleasant and surrounding neighborhoods of Lee-Harvard, Shaker and Buckeye.
- All ages, All socioeconomic categories

Anticipated Number of Clients to be Served: 200

Number of Staff Required to Implement Program: 14

Steps to Ensure Program Continuity if Staff Vacancies Occur:

Should a vacancy occur, the agency would immediately ask a volunteer to step in until the
vacancy could be filled. The agency is fortunate to have many retired professionals that include
social workers, artists, musicians and classroom assistants who can fill in if necessary to keep
services consistent. Clients could also be reassigned.

Funding Priority:

Prevention

Program Goals:

- Hire an additional certified drug and alcohol counselor that will provide two monthly interactive
 workshops, phone support and drug and alcohol misuse training to people in the community. The
 drug counselor will provide a human-centered and spiritual approach for clients using a holistic,
 culturally specific and interfaith services based on the agency's interfaith collaborations. While
 relapse is part of the recovery process, staff expect that 75% of clients will maintain sobriety in
 addition to not beginning the use of drugs and alcohol.
- Prevention strategy for youth and families: Provide innovative therapeutic year-round Out of School Time (OST) programming and a summer camp. The agency provides programming at two HUD housing estates twice per month to older adults and residents at each estate (Riverside Park and Jennings Estates). The agency will serve 200 participants ages 5-18 and adults. At the end of curriculum modules, 85% of participants will earn a certificate of completion. OST programming

one weekday at the Mt. Pleasant Library (14000 Kinsman Rd. Cleveland, Ohio 44120) and Saturday Family Day. The program follows the CMSD school calendar.

Community-based networking: The agency will continue to provide intergenerational
"community involved" Public Artworks component for Mt. Pleasant. Participants will be involved
in mastery level art activities to create a Gun Violence Gallery wall for the Mt. Pleasant Library.
The artwork will reflect solutions through discussion, research and reading or weekly assignments
for drug/alcohol abuse and gun violence plaguing communities today. There will be 25 additional
pieces of one-of-a-kind artwork for the Mt. Pleasant Library (25 are installed to date) for a total of
50 by 2023.

Program Metrics:

- Utilize attendance sheets
- Monitor information dissemination by the use of pre- and post-surveys
- Alternative ways to deliver services to youth and families

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 100
- ADAMHS Funded Unduplicated Clients Served: 104
- Total Number of Clients Served: 104
- Total Number of Clients that Completed this Program/Service: 27

Average Cost Per Client: \$450.45

Additional Information:

• Three of the agency's youth graduated with honors from high school this year. Two of them have been in the program for thirteen years. One of the youth, Eric Jefferies, was a speaker at the Y.O.U. kickoff event at City Hall with Mayor Bibb.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 75
- Total Number of Unduplicated Clients that were Served: 85
- Total Number of Clients that were Served: 85
- Total Number of Clients that Completed this Program/Service: 43

Goals Met:

- Provided Saturday Family and Summer Peace Camp services.
- Provided a human centered and spiritual approach to recovery using holistic, culturally specific services based on collaboration and inclusion.
- Empowered clients against self-sabotage and self-destructive behaviors.
- Provided activities that included interactive workshops and trainings, role play experiences and expressive arts.
- Provided interfaith culturally specific programming that will accommodate varying learning modalities/intergenerational poverty/drugs/mental health.

Metrics Used to Determine Success:

 The agency used sign-in sheets and client feedback forms. Staff also uses DESSA assessments, pre- and post-tests, pictures, videos and school reports if applicable, including school and behavioral reports.

Program Successes:

• The agency successfully held programming on Saturdays and Summer Peace Camp. Staff collaborated successfully with multiple faith and community agencies. The agency had guest speakers from the Opiate Task Force, the ATF and Aldersgate Methodist Church. Staff conducted four trainings, three workshops, four role play skits and created 25 paintings. Staff incorporated small groups, gender specific, intergenerational and peer mentoring into the program.

Average Cost Per Client in CY21: \$450.45

Additional Information:

• A volunteer, who is a former client and the parent of four of the program youth, received a Master's in Social Work from The Ohio State University on Mother's Day.

		2021 First Outcome		2022 First Outcome	
Provider:	99Treasures Arts & Culture	Count:	103	Count:	36
		2021 Final Outcome		2022 Final Outcome	
Instrument:	DESSA MINI	Count:	103	Count:	36
Program:	Youth Prevention	2021 % of Final:	100%	2022 % of Final:	100%

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

			First	Final		
	Evaluation		Outcome	Outcome	Average	
Population	Year	SubScale	Average	Average	Difference	Significance
Grades K - 8	2021	No Scale	49.59	54.41	4.83	Significant at p<.05
Grades 9 - 12	2021	No Scale	53.11	54.26	1.16	Not Significant
Grades K - 8	2022	No Scale	51.38	56.56	5.19	Significant at p<.05
Grades 9 - 12	2022	No Scale	53.50	55.35	1.85	Significant at p<.05

		2021 First Outcome		2022 First Outcome	
Provider:	99Treasures Arts & Culture	Count:	41	Count:	0
		2021 Final Outcome		2022 Final Outcome	
Instrument:	DARS	Count:	43	Count:	0
Program:	Adult Prevention	2021 % of Final:	95.35%	2022 % of Final:	0

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

	Evaluation		% Who	
Population	Year	SubScale	Improved	Significance
Adults (18+ years)	2021	Initiative	83.72%	Not Significant
Adults (18+ years)	2021	Internal Beliefs	81.40%	Not Significant
Adults (18+ years)	2021	Overall	95.35%	Not Significant
Adults (18+ years)	2021	Relationships	88.37%	Not Significant
Adults (18+ years)	2021	Self Control	81.40%	Not Significant
Adults (18+ years)	2022	Initiative		Not Significant
Adults (18+ years)	2022	Internal Beliefs		Not Significant
Adults (18+ years)	2022	Overall		Not Significant
Adults (18+ years)	2022	Relationships		Not Significant
Adults (18+ years)	2022	Self Control		Not Significant

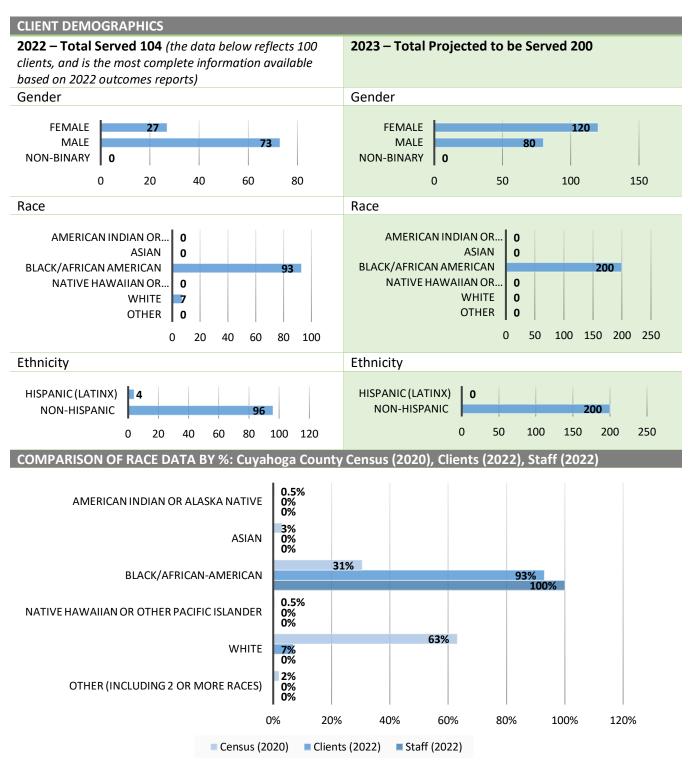
Focus on Diversity: 99 Treasures Arts & Culture

Program(s): Holistic Solutions for Holistic Problems

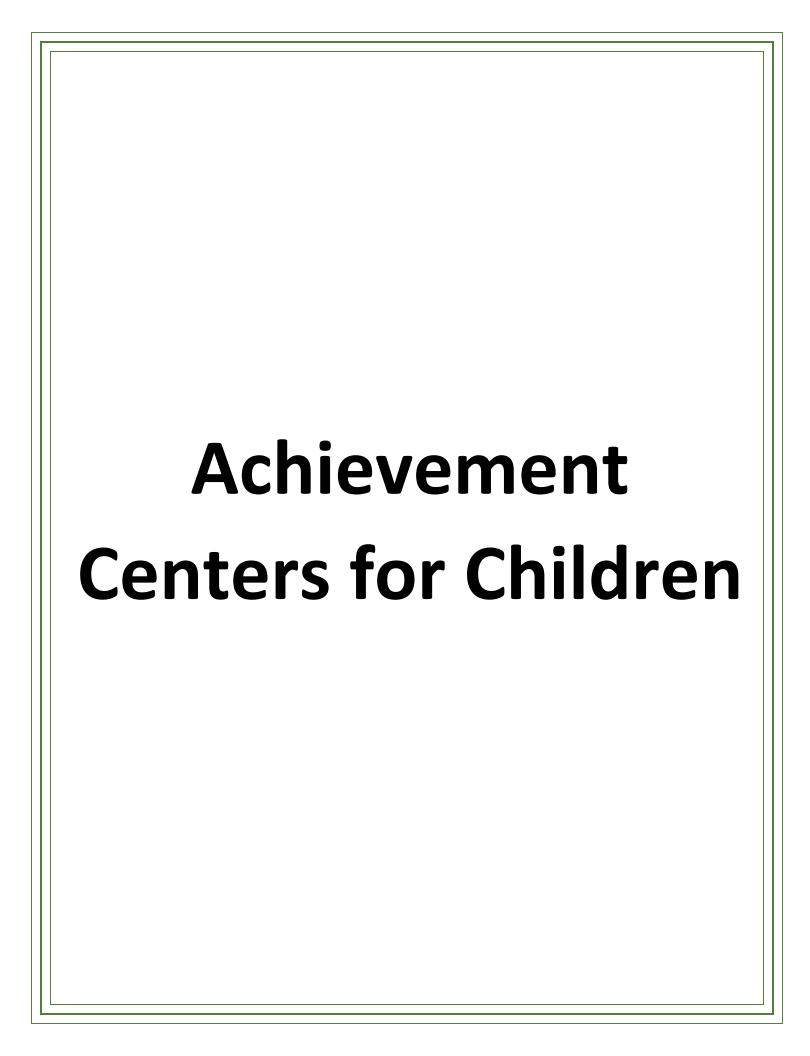
Diversity, Equity and Inclusion STRENGTH from program proposal:

The agency has a policy or polices related to non-discrimination, equal employment opportunity, and/or harassment based on protected categories of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), language, disability, marital status, sexual orientation, or military status.





Note: These are the best estimates based on available information. Figures may be estimated or rounded, and may not equal 100%.



CY2023 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2022 FINAL CONTRACT AMOUNT	2023 CONTRACT RECOMMENDATIONS	PRIORITY
Achievement Centers for Children			
Early Childhood Mental Health**	\$ -	\$ -	Prevention
Total	\$ -	\$ -	

^{**} ECMH Providers Pooled Funding

		2021 First Outcome		2022 First Outcome	
Provider:	Achievement Centers for Children	Count:	88	Count:	37
		2021 Final Outcome		2022 Final Outcome	
Instrument:	e-DECA	Count:	88	Count:	37
Program	Early Childhood Mental Health	2021 % of Final:	100%	2022 % of Final:	100%

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.

	Evaluation		First Outcome	Final Outcome	Average	
Population	Year	SubScale	Average	Average	Difference	Significance
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
Toddler (18-36 months)	2021	AT- Attachment	36.33	38.17	1.83	Not Significant
Toddler (18-36 months)	2021	IN- Initiative	35.67	38.5	2.83	Not Significant
Toddler (18-36 months)	2021	SC- Self Regulation	34.17	41.5	7.33	Not Significant
Toddler (18-36 months)	2021	TPF- Total Protective Factors	33.83	38	4.17	Not Significant
Child (2 - 5 years)	2021	AG- Aggression	61.19	60.01	-1.18	Not Significant
Child (2 - 5 years)	2021	AP- Attention Problems	65.98	66.45	0.48	Not Significant
Child (2 - 5 years)	2021	AT- Attachment	42.1	43.59	1.49	Not Significant
Child (2 - 5 years)	2021	ECP- Emotional Control Problems	66.35	64.77	-1.58	Not Significant
Child (2 - 5 years)	2021	IN- Initiative	41.88	43.89	2.01	Not Significant
Child (2 - 5 years)	2021	SC- Self Regulation	40.06	41.66	1.6	Not Significant

Child (2 - 5 years)	2021	TBC- Total Behavioral Concerns	66.93	65.52	-1.41	Not Significant
Child (2 - 5 years)	2021	TPF- Total Protective Factors	39.48	41.13	1.65	Not Significant
Child (2 - 5 years)	2021	WD- Withdrawal/Depression	62.6	60.57	-2.03	Significant at p<.05
Child (2 - 5 years)	2022	WD- Withdrawal/Depression	62.32	58.76	-3.57	Significant at p<.05
Infant (1-18 months)	2022	AT- Attachment	51.33	53.44	2.11	Not Significant
Infant (1-18 months)	2022	IN- Initiative	55.67	55.11	-0.56	Not Significant
Toddler (18-36 months)	2022	TPF- Total Protective Factors	37	41.5	4.5	Not Significant
Infant (1-18 months)	2022	TPF- Total Protective Factors	53.78	54.67	0.89	Not Significant
Toddler (18-36 months)	2022	AT- Attachment	39.67	43.83	4.17	Not Significant
Toddler (18-36 months)	2022	IN- Initiative	40.67	44	3.33	Not Significant
Toddler (18-36 months)	2022	SC- Self Regulation	35.67	39.67	4	Not Significant
Child (2 - 5 years)	2022	AG- Aggression	60.27	58.92	-1.35	Not Significant
Child (2 - 5 years)	2022	AP- Attention Problems	67.35	66.08	-1.27	Not Significant
Child (2 - 5 years)	2022	AT- Attachment	43.68	41.95	-1.73	Not Significant
Child (2 - 5 years)	2022	ECP- Emotional Control Problems	66.73	66.05	-0.68	Not Significant
Child (2 - 5 years)	2022	IN- Initiative	40.51	42.65	2.14	Not Significant
Child (2 - 5 years)	2022	SC- Self Regulation	42.35	41.32	-1.03	Not Significant
Child (2 - 5 years)	2022	TBC- Total Behavioral Concerns	67.81	65.86	-1.95	Not Significant
Child (2 - 5 years)	2022	TPF- Total Protective Factors	39.57	39.97	0.41	Not Significant



CY2023 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program		2022 FINAL CONTRACT AMOUNT		2023 CONTRACT ECOMMENDATIONS	PRIORITY
Applewood Centers, Inc					
Early Childhood Mental Health**	\$	-	\$	1	Prevention
Mental Health in the Detention Center	\$	567,280	\$	619,583	24/7 Access
Crisis Stabilization Placement for Youth	\$	913,230	\$	1,455,936	Crisis
School Based Prevention	\$	112,500	\$	179,681	Prevention
Transportation	\$	50,000	\$	25,000	Removing Barriers
Workforce Retention	\$	-	\$	320,836	Removing Barriers
Total	\$	1,643,010	\$	2,601,036	
Pooled Funding:					
Treatment Services	\$	-	\$	-	

^{**} ECMH Providers Pooled Funding

Applewood Centers, Inc.

Applewood Centers, Inc., is a non-profit agency and one of Northeast Ohio's largest providers of behavioral healthcare and social services for children, youth, and families.

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

Mental Health in the Juvenile Detention Center

Since 2016, Applewood's licensed social workers have provided trauma-informed clinical services to youth identified with behavioral health symptoms in need of emotional stabilization and/or crisis intervention while detained in the Cuyahoga County Juvenile Detention Center. Services include assessment, screening for suicide, and behavior management, as well as psychiatry services, care coordination, and linkage with community-based services upon release. To minimize mental health impact and maximize safety and security, staff also advocate for interventions for youth and families in the court room, during court and community meetings, and within the Detention Center itself.

Per agency outcomes, within the first six months of 2022, 83% of youth who received mental health services from Applewood while in the Detention Center showed improved behavioral and emotional symptoms.

Target Population:

- Youth ages 8-12 identified with behavioral health symptoms in need of emotional stabilization while detained in the Detention Center. Most of these youth are Black/African American and have experienced at least one form of significant childhood trauma
- All socioeconomic categories

Anticipated Number of Clients to be Served: 500

Number of Staff Required to Implement Program: 7

Steps to Ensure Program Continuity if Staff Vacancies Occur:

• In the event of vacancies, services will be covered by the Director of Applewood's Juvenile Justice Division, Michelle Sims, LPCC-S, and/or other program staff, while Ms. Sims works with the agency's Human Resources Division to recruit and hire new staff for the program.

Funding Priority:

24/7 Access

Program Goals:

- Will serve approximately 500 youth beyond the initial assessment
- Fewer risk behaviors
- Improved behavioral and emotional symptoms
- Improved life domain functioning
- Improved community safety rating

Program Metrics:

- Client count, as well as Juvenile Court data and reports measure the number of clients served
- Child and Adolescent Needs and Strengths (CANS) Juvenile Justice Crisis assessment tool

First Six Months of CY22 Provider Outcomes:

Highlights:

Number of Clients that were Anticipated to be Served: 250

• ADAMHS Funded Unduplicated Clients Served: 331

• Total Number of Clients Served: 331

Total Number of Clients that Completed this Program/Service: 64

Average Cost Per Client: \$967.72

Additional Information:

• Due to the inability to bill Medicaid or private insurance for youth seen while remanded in the Detention Center, this program and its successful outcomes for youth is reliant on grant funding. In collaboration with the ADAMHS Board and the Cuyahoga Justice Center, Applewood has been providing Mental Health (MH) services in the Detention Center since 2016. Services have been modified over the years to meet the needs of the current Detention Center administration and the ever-changing youth population. Services include but are not limited to, 24-hour on call coverage, 7-day-per-week coverage, suicide watch assessments, safety contracting, confinement assessment, crisis management, psychiatry referral and coordination, psychotherapy for identified MH clients, collaboration, and coordination of services.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 500
- ADAMHS Funded Unduplicated Clients Served: 457
- Total Number of Clients that were Served: 457
- Total Number of Clients that Completed this Program/Service: 148

Goals Met:

• 50% of youth will demonstrate fewer risk behaviors. 50% of youth will demonstrate improved behavioral and emotional symptoms. 50% of youth will demonstrate improved life domain functioning.

Metrics Used to Determine Success:

Child and Adolescent Needs and Strengths (CANS) Assessment Tool

Program Successes:

• 77% demonstrated fewer risk behaviors, 76% demonstrated improved behavioral and emotional symptoms, 78% demonstrated improved life domain functioning, and 34% demonstrated an improved community safety rating.

Average Cost Per Client in CY21: \$972.75

Additional Information:

Due to the inability to bill Medicaid or private insurance for youth seen while remanded in the
Detention Center, this program and its successful outcomes for youth are reliant on grant
funding. In collaboration with the ADAMHS Board and the Cuyahoga County Justice Center,
Applewood has been providing mental health services in the Detention Center since 2016.
 Services have been modified over the years to meet the needs of the current Detention Center

administration and the ever-changing youth population. Services include but are not limited to 24-hour on call coverage; 7-day-per-week coverage; suicide watch assessments; safety contracting; confinement assessment; crisis management; psychiatry referral and coordination; psychotherapy for identified MH clients; collaboration, and coordination of services.

School Based Prevention and Short-Term Consultation

Applewood will provide prevention and short-term consultation services within targeted Cuyahoga County schools to help children, families and school staff identify and resolve challenges before they grow more complex. This ability to get in at the ground floor of a concern with fewer barriers to care enables counselors to work efficiently and swiftly in the schools, promoting wellness and stronger outcomes for all involved. Applewood, which has provided school-based services for more than 30 years, sees first-hand how prevention and short-term consultation directly impacts children's abilities to achieve success in school, at home and in society; supports teachers and staff; and promotes a stronger, stable culture in the schools. Moreover, when clinically indicated, counselors can quickly triage a student from consultation to a higher level of care with access to proper supports as soon as possible.

Applewood's counselors provide their clinical expertise and work with:

- Teachers/school staff to help them effectively manage a child's mental health and/or behavioral issues, address classroom or whole school issues, and enhance their own wellness
- Individual children for one-time consultation or for multiple session consultations with parental
 consent. The ability to work with children when it is not clear if treatment is necessary enables
 counselors to provide early and supportive interventions for students, families, and teachers so
 they are equipped with the skills to manage challenging behaviors and concerns
- Groups of multiple children to address serious issues that students are facing and/or topics identified by school staff

Program modalities address issues among vulnerable age groups to help children overcome negative influences and challenges including but not limited to depression/anxiety, violence, criminal behaviors and poor family functioning, while encouraging the development of self-esteem; healthy relationships; healthy conflict resolution and the recognition of positive and negative emotions.

School-Based Short-Term Consultation runs for eight to 12 sessions and is client-specific per needs, client profile, and problem intensity.

Regular consultation is provided, as needed, to staff, administration or parents, and could be a one-time session regarding a specific child. Some prevention groups are one-time classroom presentations, while others could be a few sessions in a classroom or provided as small groups with time limits.

Target Population:

- The urban and suburban schools that make up Applewood's School-Based program's target populations who suffer economic hardships and are frequently located in distressed neighborhoods where violence is common. Most families attending these schools are African American and often in female-headed households, living in or near poverty in struggling neighborhoods.
- Children ages 13-17, 100-199% of the federal poverty level

Anticipated Number of Clients to be Served: 1,630

Number of Staff Required to Implement Program: 2

Steps to Ensure Program Continuity if Staff Vacancies Occur:

 When staff vacancies occur, other departmental staff will assist with providing services where needed; supervisors and the director will also continue to assist with program implementation and school/case coverage.

Funding Priority:

Prevention

Program Goals:

- Increased display of positive interactions, increased self-esteem, emotional expression, and usage of healthy coping skills
- Decrease in display of problematic behaviors
- Improved communication with teachers regarding mental health, trauma, social emotional needs, and how to support students within a learning environment

Program Metrics:

 Devereux Student Strengths Assessment (DESSA) for ongoing consultation; satisfaction survey for all other services

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 550
- ADAMHS Funded Unduplicated Clients Served: 2,602
- Total Number of Clients Served: 3,200
- Total Number of Clients that Completed this Program/Service: 0

Average Cost Per Client: \$34.57

Additional Information:

• Applewood's counselors provide their clinical expertise and work with: teachers and school staff to help them effectively manage a child's mental health and/or behavioral issues, address classroom or whole school issues, and enhance their own wellness; individual children for one-time consultation or for multiple session consultations with parental consent; individual children when it is not clear if treatment is necessary which enables counselors to provide early and supportive interventions for students, families and teachers so they are equipped with the skills to manage challenging behaviors and other issues that encapsulate all facets of a child's life; groups of multiple children to address serious issues that students are facing and/or topics identified by school staff; classrooms for one-time prevention topics (provide topics such as grief/loss when a student/school staff member has died/been victim of community violence, etc.) as well as ongoing groups (mentioned above); professional development for school staff on topics such as Vicarious Trauma; Trauma informed classrooms; etc.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 600
- ADAMHS Funded Unduplicated Clients Served: 7,787
- Total Number of Clients that were Served: 14.800

• Total Number of Clients that Completed this Program/Service: 7,735

Goals Met:

 Provide Consultation and Prevention Services to assigned schools. For ongoing consultation clients, improvement in DESSA scores.

Metrics Used to Determine Success:

Count of services provided and the DESSA.

Program Successes:

• Staff provided over 1,200 hours of consultation and prevention to assigned schools. Of the 16 students who finished consultation services, 11 students showed statistically significant improvement on their post-DESSA scores.

Average Cost Per Client in CY21: \$16.35

Additional Information:

• Workers provide one-time prevention topics to classrooms based on need; workers provide consultation services to parents and/or teachers and school administrators as needed; workers provide ongoing short-term consultative services to students when appropriate. Due to the schools returning to in-person learning for the 2021-2022 school year, staff were able to utilize funds more in the fall of 2021. An increased need for consultative services was identified for teachers, school administrators, parents, and students. This return to in-person learning also resulted in an increase in various prevention topics being provided to students to assist them with managing in a school setting. Due to the ongoing COVID restrictions during this reporting period, services look differently than in prior years. Ongoing prevention groups were unable to be organized when schools returned to a hybrid model due to the way the school day was structured. For the second part of the reporting period, staff were able to utilize remaining funding by wrapping around students, parents, and teachers/school administrators as they were all in need of extra supports due to being out of a traditional school setting since March 2020.

Treatment Services for Medicaid Non-Eligible Clients

Applewood serves children and youth whose families would not otherwise be able to afford the care needed to treat such challenges as depression, anxiety, trauma, and behavioral health issues. Applewood provides an array of appropriate outpatient mental health services based on the individualized needs of the client.

Target Population:

Children and young adults ages four to 25, 100-199% of the federal poverty level

Anticipated Number of Clients to be Served: 15

Number of Staff Required to Implement Program: 10

Steps to Ensure Program Continuity if Staff Vacancies Occur:

• Any vacancies will be filled by other staff and/or supervisors while program directors work with Human Resources to hire new staff.

Funding Priority:

Treatment Services – Pooled Funding

Program Goals:

- Reduced severity of behavioral problems
- Improved daily functioning
- Improved future outlook (i.e. hopefulness)

Program Metrics:

Ohio Scales

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 10
- ADAMHS Funded Unduplicated Clients Served: 4
- Total Number of Clients Served: 789
- Total Number of Clients that Completed this Program/Service: 4

Average Cost Per Client: \$344.47

Additional Information:

• It has become increasingly difficult to qualify families for these pooled, non-Medicaid funds who are underinsured. The agency is seeing less and less families with no insurance at all for children.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 21
- ADAMHS Funded Unduplicated Clients Served: 5
- Total Number of Clients that were Served: 628
- Total Number of Clients that Completed this Program/Service: 0

Goals Met:

Decrease behavioral problems and increase functioning

Metrics Used to Determine Success:

• Ohio Scales

Program Successes:

 One client showed a small reduction in behavior, but not enough clients were in the program long enough to show change in functioning.

Average Cost Per Client in CY21: \$195.14

Additional Information:

• The agency had a significant decrease in clients who needed to utilize these non-Medicaid funds this calendar year. More families qualified for Medicaid. As more families are back to work, staff anticipates seeing an increased need again next calendar year.

Retention of an Appropriate and Diverse Workforce

The stress caused by the pandemic-on workers, especially front-line staff, has resulted in a significant shortage of mental health professionals locally and nationally. Applewood has been affected by staffing shortages, especially in the hardest to fill positions that serve the most challenged and troubled clients in the agency's community, juvenile justice, and residential programs. As the level of acuity in Applewood's clients has significantly risen coupled with the subsequent increased demands and expectations of staff during a contagious pandemic, Applewood has lost many good employees to higher paying, less stressful careers in private practice, as well as to managed care organizations, hospitals, and jobs outside of the mental health field.

With the goal of maintaining a stable, strong and diverse workforce of quality mental health providers, Applewood has prioritized the recruitment and retention of an appropriate personnel to meet community needs. ADAMHS Board funds will provide retention bonuses to 122 staff who have been identified in critical service areas to incentivize them to remain Applewood employees.

To accept and keep the incentive payment, staff must agree to maintain employment in their position for at least one year, thereby resulting in the agency's ability to serve more clients and provide more stability in care to the children, youth and families in the agency's care. These retention/incentive bonuses will help increase Applewood's staffing in these vital program areas from the agency's current roster of 80 therapists to 122 by 2023. To be eligible for the bonus, all staff must be in good standing, and new staff must be employed for at least six months.

Target Population:

• Workforce of front-line clinical staff in the agency's School-Based, In-home/Early Childhood Mental Health, Residential and Juvenile Justice programs.

Anticipated Number of Clients to be Served: 122

Number of Staff Required to Implement Program: 122

Steps to Ensure Program Continuity if Staff Vacancies Occur:

 Staff vacancies will be alleviated by this program. Current staff will be incentivized to remain in their position at Applewood and new staff must be employed for at least six months before being eligible for the retention bonus.

Funding Priority:

Removing Barriers

Program Goals:

- To maintain a strong workforce of 122 mental health professionals
- To retain and incentivize quality providers in the agency's hardest to fill, critical service positions

Program Metrics:

• Staff count, supervision, Human Resources records/tracking

First Six Months of CY22 Provider Outcomes: N/A – New Program for CY23

Crisis Stabilization Residential Treatment Beds

Applewood's needs-driven crisis stabilization program provides flexible, therapeutic short-term residential placement for youth presenting with varying safety concerns in the community. Stays in Applewood's residential crisis stabilization program are designed to be as short as clinically appropriate with the goal being to help youth re-establish the emotional and behavioral stability required for a safe return to home or step-down to a lower level of care.

Placement is provided within Applewood's secure (locked), gender-specific residential units ("cottages"), which are situated within a gated campus and provide round-the-clock structure, staff supervision and access to on-campus psychiatric and nursing care. Treatment is individualized and length of stay varies from 72 hours to 90 days depending on each youth's assessed needs. Placement in a residential crisis bed is safe and highly supervised with an increased staff-to-client ratio of 1:3. Each youth receives intensive, individualized services, which are strength based, culturally and linguistically competent, and youth and family focused. Focusing on crisis stabilization and safety, youth receive thorough and accurate assessment and treatment planning with clear, individualized goals and monitoring. Treatment modalities include evidence-based practices and trauma-informed interventions provided by a multidisciplinary treatment team including dually trained and licensed mental health/SUD clinicians, child and adolescent psychiatrists, psychiatric nurse practitioners, psychologists, social workers, counselors, registered nurses, licensed clinicians, and childcare workers.

Youth in crisis beds receive all components of Applewood's residential treatment programming, which are individualized for each client based on the youth and families' needs and include: comprehensive, diagnostic Psychiatric Diagnostic Evaluation (PDE), Individualized Treatment Plan (ITP), case management, including permanency and discharge plans, psychiatric consultation, crisis intervention, psychological testing, day treatment group services, chemical dependency assessment/treatment, medical, dental, and optical care, therapy: Individual, family, and group, therapeutic recreation, specialized educational services, discharge planning with wraparound aftercare with all needed mental health and/or substance abuse disorder services and other necessary supports to maintain stability, promote progress and reduce future emergency needs.

Target Population:

- Male and female youth, ages 11-18, who are experiencing mental health and/or co-occurring substance abuse emergencies, and require short-term crisis stabilization, assessment, and intensive intervention in a safe and secure (locked), trauma-informed, gender-specific residential setting with 24/7 supervision.
- All socioeconomic categories

Anticipated Number of Clients to be Served: 70

Number of Staff Required to Implement Program: 23

Steps to Ensure Program Continuity if Staff Vacancies Occur:

When staff vacancies occur, overtime is offered to current treatment specialists to assist with
coverage. All members of the Residential team, including licensed staff, are trained and able to
provide coverage. If needed, Residential Managers are utilized to assist with coverage on an asneeded basis. In the event of an emergency, staff from other divisions with residential experience
and appropriate training are utilized.

Funding Priority:

Crisis Services

Program Goals:

- Discharge home to parent/guardian
- Fewer risk behaviors
- Improved behavioral and emotional symptoms
- Improved life domain functioning
- Improved caregiver resources

Program Metrics:

- Client count, records, and data on discharge location upon step down from the crisis beds
- Crisis Assessment Tool (CAT)

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 70
- ADAMHS Funded Unduplicated Clients Served: 43
- Total Number of Clients Served: 43
- Total Number of Clients that Completed this Program/Service: 43

Average Cost Per Client: \$417

Additional Information:

• Applewood's needs-driven crisis stabilization program provides flexible, therapeutic, short-term residential placement for youth presenting with varying safety concerns in the community. Treatment is individualized and length of stay varies from 24 hours to 90 days depending on the youth's needs. Placement in the residential crisis bed program is safe and highly supervised within the secure, gender specific and structured residential Intensive Treatment Units, which maintain a staff-to-client ratio of 1:3. Each youth receives intensive, individualized services which are strength-based, culturally and linguistically competent, and youth and family focused. Treatment modalities include evidence-based practices and are led by a multidisciplinary treatment team including dually trained and licensed mental health/SUD clinicians, psychiatrists, psychologists, social workers, counselors, registered nurses, and qualified mental health specialists. Youth that have active Medicaid are placed at a per diem of \$417 per day which covers all non-billable milieu programming; Medicaid is billed for billable services such as individual, family and group counseling and psychiatry. Youth that do not have active Medicaid are placed at a per diem of \$664.81 per day which includes all billable and non-billable services provided during admission.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 70
- ADAMHS Funded Unduplicated Clients Served: 87
- Total Number of Clients that were Served: 87
- Total Number of Clients that Completed this Program/Service: 67

Goals Met:

- 50% will return home to parent/guardian
- 50% will demonstrate fewer risk behaviors
- 50% will demonstrate improved behavioral and emotional symptoms
- 50% will demonstrate improved life domain functioning
- 50% will demonstrate improved caregiver resources

Metrics Used to Determine Success:

Crisis Assessment Tool (CAT)

Program Successes:

- 82% returned home to parent/guardian
- 68% demonstrated fewer risk behaviors
- 62% demonstrated improved behavioral and emotional symptoms
- 53% demonstrated improved life domain functioning
- 59% demonstrated improved caregiver resources

Average Cost Per Client in CY21: \$5,189

Additional Information:

Stays in Applewood's residential crisis stabilization program are designed to be as short as
clinically appropriate with the goal being to help youth re-establish the emotional and behavioral
stability required for a safe return to home or step-down to a lower level of care. Treatment is
individualized and length of stay varies from 72 hours to 90 days depending on each youth's
assessed needs.

<u>Transportation for clients to keep mental health appointments</u>

Applewood's day treatment After School Program (ASP), on the agency's Children's Aid Society campus location, provides intensive group counseling for children and adolescents. These challenges might include, but are not limited to, extreme fears or excessive worries, anger, mood disturbance, depression, impulsivity, aggressive behaviors, single or complex trauma, multiple losses, relationship difficulties with peers and adults, or environmental stressors related to the current pandemic.

Utilizing agency vans, Applewood coordinates transportation to and from the program on an individual basis for those clients who reside within a specific geographic area around the campus.

Applewood will contract with America's Best Transportation for ASP services. America's Best Transportation specializes in transporting emotionally and/or behaviorally challenged passengers via extensively trained and experienced drivers. All drivers and monitors are thoroughly screened and trained and receive Ohio School Van Driver training in compliance with the Ohio Department of Education requirements.

While virtual services are now an option for some clients, most ASP clients benefit from in-person services to work on their issues most effectively with program therapists and other qualified mental health providers, participate in therapeutic group activities with peers and obtain a bagged lunch provided by the Cleveland Food Bank during each group session. ASP is a critical program that enables the most at-risk youth to share their thoughts and feelings and to learn skills that will improve their functioning and be more successful in all aspects of their lives. Free and reliable, safe transportation minimizes barriers to this critical service.

Target Population:

- Children ages seven through 18 who suffer from moderate to severe social, emotional, or behavioral symptoms, which qualify them for Applewood's day treatment After School Program (ASP), provided at the agency's Children's Aid Society Campus.
- 100-199% of the federal poverty level

Anticipated Number of Clients to be Served: 21

Number of Staff Required to Implement Program: 3

Steps to Ensure Program Continuity if Staff Vacancies Occur:

Services to clients will not be impacted by staff vacancies as the duties will be fulfilled by another
person on the team. American's Best Transportation maintains a consistent roster of drivers and
monitors, as well as a well-maintained fleet of passenger vans which are equipped with cell
phones and custom surveillance video to monitor passengers and staff for safety purposes.

Funding Priority:

• Removing Barriers

Program Goals:

- Increase attendance in the agency's day treatment After School Program by minimizing barriers to treatment via transportation to and from the program
- Add an additional 21 children per year on expanded routes to and from Applewood's on-campus After School Program.

Program Metrics:

- Count of clients provided with transportation and their show rates to ASP
- Count of clients on vans to/from the day treatment After School program

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 38
- ADAMHS Funded Unduplicated Clients Served: 8
- Total Number of Clients Served: 100
- Total Number of Clients that Completed this Program/Service: 0

Average Cost Per Client: \$1,168.75

Additional Information:

Bus tickets were not needed in 2022, as Applewood's outpatient clients with transportation
issues opted to use Zoom for telehealth services rather than come to the office for in-person
sessions. RTA enabled us to exchange old tickets for new, valid tickets, and Applewood will utilize
these to assist any future clients who prefer office-based visits. Staff worked with ADAMHS staff
to focus on getting more high need clients here for the Day Treatment program as those are the
clients most at risk for out-of-home care without these services.

CY21 Provider Outcomes: N/A – New Program beginning in 2022

Provider:	Applewood Centers Inc	Count:	15	Count:	1
		2021 Final Outcome		2022 Final Outcome	
Instrument:	e-DECA	Count:	15	Count:	1
Program:	Early Childhood Mental Health	2021 % of Final:	100%	2022 % of Final:	100%

2021 First Outcome

2022 First Outcome

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.

			First	Final		
	Evaluation		Outcome	Outcome	Average	
Population	Year	SubScale	Average	Average	Difference	Significance
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
Toddler (18-36 months)	2021	AT- Attachment	50	55	5	Not Significant
Toddler (18-36 months)	2021	IN- Initiative	37	41	4	Not Significant
Toddler (18-36 months)	2021	SC- Self Regulation	35	50	15	Not Significant
Toddler (18-36 months)	2021	TPF- Total Protective Factors	39	49	10	Not Significant
Child (2 - 5 years)	2021	AG- Aggression	61.87	58.4	-3.47	Significant at p<.05
Child (2 - 5 years)	2021	AP- Attention Problems	68.13	64.33	-3.8	Not Significant
Child (2 - 5 years)	2021	AT- Attachment	44	42.73	-1.27	Not Significant
Child (2 - 5 years)	2021	ECP- Emotional Control Problems	63.27	60.47	-2.8	Not Significant
Child (2 - 5 years)	2021	IN- Initiative	43.93	46.73	2.8	Not Significant
Child (2 - 5 years)	2021	SC- Self Regulation	43.6	46.6	3	Not Significant
Child (2 - 5 years)	2021	TBC- Total Behavioral Concerns	65.8	62.87	-2.93	Not Significant
Child (2 - 5 years)	2021	TPF- Total Protective Factors	41.4	44.6	3.2	Not Significant
Child (2 - 5 years)	2021	WD- Withdrawal/Depression	59	59.67	0.67	Not Significant

Infant (1-18 months)	2022	AT- Attachment				Not Significant
Infant (1-18 months)	2022	IN- Initiative				Not Significant
Toddler (18-36 months)	2022	TPF- Total Protective Factors				Not Significant
Child (2 - 5 years)	2022	WD- Withdrawal/Depression	62	60	-2	Not Significant
Infant (1-18 months)	2022	TPF- Total Protective Factors				Not Significant
Toddler (18-36 months)	2022	AT- Attachment				Not Significant
Toddler (18-36 months)	2022	IN- Initiative				Not Significant
Toddler (18-36 months)	2022	SC- Self Regulation				Not Significant
Child (2 - 5 years)	2022	AG- Aggression	47	33	-14	Not Significant
Child (2 - 5 years)	2022	AP- Attention Problems	61	71	10	Not Significant
Child (2 - 5 years)	2022	AT- Attachment	48	38	-10	Not Significant
Child (2 - 5 years)	2022	ECP- Emotional Control Problems	64	53	-11	Not Significant
Child (2 - 5 years)	2022	IN- Initiative	58	56	-2	Not Significant
Child (2 - 5 years)	2022	SC- Self Regulation	48	50	2	Not Significant
Child (2 - 5 years)	2022	TBC- Total Behavioral Concerns	60	54	-6	Not Significant
Child (2 - 5 years)	2022	TPF- Total Protective Factors	51	48	-3	Not Significant

		2021 First Outcome		2022 First Outcome	
Provider:	Applewood Centers Inc	Count: 20		Count:	175
		2021 Final Outcome		2022 Final Outcome	
Instrument:	DESSA MINI	Count:	20	Count:	175
Program:	Youth Prevention	2021 % of Final:	100%	2022 % of Final:	100%

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

			1	1		1
			First	Final		
	Evaluation		Outcome	Outcome	Average	
Population	Year	SubScale	Average	Average	Difference	Significance
Grades K - 8	2021	No Scale	43.10	45.90	2.80	Not Significant
Grades 9 - 12	2021	No Scale				Not Significant
Grades K - 8	2022	No Scale	44.26	46.40	2.14	Significant at p<.05
Grades 9 - 12	2022	No Scale	39.00	43.20	4.20	Not Significant

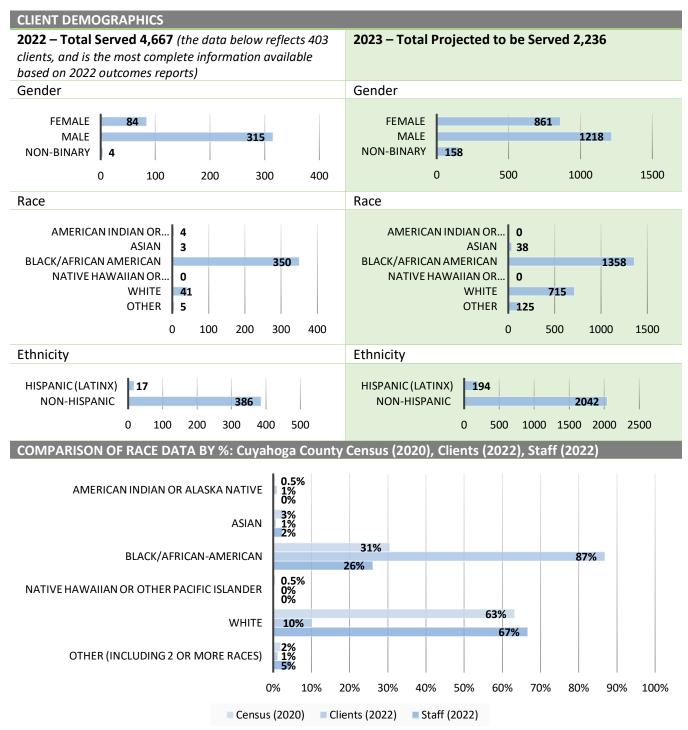
Focus on Diversity: Applewood Centers, Inc.

Program(s): Crisis Stabilization Residential Treatment Beds; Mental Health in the Juvenile Detention Center; Retention of an Appropriate and Diverse Workforce; School-Based Prevention and Short-Term Consultation; Transportation; Treatment Services for Medicaid Non-Eligible Clients

Diversity, Equity and Inclusion STRENGTH from program proposal:

The Wingspan Care Group notes they are "committed to delivering behavioral and primary healthcare, education, prevention, social services and advocacy in order to enhance the emotional, physical and intellectual wellbeing of the children, youth and family members of our community."

Region: All



Note: These are the best estimates based on available information. Figures may be estimated or rounded, and may not equal 100%.

Asian Services in Action (ASIA)

CY2023 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program		2022 FINAL CONTRACT AMOUNT		2023 CONTRACT COMMENDATIONS	PRIORITY
Asian Services in Action, Inc.					
West-Community Adult Monitoring Program	\$	86,000	\$	100,000	Prevention
Total	\$	86,000	\$	100,000	

Asian Services in Action (ASIA)

Asian Services in Action (ASIA), Inc., is a non-profit organization in Northeast Ohio whose mission is to empower and advocate for Asian Americans/Pacific Islanders (AAPI's) and to provide access to culturally and linguistically appropriate information and services.

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

West-Community Adult Mentoring Program

West CAM meets after school, twice a week for grades K-5 and twice a week for grades 6-12. The program involves drug prevention education, English language education, tutoring and mentoring. In the summer, CAM provides small group and individual drug prevention education, literacy-based education, extracurricular activities and field trips. Summer programming occurs six-hours-per-day, four-days-per-week, in June and July. In addition, parenting classes are offered weekly during the school year. The classes teach parents about communicating expectations, handling family conflict, setting rules about drugs, using "I" messages, American culture and other ways to prevent drug misuse.

Summer and afterschool programs seek to build protective factors against substance abuse, using a culturally adapted version of evidence-based Strengthening Families Program (SFP). SFP has been found to significantly improve parenting skills and family relationships, reduce problem behaviors, delinquency, alcohol and drug abuse in children, improve social competencies and school performance. West CAM increases school bonding and academic achievement by providing students who do not have anyone at home who is available or able to assist with homework, a place where they can finish their homework, get additional English language tutoring and find the support they need to successfully complete high school. Family management and skill development is also integrated into the curricula, as family conflict is another risk factor for substance abuse. The CAM program provide at-risk immigrant and refugee students with positive relationships with caring adults and healthy relationships with peers, which are also protective factors against alcohol, tobacco and other drug (ATOD) use and abuse. These protective factors directly combat risk factors for youth drug use, including lack of a sense of belonging in the home culture or the at-large culture, academic failure, low commitment to school and family conflict.

Ongoing engagement with both students and parents serves to identify individual and community needs and programming is tailored to meet those needs. There is a large amount of one-on-one assistance and support based on frequent communication with students and parents. Discussion is a large part of the education, as students learn best when they are involved in the process. Educators focus less on lecture time and more on having students identify real-life problems and solutions. This is very often done through role-play scenarios, wherein groups of students create their own problem-solving scenarios and demonstrate knowledge of problem-solving skills by acting out the scenario with and without an effective skill.

Target Population:

 The program primarily serves low-income, limited English proficient (LEP), immigrant and refugee students and their families on Cleveland's near Westside, Lakewood and Cleveland Heights. Most of these families speak a language other than English at home with varied levels of literacy in English and their home language. Participating parents in the program had little to no formal education prior to coming to the U.S.; many families moved to Cleveland from refugee camps

where children were born and raised. Some of the LEP students have diagnosed and undiagnosed developmental and learning disabilities.

- Demographics of West CAM students were as follows: 49% Female and 51% Male; at least 80% are below the 200% FPL; and spoke the following home languages: Ka'Ren (57%), Nepali (14%), Burmese (11%), Dari (5%), Albanian and Ukrainian (2%), Farsi, Russian, Tigrinya and Chin (1%)
- Children ages 0-17, All socioeconomic categories

Anticipated Number of Clients to be Served: 110

Number of Staff Required to Implement Program: 6

Steps to Ensure Program Continuity if Staff Vacancies Occur:

 As an after-school prevention program, students build relationships with all staff and often move between teachers as appropriate. When needed, staff can increase their capacity with the support of community volunteers and mentors. When max capacity is reached, a waiting list is established.

Funding Priority:

Prevention

Program Goals:

- Attend minimum of program events (>50%)
- Demonstrate at least one refusal skill
- Delay onset of first substance use
- Pledge to refrain from AOD use
- Parents demonstrate positive communication skills

Program Metrics:

- Tracking students' program attendance: Students are to attend more than 50% of all program events
- Post-assessments: Students complete assessment demonstrating at least one strategy of saying 'no'
- Self-report surveys: Anonymous slip self-reporting whether they have used alcohol, tobacco or other drugs
- 30-Day Pledges: Students sign 30-day pledges to refrain from using harmful substances to empower themselves and their community
- Post-assessments: Completes situational questionnaire to determine appropriate methods to communicate with youth (in primary language)

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 65
- ADAMHS Funded Unduplicated Clients Served: 60
- Total Number of Clients Served: 60
- Total Number of Clients that Completed this Program/Service: 0

Average Cost Per Client: \$590.50

Additional Information:

As COVID restrictions loosened, staff were able to serve more students in a space and as a result
increased enrollment. However, staff numbers have stayed the same. Agency services are often
requested for Cleveland residents, but Asian Services in Action (ASIA) does not have the staff to
provide additional programming sites. The program has had increased attendance from
newcomer students originating from western European countries attending Lakewood schools
that seek culturally sensitive and English language focused academic support.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 150
- ADAMHS Funded Unduplicated Clients Served: 93
- Total Number of Clients that were Served: 93
- Total Number of Clients that Completed this Program/Service: 91

Goals Met:

- Attend minimum of program events (>50%)
- Students demonstrates refusal skills
- Students delay onset of first substance use
- Students pledge to refrain from AOD use

Metrics Used to Determine Success:

- Tracking students' program attendance: Students attend more than 50% of all program events
- Post-assessments: Students complete assessment demonstrating three different methods of saying 'no'
- Self-report surveys: Anonymous slip self-reporting whether they have used alcohol, tobacco or other drugs
- 30-Day pledges: Students sign 30-day pledges to refrain from using harmful substances to empower themselves and their community
- Completed assignments: Parents have tracking cards to record and reward and consequences applied for their child's behavior (in primary language and translated)

Program Successes:

- Over 80% of students attended more than 50% of program events
- Over 90% of students were able to demonstrate three different methods of refusal
- 100% of students who completed the evaluation self-reported delayed onset of substance use
- Over 96% of regularly attending students completed the 30-Day pledge

Average Cost Per Client in CY21: \$924

Additional Information:

 Due to COVID, parenting program classes in Burmese, Karen and Nepali languages have been on hiatus since 2020.

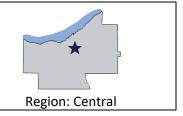
- ASIA was able to expand to a second program location this year in partnership with Lakewood
 City Schools, providing two-days-per-week of after school programming to 30 English Language
 Learners at Lakewood High School. Lakewood City Schools hires and supports the ASIA program
 by providing school space for programming to happen in a familiar location for families as well as
 financially providing for a Lakewood TESOL (Teaching English as a Second or Other Language)
 certified teacher to work the ASIA after school programming.
- ASIA also hosted the first in-person summer camp for four weeks at Roosevelt Elementary since COVID, partnering with Catholic Diocese of Cleveland to provide free meals and offering volunteering and youth internship opportunities to build leadership in ELL youth.
- Half of the ASIA staff are bilingual and able to communicate with limited English proficient families to advocate for students' wellbeing and education, including connecting them to community resources.

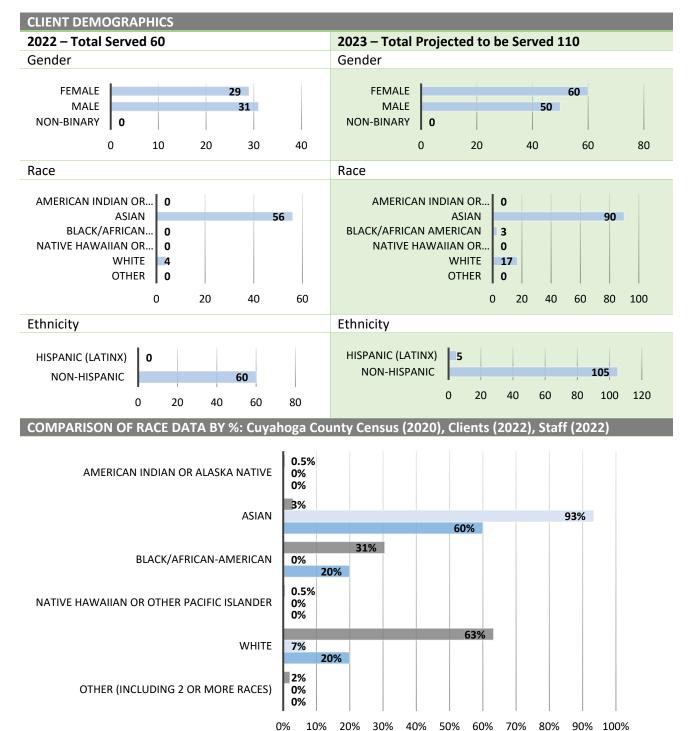
Focus on Diversity: Asian Services in Action (ASIA)

Program(s): West-Community Adult Mentoring Program

$\label{lem:constraint} \textbf{Diversity, Equity and Inclusion STRENGTH from program proposal:}$

The program primarily serves low-income, limited English proficient (LEP), immigrant and refugee students and their families. It has tailored its curriculum and programming to meet the cultural and linguistic needs of the target population.

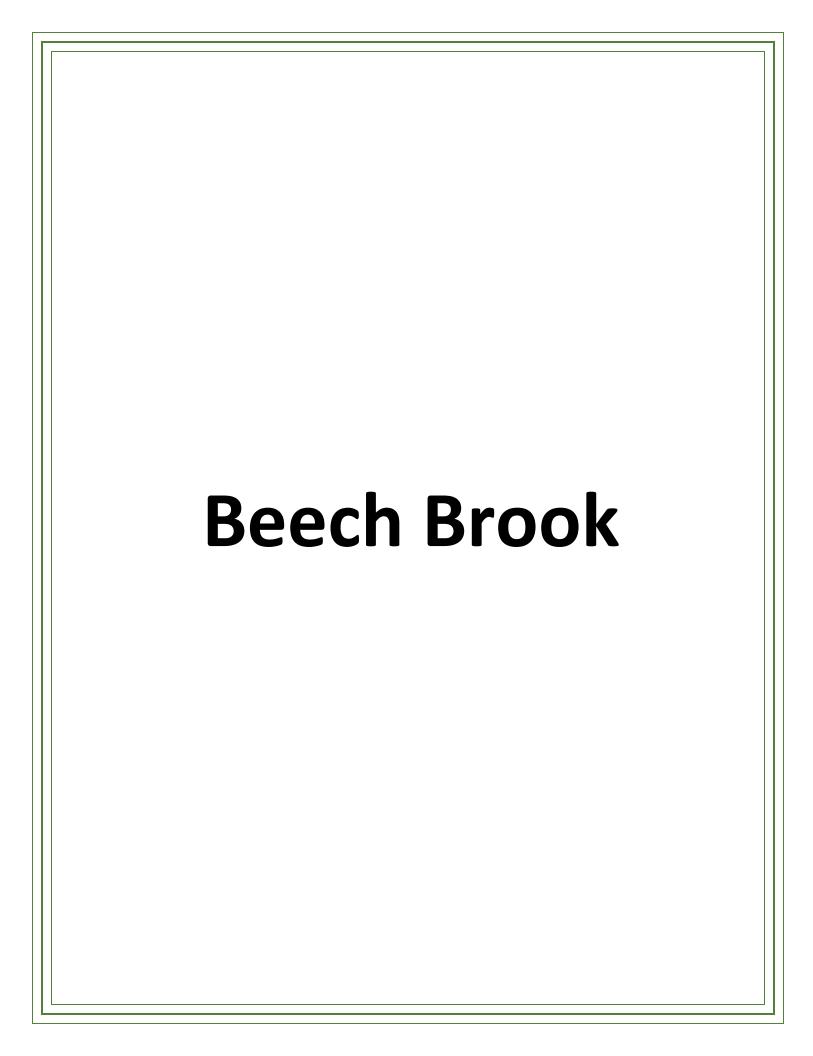




Note: These are the best estimates based on available information. Figures may be estimated or rounded, and may not equal 100%.

■ Clients (2022)
■ Staff (2022)

■ Census (2020)



CY2023 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program		2022 FINAL CONTRACT AMOUNT		2023 CONTRACT ECOMMENDATIONS	PRIORITY
Beech Brook					
School Based Prevention	\$	112,500	\$	153,403	Prevention
Early Childhood Mental Health**	\$	-	\$	-	Prevention
Total	\$	112,500	\$	153,403	

^{**} ECMH Providers Pooled Funding

Beech Brook

Beech Brook is a behavioral health agency that serves children, adolescents and transitional aged youth at risk in Northeast Ohio through a continuum of outpatient services.

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

School Based Consultation Services

Supervisors, licensed therapists and Qualified Mental Health Specialists have been trained to implement the Ohio Consultation Model in the Cleveland Metropolitan School District and adjoining suburban cities in Cuyahoga County. Services include mental health education to teachers and school administrators, consultation on individual student needs, prevention groups, parent support and linkage to resources. In addition, Beech Brook staff work to bridge the gap between parent and school communication issues, facilitate referrals from school staff and parents, meet face-to-face with children and work as a liaison between school and other providers.

Target Population:

- The target population is students in Cuyahoga County (K-12), school professionals and their families.
- The districts served range in demographic measures from North Olmsted at a 7.7% minority population to Cleveland at 80% and Warrensville Heights at 90%. The largest minority population in each of the districts is African American from North Olmsted at 4.7%, Cleveland at 64% and Warrensville Heights at 90%.
- All ages, All socioeconomic categories.

Anticipated Number of Clients to be Served: 3,500

Number of Staff Required to Implement Program: 52

Steps to Ensure Program Continuity if Staff Vacancies Occur:

 Management would cover additional duties if/when vacancies occur and additional support cannot be identified.

Funding Priority:

Prevention

Program Goals:

- Increase services for students and reduce or eliminate barriers that can prevent students and families from accessing needed services for challenging issues.
- Ensure school personnel, parents and students are educated about mental health issues and how they can impact the functioning of youth in academic, community and home settings, and introduce skills to manage mental health issues before there is a need for treatment.
- Students, parents, teachers and administrators are provided with strategies to assist in improving social and emotional functioning in eight areas of social emotional competencies: self-awareness, self-management, social awareness, relationship skills and goal directed.

Program Metrics:

 Comparison of pre- and post- DESSA-Mini scores for students receiving ongoing consultation services

- Satisfaction surveys collected from teachers and non-teaching staff at the end of the school year
- Number of students moving from consultation to treatment. While it is not a measure of success,
 it is an important measure of how consultation services allow Beech Brook school-based staff to
 identify and treat students requiring more intensive services.

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 3,500
- ADAMHS Funded Unduplicated Clients Served: 467
- Total Number of Clients Served: 1,742
- Total Number of Clients that Completed this Program/Service: 0

Average Cost Per Client: \$983

Additional Information:

- Unduplicated Counts: 467 individual students, 182 parent/guardians, 203 at presentations, 323 through groups and 620 school staff.
- Total Services Provided (duplicated) by Type of Group Served: Anger Management 82, Anxiety 25, Behavioral Interventions 142, Bully Prevention 97, Classroom Management 355, Community Resources 28, Coping Skills 204, Crisis Interventions 282, De-Escalation Techniques 91, Depression/Mood 22, Interventions modeling 28, Mental Health Education 94, Parent Support 37, Prevention Group 53, Problem Solving meeting 164, Refer for Services 141, Social Skills 74, Other 253; Total Services Provided 2,172. Type of Services: 32 Individual HS Student, 716 Individual K-8 Student, 186 Parent/Guardian, 203 Presentation; 326 Prevention Group, 709 School Staff
- Total by Type of Services: 2,172.
- Demographic information is difficult to collect due to the nature of the service as teachers. Other
 school staff and guardians can receive consultation. Additionally, consultation services are used
 for crisis support and demographic information is not easy to collect. When considering only the
 individual youth that received individualized consultation support, 223 youth received one
 contact intervention and 244 youth received ongoing consultation services.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 3,000
- ADAMHS Funded Unduplicated Clients Served: 3,925
- Total Number of Clients that were Served: 5,356
- Total Number of Clients that Completed this Program/Service: 219

Goals Met:

- Increase services for students: Reduce or eliminate barriers that can prevent students and families from accessing needed services.
- Ensure school administration, parents and youth are equipped with the skills to manage without treatment services unless warranted.
- Students, parents, teachers and administrators are provided with strategies to assist in improving social and emotional functioning.

Metrics Used to Determine Success:

Number of students, school staff and parents served. Satisfaction surveys collected from teachers
and non-teaching staff at the end of the school year. Comparison of pre- and post- DESSA scores
for students receiving ongoing consultation services.

Program Successes:

- 3,925 total people were served during CY 2021. 807 individual students; 676 parent/guardians; 870 at presentations; 154 through groups; 1,418 school staff.
- Of the 807 individual students served, 219 of them received more than 1 consultation service.
- Overall, the number of satisfaction surveys completed this past school year was much lower than typical. Satisfaction scores also were lower overall than in previous years. For 219 youth receiving pre and post DESSA-mini ratings, there was a statistically significant increase in DESSA scores, from 43.63 to 47.94 (N=125 pairs).

Average Cost Per Client in CY21: \$1,490

Additional Information:

- Among the group number served with ADAMHS Board funding, there were 14 anger management; 3 anxiety; 16 girls' groups; 9 boys' groups; 41 coping skills and 14 social skills.
- The total served in ongoing groups were 100.
- The types of services were: 124 individual high school students; 1,036 individual K-8 students; 709 parents and/or guardians; 872 presentation; 507 prevention group; 1,548 school staff, for a total of 4,796.
- Number served in terms of grouping: 2,422 adults (parent or teacher); 205 high school students; 1,877 K-8 students and 287 mixed group.

		2021 First Outcome		2022 First Outcome	
Provider:	Beech Brook	Count:	47	Count:	34
		2021 Final Outcome		2022 Final Outcome	
Instrument:	e-DECA	Count:	47	Count:	34
Program:	Early Childhood Mental Health	2021 % of Final:	100%	2022 % of Final:	100%

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.

			First	Final		
	Evaluation		Outcome	Outcome	Average	
Population	Year	SubScale	Average	Average	Difference	Significance
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
Toddler (18-36 months)	2021	AT- Attachment	35.33	40	4.67	Not Significant
Toddler (18-36 months)	2021	IN- Initiative	44	44		Not Significant
Toddler (18-36 months)	2021	SC- Self Regulation	38	37.67	-0.33	Not Significant
Toddler (18-36 months)	2021	TPF- Total Protective Factors	37.67	39	1.33	Not Significant
Child (2 - 5 years)	2021	AG- Aggression	63.4	60.51	-2.89	Not Significant
Child (2 - 5 years)	2021	AP- Attention Problems	67.47	65.34	-2.13	Not Significant
Child (2 - 5 years)	2021	AT- Attachment	48.06	49.6	1.53	Not Significant
Child (2 - 5 years)	2021	ECP- Emotional Control Problems	67.96	65.45	-2.51	Not Significant
Child (2 - 5 years)	2021	IN- Initiative	49.06	50.19	1.13	Not Significant
Child (2 - 5 years)	2021	SC- Self Regulation	36.19	40.09	3.89	Significant at p<.05
Child (2 - 5 years)	2021	TBC- Total Behavioral Concerns	68.15	64.91	-3.23	Significant at p<.05
Child (2 - 5 years)	2021	TPF- Total Protective Factors	42.3	44.72	2.43	Not Significant
Child (2 - 5 years)	2021	WD- Withdrawal/Depression	56.89	52.83	-4.06	Significant at p<.05

Infant (1-18 months)	2022	AT- Attachment				Not Significant
Infant (1-18 months)	2022	IN- Initiative				Not Significant
Toddler (18-36 months)	2022	TPF- Total Protective Factors	48	44	-4	Not Significant
Child (2 - 5 years)	2022	WD- Withdrawal/Depression	54.03	51.97	-2.06	Not Significant
Infant (1-18 months)	2022	TPF- Total Protective Factors				Not Significant
Toddler (18-36 months)	2022	AT- Attachment	44	37	-7	Not Significant
Toddler (18-36 months)	2022	IN- Initiative	53	51	-2	Not Significant
Toddler (18-36 months)	2022	SC- Self Regulation	47	47		Not Significant
Child (2 - 5 years)	2022	AG- Aggression	59.56	57.53	-2.03	Not Significant
Child (2 - 5 years)	2022	AP- Attention Problems	61.65	60	-1.65	Not Significant
Child (2 - 5 years)	2022	AT- Attachment	49.06	51.53	2.47	Not Significant
Child (2 - 5 years)	2022	ECP- Emotional Control Problems	64.59	63.18	-1.41	Not Significant
Child (2 - 5 years)	2022	IN- Initiative	48.18	52.68	4.5	Significant at p<.05
Child (2 - 5 years)	2022	SC- Self Regulation	41.65	44.56	2.91	Not Significant
Child (2 - 5 years)	2022	TBC- Total Behavioral Concerns	62.68	60.71	-1.97	Not Significant
Child (2 - 5 years)	2022	TPF- Total Protective Factors	44.62	48.65	4.03	Significant at p<.05

		2021 First Outcome		2022 First Outcome	
Provider:	Beech Brook	Count:	126	Count:	18
		2021 Final Outcome		2022 Final Outcome	
Instrument:	DESSA MINI	Count:	126	Count:	18
Program:	Youth Prevention	2021 % of Final:	100%	2022 % of Final:	100%

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

			First	Final		
	Evaluation		Outcome	Outcome	Average	
Population	Year	SubScale	Average	Average	Difference	Significance
Grades K - 8	2021	No Scale	42.62	47.37	4.75	Significant at p<.05
Grades 9 - 12	2021	No Scale	44.43	42.57	-1.86	Not Significant
Grades K - 8	2022	No Scale	44.26	46.40	2.14	Not Significant
Grades 9 - 12	2022	No Scale				Not Significant

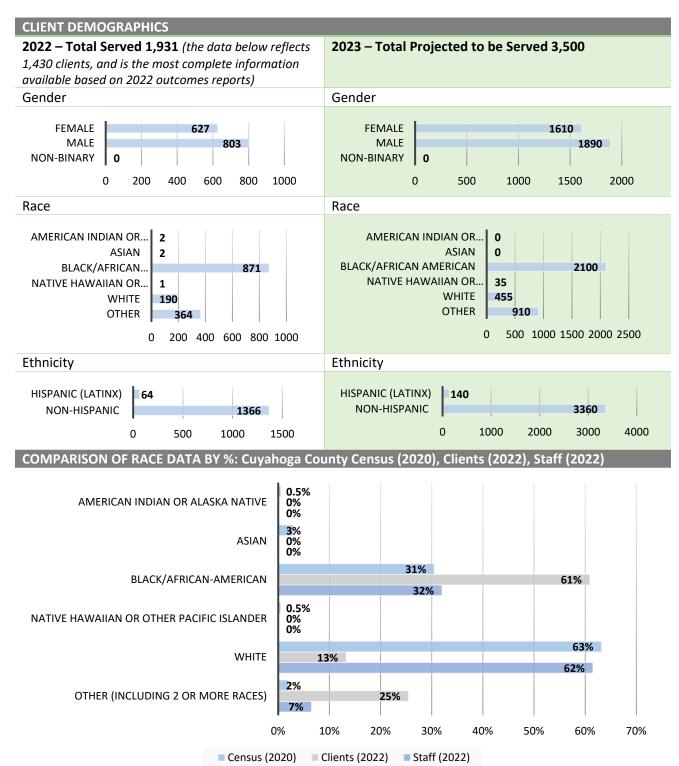
Focus on Diversity: Beech Brook

Program(s): School Based Consultation Services

Diversity, Equity and Inclusion STRENGTH from program proposal:

The agency has a policy or polices related to non-discrimination, equal employment opportunity, and/or harassment based on protected categories of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), language, disability, marital status, sexual orientation, or military status.





Note: These are the best estimates based on available information. Figures may be estimated or rounded, and may not equal 100%.



CY2023 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program		2022 FINAL CONTRACT AMOUNT		2023 CONTRACT RECOMMENDATIONS	PRIORITY
Bellefaire JCB					
Residential Treatment Crisis Beds	\$	1,422,069	\$	1,801,275	Crisis
Mobile Autism Intervention Team & Beds	\$	144,000	\$	-	Crisis
School Based Prevention	\$	76,500	\$	153,000	Prevention
Social Advocates for Youth (SAY)	\$	35,000	\$	78,253	Prevention
Total	\$	1,677,569	\$	2,032,528	

Bellefaire JCB

Founded as an orphanage in 1868, Bellefaire Jewish Children's Bureau has evolved into one of the nation's leading providers and innovators of wellness, advocacy and behavioral healthcare for children, youth and their families.

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

Residential Treatment Crisis Stabilization Beds

Bellefaire's crisis stabilization beds, located within the agency's safe and secure, highly supervised and supportive co-ed residential treatment environment (ITU and SCCU), provide a 24-hours per day, 7-days per week emergency service for at-risk children and youth, ages 8-17, who are experiencing a mental health, behavioral or co-occurring substance abuse crisis. Offering needs-driven, flexible stays ranging from 24 hours to 30 days, the program diverts youth from emergency departments and psychiatric hospitalization for stabilization, assessment and intensive therapeutic intervention.

An initial psychiatric evaluation and stabilization needs assessment guides the child's stay, with each client receiving a risk assessment and diagnosis, crisis intervention and stabilization and medication assessment. Discharge planning begins at admission in cooperation with the child's placing agency to move children as appropriate to less restrictive levels of care as their condition improves, with wraparound care coordination connecting children and families to needed mental health services (e.g. in-home and outpatient therapy) and other identified supports to maintain stability and decrease the likelihood of readmission due to relapse.

During crisis beds stays, care and individualized, short-term therapeutic services are provided around the clock by a multidisciplinary treatment team that includes dually trained and licensed mental health/SUD clinicians, child and adolescent psychiatrists, psychologists, social workers, counselors, registered nurses, licensed clinicians and childcare workers. The crisis bed program maintains small staff to client ratios that support intensive intervention while managing the safety and supervision of children in crisis.

Within any level of residential treatment, Bellefaire treats the most vulnerable and at-risk youth via evidence-based models and therapeutic techniques that include Cognitive Behavioral Therapy, Dialectical Behavior Therapy and Collaborative Problem-Solving. Crisis stabilization clients may also be referred to residential services, which are provided in all units, and include individual and group therapy, partial hospitalization, psychological and psychiatric evaluation, medication management, and chemical dependency assessment and treatment. Nursing and routine medical care are provided on campus, with a Nurse, Psychiatrist, Pediatrician and program supervisors available and/or on-call 24-hours per day, 7-days per week.

Target Population:

- At-risk children, youth and families who often are amongst Cuyahoga County's most under-served populations. Many residential clients are involved in the child welfare and juvenile justice systems, have been in and out of foster homes, and often do not have a stable, caring adult in their lives.
- Children ages 13-17, All socioeconomic categories.

Anticipated Number of Clients to be Served: 75

Number of Staff Required to Implement Program: 25

Steps to Ensure Program Continuity if Staff Vacancies Occur:

 Via supervisors, directors and trained clinical staff from other divisions, Bellefaire ensures that services are maintained while the Human Resources Division works to recruit, hire and onboard new staff.

Funding Priority:

Crisis Services

Program Goals:

- Youth return home to their parent/guardian
- Fewer risk behaviors
- Improved behavioral and emotional symptoms
- Improved life domain functioning
- Improved caregiver resources

Program Metrics:

- Client Data
- Crisis Assessment Tool (CAT)

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 40
- ADAMHS Funded Unduplicated Clients Served: 22
- Total Number of Clients Served: 22
- Total Number of Clients that Completed this Program/Service: 16

Average Cost Per Client: \$688.75

Additional Information: N/A

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 46
- ADAMHS Funded Unduplicated Clients Served: 59
- Total Number of Clients that were Served: 59
- Total Number of Clients that Completed this Program/Service: 54

Goals Met:

• Return home to their parent/guardian, fewer risk behaviors, improved behavioral and emotional symptoms, improved life domain functioning and improved caregiver resources.

Metrics Used to Determine Success:

- 50% return home to their parent/guardian on CAT form
- 50% have fewer risk behaviors on CAT form

- 50% improved behavioral and emotional symptoms on CAT form
- 50% improved life domain functioning on CAT form
- 50% improved caregiver resources on CAT form

Program Successes:

 65% returned home, 81% demonstrated few risk behaviors, 81% demonstrated improved behavioral and emotional symptoms, 57% demonstrated improved life domain functioning and 52% demonstrated improved caregiver resources.

Average Cost Per Client in CY21: \$615.37

Additional Information:

COVID has led to significant staffing shortages to an extent that the agency has never seen. The
agency increased salaries and sign-on bonuses but continues to struggle to onboard staff fast
enough to fill the level of open vacancies.

SAY (Social Advocates for Youth) School Based Prevention

SAY school-based prevention program was developed to reduce teenager's use of alcohol and other drugs; support teens, families and schools through the difficulties of adolescence; and decrease social and behavioral health problems such as teen violence, depression and suicide. Services are built upon evidence-based principles of prevention and are provided directly in students' natural school environments to bolster engagement while minimizing stigmas.

SAY currently uses ADAMHS Board funding to provide:

- Education via small psycho-education groups to identified/referred students, consultation
 with school staff/teachers and parents, and classroom education on topics that meet
 school/teacher needs
- 2. Alternatives Activities, which are structured, positive prevention activities such as afterschool SAY clubs and the Student Leadership Council
- 3. Information Dissemination via SAY's prevention newsletter, which is sent to 750 individuals

SAY counselors use the "problem identification and referral" technique to determine if a student has a substance abuse or mental health issue and whenever possible to identify and help the most at-risk youth before problems grow complex. If so, the counselor works with the teen to build protective factors and reduce risks, while referring and linking the student and caregiver to a long-term service provider who accepts their insurance/Medicaid. SAY supports and monitors the student until the transfer to the provider is established.

SAY's prevention services have proven successful in empowering teens with the skills to effectively manage conflicts, solve problems, minimize risks, develop healthy peer relationships and pro-social activities, and maintain positive, trusted connections with a parent or other adult, the primary protective factor for youth. Through SAY's efforts, teens, families and schoolteachers and staff learn to recognize the early warning signs of mental health and risky behaviors in youth, which is critical to preventing problems and crises from occurring.

Target Population:

- SAY serves a diverse group of middle and high school students in seven eastern suburban school districts: Beachwood, Chagrin Falls, Cleveland Heights/University Heights, Mayfield, Orange, Shaker Heights and Solon. ADAMHS Board funds are utilized in all districts but Chagrin Falls.
- Children ages 13-17 from all socioeconomic categories.

Anticipated Number of Clients to be Served: 6,350

Number of Staff Required to Implement Program: 11

Steps to Ensure Program Continuity if Staff Vacancies Occur:

• Staff vacancies will be covered by other SAY counselors or supervisors while the program and Human Resources works to hire and train new staff.

Funding Priority:

Prevention

Program Goals:

- Improved communication skills
- Enhanced leadership skills
- Increased self-confidence
- Improved positive coping skills
- Improved problem-solving skills

Program Metrics:

• In-house developed surveys, which students complete by Survey Monkey or hard copy. Staff utilize to measure program effectiveness and satisfaction.

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 250
- ADAMHS Funded Unduplicated Clients Served: 466
- Total Number of Clients Served: 4,263
- Total Number of Clients that Completed this Program/Service: 0

Average Cost Per Client: \$1.17

Additional Information:

• With grant funding through FCFC, Bellefaire brought prevention education to six districts (three of which are outside their usual districts) at both the elementary and high school levels. They reached approximately 2,900 individuals. Outcome data, as generated by Case Western Reserve University, is very positive with all responses being 80% or higher. These numbers were not included in the outcomes provided earlier in this report as they were evaluated differently. Many students in this program are seen for problem identification and referral. Staff assess students for safety and mental health needs and provide support, coping skills, and/or referrals as needed.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 1,420
- ADAMHS Funded Unduplicated Clients Served: 2,373
- Total Number of Clients that were Served: 3,453
- Total Number of Clients that Completed this Program/Service: 0

Goals Met:

- Alternatives: Reports satisfaction
- Summer Leadership: Demonstrates leadership skills and positive communication and reports satisfaction
- Classroom Presentations: Reports satisfaction and increased self-confidence

Metrics Used to Determine Success:

• All goals are measured via self-report surveys.

Program Successes:

- Psychoeducation Groups
 - Demonstrate positive coping skills 16
 - o Demonstrate problem solving skills 41
 - o Reports satisfaction with psychoeducation group 29
- Alternatives
 - o Demonstrates positive communication skills 38
 - Demonstrates leadership skills 41
 - o Reports satisfaction 50
- Summer Leadership
 - Demonstrates leadership skills 15
 - Demonstrates positive communication skills 17
 - o Reports Satisfaction 17
- Classroom Presentations
 - o Reports satisfaction 1,181
 - Reports increased self-confidence 1,194

Average Cost Per Client in CY21: \$14.75

Additional Information:

• ADAMHS Board funding only covers a small portion of SAY services. These services have been provided to the same school districts for 22 years. Most of this is funded by other sources. SAY school districts routinely request an increase in services. The ADAMHS Board currently reimburses for Education, Alternatives and Information Dissemination. SAY also provides Problem Identification and Referral in seven districts at no cost to the student, family or district. These services are costly as they are provided on an individual basis. They are also very necessary as they provide support and referrals to students who are identified as being at the highest risk.

School Based Prevention

Bellefaire's Master's level, licensed School-Based Counseling (SBC) staff provide expert prevention and consultation services to at-risk children (pre-K through grade 12), and to their caregivers and school administrators and staff in 54 schools throughout Cuyahoga County to reduce barriers to learning and provide intervention at the earliest opportunity. The ADAMHS Board dollars are available for students who need mental health services, but do not have a means to pay for it such as insurance/Medicaid. Additionally, ADAMHS Board funding covers services that are vital but not covered by insurance, such as student prevention groups, as well as seminars and trainings for parents/guardians and school faculty/staff that focus on relevant mental health wellness and prevention topics.

Bellefaire's school-based prevention programs run for eight to 12 sessions, while short-term child and family consultation services utilize the Ohio/Georgetown Consultation Model and are client-specific and dependent upon individual needs, client profile and problem intensity. Services are delivered year-round in the comfortable and familiar environment of students' schools and homes, as needed, to minimize obstacles to care and bolster client engagement.

Collaborating with school administration, faculty and staff, as well as parents, SBC counselors identify the unique mental health needs of students and address them in individual and group settings. With children and youth presenting with significantly higher levels of acuity, Bellefaire understands the significant need for services to help students prevent and overcome a wide range of issues including but not limited to trauma, depression, anxiety, self-harm, suicide ideation, oppositional behaviors and aggression, grief and loss, family issues/dysfunction, school-related challenges such as bullying or attention deficit problems, substance use, involvement with the juvenile justice or child welfare systems and difficulties coping with effects of the pandemic.

Bellefaire's school-based counselors work with students to increase their resiliency and protective factors so that they are able to achieve wellness, stability and short- and long-term success. For instance, services assist children and youth in building self-esteem, improving communication, problem solving, coping skills and conflict resolution; identifying healthy peer relationships and prosocial activities; and recognizing positive and negative emotions.

Target Population:

- Students in pre-K through grade 12 in the 54 Cuyahoga County schools the program serves, including Cleveland, East Cleveland, Lakewood, Shaker Heights, Mayfield, Constellation LLC, South Euclid/Lyndhurst, Euclid, Charter schools, and E Prep and Village Prep schools.
- SBC clients come from some of the communities' most at-risk families, who are especially
 vulnerable to multiple risk factors including but not limited to low birth weight, infant mortality,
 high dropout rates, housing insecurity, homelessness, discrimination, violence and chronic
 poverty.
- Children ages 0-17 from all socioeconomic categories

Anticipated Number of Clients to be Served: 2,500

Number of Staff Required to Implement Program: 2

Steps to Ensure Program Continuity if Staff Vacancies Occur:

 Bellefaire will utilize its full roster of 29 School-Based therapists, as well as supervisors, directors and other clinical staff, as needed, to cover staff vacancies while working with Human Resources to recruit, hire and train new staff.

Funding Priority:

Prevention

Program Goals:

- Increased academic performance and in-school time
- Decreased suspension and expulsion rate
- Improved self-control and understanding and recognition of emotions
- Increased ability to tolerate frustration via the use of effective conflict resolution strategies
- Decreased anxiety and depressive symptoms and decreased mental and behavioral health crisis symptoms

Program Metrics:

 Ohio Scales and DESSA for outcomes and school attendance records, teacher reports, student/family self-reports and data

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 1,000
- ADAMHS Funded Unduplicated Clients Served: 648
- Total Number of Clients Served: 1,195
- Total Number of Clients that Completed this Program/Service: 1,136

Average Cost Per Client: \$204.00

Additional Information: N/A

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 2,500
- ADAMHS Funded Unduplicated Clients Served: 1,927
- Total Number of Clients that were Served: 3,071
- Total Number of Clients that Completed this Program/Service: 2,917

Goals Met:

Increase social emotional strength and competencies and decrease risk factors.

Metrics Used to Determine Success:

DESSA

Program Successes:

- Mini DESSA1 showed:
 - 24% of students in the "need" range
 - o 67% in the "typical" range
 - o 9% in the "strength" range
- Mini DESSA3 showed:
 - 20% of students in the "need" range
 - o 70% in the "typical" range
 - 10% in the "strength" range

Average Cost Per Client in CY21: \$204

Additional Information:

• Due to a lack of applicants and the inability to pay people what they are asking for, Bellefaire's school-based program is the smallest that it has been in years. Additionally, the development of other school-based programs (i.e., Say Yes) that pay far more than community mental health agencies is impacting hiring.

		2021 First Outcome		2022 First Outcome	
Provider:	Bellefaire JCB	Count:	14	Count:	50
		2021 Final Outcome		2022 Final Outcome	
Instrument:	DESSA MINI	Count:	14	Count:	50
Program:	Youth Prevention	2021 % of Final:	100%	2022 % of Final:	100%

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

			First	Final		
	Evaluation		Outcome	Outcome	Average	
Population	Year	SubScale	Average	Average	Difference	Significance
Grades K - 8	2021	No Scale	47.11	47.89	0.78	Not Significant
Grades 9 - 12	2021	No Scale	46.40	50.60	4.20	Not Significant
Grades K - 8	2022	No Scale	46.83	49.73	2.90	Significant at p<.05
Grades 9 - 12	2022	No Scale	48.33	52.11	3.78	Not Significant

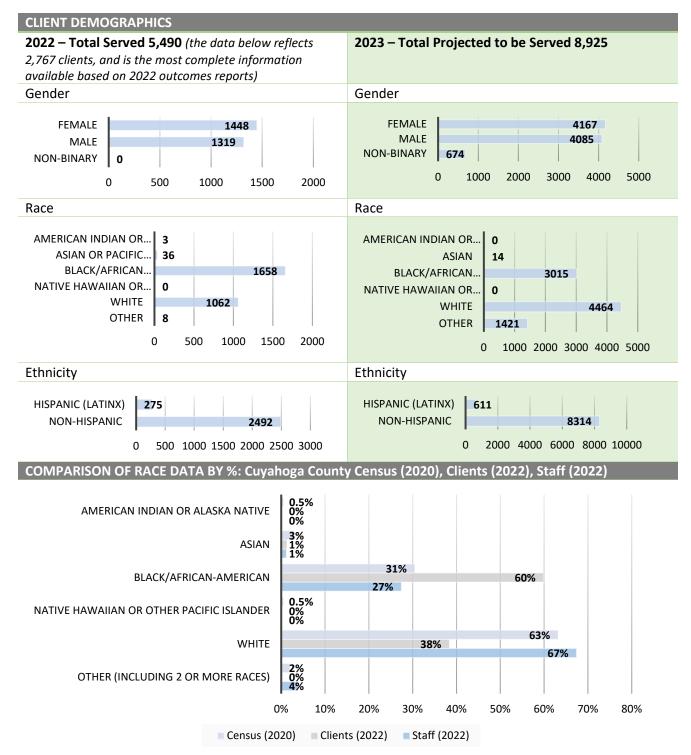
Focus on Diversity: Bellefaire JCB

Program(s): Residential Treatment Crisis Stabilization Beds; SAY (Social Advocates for Youth) School Based Prevention; School-Based Prevention

Diversity, Equity and Inclusion STRENGTH from program proposal:

The Wingspan Care Group notes they are "committed to delivering Behavioral & Primary Healthcare, Education, Prevention, Social Services and Advocacy in order to enhance the emotional, physical and intellectual wellbeing of the children, youth and family members of our community."





Note: These are the best estimates based on available information. Figures may be estimated or rounded, and may not equal 100%.



CY2023 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2022 FINAL CONTRACT AMOUNT	2023 CONTRACT RECOMMENDATIONS	PRIORITY
Birthing Beautiful Communities			
Our Wellness Network	\$ -	\$ 80,000	Removing Barriers
Total	\$ -	\$ 80,000	

Birthing Beautiful Communities

Birthing Beautiful Communities (BBC) was formed in 2014 by African American trained Perinatal Support Person (PSP) in the Glenville neighborhood. Since its inception, the organization has served as an agency for training, certifying and employing PSPs who provide services for the women at highest risk for infant death. BBC's grassroots and culturally centered model improves infant health, strengthens families, and establishes support to ensure ongoing family success.

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

Our Wellness Network

Birthing Beautiful Communities' Our Wellness Network began with Grief Recovery Method workshops. However, what has become clear is that clients need individual counseling, either before or after their GRM classes. Many of the therapists in the network do not take insurance, which causes a major barrier for clients. Additionally, clients are often in an immediate crisis when they are reaching out to BBC for mental and/or behavioral health support. As such, the agency has decided to hire a full-time licensed therapist who can provide immediate and ongoing support to clients in need.

Structural racism causes significant inequities in the diagnosis of perinatal and maternal mental health disorders and access to perinatal and maternal mental health treatment. Black birthing populations are particularly burdened by disjointed systems of care for mental health. To identify strategies to address racism and inequities in maternal and infant mental health care, the agency is going to employ a full-time mental health professional to support this client base. This role will support the Grief Recovery Method specialists.

Our Wellness Network (OWN) is a community-driven network established in 2020 to address the gaps in mental health services and support for the Black community. OWN provides awareness, support, and hope to those who are pregnant, new parents, or have experienced miscarriage, stillbirth, or the death of a baby before age one. OWN is comprised of 35 African American therapists and lay leaders who have been vetted and certified in the Grief Recovery Method (GRM). The Grief Recovery Method is an evidence-based and action-based program that assists individuals in addressing current and previous losses, equips them with healthy coping skills, and empowers them to embrace their own personal healing journey. OWN and its focus on providing quality, culturally responsive grief recovery education and support are essential elements in improving maternal and infant health, and thus birth equity outcomes.

Target Population:

Adults ages 18-25, All socioeconomic categories

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:

• The organization will utilize the network of therapists that are part of Our Wellness Network, in the event of a staff vacancy.

Funding Priority:

Removing Barriers

Program Goals:

- Grow Black client and family participation in BBC birthing support services, education classes, and behavioral health therapy sessions (one-on-one or group)
- Enhance the infrastructure of OWN to deliver education, mental and emotional support services for in-person, healing circles, and/or virtual
- Develop and enhance each of OWN's pillars of service

Program Metrics:

- Promote BBC personnel and services where the community sees themselves within the "system" to help gain trust and reliance to mitigate issues.
- Enrich the OWN project by offering greater program and administrative support in working with African American individuals and families who experience loss and grief.
- Streamline treatment and coordinated referral systems for individuals who have experienced a loss or are newly pregnant or are new parents.

First Six Months of CY22 Provider Outcomes: N/A – New Program for CY23

Focus on Diversity: Birthing Beautiful Communities

Program(s): Our Wellness Network

Diversity, Equity and Inclusion STRENGTH from program proposal:

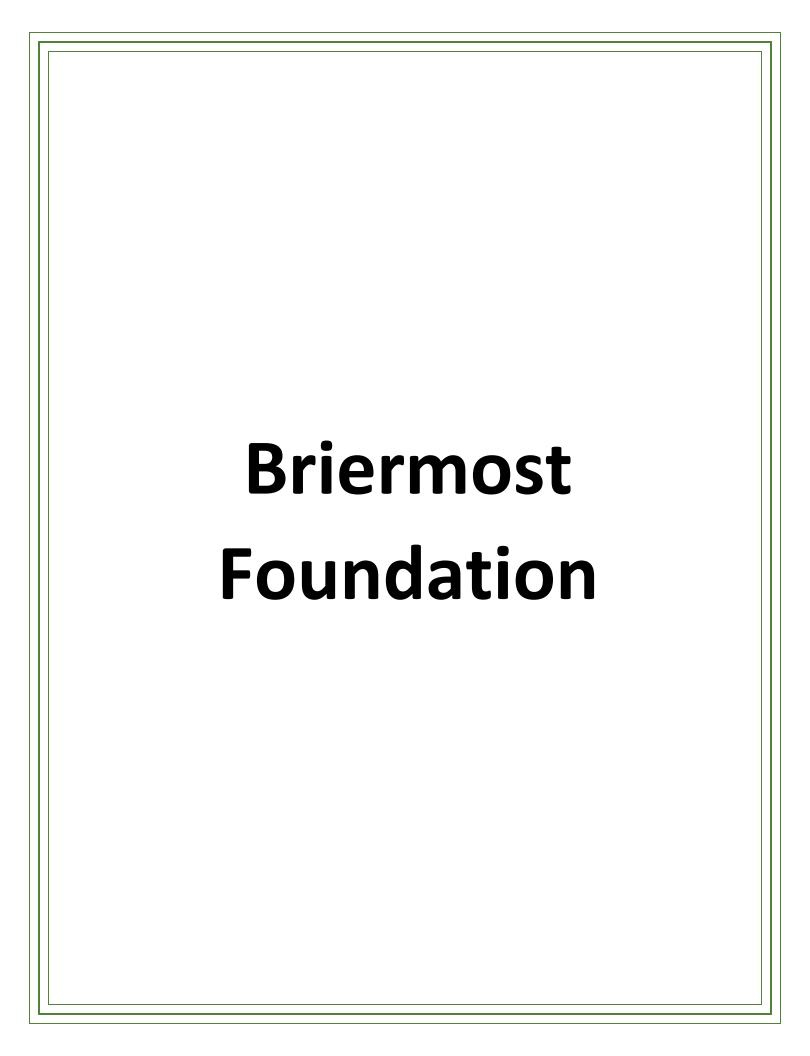
The program was established to address the gaps in mental health services and support for the Black community. Its focus is providing quality, culturally responsive grief recovery education and support for maternal and infant health.



CLIENT DEMOGRAPHICS	
2022	2023 – Total Projected to be Served 60
Gender	Gender
Program is new to the ADAMHS Board	FEMALE MALE NON-BINARY 0 10 20 30 40 50
Race	Race
Program is new to the ADAMHS Board	AMERICAN INDIAN OR ASIAN BLACK/AFRICAN AMERICAN NATIVE HAWAIIAN OR WHITE OTHER 0 0 20 40 60 80
Ethnicity	Ethnicity
Program is new to the ADAMHS Board	HISPANIC (LATINX) 0 60
	0 20 40 60 80
COMPARISON OF RACE DATA BY %: Cuyahoga Cou	nty Census (2020), Clients (2022), Staff (2022)

Program is new to the ADAMHS Board

Note: These are the best estimates based on available information. Figures may be estimated or rounded, and may not equal 100%.



CY2023 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2022 FINAL CONTRACT AMOUNT	2023 CONTRACT RECOMMENDATIONS	PRIORITY
Briermost Foundation			
Recovery Housing	\$ 47,883	\$ 100,000	Housing
Total	\$ 47,883	\$ 100,000	

The Briermost Foundation

The Briermost Foundation's mission is to provide safe, sober and supportive housing to women in recovery from drugs and alcohol and provide purpose in living through learning and training opportunities.

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

Quality Recovery housing and agriculture program

Briermost is committed to provide safe, sober, and supportive housing to women in recovery from drugs and alcohol and provide them with vocational and life-skills training. Staff have chosen this mission because many women do not have safe, stable, and supportive homes to return to after in-patient or detoxification treatment.

Staff currently operate three recovery homes and a small working farm, all in Cuyahoga County. The agency has been awarded capital funding for the purchase, renovation, and furnishing of an apartment building to serve women with children up to the age of 12. The apartment building will be operational within the next year to serve women who are diagnosed with substance use disorders (SUD) or dually diagnosed. The organization has served women effectively for more than five years. Staff provide long-term support to offer the best opportunity for participants to make the changes necessary to reach long-term recovery.

Each week, residents meet with the peer supporter to update individualized recovery plans. The resident chooses two or three goals, and together they develop action steps to take and identify barriers to overcome. The goals are approached from the perspective of SAMHSA's eight dimensions of wellness: emotional, physical, occupational, intellectual, financial, social, environmental, and spiritual. Every month, the resident completes a self-evaluation in each of these wellness areas, to gauge where she stands as a measure of what steps are needed to build her recovery capital.

Staff found that residents flourish with structure and support, each resident completes a weekly calendar to begin changing their life from chaotic to organized. The client lists all activities on their schedule, from meals to employment to fellowship activities. Residents are expected to complete service work in the recovery house, recovery community and greater community. People in early recovery have often been selfish, and as a result may struggle with guilt and shame. When a client gives back unselfishly to roommates, a recovery support group and the greater community, the resident begins to heal.

Residents of certified recovery homes such as Briermost are given the opportunity to build recovery capital, a collection of personal, social, environmental, and cultural resources that are critical to remission and recovery from alcohol and other drug disorders. Essentially, recovery capital is made up of the coping tools taught in recovery homes, tools which empower people to rebuild their lives. Recovery is the expectation.

Target Population:

- Adult women who have completed detoxification or inpatient or residential treatment and are stable on their mental health medications
- Some residents have been convicted of attempted arson or violent crimes due to substance use disorders
- Staff have experience working with members of the LGBTQ+ population and transgender women
- All socioeconomic categories

Anticipated Number of Clients to be Served: 50

Number of Staff Required to Implement Program: 7

Steps to Ensure Program Continuity if Staff Vacancies Occur:

The organization has peer supporters who fill-in when the house managers are on vacation.
 When there are vacancies, fill-in peer supporters fulfill the necessary duties of the recovery house until the agency can hire and train new staff. Additionally, the director and assistant housing director have filled in when necessary. Staff makes sure residents are always supported when living in the recovery homes.

Funding Priority:

High Quality Housing

Program Goals:

- 70% of residents maintaining sustained recovery
- 75% of residents engaged in employment or training program
- 90% of residents complying with probation or parole and no new criminal charges
- 90% of residents engaged in chosen pathway of recovery within the first 30 days
- 80% of residents reaching recovery plan goals

Program Metrics:

- Ohio Recovery housing outcomes tool
- Review of monthly recovery plans

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 20
- ADAMHS Funded Unduplicated Clients Served: 11
- Total Number of Clients Served: 30
- Total Number of Clients that Completed this Program/Service: 10

Average Cost Per Client: \$38.74

Additional Information:

Briermost provides quality recovery housing and residents are the priority.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 16
- ADAMHS Funded Unduplicated Clients Served: 26
- Total Number of Clients that were Served: 42
- Total Number of Clients that Completed this Program/Service: 28

Goals Met:

Sustained recovery: 70% maintaining recovery

- Engaged in employment or training program: 75% engaged
- Reduction in recidivism: 90% compliance with probation/parole and no new charges
- Engagement in chosen pathway to recovery within the first 30 days: 90% engaged
- Recovery plans: 80% compliance with reaching recovery plan goals

Metrics Used to Determine Success:

• Ohio Recovery Housing Outcomes tool and monthly review of recovery plans.

Program Successes:

- 82% maintaining recovery
- 88% engaged in training program or employed
- 100% compliance with probation and 0% recidivism
- 96% engaged in chosen pathway of recovery within 30 days
- 88% compliance with reaching goals on recovery plans

Average Cost Per Client in CY21: \$46.03

Additional Information:

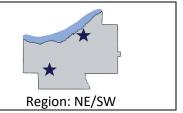
• Staff complete organizational evaluations quarterly, asking for resident feedback. Over the past year, residents continue to report they have received above average and excellent recovery housing support, with 98% marking excellent in the support area. Staff works to meet the needs of everyone on a daily basis. Staff are excited to provide quality recovery housing in 2023. One resident wrote, "I had nothing when I came, literally a garbage bag full of clothes. I moved in during the pandemic and was terrified. Over the past year, I have gone back to school, found a job, and will be graduating as an RN next year. I also get to see my son and daughter every other weekend. I have not seen them in four years. I am a mom again. Thanks to the support I received, I am able to love myself again. Thank you! Thank you!"

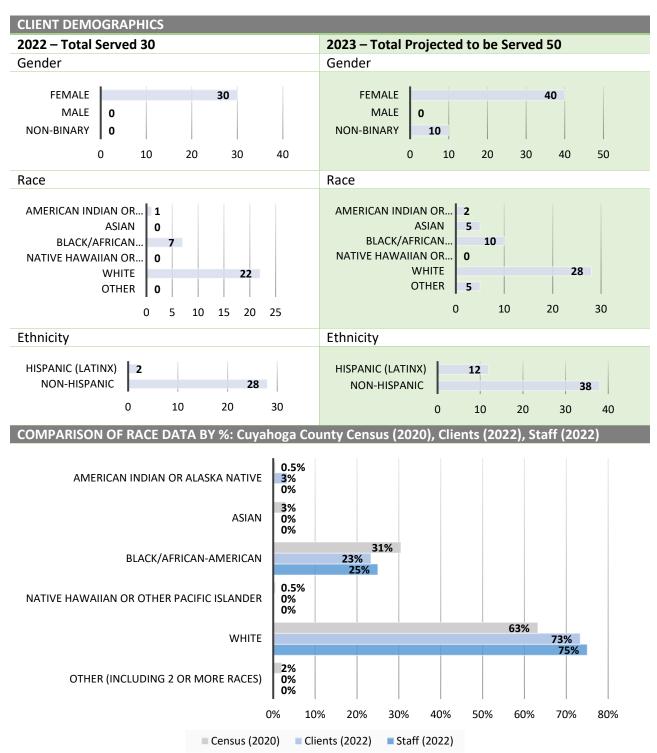
Focus on Diversity: The Briermost Foundation

Program(s): Quality Recovery housing and agriculture program

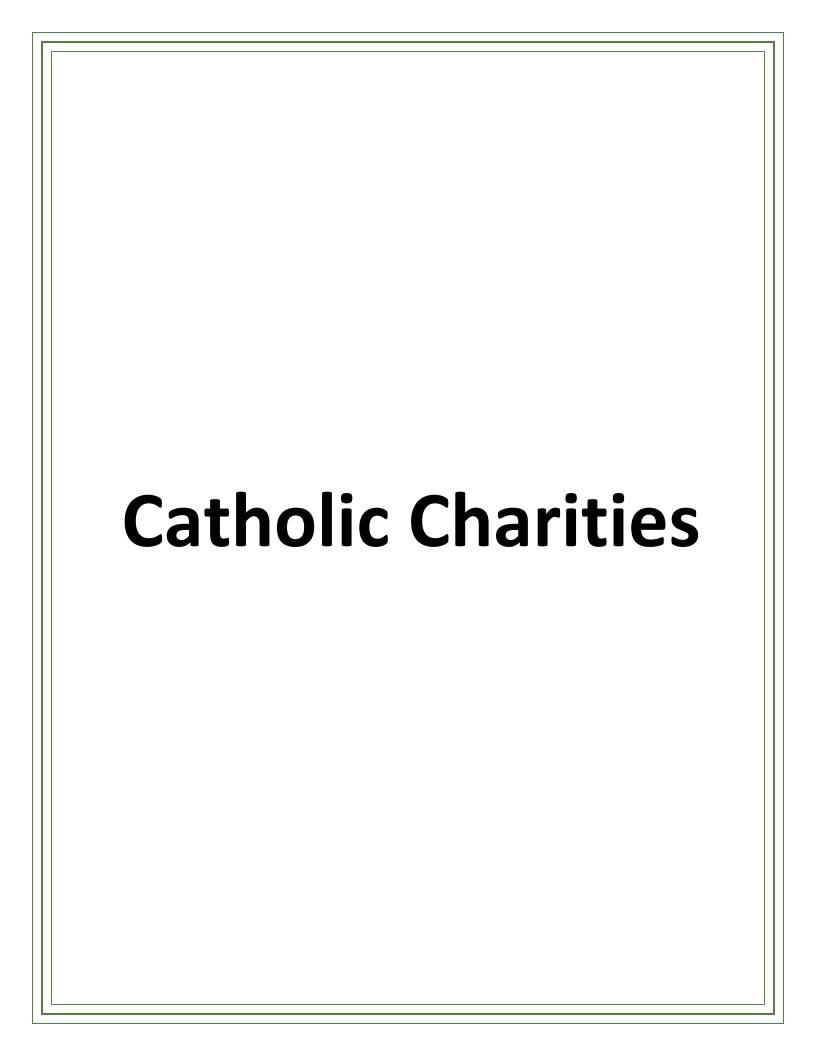
Diversity, Equity and Inclusion STRENGTH from program proposal:

The foundation states that it "is within our best interest to promote diversity and eliminate discrimination in the recovery housing organization. Our aim is to ensure that all staff, residents, and Board members are given equal opportunity and that our organization is representative of all sections of society."





Note: These are the best estimates based on available information. Figures may be estimated or rounded, and may not equal 100%.



CY2023 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program		2022 FINAL CONTRACT AMOUNT	2023 CONTRACT RECOMMENDATIONS	PRIORITY
Catholic Charities				
SUD Prevention Services	\$	223,647	\$ 223,647	Prevention
Seasons of Hope	\$	225,968	\$ 208,437	Crisis
Employment	\$	216,000	\$ 265,000	Employment
School Based Prevention	\$	22,312	\$ 22,374	Prevention
Project FIRST Schizophrenia Program	\$	30,000	\$ -	Prevention
Т	otal \$	717,927	\$ 719,458	
Pooled Funding:				
Matt Talbot for Women - Res. Treatment & IOP	\$	-	\$ -	
Hispanic Men's Program	\$	-	\$ -	
Matt Talbot for Men Residential Treatment	\$	-	\$ -	
The FIRST Program	\$	-	\$ -	

Catholic Charities

Catholic Charities Corporation (CCC) is a comprehensive behavioral health organization that provides a myriad of services under contract with the ADAMHS Board for adolescents and adults.

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

Matt Talbot for Men Residential Treatment

The essential elements of the program include group therapy, group education, individual counseling, urinalysis, psychiatric services and case management. Monday through Friday, clients receive six hours of therapeutic services a day, followed by a 12-step meeting in house or virtually. On the weekends, the clients receive 12-step education groups but are looking to elevate the clinical services by recruiting advance licensed professionals to deliver two-hour clinical therapy groups on the weekends in the future.

Key pieces to the program include: Treating clients on MAT onsite in the medical clinic; Licensed clinical staff dually licensed and/or trained in SUD and MH; Onsite individual trauma counseling; Trauma informed approach to client care; Wellness groups onsite to include yoga with certified instructor who also has her CDCA; Transportation to appointments with community mental health centers, probation officers and court hearings; Commitment to ongoing clinical training for staff.

It is noteworthy that currently both the men and women's residential programs are now under the same director, whereas previously they were under different leaders. This allows for improved consistency in service delivery and elimination of inefficiencies. Both programs share in the same strength-based, person-centered treatment philosophy.

Catholic Charities believes in treating clients with dignity and respect, and understands negative behaviors are often related to untreated symptoms of substance use disorder and/or mental illness. Staff do not believe in punishment or consequences. Rather, staff work with clients to understand the origins of their behavior (often trauma) and work to create a therapeutic alliance with them so they can heal from past wounds and learn a new way of living.

Clients encounter stigma based on prejudicial societal beliefs all the time and it is important to us this is eliminated once they walk through the door.

Target Population:

- Adult men who are diagnosed with a substance use disorder, with the majority having a cooccurring mental illness.
- Most of the clients served are indigent, involved with the criminal justice system and have a significant history of trauma.
- Adult ages 18-65 and older, 200% or more of the federal poverty level.

Anticipated Number of Clients to be Served: 350

Number of Staff Required to Implement Program: 66

Steps to Ensure Program Continuity if Staff Vacancies Occur:

Catholic Charities employs many licensed staff and with different licenses. When there is a staff
vacancy the other licensed staff assist existing clients on a temporary basis. Program
Directors/Coordinators are also licensed and called upon from time to time to assist clients that
were working with a clinician that left.

Funding Priority:

24/7 Access

Program Goals:

- 95% of clients are abstinent at discharge
- 70% of clients are linked to stable, sober supportive housing at discharge
- 60% of clients successfully complete the program

Program Metrics:

- Brief Addiction Monitor and Urinalysis
- Sober Housing Acceptance Confirmation
- Reason for Discharge noted in Discharge Summary

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 175
- ADAMHS Funded Unduplicated Clients Served: 65
- Total Number of Clients Served: 189
- Total Number of Clients that Completed this Program/Service: 100

Average Cost Per Client: \$10,700

Additional Information: N/A

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 540
- ADAMHS Funded Unduplicated Clients Served: 246
- Total Number of Clients that were Served: 338
- Total Number of Clients that Completed this Program/Service: 194

Goals Met:

- 70% of the clients are abstinent at discharge
- 70% of the clients complete the program
- 70% of the clients are linked to stable, sober supportive housing at discharge
- 70% of the clients have improved their social connectedness

Metrics Used to Determine Success:

• Track NOMs, use satisfaction surveys at d/c, track data through the EMR and use report-out guidelines that are monitored in supervision.

Program Successes:

- 97% were abstinent at discharge
- 57% of the clients completed the program
- 94% did not incur additional legal charges

- 74% were linked to stable, sober supportive housing at discharge
- 68% have improved their social connectedness

Average Cost Per Client in CY21: \$10,693.64

Additional Information: N/A

Matt Talbot for Women Residential Treatment and IOP

The essential elements of the program include group therapy, group education, individual counseling, urinalysis, psychiatric services and case management. Monday through Friday, clients receive six hours of therapeutic services a day, followed by a 12-step meeting in house or virtually. On the weekends, the clients receive 12-step education groups but are looking to elevate the clinical services by recruiting advance licensed professionals to deliver two-hour clinical therapy groups on the weekends in the future.

Key pieces to the program include: Treating clients on MAT onsite in the medical clinic; Licensed clinical staff dually licensed and/or trained in SUD and MH; Onsite individual trauma counseling; Trauma informed approach to client care; Wellness groups onsite to include yoga with certified instructor who also has her CDCA; Transportation to appointments with community mental health centers, probation officers and court hearings; Commitment to ongoing clinical training for staff.

It is noteworthy that currently both the men and women's residential programs are now under the same director, whereas previously they were under different leaders. This allows for improved consistency in service delivery and elimination of inefficiencies. Both programs share in the same strength-based, person-centered treatment philosophy.

Catholic Charities believes in treating clients with dignity and respect, and understands negative behaviors are often related to untreated symptoms of substance use disorder and/or mental illness. Staff do not believe in punishment or consequences. Rather, staff work with clients to understand the origins of their behavior (often trauma) and work to create a therapeutic alliance with them so they can heal from past wounds and learn a new way of living.

Clients encounter stigma based on prejudicial societal beliefs all the time and it is important to us this is eliminated once they walk through the door.

Target Population:

- Adult women who are diagnosed with a substance use disorder, with the majority having a cooccurring mental illness.
- Most of the clients served are indigent, involved with the criminal justice system and have a significant history of trauma.
- Adults ages 18-65 and older, 200% or more of the federal poverty level

Anticipated Number of Clients to be Served: 130

Number of Staff Required to Implement Program: 20

Steps to Ensure Program Continuity if Staff Vacancies Occur:

Catholic Charities employs many licensed staff and with different licenses. When there is a staff
vacancy the other licensed staff assist existing clients on a temporary basis. Program
Directors/Coordinators are also licensed and called upon from time to time to assist clients that
were working with a clinician that left.

Funding Priority:

24/7 Access

Program Goals:

- 95% of clients are abstinent at discharge
- 70% of clients are linked to stable, sober supportive housing at discharge
- 60% of clients successfully complete the program

Program Metrics:

- Brief Addiction Monitor and Urinalysis
- Sober Housing Acceptance Confirmation
- Reason for Discharge noted in Discharge Summary

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 52
- ADAMHS Funded Unduplicated Clients Served: 21
- Total Number of Clients Served: 65
- Total Number of Clients that Completed this Program/Service: 26

Average Cost Per Client: \$4,500

Additional Information: N/A

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 200
- ADAMHS Funded Unduplicated Clients Served: 39
- Total Number of Clients that were Served: 45
- Total Number of Clients that Completed this Program/Service: 22

Goals Met:

- 60% complete program
- 70% do not incur additional legal charges
- 70% are linked to stable, sober supportive housing at discharge
- 70% have improved their social connectedness

Metrics Used to Determine Success:

- Treatment plan achievement
- Regular engagement with probation
- Transition and discharge plan monitoring
- Satisfaction survey completion

Program Successes:

- 49% completed the program
- 98% did not incur additional legal charges
- 49% are linked to stable, sober supportive housing at discharge
- 70% have improved their social connectedness

Average Cost Per Client in CY21: \$4,700

Additional Information: N/A

Project FIRST Schizophrenia Program - Pooled Funding

FIRST Program is a coordinated specialty care program for early identification and treatment for individuals who have had a first episode of a psychotic illness. The program provides the following treatment services: Comprehensive AOD treatment; Increased peer support; Wrap clients with services and community support; Reduce risk and increase safety; Provide CBTp and IRT modules to help client meet their own needs and address their symptoms of mental health issues; General Consultation Services; On-Going One-on-One Student Consultation; Whole Classroom Consultation; Professional Development; Prevention Groups; Short-term/Solution Focused Counseling; CPST; and Crisis Management.

Target Population:

- The ages range is 15 to 40 years of age and have had psychotic symptoms for no more than 18 months
- All socioeconomic categories

Anticipated Number of Clients to be Served: 50

Number of Staff Required to Implement Program: 7

Steps to Ensure Program Continuity if Staff Vacancies Occur:

Catholic Charities employs many licensed staff and with different licenses. When there is a staff
vacancy the other licensed staff assist existing clients on a temporary basis. Program
Directors/Coordinators are also licensed and called upon from time to time to assist clients that
were working with a clinician that left.

Funding Priority:

Treatment Services – Pooled Funding

Program Goals:

- 90% of clients' first appointments with psychiatrist occur within 14 days of admission
- 80% of clients admitted within 14 days or less of referral
- 70% of clients successfully remain in treatment
- 80% of clients compliant with medication use
- 80% of clients do not require hospitalization for their symptoms

Program Metrics:

• 100% of cases are offered an initial psychiatric evaluation within 14 days of admission

- 94% of FIRST admissions were admitted within 14 days from referrals. FIRST clients were admitted at an average of six days from referral date to admission date
- 95% remained engaged in treatment
- 85% are compliant with medications prescribed
- 95% of the enrolled FIRST clients did not require hospitalization

First Six Months of CY22 Provider Outcomes:

Highlights:

• Number of Clients that were Anticipated to be Served: 50

• ADAMHS Funded Unduplicated Clients Served: 12

• Total Number of Clients Served: 51

Total Number of Clients that Completed this Program/Service: 5

Average Cost Per Client: \$3,833

Additional Information:

- The FIRST program began in 2014 in Cuyahoga County as a pilot for early identification and treatment of schizophrenia and Catholic Charities remains the provider for this county. This program continues to offer quality care through a specialty coordinated care team-based model based on evidence informed curriculum and modules per counseling and case management service. The program strives to increase the network and outreach for the first-episode psychosis (FEP) model to help more individuals each year through early intervention concepts closest to the time of first presentation of psychosis. Individuals that are engaged in the FIRST program will be recommended for and meet medical necessity criteria for at least two behavioral health (BH) services on an ongoing basis.
- There are up to six BH treatment components that can be offered and recommended to work towards stabilization, self-sufficiency, and sustainment in the community and/or same households. This information is evidence based and unique to the FEP early intervention model. The services include: individual resiliency training and behavioral health counseling; family psychoeducation; pharmacological management; supportive employment/education; and substance use disorder when co-occurring disorders present with schizophrenia. Staff are titrating services according to medical necessity upon readiness of the individual.
- Most planned discharges are recommendations to continue with the psychiatrist for ongoing medication management with the same doctor and nurse at the Outpatient Mental Health program at Catholic Charities.
- Clients that are not Medicaid eligible do benefit from the ADAMHS Board funding to pay for the
 needed services not covered by their insurances. They would benefit further to remain eligible as
 they complete the FIRST modules and program to sustain their treatment gains in the least
 restrictive level of service, like medication management. They would also benefit from closer to
 \$0 out of pocket costs for non-Medicaid services and covered fees especially for peer support,
 nursing, CPST work, and family psychoeducation.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 50
- ADAMHS Funded Unduplicated Clients Served: 13

- Total Number of Clients that were Served: 74
- Total Number of Clients that Completed this Program/Service: 11

Goals Met:

- Increasing census to 50
- Provide comprehensive assessments
- Provide increased peer support
- Coordinate services and community supports to offer wrap around planning
- · Reduce risk to self and increase safety

Metrics Used to Determine Success:

- 90% of admission with be offered a psychiatry appointment within 14 days
- 80% will be admitted within 14 days of referral
- 70% will remain in treatment in the FIRST program
- 80% of clients will be compliant with medication recommendations
- 80% will avoid hospitalization

Program Successes:

- 42% of cases are offered an initial psychiatric evaluation within 14 days of admission
- 89% of FIRST admissions were admitted within 14 days from referrals. FIRST clients were admitted at an average of nine days from referral date to admission date
- 95% remained engaged in treatment
- 85% are compliant with medications prescribed
- 89% of the enrolled FIRST clients did not require hospitalization

Average Cost Per Client in CY21: \$30,000

Additional Information:

This program continues to offer quality care through a Specialty Coordinate Care/team-based model based on evidence informed curriculum and modules per counseling and case management service. The program strives to increase the network and outreach for the FEP model to help more individuals each year through early intervention concepts closest to the time of first presentation of psychosis. Individuals that are engaged in the FIRST program will be recommended for and meet medical necessity criteria for at least two BH services on an ongoing basis. There are up to six BH treatment components that can be offered and recommended to work toward stabilization, self-sufficiency, and sustainment in the community and/or same households. This information is evidenced based and unique to the FEP early intervention model. The services include individual resiliency training & behavioral health counseling; family psychoeducation; pharmacological management; case management; supported employment/education; and substance use disorder treatment when co-occurring disorders present with schizophrenia. Staff titrates services according to medical necessity upon the readiness of the individual. Most planned discharges are recommendations to continue with the psychiatrist for ongoing medication management with the same doctor and nurse at the Out-Patient MH program at Catholic Charities. Clients that are not Medicaid eligible do benefit from the ADAMHS Board funding to pay for the needed services not covered by their insurances. They would benefit further to remain eligible as the complete the FIRST modules and program to

sustain their treatment gains in the least restrictive level of service, like medication management. They would also benefit from closer to \$0 out of pocket costs for non-Medicaid services and uncovered fees especially for peer support, nursing, CPST work, and family psychoeducation.

School-Based Mental Health Services

Catholic Charities School-Based program promotes social-emotional development, fosters resilience, and builds the skills necessary for youth to be successful in school and their environment. The program is inclusive of prevention services in a supportive group format and through consultation services to youth, parents, school administration, and teachers in partnering schools. Catholic Charities staff will be available to the school for the program from August through June of each school year. Other availability can also arrange as part of the agreement per school system. The strengths-based program is offered in identified classrooms with the purpose of preventing serious mental health disorders and symptoms, to enhance quality of life, support health and wellness, and improve functioning. The evidence-informed curriculum is decided according to the feedback received in the consultation. The focus can also help to reduce the prevalence of problematic behaviors in the classroom and to promote more positive feelings and use of skills at times of stress. The prevention groups work to increase resiliency through building social emotional competencies through activities and interventions to promote healthy social skills, wellness, a successful academic performance, and a positive school environment. Risk factors can be subsequently reduced as staff works to enhance protective factors.

Target Population:

- Clients will be pulled from the following schools in Cuyahoga County: Metro Catholic School, St. Stanislaus Catholic School, and Cleveland Central Catholic High School to provide prevention, consultation, individual counseling in the school, and professional development.
- Students range from kindergarten through the 12th grade
- 100-199% of the federal poverty level

Anticipated Number of Clients to be Served: 400

Number of Staff Required to Implement Program: 3

Steps to Ensure Program Continuity if Staff Vacancies Occur:

Catholic Charities employs many licensed staff and with different licenses. When there is a staff
vacancy the other licensed staff assist existing clients on a temporary basis. Program
Directors/Coordinators are also licensed and called upon from time to time to assist clients that
were working with a clinician that left.

Funding Priority:

Prevention

Program Goals:

- Total number of prevention sessions and individual consultation episodes
- The reason for consultation resulted in resolution and/or linkage to needed services
- 90% of school staff and youths' families perceive their needs are met and are satisfied with the results of services
- Comparison of strengths and needs compared to national norms; High score (strengths) are desirable as DESSA is a strength-based instrument

Program Metrics:

- Sum of completed services by type
- Status at time of closure as determined by therapist for one-on-one student consultations
- Responses to customer satisfaction survey questions
- DESSA scores for administration in 2023

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 400
- ADAMHS Funded Unduplicated Clients Served: 282
- Total Number of Clients Served: 285
- Total Number of Clients that Completed this Program/Service: 0

Average Cost Per Client: \$54.69

Additional Information:

The Hispanic Youth/Covenant Center Prevention provides two Alcohol, Tobacco, and Other Drug (ATOD) Prevention services to youth on the West Side of Cleveland. The Hispanic Youth Prevention (HYP) Program serves predominately Hispanics, and The Covenant Center provides serves to a variety of schools and community centers. Both programs provide services throughout the West Side of Cleveland. Both provide school-based programs using an evidence-based curriculum. The Hispanic Program uses Lion's Quest offered in English and Spanish. The Covenant Program uses Botvin Life Skills Training. Both programs are in schools, summer camps, community centers, providing information dissemination, education, alternatives, and problem identification and referral services. The prevention program was able to adapt and provide prevention services through virtually and in person. Staff worked with 12 different Cleveland Municipal School District teachers providing these services. Staff also provided tutoring services to Westlake School System and Seeds of Literacy both in person and virtually. The Hispanic Program has a summer "Just Say No" program that youth between the ages of 13 to 18 present Prevention messages utilizing a traveling puppet shows to children in the community. The young people come through MYCOM recommended by the Hispanic Program. The agency is a Youth Opportunities Unlimited/MYCOM Community Partner. Four Latina youth have participated thus far and will begin presenting to young people in mid-July. The summer program continues to be highlighted in the Catholic Charities Appeal and My Com Newsletter. Aside from the 798 individual customers served and reported on earlier in this report through school groups and tutoring, the prevention program participated in several health fairs attended by 1,035 persons. These health fairs were carried out in the Latino community in collaborations with other Hispanic serving partners. Staff also received 545 hits on its prevention social media site.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 400
- ADAMHS Funded Unduplicated Clients Served: 331
- Total Number of Clients that were Served: 359
- Total Number of Clients that Completed this Program/Service: 356

Goals Met:

- Total number of prevention sessions and individual consultation episodes.
- Reason for consultation resulted in resolution and/or linkage to needed services.
- 90% of school staff and youths' families perceive that their needs are met and are satisfied with the results of services.
- Comparison of strengths and needs compared to national norms; High scores (strengths) are desirable as DESSA is a strength-based instrument.

Metrics Used to Determine Success:

- Sum of completed services by type.
- Status at time of closure as determined by therapist for one-on-one student consultations.
- Responses to customer satisfaction survey questions.
- DESSA scores for administrations in 2021.

Program Successes:

- 138 prevention groups, 279 consultation contacts.
- 39 out of 43 (90.6%) students were linked to services or issues were resolved.
- Customer satisfaction surveys have not yet been administered because staff is halfway through the school year.
- First half: 9% Needs, 59% Typical, 32% Strengths. 15% increase in Strengths, 6% decrease in needs. Second half: 23% strengths, 69% typical, 9% needs.

Average Cost Per Client in CY21: \$86.11

Additional Information:

• The agency received great positive feedback from teachers and administrators about their need for services at the end of the 2020/2021 school year. Some comments about services include: "(Therapist) actively engaged with the students with culturally and developmentally appropriate activities. The students look forward to visits. If staff could increase the presence (frequency and length) of Catholic Charities' presence that would integrate the programs more into the community." "The mental health services provided to (school) through Catholic Charities has been invaluable, especially this year. Communication is top-notch and I cannot express how thankful I am to have the professionals in the building to support employees and families! Thank you!" "We are so grateful for the support and services we receive from our Catholic Charities partners! They were so important to us even as we navigated through a Pandemic! Thank you!!"

Comprehensive Employment Services

Building on its longtime leadership in vocational employment services, CES is designed to serve consumers of Cuyahoga's MH and AoD programs and to provide supported employment for clients with schizophrenia in FIRST Cuyahoga. Consumers from the general population and those who are participating in various treatment and drug or alcohol rehabilitation programs will be referred to CES by staff at the various treatment programs and other re-entry service facilities. Staff will have knowledge of individual physical and mental health capabilities and barriers and will give them the tools they need to obtain employment. Participants have an opportunity to achieve an industry-based certification upon successful completion of training. Participants learn about expectations of workplace, emphasis on appropriate attitudes, a commitment to excellence, and the development of effective work habits.

Target Population:

- Adults ages 18-65 with a high school diploma or GED
- 200% or more of the federal poverty level

Anticipated Number of Clients to be Served: 250

Number of Staff Required to Implement Program: 6

Steps to Ensure Program Continuity if Staff Vacancies Occur:

CES staff are required to give more than a two-week' notice for the very reason of assuring
continuity of service to clients. However, jobs still need to be posted and persons screened and
interviewed. Staff commit to moving as fast as possible. Should there be major problems with
coverage, temporary staff can be made available from other sites.

Funding Priority:

• Employment Programs

Program Goals:

- 70% of individuals referred complete an assessment
- 70% of individuals assessed successfully complete vocational employment counseling
- 70% of individuals assessed successfully complete vocational skills training
- 65% of clients employed will remain employed for 30 days

Program Metrics:

- Number of referrals
- Number of assessments completed
- Percentage of individuals referred that complete vocational skills training
- Number of clients employed through retention services

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 100
- ADAMHS Funded Unduplicated Clients Served: 95
- Total Number of Clients Served: 95
- Total Number of Clients that Completed this Program/Service: 30

Average Cost Per Client: \$1,420.75

Additional Information:

• Employment and Training Services recently changed its name to Job and Career Training Services. The administration felt a name change would bring a new awareness to the employment program and services offered. In addition, the program is moving to a new location, St. Wendelin's Campus (2281 Columbus Rd. Cleveland, Ohio) and will maintain an office on the east side. The move will take place in October 2022. The agency offers an existing system of extensive outreach to inform the community about the resources available to individuals living with mental health and substance use disorders. The specialized approach to handling one's mental health and substance use background during the job search, application, and interview is based on years

of experience, input from employer advisory board, and tailored to the individual's background and circumstances. Approximately 70% of clients maintain employment for 90 days with full time hours (30 hours) and wages that start at \$12.50 an hour and above.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 200
- ADAMHS Funded Unduplicated Clients Served: 484
- Total Number of Clients that were Served: 484
- Total Number of Clients that Completed this Program/Service: 209

Goals Met:

- Increase the number of referring agencies and placements by 15%
- Offer certification sector-based training to consumers
- Provide Quarterly Customer Service Training (in-person and online)
- Seek ADAMHS Board support to provide funding for scholarships to job seekers seeking Community Health Worker training
- Meet contract requirements to obtain a renewed contract for 2021-2022

Metrics Used to Determine Success:

- The business development specialist was assigned to attend six networking and business events per month.
- Determine each sectors skill levels required, qualifications for each sector required.
- Enroll four clients per month for quarterly customer service training.
- The Director of the program would set up a meeting with the ADAMHS Board to discuss scholarship funding for Community Health Worker training.
- Meet all contract deliverable by contract end date.

Program Successes:

 Due to COVID-19 several businesses and agencies folded due to lack of staffing, funding and health related issues. Therefore, the program was unable to meet the goal. The program enrolled 13 students for Community Health Worker training and eight successfully completed the training. Due to the pandemic the program was unable to register four consumers a month for Customer Service Training. Funding was renewed to support scholarships for low-income consumers interested in Community Health Worker Training. CES met the contract goals, and the program was renewed.

Average Cost Per Client in CY21: \$41,369

Additional Information: N/A

Hispanic Men's Program

The Hispanic Services Office has been offering drug and alcohol services to the Latino community since 1974. Staff is bilingual and bicultural which is essential to clients. The program tackles the many barriers Latino men face in accessing drug/alcohol and mental health services. The agency offers a variety of programs that interact and complement each other which includes the Emergency Assistance Program, Prevention and Education Program, Hispanic Youth Program and the Women's Program. The emergency assistance program provides emergency dollars to clients that are need of clothing, rental assistance, utilities and medication assistance. Many men use this service to maintain or obtain housing, medication, IDs and utility assistance. Men also work closely with the Women's program that provides counseling to their wives/ partners and provide parenting classes to both parents. The Men's Program utilizes a variety evidence-based treatment modalities such as Motivational Interviewing, Trauma Informed Therapy, CBT, Reality Therapy and Gorski's Relapse Prevention. Staff uses these modalities because they can address the many aspects of Latino men such as their acculturation and transience with their countries of origins, family roles and relationships, employment challenges, legal issues, and the stressors and traumas that are specific to this population. The Men's Program also utilizes intensive case management to connect clients to the community resources to meet their many needs. The agency's familiarity with the culture and community resources allows us to establish a network that enhances treatment outcomes. Case management is unique because of the special trust relationships that staff have established with clients. These relationships and linkages help retention rates in the treatment continuum and staff can get clients to accept higher levels of care when needed. The agency also advocates with other programs to meet the needs of the Latino population forging strong ties with Metro Hospital's MAT program. MAT is also available onsite with Catholic Charities contractual psychiatrist under the mental health program.

Target Population:

- This is a much needed and sought-after program for adult Hispanic men who have substance use disorders, have mental health issues, and are indigent.
- 99% of the clients are from the near west side; 99% have Spanish as their primary language and 80% speak little or no English and are more effectively serviced by a bilingual and bicultural program. 90% have no high school diploma or GED.
- The age range is 19-70 with the average age falling between 25 to 49 years of age.
- 45% of the clients present with opiate addiction, 40% with cannabis dependence, and 65% with alcoholism. 30% are dually diagnosed. Of the clients that present with opiate addiction, 90% are receiving MAT services.
- Less than 100% of the federal poverty level.

Anticipated Number of Clients to be Served: 120

Number of Staff Required to Implement Program: 4

Steps to Ensure Program Continuity if Staff Vacancies Occur:

• The Hispanic Men's program is part of a larger team that includes other Hispanic drug and alcohol licensed professionals. When there is a vacancy, other staff provide the contract services to the Men's Program.

Funding Priority:

Removing Barriers

Program Goals:

- 70% clients successfully complete treatment without rejecting services
- 70% clients will have no new arrests from admission to date of last service
- 70% clients will have increased in social supports and/or social connectedness at date of last service

Program Metrics:

- Completion of treatment and clients meeting their goals documented in progress notes, referral sources reports, urine screens and client feedback
- Completion of treatment and clients meeting their goals documented through probation reports and client self-report
- Client and family feedback, signed AA sheets documented in the client record

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 60
- ADAMHS Funded Unduplicated Clients Served: 3
- Total Number of Clients Served: 46
- Total Number of Clients that Completed this Program/Service: 26

Average Cost Per Client: \$1,846.42

Additional Information:

- The program is a bilingual, bi-cultural program that specializes in servicing the Hispanic Community. The Hispanic Services Office has been offering drug and alcohol services to the Hispanic community since 1974.
- Two bilingual, bi-cultural male counselors provide assessment, case management, intensive and non-intensive, dual services, and mental health outpatient treatment for this population.
- The Hispanic Men's program has provided telehealth and in-person services to support men and recovery.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 130
- ADAMHS Funded Unduplicated Clients Served: 22
- Total Number of Clients that were Served: 88
- Total Number of Clients that Completed this Program/Service: 53

Goals Met:

- 70% Clients successfully complete treatment without rejecting services
- 70% Clients have no new arrests at date of last service
- 70% Clients have increased social supports and or social connectedness at date of last service

Metrics Used to Determine Success:

- Completion of treatment and clients meeting their goals documented in progress notes, referral sources reports, urine screens and client feedback.
- Completion of treatment and clients meeting their goals documented through probation reports and client self-report.
- Client and family feedback, signed AA sheets documented in the client record

Program Successes:

 87% Clients successfully completed treatment without rejecting services. 98% Clients have no new arrests at date of last service. 97% Clients have increased social supports and or social connectedness at date of last service.

Average Cost Per Client in CY21: \$1,306

Additional Information: N/A

SUD Prevention Services

Culturally specific programming in neighborhoods that have a high Hispanic population, with bilingual and bicultural staff is an essential element of the prevention program. The staff utilize the protective factors that are present in the community, such as respect, "familiarismo," dignity, extended family, and "personalismo." Use of a best practice curriculum through SAMHSA: Lions Quest Skills for Adolescents and Botvin Life Skills, is a comprehensive school-based curriculum that supports the development of life skills and citizenship skills for several years. Low emotional distress, self-acceptance, high emotional support and parent/family support are some of the protective factors which are increased to offset the children's high-risk factors for using. The Hispanic/Covenant staff have a long history of serving the Cleveland Municipal School and surrounding communities. The agency is well-respected by teachers, administrative staff and the larger community. This is essential in establishing relationships and being allowed to provide these, much needed prevention services to community.

Target Population:

- Youth that attend various Cleveland Municipal Schools concentrated on the westside of Cleveland including, Buhrer Dual Language School, which has a high concentration of Hispanic youth, Cleveland Central Catholic High School on eastside of Cleveland.
- 50% of the youth served are Hispanic; 37% African American; 13% Caucasian.
- 61% are female and 39% male.
- The "Just Say No" summer puppet program is offered to day cares, summer camp programs and community centers provide services to over 400 children of which 91% are Hispanic, 8% African American, and 1% Caucasian 12 years of age and under.
- Less than 100% of the federal poverty level.

Anticipated Number of Clients to be Served: 1,500

Number of Staff Required to Implement Program: 4

Steps to Ensure Program Continuity if Staff Vacancies Occur:

 The prevention program is part of a larger team that includes other Hispanic drug and alcohol licensed professionals. When there is a vacancy, other staff provide the contract services to the prevention program.

Funding Priority:

Prevention

Program Goals:

- 80% of the students who take the ATOD pre-test and post-test will be able to identity two harmful effects of ATOD use
- 80% of the students will be able to demonstrate two refusal skills
- 80% of the students will be able to demonstrate two life skills
- 70% receiving tutoring will improve their academics
- Participation in 10 Latino community meetings

Program Metrics:

- Pre- and Post-Test Results
- SCOPE Role Play Rating Scale recommended by SAMHSA to track ATOD refusal skills and decisionmaking skills and teacher reports
- SCOPE Role Play Rating Scale recommended by SAMHSA to track ATOD refusal skills and decisionmaking skills and teacher reports
- Teacher reports, self-reports, family reports and grades
- Attendance

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 750
- ADAMHS Funded Unduplicated Clients Served: 798
- Total Number of Clients Served: 798
- Total Number of Clients that Completed this Program/Service: 798

Average Cost Per Client: \$154.12

Additional Information:

- The Hispanic Youth/Covenant Center Prevention provides two Alcohol, Tobacco, and Other Drug (ATOD) Prevention services to youth on the West Side of Cleveland. The Hispanic Youth Prevention (HYP) Program serves predominately Hispanics, and The Covenant Center provides serves to a variety of schools and community centers. Both programs provide services throughout the West Side of Cleveland and provide school-based programs using an evidence-based curriculum. The Hispanic Program uses Lion's Quest, offered in English and Spanish. The Covenant Program uses Botvin Life Skills Training. Both programs are in schools, summer camps, and community centers, providing information dissemination, education, alternatives, and problem identification and referral services.
- The prevention program was able to adapt and provide prevention services virtually and inperson. Staff worked with twelve different Cleveland Municipal School District teachers providing these services and provided tutoring services to Westlake School System and Seeds of Literacy both in person and virtually.

• The Hispanic Program has a summer "Just Say No" program where youth ages 13 to 18 present prevention messages utilizing a traveling puppet shows to children in the community. The young people come through MYCOM recommended by the Hispanic Program. The agency is a Youth Opportunities Unlimited/MYCOM Community Partner. Four Latina youth have participated thus far and will begin presenting to young people in mid-July. The summer program continues to be highlighted in the Catholic Charities Appeal and My Com Newsletter. Aside from the 798 individual customers served and reported on earlier in this report through school groups and tutoring, the prevention program participated in several health fairs attended by 1,035 persons. These health fairs were carried out in the Latino community in collaborations with other Hispanic serving partners. Staff also received 545 hits on its prevention social media site.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 1,000
- ADAMHS Funded Unduplicated Clients Served: 1,451
- Total Number of Clients that were Served: 1,451
- Total Number of Clients that Completed this Program/Service: 1,248

Goals Met:

- 80% of the students who take the ATOD pre-test and post-test will be able to identity two harmful effects of ATOD use
- 80% of the students will be able to demonstrate two refusals skills
- 80% of the students will be able to demonstrate two life skills
- 70% receiving tutoring will improve their academics
- Participation in 10 Latino community meetings

Metrics Used to Determine Success:

- Pre- and Post-Test Results
- SCOPE Role Play Rating scale recommended by SAMHSA to track ATOD knowledge and refusal skills decision making/life skills
- Teacher reports, self-report, family reports. Grades, and attendance

Program Successes:

- 85% of students were able to identify two harmful effects of ATOD
- 84% demonstrated two refusal skills
- 84% of students demonstrated two life skills
- 83% receiving tutoring improved academically
- Participation in 91 community meetings

Average Cost Per Client in CY21: \$96.50

Additional Information:

• The Hispanic Youth/Covenant Center Prevention provides two Alcohol, Tobacco, and Other Drug (ATOD) Prevention services to youth on the West Side of Cleveland. The Hispanic Youth Prevention (HYP) Program serves predominately Hispanics, and The Covenant Center provides serves to a variety of schools and community centers. The Hispanic Program uses Lion's Quest

offered in English and Spanish. The Covenant Program uses Botvin Life Skills Training. Both programs are in schools, summer camps, community centers, providing information dissemination, education, alternatives, and problem identification and referral services. The program provided services virtually and in person and worked with 12 different Cleveland Municipal School District teachers. Staff also provided tutoring services to Westlake School System, West Side Catholic Center, and Seeds of Literacy both in person and virtually. The Hispanic Program has a summer "Just Say No" program that youth (ages 13-18) present Prevention messages utilizing a traveling puppet shows. The young people come through MYCOM recommended by the Hispanic Program. The agency is a Youth Opportunities Unlimited/MYCOM Community Partner. Eight Latina youth participated in the summer program for six weeks that began June 21, 2021, completing the program successfully. 400 children and adults received prevention services that were provided by the eight young women and staff. The summer program and one young woman was highlighted in the Catholic Charities appeal campaign. Her story will also be highlighted in the MY/COM newsletter in May 2022. The prevention program also participated in health fairs attended by 1,016 persons and received 906 hits on the prevention social media site.

Seasons of Hope

Seasons of Hope provides safe harbor in an unpublished location. Clients call and are given the address after a conversation about their needs or are referred to the program through emergency rooms and/or police departments or other community providers. Staff are all women in recovery and the security guards are all women as well. Cell phones and other belongings are secured in the garage while women stay overnight, during the hours that women feel the most vulnerable and have the fewest options for safety. In the morning, staff provide bus tickets for women to go to the Rape Crisis Center's Human Trafficking Drop In Center or Catholic Charities Bishop Cosgrove Center (day shelter), or anywhere else that they need to go. Staff provide referrals upon request to rape crisis, domestic violence, drug treatment, and counseling services or any other help requested, if a client expresses interest.

Target Population:

- Seasons of Hope (SOH) serves women in crisis who are seeking refuge from the streets
- Adult ages 18-65 and older, All socioeconomic categories

Anticipated Number of Clients to be Served: 150

Number of Staff Required to Implement Program: 6

Steps to Ensure Program Continuity if Staff Vacancies Occur:

 Catholic Charities has a permanent listing for the Human Service Workers, both full-time and part-time, posted in the employment opportunities. The Program Coordinator covers shifts as necessary, and staff are provided overtime opportunities to ensure operations.

Funding Priority:

Crisis Services

Program Goals:

- Crisis Shelter: Seasons of Hope will offer approximately 150 vulnerable women safety overnight
- Community Outreach: Staff will provide outreach to promote the program to vulnerable populations and the groups that serve those populations (hospitals, police, community providers).

Program Metrics:

- The number of women served and the number of nights of service
- Community outreach and training efforts will be measured by hosting a new NA and a new AA
 meeting in CY23 and an increase in referrals to SOH from hospitals and police

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 48
- ADAMHS Funded Unduplicated Clients Served: 49
- Total Number of Clients Served: 49
- Total Number of Clients that Completed this Program/Service: 0

Average Cost Per Client: \$1,848

Additional Information:

• The agency is continuing its recruitment and retention efforts and are incorporating Seasons of Hope staff into the robust training of the Bishop Cosgrove Center staff. The agency hopes to work collaboratively with the Cleveland Rape Crisis Center Human Trafficking Drop-In Program.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 86
- ADAMHS Funded Unduplicated Clients Served: 86
- Total Number of Clients that were Served: 86
- Total Number of Clients that Completed this Program/Service: 84

Goals Met:

- To secure a safe place for women
- Ensure that the program is utilized by clients and community
- Ensure good work coverage
- Ensure clients receive the best care and service, have boundaries, and insist on accountability

Metrics Used to Determine Success:

• Metrics not provided by the provider

Program Successes:

- Having an armed guard onsite
- Having the doors open and getting the word out to the community about the program
- Being fully staffed
- Having necessities for women
- Trained staff on the no questions asked policy

Average Cost Per Client in CY21: \$2,395.35

Additional Information: N/A

		2021 First Outcome		2022 First Outcome	
Provider:	Catholic Charities Services	Count:	226	Count:	72
		2021 Final Outcome		2022 Final Outcome	
Instrument:	Brief Addiction Monitor	Count:	176	Count:	52
Program:	Substance Use Disorder Treatment	2021 % of Final:	77.88%	2022 % of Final:	72.22%

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.

			First	Final		
	Evaluation		Outcome	Outcome	Average	
Population	Year	SubScale	Average	Average	Difference	Significance
Adults (18+ years)	2021	Drug Use	3.52	0.85	-2.67	Significant at p<.05
Adults (18+ years)	2021	Protective	11.1	14.76	3.66	Significant at p<.05
Adults (18+ years)	2021	Risk	9.42	5.64	-3.78	Significant at p<.05
Adults (18+ years)	2022	Drug Use	3.58	0.45	-3.13	Significant at p<.05
Adults (18+ years)	2022	Protective	10.67	13	2.33	Significant at p<.05
Adults (18+ years)	2022	Risk	10.83	6.05	-4.78	Significant at p<.05

		2021 First Outcome		2022 First Outcome		
Provider:	Catholic Charities Services	Count:	174	Count:	128	
		2021 Final Outcome		2022 Final Outcome		
Instrument:	DESSA MINI	Count:	174	Count:	128	
Program:	Youth Prevention	2021 % of Final:	100%	2022 % of Final:	100%	

2021 First Outcome

2022 First Outcome

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

			First	Final		
	Evaluation		Outcome	Outcome	Average	
Population	Year	SubScale	Average	Average	Difference	Significance
Grades K - 8	2021	No Scale	50.65	54.60	3.96	Significant at p<.05
Grades 9 - 12	2021	No Scale	40.00	42.50	2.50	Not Significant
Grades K - 8	2022	No Scale	52.55	55.24	2.69	Significant at p<.05
Grades 9 - 12	2022	No Scale	41.33	42.89	1.56	Not Significant

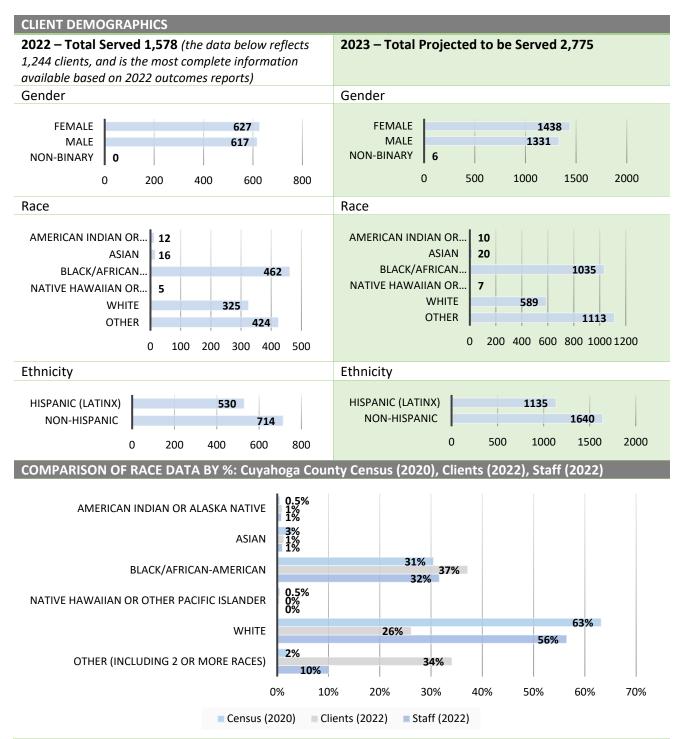
Focus on Diversity: Catholic Charities

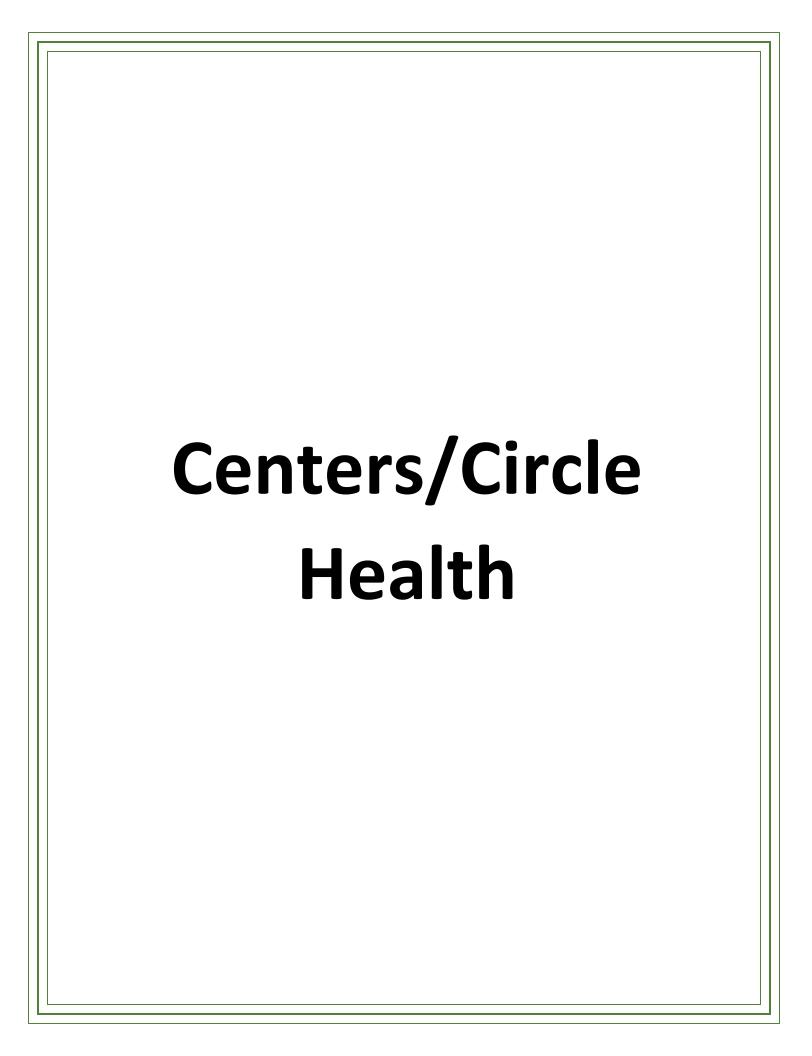
Program(s): Comprehensive Employment Services; Hispanic Men's Program; Matt Talbot for Men Residential Treatment; Matt Talbot for Women Residential Treatment and IOP; Project FIRST Schizophrenia Program (Pooled Funding); School-Based Mental Health Services; Seasons of Hope; SUD Prevention Services

Diversity, Equity and Inclusion STRENGTH from program proposal:

Catholic Charities notes that they "see diversity, equity, and inclusion as integral to our mission and critical to ensuring the well-being of our workforce and the communities we serve. We acknowledge the inherent dignity of every person."







CY2023 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program		2022 FINAL CONTRACT AMOUNT		2023 CONTRACT ECOMMENDATIONS	PRIORITY
The Court on Control Civil of the older					
The Centers (including Circle Health)					
Integrated Care Coordination (Prevention)	\$	343,000	\$	343,000	Prevention
Transportation	\$	-	\$	50,000	Removing Barriers
Harm Reduction	\$	30,000	\$	45,000	Harm Reduction
Jail Re-Entry Program	\$	78,000	\$	100,000	Prevention
Behavioral Health Urgent Care	\$	500,000	\$	750,000	Prevention
Early Childhood Mental Health**	\$	-	\$	-	Prevention
Tota	\$	951,000	\$	1,288,000	
			-		
Pooled Funding:					
Treatment Services - MH	\$	-	\$	-	
Treatment Services - SUD	\$	-	\$	-	

^{**} ECMH Providers Pooled Funding

The Centers (Circle Health Services)

The Centers (Circle Health Services) is a comprehensive behavioral health organization that also provides a variety of other services in the community to both children and adults.

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

Behavioral Health Urgent Cares

The Centers' two Behavioral Health Urgent Care (BHUC) Centers in University Circle (east side) and Gordon Square (west side) address non-crisis urgent needs related to symptoms of mental illness or substance use disorders. BHUC services provided include rapid/initial assessment; psych evaluation and assessment; linkage to community resources; brief interventions; on-site care coordination; and referrals for follow-up services. Examples of non-crisis urgent needs include medication; unhealthy changes in play (children); withdrawal from family/friends; excessive worry or fear; feeling sad, isolated, or lonely; confusion or problems concentrating on a daily task; nervous energy or restlessness; overeating or appetite loss; loss of interest in things which were once enjoyed; having thoughts of harm to self or others; progressive memory loss or confusion; and other emotional or behavioral changes. Staff developed 12 referral pathways with community providers to ensure an efficient workflow that allows access to same-day services.

These dedicated team members work together to assess the current needs of each individual and provide same-day services. Services are available across the lifespan and may include psychiatric evaluations, brief solution-focused therapy, care coordination, healthcare screening, medication, transportation assistance, and much more. For clients needing medications, there are onsite pharmacies at both locations so that individuals can walk out of the building with medications in hand, without having to fill a prescription, lessening the burden of prolonging medication treatment and attainment.

Individuals are provided with an appointment scheduled before they leave (as opposed to a list of phone numbers) to an ongoing provider at the Centers or anywhere else in the community the client chooses. Team members continue to stay engaged with individuals until they are linked to ongoing services.

These BH Urgent Care Centers are open to the public, accept all insurances, and offer a sliding fee scale so that it is affordable regardless of a client's insurance or income situation.

Target Population:

- The Behavioral Health Urgent Cares (BHUCs) aim to increase access to, and the quality of, behavioral health services for underrepresented minority adults and youth who are experiencing urgent (non-crisis) severe health disparities, living with schizophrenia, and/or experiencing a first episode of psychosis.
- All ages, Less than 100% of the federal poverty level

Anticipated Number of Clients to be Served: 500

Number of Staff Required to Implement Program: 16

Steps to Ensure Program Continuity if Staff Vacancies Occur:

 The integrated and team-based approach to the services provided will ensure clients continue to receive services when staff vacancies occur. Staff will work together to create and carry out the services as described herein and team members will be able to step in when a vacancy occurs.
 The BHUCs are co-located with two health clinics, enabling coverage support in times of need.

The Centers will also ensure that institutional knowledge gained by program staff is shared across
the entire team and passed onto subsequent staff. As a longtime provider of behavioral health
services to the community, The Centers has created detailed documentation of protocols for the
services, which all staff are to adhere to. Further, all case management notes will be captured in
The Centers' Electronic Health Record (EHR) system which can be accessed and referenced by
future providers.

Funding Priority:

• Removing Barriers

Program Goals:

- Increase access and availability of behavioral health services
- Increase access and availability of primary care services to behavioral health clients

Program Metrics:

- 70% of individuals who are not yet linked with behavioral health supports will be linked to The Centers' behavioral health services within ten days
- 50% of adults and children who are unaffiliated with a medical care provider will be linked to a primary care provider within seven days

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 175
- ADAMHS Funded Unduplicated Clients Served: 175
- Total Number of Clients Served: 175
- Total Number of Clients that Completed this Program/Service: 0

Average Cost Per Client: \$899.79

Additional Information:

- The Behavioral Health Urgent Care Centers (BHUC) is one component of the Whole Person Integrated Care Model and is an important part of an ideal behavioral healthcare system. BHUC addresses recognized barriers by increasing service access and capacity, reducing stigma, addressing social determinants of health and logistical impediments, emphasizing early detection and intervention, and promoting cross-system communication and care coordination. BHUC provides on-demand and non-invasive services, which are inclusive of mental health, substance use, or co-occurring conditions. and BHUC services responds to the needs that fall short of posing an immediate risk of harm to self or others. BHUC services are available to persons ages six and up and can be accessed on a walk-in basis or through scheduled appointments. Virtual encounters are coordinated on a case-by-case basis. Thirteen pathways to the BHUC from community partners have been activated, including University Hospital, Cleveland Clinic Foundation, Frontline Service Mobile Crisis Team (MCT), Northeast Ohio Coalition for Homelessness, Northcoast Behavioral Health, and the Diversion Center.
- A BHUC Open House was held on 7/22/22, and services were opened to the Cuyahoga County community on 7/25/22.
- Findings from several BHUC Care Experience Survey questions indicated that 97% of persons served indicated the Care Team addressed their needs, 95% indicated BHUC services were accessible, and 90% indicated an overall degree of satisfaction with services received.

- Barriers associated with attaining expected linkage outcome includes (1) staffing shortages within
 the case management program which led to clients having to be referred to outside providers; (2)
 clients waiting later than the ten-day target period to request services; and (3) clients citing their
 needs were met during BHUC visit, and subsequently declining ongoing services.
- Barriers associated with meeting the expected primary care linkage outcome includes: (1) clients seeking access to behavioral health services, but not primary care services; (2) clients were linked to primary care services prior to being referred to the BHUC; (3) lack of a data analysis system to track behavioral health clients who do not have primary care services. The BHUC, Primary Care, and Quality Improvement leadership teams are meeting to develop a data analysis system to track clients who are not linked to services as this is a core strategic plan initiative.

CY21 Provider Outcomes: N/A – New Program beginning in 2022

Integrated Health Services - Rapid Access

Rapid Access staff serve as health advocates for clients to help reduce gaps in care, and support clients in committing to their health, including reducing barriers to wellness for those with Serious and Persistent Mental Issues (SPMI). The program offers three main services to bridge the gap between hospitalization and aftercare:

- 1. Rapid Access Assessment is an integrated mental health (MH) assessment that evaluates clients' mental health diagnoses and identifies any barriers to receiving ongoing care. An assessor with the program conducts the assessment with clients prior to a hospital discharge, then works with clients to schedule aftercare appointments to manage recovery.
- 2. Case Management provides additional support and aftercare coordination for clients prior to hospital discharge. Case Managers assist clients with making and attending aftercare appointments, referring clients to needed services (when possible, within The Centers). Centralized care helps to eliminate confusion among providers and increases the speed at which clients receive needed care. The Centers offers centralized enrollment in a comprehensive suite of integrated health and wellness programs, including primary care, dental, behavioral health, pharmacy services, addiction and substance abuse treatment, HIV/AIDS prevention, and support services, along with trauma recovery services. When referrals need to be made outside of The Centers system, case managers help clients navigate the broader healthcare system.
- 3. Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) are essential income supports for adults with SPMI who are unable to work because of illness. These income sources provide some measure of stability and access to housing and other essential supports. Most adults with SPMI have significant difficulty in navigating the SSI/SSDI application process, which can take well over six months without support. To expedite SSI activities, The Centers' new Benefits Specialist will arrange appointments; meet with the client 3-6 times to complete all required forms (SSA 8000, SSA 1696, SSA 826, etc.); consult with up to 15 providers to obtain necessary medical records; finalize Mental Health Status and Summary reports; and complete and submit applications to the Division of Disability Determination (DDD) to expedite priority cases from designated health providers and social services organizations. The specialist closely monitors each application and maintains close communication with DDD staff throughout the application process, following up with the client to explain decisions made and resolve remaining non-medical documentation. The goal of the Benefits Specialist is to work with clients to ensure SSDI benefits are approved within 90 days.

Target Population:

- The Rapid Access program is available to all low-income residents in Cuyahoga County. Clients are referred to this program upon being discharged from a hospital or emergency department (ED), present with behavioral health or substance use disorder including SPMI, and are not already linked to a community organization. Most clients are adults, but the Rapid Access program can serve children as young as five. Clients are mostly female (60%), and predominantly White (54%) or African American (36%).
- Adults ages 18-65+, Less than 100% of the federal poverty level

Anticipated Number of Clients to be Served: 600

Number of Staff Required to Implement Program: 6.25

Steps to Ensure Program Continuity if Staff Vacancies Occur:

- Rapid Access Assessment: Rapid Access staff are notified of an integrated mental health assessment the day of a client's hospital discharge. There are two assessors within the Rapid Access team who can meet clients at the hospital. If both assessors are busy or there is a vacancy in this position, a qualified clinician from The Centers' staff will conduct a telehealth visit with the client to complete the assessment. If a telehealth visit is not possible, the client will be referred to one of The Centers' locations for a post-discharge assessment.
- Transitional Case Management: The Transitional Case Manager within the Rapid Access team
 meets with clients prior to discharge to coordinate care. Similarly, if they are busy with other
 clients or there is a vacancy in this position, a Case Manager from one of The Centers' sites will
 conduct a telehealth visit. If a telehealth visit is not possible, the client will be referred to one of
 The Centers' locations for post-discharge care coordination.
- SSI/SSDI Support: Case Managers will work closely with the Benefits Specialist, sharing notes and knowledge, so that case managers can support critical deadlines and client contact when the Benefits Specialist is out.

Funding Priority:

Removing Barriers

Program Goals:

 Connect 600 individuals to needed recovery and prevention services within ten days upon their discharge from the hospital

Program Metrics:

 Number of completed Rapid Access assessments; number of clients linked to case management, counseling, psychiatry, Substance Use treatment or Primary Care services; average number of days to linked services

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 300
- ADAMHS Funded Unduplicated Clients Served: 145
- Total Number of Clients Served: 145
- Total Number of Clients that Completed this Program/Service: 0

Average Cost Per Client: \$636

Additional Information:

• By working closely with various hospitals within Cuyahoga County, the Rapid Access program continues to support the community by assisting clients in the post-hospitalization discharge process, linking them with identified resources within the agency. Despite the barriers that have presented themselves, the Rapid Access team continues to find solutions to meet the needs of clients referred to the Rapid Access program. The Rapid Access team has been able to leverage the Behavioral Health Urgent Care by having designated psychiatric appointment times for Rapid Access clients within seven days of discharge. Often, clients that present to the hospital for psychiatric concerns are faced with social barriers (lack of reliable means of communication) that create challenges to engagement with services providers. Seeing the issues that these social barriers create; the Rapid Access team has been able to procure cell phones with minute cards for clients to help assist them in attending their appointments.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 600
- ADAMHS Funded Unduplicated Clients Served: 412
- Total Number of Clients that were Served: 412
- Total Number of Clients that Completed this Program/Service: 367

Goals Met:

• Quickly connect clients discharging from inpatient stays to ongoing services

Metrics Used to Determine Success:

- Number of referrals (including number of clients who decline service)
- Number of mental health assessments (MHA) completed
- Number of clients linked with psychiatry and/or pharmacy services
- Average days from hospital discharge to the first scheduled psychiatry/pharmacy visit
- Number of clients referred to Primary Care; Dental; Substance Use Disorder Services

Program Successes:

- # Referrals = 412
- # MHA Completed = 367
- 96% (354 of 367) clients were scheduled with pharmacist and/or psychiatry provider after discharge from hospital
- On average, clients were scheduled with pharmacist or psychiatry provider within seven business days: Primary care = 129, Dental = 45, SUD = 72

Average Cost Per Client in CY21: \$558.96

Additional Information:

Despite the continued staffing struggles throughout the year, The Centers has continued to
provide assessments by utilizing site-based assessors, offering assessments during nontraditional
hours to increase accessibility, and continue to use telephonic assessments. Staff successfully
completed over ten youth assessments during the year and have recently seen an increase in

interest in this service line. Staff provided care packages to clients that have used the Rapid Access program through the year.

Jail Re-Entry Program

To help ensure a more comprehensive safety net of services for qualified individuals in the jail, The Centers is implementing a re-entry program that will formalize partnerships with individuals by embedding case management and peer support services within the criminal justice system. The re-entry program will provide individual assessments of needs, intensive case management services, and coordination of care with the courts as individuals are reintegrated into the community following incarceration. The Centers will work specifically with individuals in the criminal justice system who qualify for the mental health or drug court dockets.

The Centers will begin to build relationships and trust with qualified individuals in the jail and will conduct individual psychosocial assessments prior to their release from incarceration. The psychosocial assessment will identify each client's needs so that they can begin to connect with and utilize community resources immediately upon release. Re-entry program staff will also provide intensive, individualized support for these individuals who have historically struggled with engagement in services and will link them with other programs and services including intensive case management, substance use disorder services, Assertive Community Treatment (ACT) Team; center for schizophrenia, coordination with the criminal justice system and mental health probation, mental health assessment, pharmacologic management, psychotherapy, peer support, supported employment and housing, and primary care and dental services.

Target Population:

- The program will focus on serving individuals who have demonstrated a high past utilization of criminal justice services and who have historically had significant challenges engaging in mental health services. The Centers anticipates that the target population will closely mirror the Cuyahoga County Jail population demographics, which are approximately 82% male, 52% Black/ African American, and 33% White.
- Adult 18-65+, Less than 100% of the federal poverty level

Anticipated Number of Clients to be Served: 160

Number of Staff Required to Implement Program: 3.5

Steps to Ensure Program Continuity if Staff Vacancies Occur:

• As the Jail Re-Entry program is relatively new, it has been a priority to develop detailed documentation of protocols for the services provided, which all staff are to adhere to.-These protocols include the steps that will be taken to ensure continuity in service when staff vacancies occur. Following similar protocol for other existing programs, The Centers will reassign cases to another staff member on the case management team when there is a staff vacancy. If one of the Behavioral Health Specialist positions is open, the Re-Entry Care Coordinator and/or another Behavioral Health Specialist will provide ongoing case management until the open position has been filled.

Funding Priority:

Prevention

Program Goals:

Serve 160 clients

Reduce recidivism

Program Metrics:

- Number served (unduplicated)
- Number of clients linked to mental health treatment and substance use disorder services

First Six Months of CY22 Provider Outcomes:

Highlights:

• Number of Clients that were Anticipated to be Served: 80

• ADAMHS Funded Unduplicated Clients Served: 35

• Total Number of Clients Served: 35

Total Number of Clients that Completed this Program/Service: 12

Average Cost Per Client: \$658.18

Additional Information:

• Staff are working with other jail liaison providers and criminal justice administrators to coordinate visitations with clients. Some strategies include visiting clients behind glass, and telehealth/virtual visitation. Staff believe these strategies will help increase the number of clients served in the next six months. Recruitment challenges caused a delayed start to the program, however, The Centers hired a Forensic Liaison who started on 4/11/22, and expect to see an increase in the number of clients served and linkage to ongoing services in the next six months.

CY21 Provider Outcomes: N/A New Program beginning in 2022

MH Treatment Services

The Centers offers programs and services designed to assist clients in overcoming barriers to recovery and provide balance to persons with chronic mental illness. Medicaid-eligible services provided under this proposal include: Assessment Services, Therapeutic Behavioral Services (TBS), Community Psychiatric Supportive Treatment (CPST), Psychosocial Rehabilitation (PSR) Services, Assertive Community Treatment (ACT) Services.

The Centers strongly believes in a team approach to client care and recognizes the valuable role each service provider plays in caring for clients' needs. The team approach involves addressing both the mental and physical health of the clients served by providing primary care services at each location as well as access to in-house pharmacies. These services offer clients the convenience of obtaining their medications and allows the pharmacy staff to become an integral a part of the client's care team.

Behavioral health case management is at the core of The Centers services. The case management team works to assist and support clients in obtaining stabilization with housing, finances, transportation, employment, and social supports within the community. Case managers are instrumental in supporting primary and psychiatric care teams by assisting the client in maintaining consistency with healthcare and behavioral health appointments. The Centers is committed to providing relevant and evidence-based practices to the clients it serves. The Centers offers both Cognitive Behavioral Therapy (CBT) and Dialectical Behavior Therapy (DBT) group therapies for both adult and adolescent clients at west side locations and are extending these groups to the east side locations. Staff provide expansive services for substance use disorders and offer intensive outpatient (IOP) services at three of the six community locations.

Target Population:

- The Centers provides mental health and substance use disorder services to more than 5,000 clients annually in six locations throughout Cuyahoga County. The Centers specializes in serving people with SPMI and individuals who have chronic, re-occurring mental health symptoms. The target population for the services outlined in this proposal will closely mirror the demographics of clients served by the mental health and substance use disorder programs. Those clients are predominantly female (60%) and either White (54%) or African American/Black (36%). All individuals served in these programs have extremely low to moderate income upon enrollment; the vast majority (97%) fall within the low or extremely low-income category.
- Adult 18-65+, Less than 100% of the federal poverty level

Anticipated Number of Clients to be Served: 400

Number of Staff Required to Implement Program: 50

Steps to Ensure Program Continuity if Staff Vacancies Occur:

• The integrated and team-based approach to the services provided will prevent a lapse in services when staff vacancies occur. The staff will work closely to create and carry out the services as described herein, and as a result, team members will be able to step in when a vacancy occurs. The Centers will also ensure that institutional knowledge gained by program staff is shared across the entire team and passed onto subsequent staff. As a longtime provider of these services to the community, The Centers has created detailed documentation of protocols, which all staff adhere to. Further, all case management notes will be captured in The Centers' EHR system for reference by future providers.

Funding Priority:

Treatment Services – Pooled Funding

Program Goals:

- Clients will experience improved health/wellness outcomes
- Clients will demonstrate satisfaction with the services received

Program Metrics:

- Number served unduplicated
- Number of patients that received at least one service in the last 90 days
- Percent of clients that reported services were helpful to them (annually)

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 200
- ADAMHS Funded Unduplicated Clients Served: 175
- Total Number of Clients Served: 175
- Total Number of Clients that Completed this Program/Service: 0

Average Cost Per Client: \$29.31

Additional Information:

To address barriers to goals, staff are reviewing caseloads for appropriateness for services to reduce caseload and developing maximum caseload expectations per worker. The Centers is providing additional staff training to improve the quality of care, including understanding diagnosis, symptoms, medical necessity, motivational interviewing, and stages of change/treatment, etc. The Centers is also improving onboard training for new employees, as well as ongoing training to improve clinical skills of current employees. Also, a review is being done of current salaries in the market to determine capacity and meet the industry need.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 1,000
- ADAMHS Funded Unduplicated Clients Served: 360
- Total Number of Clients that were Served: 3,770
- Total Number of Clients that Completed this Program/Service: 0

Goals Met:

- Improved health/wellness outcomes
- Client Satisfaction
- Reduction in psychiatric hospitalization
- Increased community tenure
- Increased self-sufficiency

Metrics Used to Determine Success:

- Improve depression screening
- Number of who received at least one service in the previous three months
- Rate of client satisfaction
- Number of repeated hospitalizations
- Rate of patients who reported stable living

Program Successes:

- Observed a 2% decrease in individuals who reported during screening to be minimally depressed
- Number of clients who received at least one service in the previous three months was 141
- The Centers' Client Satisfaction Survey was 89%
- 104 patients had repeated hospitalizations
- 92% reported stable living

Average Cost Per Client in CY21: \$635.85

Additional Information:

• Staff developed strategies that allowed the agency to increase salaries for case managers and counselors, which improve retention and recruitment. Additionally, staff has been able to safely increase face-to-face services in the community with a combination of telehealth. Also, the

number of staff within this program has change compared to the six-month reporting period due to a move of some of the departments from The Centers to Circle Health. This essentially reallocated the number of staff associated with this program.

BH Treatment Services

Circle Health Services, a part of The Centers, offers programs and services designed to assist clients in overcoming barriers to recovery and to provide balance to those persons with chronic mental illness. Staff takes a team approach to care/treatment by providing case management, psychiatric medication management, nursing services, pharmacy services, primary care services, substance use disorder treatment and counseling, behavioral health treatment and group therapies. The Medicaid-eligible Behavioral Health Services offerings included in this proposal are counseling/psychotherapy services, psychiatry and medication management, medication administration, medication assisted treatment, psychiatry evaluation and management services, and substance use disorder (SUD) assessment, group services, case management services, intensive outpatient, partial hospitalization, peer support and urine screens.

Circle Health strongly believe in a team approach to client care and recognize the valuable role each service provider plays in caring for clients' needs. The team approach involves addressing both the mental and physical health of the clients served by providing primary care services at all locations as well as access to in-house pharmacies. These offer clients the convenience of obtaining their medications and allows the pharmacy staff to become an integral a part of the clients' care teams.

Target Population:

- Clients range in age from five to 90, with the majority between 19 and 45
- Clients are predominantly female (60%) and either White (54%) or African American/Black (36%) All individuals served in these programs have extremely low to moderate income upon enrollment; the vast majority (97%) fall within the low or extremely low-income category.

Anticipated Number of Clients to be Served: 500

Number of Staff Required to Implement Program: 150

Steps to Ensure Program Continuity if Staff Vacancies Occur:

• The integrated and team-based approach to the services provided will ensure clients continue to receive services when staff vacancies occur. The staff will work closely together to create and carry out the services as described herein, as a result team members will be able to step in when a vacancy occurs. Circle Health will also ensure that institutional knowledge gained by program staff is shared across the entire team and passed onto subsequent staff. As a longtime provider of these services to the community, Circle Health has created detailed documentation of protocols for the services, which are followed by all. Further, all case management notes will be captured in the EHR system for reference by future providers.

Funding Priority:

Treatment Services – Pooled Funding

Program Goals:

- Clients will experience improved health/wellness outcomes
- Clients will demonstrate satisfaction with the services received

Program Metrics:

- Number served unduplicated and number of patients that received at least one service in the last
 90 days
- Percent of clients that reported services were helpful to them (annually)

First Six Months of CY22 Provider Outcomes:

Highlights:

• Number of Clients that were Anticipated to be Served: 250

• ADAMHS Funded Unduplicated Clients Served: 207

• Total Number of Clients Served: 207

• Total Number of Clients that Completed this Program/Service: 0

Average Cost Per Client: \$97.08

Additional Information:

• The patient count is lower than projected in part because the agency improved their internal process to ensure that all patients who may be eligible for Medicaid or other coverage are enrolled. Because of this and changes in the federal and state guidelines around these programs, the agency has had the lowest rate of uninsured patients in recent history. With the increase in BHT staff in the last two months, the agency should be able to meet anticipated number of clients served. Satisfaction surveys are conducted annually, so there is not yet progress on this goal.

CY21 Provider Outcomes: Reported as part of The Centers Treatment Services in 2021

Harm Reduction

Circle Health will distribute 40,000 fentanyl test strips to individuals to determine the presence of fentanyl in their drugs. This harm reduction strategy, first implemented at Circle Health in 2018, aims to avoid unintentional use of fentanyl and overdose deaths. An outreach worker connects with clients to provide fentanyl strips and asks the client a set of questions to understand their use of substances, understand their interest in treatment, and connect them to other services if appropriate.

This work is carried out in conjunction with Circle Health's other services and harm reduction efforts. Circle Health will offer fentanyl test strips to individuals utilizing its syringe exchange program (SEP). The first program of its kind in the region, the SEP offers free new syringes to prevent the spread of HIV and other bloodborne pathogens. Further, Circle Health will harness its integrated approach to care, where clients can access services to care for their mental and physical health in one place. Staff coordinates with other departments to identify individuals who have indicated drug use or symptoms of drug use and provide test strips and educational information to expand the use of fentanyl strips beyond clients who inject drugs.

In addition to fentanyl strips, Circle Health will provide educational materials to individuals, including "How to Get the Right Hit," which demonstrates the correct usage of a syringe, evidence-based resources from the CDC Harm Reduction Tool Kit, and its own fentanyl test strip instructions which include information on testing pills and other substances. These documents are distributed to the clients with the fentanyl test strips.

Target Population:

 Clients served by the Syringe Exchange program in 2021: predominantly male (62%) and either Caucasian/white (85%) or African American/Black (10%). All individuals served in these programs

have extremely low to moderate income upon enrollment; the vast majority (97%) fall within the low or extremely low-income category.

Anticipated Number of Clients to be Served: 2,500

Number of Staff Required to Implement Program: 4

Steps to Ensure Program Continuity if Staff Vacancies Occur:

- The integrated and team-based approach to the services provided will ensure clients continue to receive services when staff vacancies occur. The staff will work closely together to create and carry out the services as described herein, as a result team members will be able to step in when a vacancy occurs.
- Circle Health will also ensure that institutional knowledge gained by program staff is shared
 across the entire team and passed onto subsequent staff. As a longtime provider of these services
 to the community, Circle Health has created detailed documentation of protocols for the services,
 which are followed by all. Further, all case management notes will be captured in the EHR system
 for reference by future providers.

Funding Priority:

• Harm Reduction

Program Goals:

 Reduce overdose and deaths related to unintended use of fentanyl by providing fentanyl test strips and educational materials

Program Metrics:

Fentanyl test strips provided, and educational materials provided

First Six Months of CY22 Provider Outcomes:

Highlights:

• Number of Clients that were Anticipated to be Served: 1,750

• ADAMHS Funded Unduplicated Clients Served: 768

• Total Number of Clients Served: 768

Total Number of Clients that Completed this Program/Service: 0

Average Cost Per Client: \$1.00

Additional Information:

• Circle Health became providers of Project Dawn to provide naloxone kits, reinstated the mobile unit for syringe exchange services now located within Slavic Village (at two sites). Staff are streamlining workflows for internal referrals to provide clients fentanyl strips from other service areas. To address barriers associated with inconclusive test results, staff also demonstrate and conduct troubleshooting with clients in the exchange to ensure that clients were able to test their substances accurately. Staff researched and provided instructions for testing substances other than opioids (including pills) due to the increase in overdose deaths in Ohio, as some residents did not identify as people who inject drugs.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 7,500
- ADAMHS Funded Unduplicated Clients Served: 1,467
- Total Number of Clients that were Served: 1,467
- Total Number of Clients that Completed this Program/Service: 0

Goals Met:

• Circle Health can distribute fentanyl test strips to Syringe Exchange Program clients as a harm reduction practice.

Metrics Used to Determine Success:

- Number of clients offered test strips
- Number of test strips provided
- Survey data

Program Successes:

- Number of clients offered test strips: 1,467
- Number of test strips provided: 15,000
- Survey data: When asked "Was your test positive or negative for traces of Fentanyl?" 83% answered yes. When asked "If positive, did you use the drug anyway?" 96.4% of clients answered yes.

Average Cost Per Client in CY21: \$10.22

Additional Information:

Educational material was created to illustrate to clients how to appropriately use the Fentanyl strips. This initiative was introduced in November 2021. Also, the reported anticipated patients served number does include duplicated patients and regarding the staff data, there isn't designated staff for this program. Another note is that mobile van services were disabled for the year of 2021 (historically the mobile van service saw about 90 patients a day, 5-days-per-week). To address this issue, the Rocky River location services were expanded 3-days-per-week to aid to west side clients.

Transportation

The Centers Transportation Assistance Program will provide rides for BH patients through Uber or Lyft. A Transportation Coordinator will be responsible for contacting Uber/Lyft to schedule the ride and coordinating with the client to make it to their visit. They will also be responsible for coordinating payment and tracking the expenditure of funds associated with these rides.

The program will not provide transportation when a client has an urgent need for medical treatment for a physical or mental illness, or when there is a need for observation and supervision of the client. The appropriate ambulance provider or other transport will be called when clients need transport to an inpatient facility or emergency room. This transportation assistance will not be used to transport children, to transport clients to grocery stores, financial institutions, for benefits applications, or to transport clients' family members and significant others.

A daily transportation schedule will be managed by the Transportation Coordinator in collaboration with health and wellness providers scheduling appointments. The Centers will work with select Uber and Lyft

to support drivers to be trained to correctly identify clients and introduce themselves as transport provided by The Centers. The Transportation Coordinator will maintain documentation of the client name, medical record number (MRN) to link to Epic for demographic and insurance status information, time and pick up location, and the time and drop off location, as appropriate, of the person or service receiving the client. Drivers will have access to a clinical supervisor via phone for any concerns that may arise during transport.

Target Population:

• The Transportation program is intended to serve clients who: 1) are seeking BH services; 2) have no or limited access to transportation; and 2) are uninsured or on Medicaid.

Anticipated Number of Clients to be Served: 350

Number of Staff Required to Implement Program: 1

Steps to Ensure Program Continuity if Staff Vacancies Occur:

• The integrated and team-based approach to the services provided will ensure clients continue to receive services when staff vacancies occur. Other Care Coordinators at The Centers will be advised on the Uber and Lyft scheduling and client interaction processes for the Transportation Assistance Program so they can fill in when the Transportation Coordinator is out. The Centers will also ensure that institutional knowledge gained by program staff is shared across the entire team and passed onto subsequent staff. As a longtime provider of these services to the community, The Centers has created detailed documentation of protocols for the services, which are followed by all.

Funding Priority:

Removing Barriers

Program Goals:

 Provide safe, secure, and reliable transportation Monday through Friday for clients needing transportation to a health facility or provider for a scheduled appointment, for behavioral health services, medications or participation in health promotion activities or to a community pharmacy.

Program Metrics:

 Number of unduplicated individuals served; number of Uber/Lyft rides scheduled; Number of Uber/Lyft rides completed (appointments attended/services accessed).

First Six Months of CY22 Provider Outcomes: Not Funded in 2022

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 0
- ADAMHS Funded Unduplicated Clients Served: 37
- Total Number of Clients that were Served: 37
- Total Number of Clients that Completed this Program/Service: 0

Goals Met:

 Provide access to safe and reliable transportation to The Centers' Substance Use Disorder Intensive Outpatient groups.

Metrics Used to Determine Success:

- Number of unduplicated clients served through transportation services
- Number identifying the range of transportation options utilized
- Number and percentage of clients that increased attendance to appointments
- Number and percentage of client that demonstrated improvement in behavioral symptoms and management
- Number and percentage of clients that reported satisfaction with transportation services

Program Successes:

- Number of unduplicated clients served through transportation services= 37
- Number identifying the range of transportation options utilized= 1
- Number and percentage of clients that increased attendance to appointments= (133/143 responses) 93%
- Number and percentage of client that demonstrated improvement in behavioral symptoms and management= (145/145 responses) 100%
- Number and percentage of clients that reported satisfaction with transportation services= (142/143 responses) 99%

Average Cost Per Client in CY21: \$25.14

Additional Information:

- Circle Health launched PHP services in June and anticipate that the number of clients requiring
 assistance with transportation will increase, as PHP will not be available via telehealth. The
 overall census in SUD services is steadily climbing and staff are confident they will continue to
 grow.
- The Agency said anticipated number of clients was zero because this service is provided on a need-by-need bases and it is difficult to estimate how many individuals need transportation services. Staff also answered zero to the staffing questions because this program does not have a designated staff person and transportation support is provided by any of the agency's counselors.

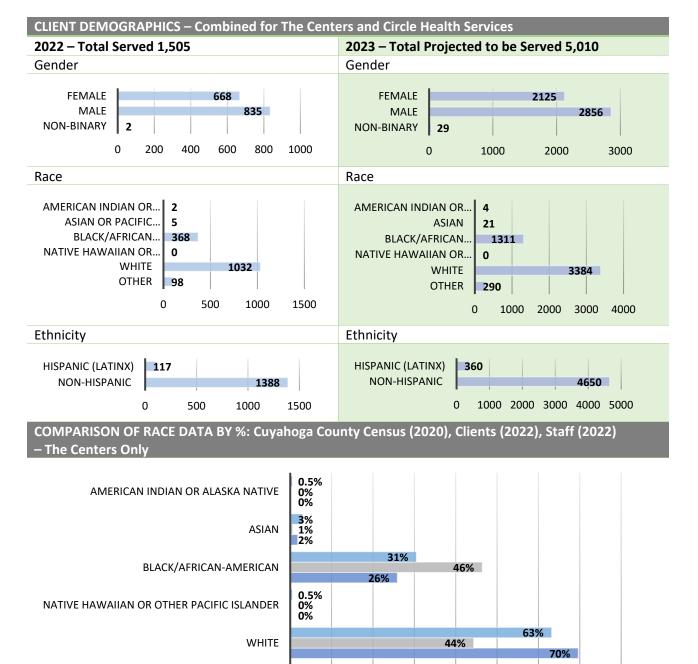
Focus on Diversity: The Centers (including Circle Health Services)

Program(s): **The Centers:** Behavioral Health Urgent Care; Integrated Health Services - Rapid Access; Jail Re-Entry Program; MH Treatment Services; **Circle Health:** BH Treatment Services; Harm Reduction; Transportation

Diversity, Equity and Inclusion STRENGTH from program proposal:

A primary goal of The Centers' Strategic Plan is Culture: "to create an equitable, anti-racist, and service-oriented organization that pioneers and co-creates solutions while fostering a community where team members thrive." The plan also includes Equity: "to close the racial equity gap..."





Note: These are the best estimates based on available information. Figures may be estimated or rounded, and may not equal 100%.

■ Clients (2022)

20%

30%

Staff (2022)

40%

50%

60%

70%

80%

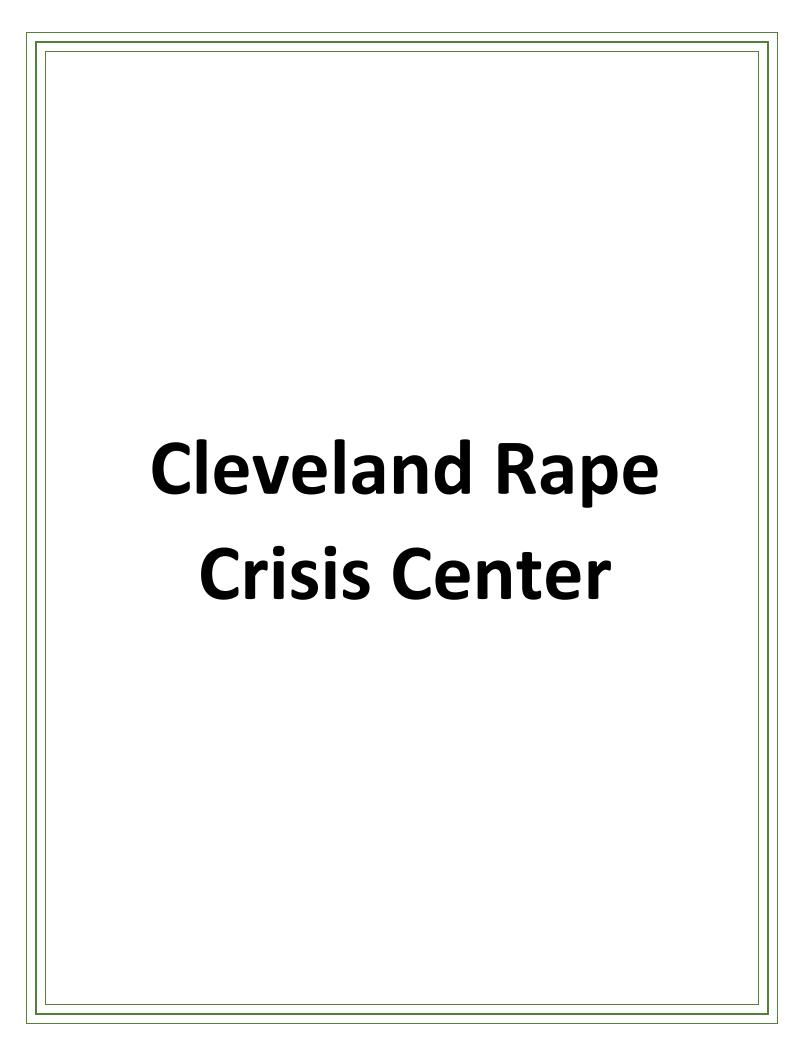
2%

Census (2020)

8%

10%

OTHER (INCLUDING 2 OR MORE RACES)



CY2023 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program		2022 FINAL CONTRACT AMOUNT	2023 CONTRACT ECOMMENDATIONS	PRIORITY
Cleveland Rape Crisis Center				
Comprehensive Sexual Violence Prevention	\$	40,000	\$ 50,000	Prevention
Early Childhood Mental Health**	\$	-	\$ -	Prevention
Total	\$	40,000	\$ 50,000	

^{**} ECMH Providers Pooled Funding

Cleveland Rape Crisis Center

Cleveland Rape Crisis Center (CRCC) offers direct and comprehensive services which include prevention, treatment, education and advocacy to support individuals impacted by sexual violence and assault.

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

Comprehensive Sexual Violence Prevention

CRCC provides Comprehensive Sexual Violence Prevention programming. Community-based prevention programming provides information about sexual violence so that community members can recognize and respond to sexual violence disclosures. The following summarizes the essential elements of CRCC's prevention programming:

- Conduct outreach and educational presentations at various locations throughout Cuyahoga County.
- Disseminate CRCC information through collateral materials including agency brochures, program fliers and 24-hour hotline cards.
- Provide information and in-person referrals to services for survivors and their supporters through community outreach and engagement.
- Participate in community collaborations to promote a victim-centered and trauma-informed approach when serving survivors of rape and sexual abuse.
- Conduct outreach and educational presentations at various locations throughout the County in conjunction with community partners and stakeholders including social service agencies, medical personnel, law enforcement, mental health providers, schools and other community-based organizations.
- Train community partners on referral systems and best practice when referring survivors of rape and sexual abuse to services.

Target Population:

- CRCC's goal is to reach the general public and as such, individuals served reflect the broader demographics of the community, with a focus on individuals most at risk to sexual violence, including youth, LGBTQ+, low income, immigrant communities, people of color and other marginalized communities.
- All ages, All socioeconomic categories.

Anticipated Number of Clients to be Served: 5,000

Number of Staff Required to Implement Program: 7

Steps to Ensure Program Continuity if Staff Vacancies Occur:

CRCC's organizational structure ensures several staff maintain the ability to execute this
programming. Staff are cross trained in prevention delivery to ensure minimal disruptions should
vacancies occur.

Funding Priority:

Prevention

Program Goals:

- Individuals will increase their knowledge to prevent rape and sexual abuse and receive resources regarding how to access direct services.
- Survivors of rape and sexual abuse will have increased access to crisis intervention and prevention services through community outreach efforts with greater familiarity of 24-hour services, therapy, advocacy and more.
- Survivors of rape and sexual abuse will have a better understanding of available resources through CRCC's outreach efforts and will receive information and referrals to appropriate services.
- Community partners will be informed of appropriate referral process and will feel prepared to make referrals to rape crisis intervention services.
- Survivors of rape and sexual abuse will have increased access to available services and will receive the support they need and deserve.

Program Metrics:

- CRCC will participate in 60 community speaking engagements, conducting outreach and educational presentations at various locations throughout Cuyahoga County.
- CRCC will reach 5,000 individuals, engaging them with vital information regarding rape crisis intervention and prevention services.
- CRCC will distribute 5,000 pieces of educational collateral materials including agency brochures, program flier and 24-hour hotline cards.
- Respond to 100% of training requests from community partners.
- 100% of individuals who disclose sexual abuse or rape will receive direct referrals.

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 2,000
- ADAMHS Funded Unduplicated Clients Served: 10,103
- Total Number of Clients Served: 10,103
- Total Number of Clients that Completed this Program/Service: 10,103

Average Cost Per Client: \$20.05

Additional Information:

CRCC's community-based prevention programming provides information about sexual violence so
that community members can recognize and be referred as needed. This allows survivors to
engage in CRCC services so they may understand their mental health needs and develop healthy
coping skills. In addition to our four locations in Cuyahoga County, CRCC also partners with many
community organizations to broaden our reach and scope. ADAMHS funding helps drive
community members in need to receive services.

CY21 Provider Outcomes

Highlights:

Number of Clients that were Anticipated to be Served: 4,000

- ADAMHS Funded Unduplicated Clients Served: 10,703
- Total Number of Clients that were Served: 10,703
- Total Number of Clients that Completed this Program/Service: 10,703

Goals Met:

- Individuals will increase their knowledge to prevent rape and sexual abuse.
- Survivors of rape and sexual abuse will have increased access to crisis intervention and prevention services.
- Survivors of rape and sexual abuse will have a better understanding of available resources through CRCC's outreach efforts.
- Community partners will be informed of appropriate referral process and will feel prepared to make referrals to rape crisis intervention services.
- Survivors of rape and sexual abuse will have increased access to available services and will receive the support.

Metrics Used to Determine Success:

- 60 community speaking engagements
- 4,000 individuals engaged with vital information
- 5,000 pieces of educational collateral materials distributed
- 100% of training requests from community partners responded to
- 100% of individuals who disclose sexual abuse or rape will receive direct referrals

Program Successes:

- CRCC completed 269 speaking engagements
- CRCC reached 10,702 individuals
- 77% of this goal was achieved, with 3,856 units of literature shared out of the goal of 5,000
- 100% of requests from community partners were responded to
- 100% of all survivors who disclosed abuse were referred

Average Cost Per Client in CY21: \$20.05

Additional Information: N/A

Focus on Diversity: Cleveland Rape Crisis Center

Program(s): Comprehensive Sexual Violence Prevention

Diversity, Equity and Inclusion STRENGTH from program proposal:

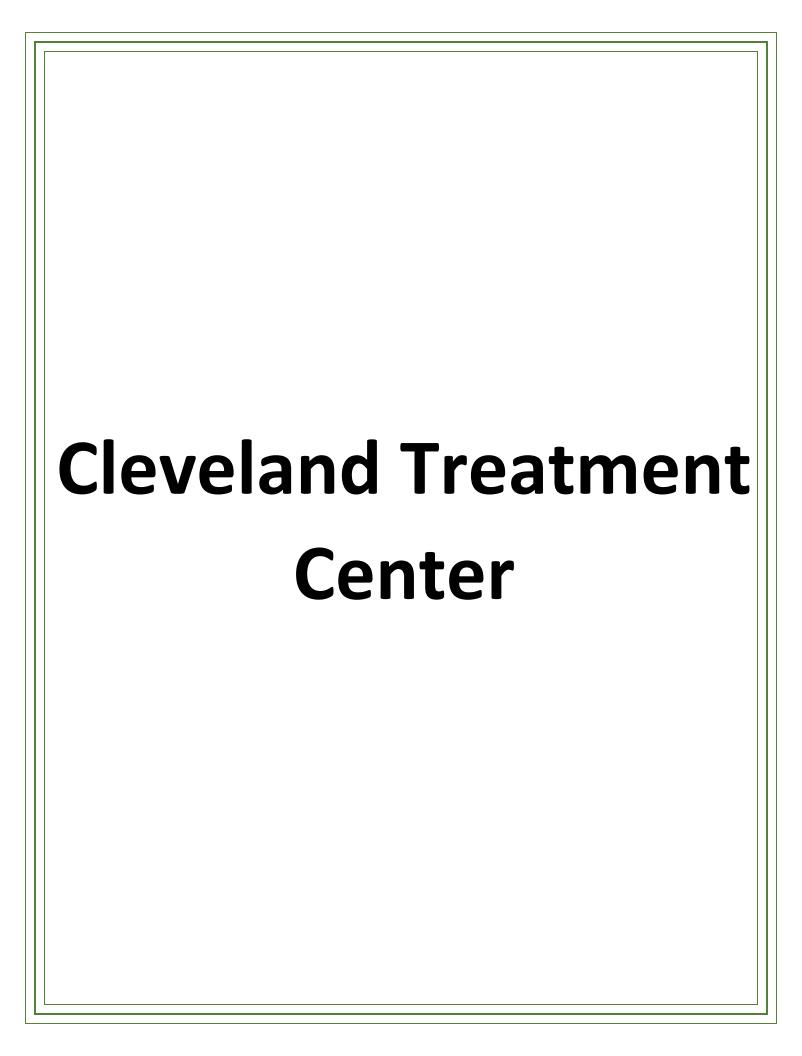
Cleveland Rape Crisis Center is "committed to cultivating a climate that respects and values all clients, community partners, and staff and embraces differences from racial, ethnic and social backgrounds, language use, gender identities, sexual orientation, ages, spiritual/religious beliefs, and/or physical/mental disabilities."



CLIENT DEMOGRAPHICS	
2022 – Total Served 10,117	2023 – Total Projected to be Served 5,000
Gender	Gender
Incomplete information provided	FEMALE MALE NON-BINARY 200 2000 2500 3000
Race	Race
Incomplete information provided	AMERICAN INDIAN OR
Ethnicity	Ethnicity
Incomplete information provided	HISPANIC (LATINX) 800 4200 4200 5000

Incomplete information provided

Note: These are the best estimates based on available information. Figures may be estimated or rounded, and may not equal 100%.



CY2023 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2022 FINAL CONTRACT AMOUNT		2023 CONTRACT RECOMMENDATIONS		PRIORITY
Cleveland Treatment Center					
Art Therapy	\$	51,840	\$	54,585	Peer Support
Sober Housing Coordination	\$	232,888	\$	234,681	Housing
Hattie House MAT Recovery Housing	\$	310,000	\$	335,913	Housing
Total	\$	594,728	\$	625,179	

Cleveland Treatment Center

The mission of the Cleveland Treatment Center (CTC) is to "improve the health and well-being of residents of Northeast Ohio by providing state-of-the-art, cost-effective, abstinence-based drug treatment and prevention health services. CTC is a substance use disorder (SUD) treatment facility that primarily provides Methadone maintenance and outpatient services.

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

Art Therapy Program

Cleveland Treatment Center (CTC) is proposing to increase capacity of CTC's year-round Art Therapy recovery support project. The service gap addressed is the increased need to service individuals negatively impacted by Opiate Use Disorder (OUD) and AOD co-occurring disorders that have not responded to traditional therapies. The services provided in this therapeutic intervention support clients' abilities to reduce or eliminate substance use disorders (SUD) and live productive healthy lives in the community. The American Art Therapy Association (AATA) specifically acknowledges the role that art therapy can play in managing addictions (AATA, 2014). Main assumptions underlying art therapy are that the client will be able to express themselves through a non-verbal, imaginative, and creative exercise. These findings suggest several benefits for SUD patients, such as decreasing denial, reducing opposition to alcohol and drug treatment, providing an outlet for communication, and lessening shame. Viewing, discussing, and interpreting art can help in group discussions, and can motivate patients to change by moving them away from reflection and into a state of action (Aletraris, 2014).

This project will continue to be implemented in partnership with local agencies and organizations throughout Cuyahoga County in a 12-month project timeline. The project is designed in 12-week rotations where three project sites will be served during a rotation. The art therapist will travel to the partner sites with the enrollment specialist, art assistant, and peer recovery supporters. Follow up sessions are completed by the art assistant and peer recovery supporters as all individuals working on this project are adept in AOD recovery, therapy, and art.

Partner organizations: Cleveland Treatment Center, Art Therapy Studio, Men's Shelter at 2100 Lakeside, Salvation Army, Oriana House, YMCA Y-Haven, Cleveland Municipal Court Veterans Treatment, Hitchcock Center for Women, Orca House, Key Decisions, Northern Ohio Recovery Association and Frontline. Each partner site offers a unique opportunity to target a group that has historically dealt with chemical dependency and may not have had access to Art Therapy as a tool for recovery and support.

Target Population:

- The project targets persons affected by SUD and co-occurring disorders who are residents of Cuyahoga County including veterans, homeless individuals, formerly incarcerated, and dually diagnosed
- Demographics for targeted sites is projected to adults ages 18 and older (average age between 35-55), 7% Female and 53% Male, 51% Non-Hispanic Black and 49% Non-Hispanic White, 57% Single, and 70% Unemployed/Disabled
- Less than 100% of the federal poverty level

Anticipated Number of Clients to be Served: 75

Number of Staff Required to Implement Program: 6

Steps to Ensure Program Continuity if Staff Vacancies Occur:

Cleveland Treatment Center has partnered with the Art Therapy Studio since 2015 to implement
this successful art therapy project and plans to continue this partnership in CY23. To date, neither
organization has experienced any staff turnover that has negatively impacted the agency's ability
to successfully meet the scope and goals of the project. CTC has several Peer Recovery
Supporters who are familiar with the project and can dedicate staff to these efforts should a
person leave the organization.

Funding Priority:

Peer Support

Program Goals:

- 75 Clients Engage in Art Therapy Program Per Year
- 80% of Clients Demonstrate Willingness to Follow Therapist/Treatment Recommendations
- 80% of Clients Demonstrate/Verbalize Understanding of Addiction
- 80% of Clients Modify Negative Behaviors
- Benchmark: 80% Adopt Elements of Healthy Lifestyle Changes

Program Metrics:

- 75 clients Enrolled: Measured and tracked using progress notes, attendance in sessions, and through the program intake/OAARS/BAM
- 80% of Clients Demonstrate Willingness to Follow Therapist and Treatment Recommendations: Measured through OAARS (Scales 2, 6, 7, 8) and BAM (Question 9)
- 80% Demonstrate and Verbalize Understanding of Addiction Measured through OAARS (Scale 4)
- 80% of Clients Modify Negative Behaviors: Measured through OAARS (Scales 1, 3) and BAM (Q 4, 5, 6, 7)
- 80% Adopt Elements of Healthy Lifestyle Changes: Measured through OAARS (Scales 5, 9, 10) and BAM (Q 11,16)

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 30
- ADAMHS Funded Unduplicated Clients Served: 21
- Total Number of Clients Served: 21
- Total Number of Clients that Completed this Program/Service: 19

Average Cost Per Client: \$773.38

Additional Information:

Cleveland Treatment Center's (CTC) cost-effective art therapy programming is an essential service
offered at several partner community-based organizations in Cuyahoga County. Each partner site
offers a unique opportunity to target a group that has historically dealt with chemical
dependency and may not have had access to Art Therapy as a tool for recovery and support.
Additionally, this program recognizes that all providers have been negatively impacted by the

opioid epidemic. This complementary and alternative medical (CAM) approach in conjunction with substance use treatment is designed to help address the opioid epidemic. Since the inception of the art therapy program in 2015 (CY15-CY22), CTC has seen positive health behavior outcomes related to substance use recovery in over 500 clients.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 60
- ADAMHS Funded Unduplicated Clients Served: 54
- Total Number of Clients that were Served: 54
- Total Number of Clients that Completed this Program/Service: 45

Goals Met:

- 60 clients engage and 80% of engaged clients successfully complete the program with average improvement in behavior of a minimum of a 25%
- 80% of clients demonstrate willingness to follow therapist and treatment recommendations
- 80% of clients demonstrate and verbalize the understanding of addiction
- 80% of clients modify negative behaviors
- 80% adopt elements of healthy lifestyle changes

Metrics Used to Determine Success:

- 60 clients Enrolled: Measured and tracked using progress notes, attendance in sessions, and through the program intake/OAARS/BAM
- 80% of clients demonstrate willingness to follow therapist and treatment recommendations: Measured through OAARS (Scales 2, 6, 7, 8) and BAM (Question 9)
- 80% demonstrate and verbalize the understanding of addiction: Measured through OAARS (Scale 4)
- 80% of clients modify negative behaviors Measured through OAARS (Scales 1, 3) and BAM (Q 4, 5, 6, 7)
- 80% adopt elements of healthy lifestyle changes Measured through OAARS (Scales 5, 9, 10) and BAM (Q 11, 16)

Program Successes:

- 90% (54/60) with 84% successfully completing the program
- 89% of Clients demonstrated willingness to following therapist/treatment recommendations with an overall improvement in behavior by 24.7% percent change from intake to discharge
- 87% of Clients self-reported improvement in understanding of addiction with an average improvement of 32.8% percent change from intake to discharge
- 87% of Clients self-reported modification of negative behaviors with average improvement of 31.9% percent change from intake to discharge
- 83% of Clients self-reported increase in adoption of healthy lifestyle with and an average of 25.9% percent change/increase in positive behavior change from intake to discharge.

Average Cost Per Client in CY21: \$760.98

Additional Information:

Since the inception of Art Therapy programming at Cleveland Treatment Center (CTC), which was funded as a pilot program by the ADAMHS Board starting in 2015, CTC has enrolled over 469 unduplicated individuals to date. Despite COVID-19 challenges, the team was still able to enroll 54/60 individuals meeting 90% of the target program goal for CY21. CTC continues to explore new community partnerships post-COVID-19 with the reopening of organizations, so staff can expand engagement to include residents of Recovery Houses and other community-based organizations that could benefit from this remarkable service.

Hattie House - MAT Housing Program

CTC services are designed to help patients address and overcome chemical dependency and to assist them in developing strategies for maintaining a chemical-free lifestyle to enhance quality of life. Through this treatment philosophy and funding available through the ADAMHS Board of Cuyahoga County, in CY17 CTC created the Hattie House, an Interim MAT Recovery Housing project and recovery home for those enrolled in MAT services at CTC. The service gap addressed is the increased need to service individuals negatively impacted by SUD and co-occurring disorders. The services provided in this peerrun, recovery-oriented housing intervention support clients' abilities to eliminate SUD and live productive healthy lives. Since July 2017, CTC has implemented a peer-run, recovery-oriented housing intervention via Hattie House, a MAT recovery home founded by Cleveland Treatment Center based on the Federal Guidelines for Opioid Treatment Programs. Hattie House is a sober housing environment for people in recovery, including individuals utilizing Medical Assisted Treatment (MAT). This recovery home has an on-site house manager and peer recovery supporter. Residents can remain in this house for up to six months after successfully completing detox and continuing to receive treatment for addiction. Many sober living environments have restrictions on MAT and Hattie House helps fill that gap in Cuyahoga County. Most recently, CTC partnered with Oriana House to be a direct referral site from Oriana's new diversion house initiative.

Since the inception of this program in 2017, CTC has been able to successfully provide a holistic approach to providing care coordination, housing, and treatment to individuals affected by the heroin and opiate epidemic in Cuyahoga County. Interim MAT Treatment and Recovery Housing together are the interventions being piloted for their impact on waiting lists, treatment linkage and recovery support. Treatment gaps addressed in this intervention also include individuals that are unable to access treatment. This project is designed to address that service gap of access to treatment by reducing the impact of waiting time on a targeted 24 clients annually. This project also addresses the negative stigma often associated with of Recovery Housing, MAT, homelessness and mental health and substance use issues. Case managers provide benefit coordination, transitional-permanent housing, training on life skills, employment readiness training, transportation, HIV/counseling testing, medication adherence and referrals. While the activities under this standard will vary depending on level, residents will engage in meaningful activities individually and as part of their shared community.

Target Population:

- This project addresses service gaps of lacking recovery housing and MAT treatment services
- Adults 18-65 and older
- Less than 100% of the federal poverty level

Anticipated Number of Clients to be Served: 24

Number of Staff Required to Implement Program: 11

Steps to Ensure Program Continuity if Staff Vacancies Occur:

CTC has not experienced any staff turnover that has negatively impacted its ability to successfully
meet the scope and goals of the project. Additionally, CTC has several Peer Recovery Supporters
and well as clinical and case management staff who are familiar with the project and are cross
trained. CTC can dedicate staff temporarily to these efforts should a person leave the
organization.

Funding Priority:

High Quality Housing

Program Goals:

- 24 clients engage in MAT Recovery Housing Hattie House
- 80% of clients demonstrate willingness to follow therapist and treatment recommendations
- 80% demonstrate and verbalize the understanding of addiction
- 80% of clients modify negative behaviors
- 80% adopt elements of healthy lifestyle changes

Program Metrics:

- 24 clients linked to MAT Recovery Housing (Hattie House) per year: Measured and tracked using referrals, case management notes, enrollment intake, client milestones, BAM/OAARS
- 80% of clients demonstrate willingness to follow therapist and treatment recommendations: Measured through OAARS (Scales 2, 6, 7, 8) and BAM (Question 9)
- 80% demonstrate and verbalize the understanding of addiction: Measured through OAARS (Scale 4)
- 80% of clients modify negative behaviors: Measured through OAARS (Scales 1, 3) and BAM (Q 4, 5, 6, 7)
- 80% adopt elements of healthy lifestyle changes: Measured through OAARS (Scales 5, 9, 10) and BAM (Q 11, 16)

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 12
- ADAMHS Funded Unduplicated Clients Served: 16
- Total Number of Clients Served: 16
- Total Number of Clients that Completed this Program/Service: 6

Average Cost Per Client: \$2,360.63

Additional Information:

Since the inception of this program in 2017, CTC has been able to successfully provide a holistic
approach to providing care coordination, housing, and treatment to individuals affected by the
heroin and opioid epidemic in Cuyahoga County. Interim MAT and Recovery Housing together are
the interventions being piloted for their impact on waiting lists, treatment linkage and recovery
support. This project addresses the negative stigma often associated with Recovery Housing,

MAT, homelessness and mental health and substance use issues. Case managers provide benefit coordination, transitional-permanent housing, training on life skills, employment readiness training, transportation, HIV counseling/testing, medication adherence, and referrals. While the activities under this standard will vary depending on level, residents will engage in meaningful activities individually and as part of their shared community.

CY21 Provider Outcomes: N/A – New Program beginning in 2022

Sober Bed/Recovery Housing Benefit Coordination

CTC was selected by the ADAMHS Board to pilot an initiative as the Recovery Sober Beds Benefit Coordinator for persons with co-occurring disorders, on probation/engaged with Marshalls Office and AOD. The initiative was piloted to address the service gap between safe and supportive environmental opportunities/beds for persons in recovery, while expanding the continuum of services by offering recovery housing for adults who struggle with OUD and AOD. While staff recognize that the program funding type selected is 'Recovery/Sober Housing' it is important to note that CTC is leading the benefit coordination for all clients, which links them to recovery hosing with one of the agency's 51 partner recovery homes. Project progress has been guided by the CTC Sober Beds Logic Model, protocols for administrative oversight, NARR/CARF quality standards, policies and procedures, safety, and effective data and outcome collection. The National Alliance for Recovery Residences (NARR) standards represent a set of guidelines that will continue to serve as a foundation for expanding the infrastructure for recovery housing in Ohio. CTC piloted this project and had since served as the Recovery Housing Benefit Coordinator for the ADAMHS Board since 2015, which has allowed CTC to place an average of nearly 150 clients annually in 51 recovery residences.

The project is to assist persons accessing quality recovery housing, which is guided by NARR/CARF standards. CTC's milestone tracking related to client retention and engagement finds that clients struggle to succeed without access to protective factors, such as a safe recovery and living environment. Recovery housing programs are founded on the belief that safe, stable, and supportive housing is the most influential protective factor in the recovery process and that is most impacted with residual challenges and cycles of addiction. Through sober housing and linkage to wrap-around and supportive housing that are focused on honesty, bonding, and external sober social/recreational activities, staff see positive behavior change among clients. The project goal is to help 125 individuals improve their physical, mental, and spiritual well-being through access to these life-saving and essential services.

Target Population:

- Opiate dependent persons and persons impacted by SUD ages 18 and older
- Less than 100% of the federal poverty level

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:

• Cleveland Treatment Center has implemented this ADAMHS funded project since 2015, and to date, CTC has not experienced any staff turnover that has negatively impacted the agency's ability to successfully meet the scope and goals of the project. As previously mentioned, CTC has served approximately 1,198 individuals and during this time clients were linked to care and services in a timely manner, which was not impacted by staff vacancies. CTC has several Peer Recovery Supporters and well as medical and case management staff who are familiar with the project and can dedicate staff to these efforts should a person leave the organization.

Funding Priority:

High Quality Housing

Program Goals:

- 125 clients linked to recovery housing and wrap-around services per year
- 80% of clients demonstrate willingness to follow therapist and treatment recommendations
- 80% demonstrate and verbalize understanding of addiction
- 80% of clients modify negative behaviors
- Adopt elements of healthy lifestyle changes

Program Metrics:

- 125 clients linked to recovery housing and wrap-around services per year: Measured and tracked using referrals, case management notes, enrollment intake, client milestones, BAM, OAARS.
 OAARS/BAM
- 80% of clients demonstrate willingness to follow therapist/treatment recommendations: Measured through OAARS (Scales 2, 6, 7, 8) and BAM (Question 9)
- 80% demonstrate and verbalize the understanding of addiction: Measured through OAARS (Scale 4)
- 80% of clients modify negative behaviors: Measured through OAARS (Scales 1, 3) and BAM (Q 4, 5, 6, 7)
- 80% adopt elements of healthy lifestyle changes: Measured through OAARS (Scales 5, 9, 10) and BAM (Q 11,16)

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 62
- ADAMHS Funded Unduplicated Clients Served: 64
- Total Number of Clients Served: 64
- Total Number of Clients that Completed this Program/Service: 39

Average Cost Per Client: \$853.13

Additional Information:

• Cleveland Treatment Center (CTC) anticipates meeting or exceeding the enrollment goal (125) by end of CY22. The mission of CTC is to improve the health and well-being of residents of Northeast Ohio by providing state of the art, cost-effective, abstinence-based drug treatment, prevention, and health promotion services. CTC provides a multi-disciplinary team approach to the evaluation and treatment of chemical dependency and has done so with this recovery housing project. CTC services are designed to help clients address and overcome chemical dependency and to assist them in developing strategies for maintaining a chemical-free lifestyle to enhance quality of life and recovery. Through this treatment philosophy, and available funding through the ADAMHS Board, CTC has been able to successfully provide a holistic approach to providing care coordination, housing, and treatment to individuals affected by the opioid epidemic in Cuyahoga County.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 125
- ADAMHS Funded Unduplicated Clients Served: 102
- Total Number of Clients that were Served: 102
- Total Number of Clients that Completed this Program/Service: 76

Goals Met:

- 125 linked to recovery housing and benefit coordination with 80% of clients successfully completing the program with 25% behavior change
- 80% of clients demonstrate willingness to follow therapist and treatment recommendations
- 80% of clients demonstrate and verbalize understanding of addiction.
- 80% of clients modify negative behaviors
- 80% adopt elements of healthy lifestyle changes

Metrics Used to Determine Success:

- 125 clients Enrolled Measured and tracked using progress notes, attendance in sessions, and through the program intake/OAARS/BAM
- 80% of clients demonstrate willingness to follow therapist and treatment recommendations: Measured through OAARS (Scales 2, 6, 7, 8) and BAM (Question 9)
- 80% demonstrate and verbalize understanding of addiction: Measured through OAARS (Scale 4)
- 80% of clients modify negative behaviors: Measured through OAARS (Scales 1, 3) and BAM (Q 4, 5, 6, 7)
- 80% adopt elements of healthy lifestyle changes: Measured through OAARS (Scales 5, 9, 10) and BAM (Q 11, 16)

Program Successes:

- 82% target enrollment (102/125) with a total of 76/102 (75%) successfully completing the program of total enrolled
- Of clients who successfully discharged, 87% demonstrated willingness to following therapist and treatment recommendations with an overall improvement in behavior by 27.4% percent change from intake to discharge
- Of clients who successfully discharged, 85% self-reported improvement in understanding of addiction with an average improvement of 30.6% percent change from intake to discharge.
- Of clients who successfully discharged, 85% self-reported modification of negative behaviors with average improvement of 29.2% percent change from intake to discharge.
- Of clients who successfully discharged, 89% self-reported increase in adoption of healthy lifestyle
 with and an average of 31.6% percent change/increase in positive behavior change from intake to
 discharge.

Average Cost Per Client in CY21: \$3,988.39

Additional Information: N/A

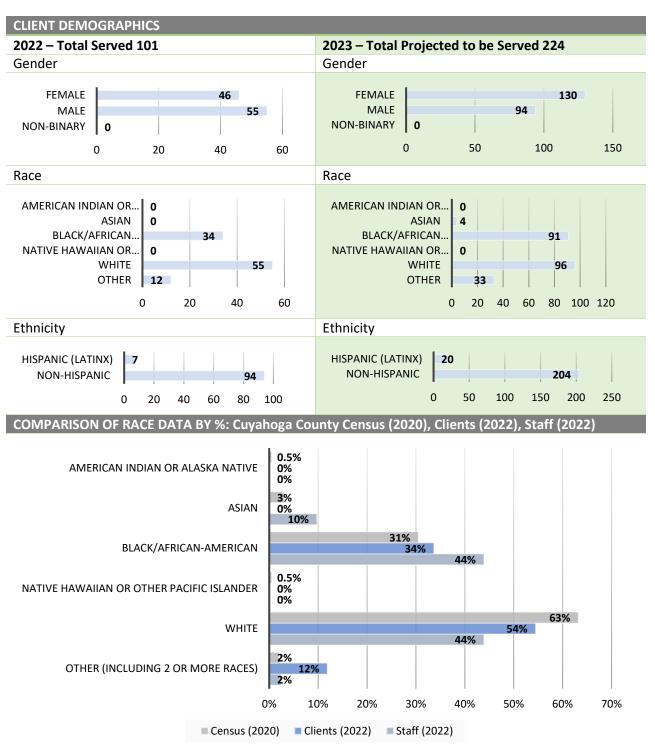
Focus on Diversity: Cleveland Treatment Center

Program(s): Art Therapy Program; Hattie House - MAT Housing Program; Sober Bed/Recovery Housing Benefit Coordination

Diversity, Equity and Inclusion STRENGTH from program proposal:

The agency has a policy or polices related to non-discrimination, equal employment opportunity, and/or harassment based on protected categories of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), language, disability, marital status, sexual orientation, or military status.





Note: These are the best estimates based on available information. Figures may be estimated or rounded, and may not equal 100%.

Colors+ Youth Center and Colors+ Counseling

CY2023 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program		2022 FINAL CONTRACT AMOUNT	2023 CONTRACT RECOMMENDATIONS	PRIORITY
Colors + Youth Center and Colors + Counseling				
LGBTQ+ Prevention and Treatment Groups	\$	29,520	\$ 35,000	Prevention
Total	\$	29,520	\$ 35,000	

Colors+ Youth Center and Colors+ Counseling

Colors+ has various programs available for LGBTQ+ youth and allies and is strengthening LGBTQ+ youth and allies by promoting individual and community wellness.

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

LGBTQ+ Empowerment and Support Groups

Colors+ offers the only treatment or prevention groups for the LGBTQ+ population that are both free and facilitated by a licensed mental health professional. Colors+ offers LGBTQ+ Prevention Groups (youth ages 5-18), treatment groups for LGBTQ+ adults, trauma-informed yoga and a summer Camp P.O.W.E.R. for LGBTQ+ teens.

Two cycles of art therapy groups will be run for youth. In response to feedback this year, groups will be in the fall and winter, broken down by age (5-7, 8-10, 11-14, 15-18) to better meet emotional and developmental needs. Groups for ages 5-10 will be 8 weeks, ages 11-18 will be 12 weeks. Art therapy encourages youth to process exploration of positive and negative experiences; reinforcement of one's identity; identify and use personal strengths to better manage present and future challenges and to connect with others in the LGBTQ+ community to decrease social isolation.

Treatment groups for LGBTQ+ adults who meet criteria for mood disorders, anxiety disorders, adjustment disorders and trauma related disorders will meet for 12 weeks, with three separate sessions run consecutively. Group treatment interventions are aimed at relieving, reducing and better managing symptoms using an LGBTQ+ Affirmative CBT model based on minority stress.

Trauma-informed yoga will be offered to all ages and family attendance will be encouraged. Intentional, gentle yoga poses address the trauma experience on mind, brain and body. Trauma-informed yoga is based on the hatha style of yoga, has nothing to do with form and everything to do with how participants are feeling. The goal of this approach is to provide survivors a safe space to focus on the power of their body to inform decision-making, thereby strengthening their body awareness and fostering a sense of agency (something that's often negatively affected by trauma). People who are LGBTQ+ are not always welcomed or treated appropriately when going to regular classes. This group assures a safe space.

Camp P.O.W.E.R. is co-led with Girls With Sole, introducing youth to wellness practices that address mental and physical well-being. The five-day camp takes youth into the community to explore fitness practices that address mind and body such as boxing, pound, yoga, stand up paddle boarding, rock climbing and more. Camp addresses coping skills like journaling, art, music and other forms of self-expression.

Target Population:

- Colors+ serves the LGBTQ+ community and their families (lesbian, gay, bisexual, transgender, and queer and other sex and gender minorities not specifically identified). Programs are targeted to meet developmental and social needs by age groups, 4–9-year-old, children ages 10-17 and adults ages 18+.
- All ages, All socioeconomic categories

Anticipated Number of Clients to be Served: 120

Number of Staff Required to Implement Program: 8

Steps to Ensure Program Continuity if Staff Vacancies Occur:

Colors+ has ten therapists who are willing to fill in if someone is unable to do a group for any
reason. Agency directors are licensed counselors and the community engagement coordinator is
an art therapist. All are willing to step in as needed.

Funding Priority:

Prevention

Program Goals:

- Youth will be able to identify five emotions they have experienced during the group
- To reinforce one's identity through art interventions
- Youth will be able to list at least three positive attributes about themselves when asked by facilitator
- To replace negative coping with positive coping, like art and emotional support of others (youth)
- To connect with others in the LGBTQ+ community to decrease social isolation (youth)

Program Metrics:

• DESSA + art assessment

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 24
- ADAMHS Funded Unduplicated Clients Served: 22
- Total Number of Clients Served: 38
- Total Number of Clients that Completed this Program/Service: 21

<u>Average Cost Per Client:</u> \$73.25 for the 5–10-year-old support groups; \$54.93 for the 11-17-year-old support groups; \$51.50 for the adult support groups

Additional Information:

• The youth worked with were siblings struggling with the gender identity of their sibling. Staff incorporated them in group when possible and met with parents weekly to provide support and resources. "I knew I met my goals when the following happened, two of the group members shared about being kicked out of their houses, one by their father and another one by their mother. My art prompt for the week was to draw and share a special memory with the group, and one member drew him hand in hand with his father, who took emergency custody over him after his mother kicked him out, and this inspired another member to share being kicked out by their father and living with their mother. They all decided to become friends on Discord (social media) after that."

CY21 Provider Outcomes: N/A – New Program beginning in 2022

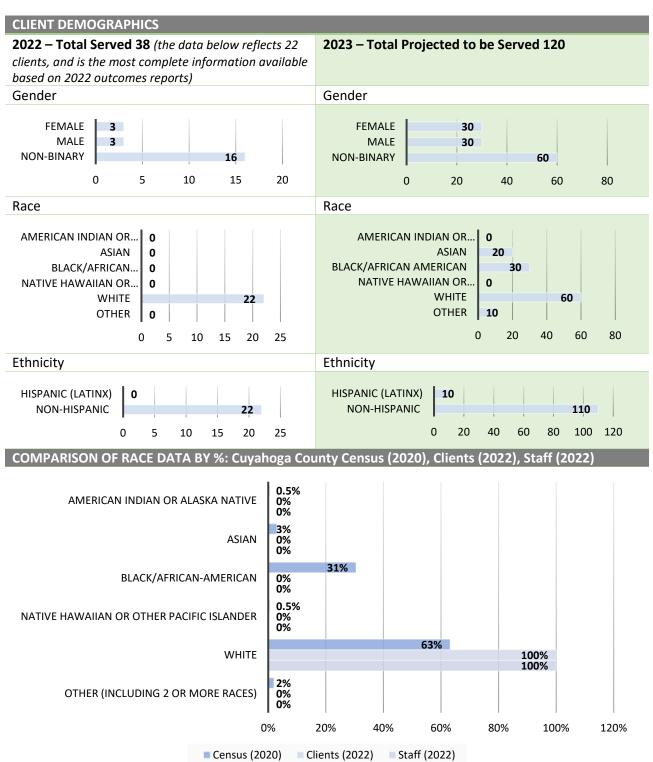
Focus on Diversity: Colors+ Youth Center and Counseling

Program(s): LGBTQ+ Empowerment and Support Groups

Diversity, Equity and Inclusion STRENGTH from program proposal:

The agency has a policy or polices related to non-discrimination, equal employment opportunity, and/or harassment based on protected categories of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), language, disability, marital status, sexual orientation, or military status.





Note: These are the best estimates based on available information. Figures may be estimated or rounded, and may not equal 100%.

Community Action Against Addiction

CY2023 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2022 FINAL CONTRACT AMOUNT	2023 CONTRACT RECOMMENDATIONS	PRIORITY
Community Action Against Addiction (CAAA)			
Pooled Funding:			
SUD-Medication Assisted Treatment (MAT)	\$ -	\$ -	
SUD-Residential Treatment Program	\$ -	n/a	

Community Action Against Addiction

Through Medication-Assisted Treatment (MAT) and therapy, Community Action Against Addiction (CAAA) provides individuals with substance use disorders the tools and resources necessary to combat and overcome addiction to heroin and other opiates. CAAA is a state licensed Opioid Treatment Program (OTP) program.

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

Medication Assisted Treatment for Opioid Addiction Disorders

The agency is required to conduct a physical exam, urinalysis testing, and a biopsychosocial assessment upon intake of new clients. After intake clients participate in an orientation process which outlines the client requirements to continue to participate in the OTP/MAT program. The OTP program includes medical and behavioral health objectives for the client to achieve a successful outcome.

Target Population:

- Clients with a substance use disorder (SUD) (opioid use disorder only) and/or mental health (MH)
 diagnosis including those who are determined to be indigent at intake
- Adults 18-65+; All socioeconomic categories

Anticipated Number of Clients to be Served: 25

Number of Staff Required to Implement Program: 40

Steps to Ensure Program Continuity if Staff Vacancies Occur:

 The agency is constantly recruiting for program employees to ensure adequate staffing levels. If an emergency or crisis-situation were to occur staff would refer clients to other licensed MAT facilities to ensure that there is no disruption in services.

Funding Priority:

• Treatment Services – Pooled Funding

Program Goals:

- Assist clients in achieving and maintaining sobriety from opioid use with the assistance of Medication Assisted Treatment
- Provide individual psychotherapy, group counseling, case management, and medical services to clients as required and/or needed
- Assist clients gaining the coping skills and support systems necessary to achieve and maintain self-efficacy
- Expand the number of clients served in the OTP/MAT program by at least 10% in 2023 and to initiate an offering of general Mental Health services

Program Metrics:

- Number Reports of participation in MAT program, accompanied by random urine screens
- Monitoring progress towards the goals outlined in individual treatment plans
- Qualitative review of individual psychotherapy sessions as well as case management support participation

Increased number of clients and establishment of mental health services in early 2023

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 435
- ADAMHS Funded Unduplicated Clients Served: 18
- Total Number of Clients Served: 460
- Total Number of Clients that Completed this Program/Service: 4

Average Cost Per Client: \$8,055

Additional Information: N/A

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 13
- ADAMHS Funded Unduplicated Clients Served: 12
- Total Number of Clients that were Served: 575
- Total Number of Clients that Completed this Program/Service: 1

Goals Met:

- All clients will receive at least one individual counseling per month for the reporting period
- Receive 80% negative urine drug screen (UDS) results for clients randomly tested for non-MAT drugs during the reporting period

Metrics Used to Determine Success:

- Biopsychosocial Assessment provides the evaluation and foundation for the client treatment services and activities. An individual treatment plan based on the client's assessment and goals is utilized to track progress and outcomes of treatment
- Conduct random monthly UDS screens
- Accept 24/7 intake screening and accept all walk-in referrals.

Program Successes:

- 100% of the clients received individual or group counseling at least one time per month during the reporting period. Out of 5,842 UDS conducted during the reporting period, 58% were positive for illicit non-MAT drugs and 42% were negative of non-MAT drugs.
- CAAA does not have a waiting list and now does intake calls and screenings 24-hours-per-day, 7days-per-week.

Average Cost Per Client in CY21: \$7,500

Additional Information: N/A

		2021 First Outcome		2022 First Outcome	
Provider:	Community Action Against Addiction	Count:	17	Count:	1
		2021 Final Outcome		2022 Final Outcome	
Instrument:	Brief Addiction Monitor	Count:	10	Count:	0
Program:	Substance Use Disorder Treatment	2021 % of Final:	58.82%	2022 % 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.

	Evaluation		First Outcome	Final Outcome	Average	
Population	Year	SubScale	Average	Average	Difference	Significance
Adults (18+ years)	2021	Drug_Use	2.56	2.11	-0.44	Not Significant
Adults (18+ years)	2021	Protective	13.14	16.71	3.57	Significant at p<.05
Adults (18+ years)	2021	Risk	5.57	6.14	0.57	Not Significant
Adults (18+ years)	2022	Drug_Use				Not Significant
Adults (18+ years)	2022	Protective				Not Significant
Adults (18+ years)	2022	Risk				Not Significant

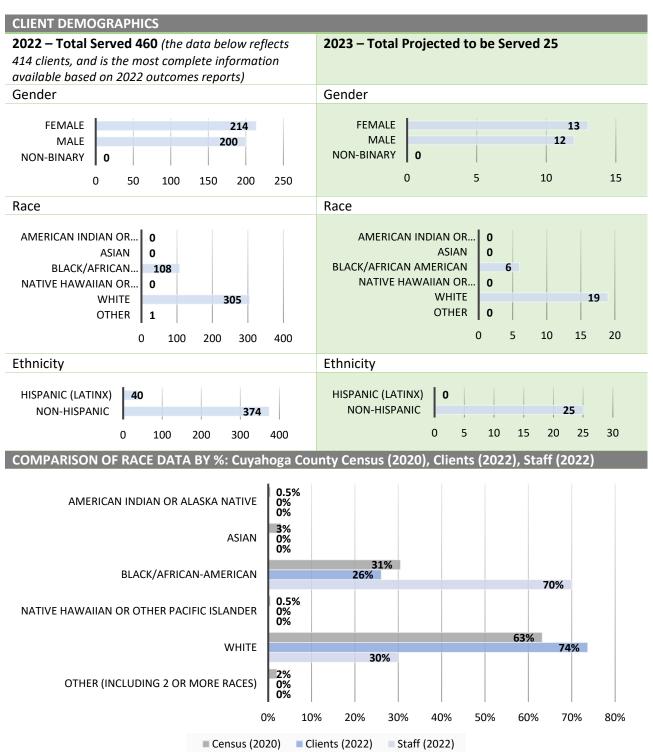
Focus on Diversity: Community Action Against Addiction

Program(s): Medication Assisted Treatment for Opioid Addiction Disorders

Diversity, Equity and Inclusion STRENGTH from program proposal:

The agency has a policy or polices related to non-discrimination, equal employment opportunity, and/or harassment based on protected categories of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), language, disability, marital status, sexual orientation, or military status.





Note: These are the best estimates based on available information. Figures may be estimated or rounded, and may not equal 100%.

Community Assessment & Treatment Services

CY2023 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program		2022 FINAL CONTRACT AMOUNT		2023 CONTRACT RECOMMENDATIONS	PRIORITY
Community Assessment & Treatment Services (CATS)					
Modified Therapeutic Community	\$	150,000	\$	-	
Sober Living	\$	84,784	\$	135,990	Housing
Transportation	\$	-	\$	50,000	Removing Barriers
Employment Services	\$	-	\$	42,184	Employment
Total	\$	234,784	\$	228,174	
Pooled Funding:					
Room and Board	\$	-	\$	-	
Drug Court Sustainability	\$	-	\$	-	
Mental Health Enhanced Substance Use Residential			,		
Treatment			\$	-	
SUD Residential Treatment	\$	-	\$	-	
Outpatient SUD Treatment	\$	-	\$	-	

Community Assessment & Treatment Services

Community Assessment & Treatment Services (CATS) provides Alcohol and Other Drugs (AOD) Intensive Outpatient (IOP) Treatment Program and residential treatment services to referrals from Drug Court, the community and adult probation staff.

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

Drug Court Sustainability

The drug court model is evidence-based and is on the SAMHSA National Registry of Evidence Based Practices. This program provides CARF accredited substance use disorder (SUD) treatment in collaboration with the Cuyahoga County Court of Common Pleas and the City of Cleveland Municipal Court's specialty dockets. SUD treatment is provided through a wide array of ASAM levels of care, ranging from 1.0 (outpatient) through 3.5 (high intensity residential). The service array consists of diagnostic assessments, IOP group counseling, group counseling, case management, peer support, urinalysis, and Medication Assisted Treatment (MAT). Evidence-based practices include Cognitive Behavioral Therapy (CBT), Motivational Interviewing (MI), Solution Focused Therapy, Behavior Management and Social Learning. In addition, it includes H.E.A.T (Habilitation, Empowerment, Accountability Therapy), a culturally responsive curriculum for African Americans.

The clinicians, who are professional counselors, social workers, and chemical dependency professionals, provide access to multiple levels of care to this population, which is a crucial element of the model, as it provides the ability to respond to changing treatment needs of the individual within one single treatment episode, providing a continuity of care. This program provides clinical services subject to Medicaid reimbursement for clients who do not have Medicaid. These services are then billed to Medicaid once they are approved. Assistance in applying for and maintaining Medicaid are continuous.

Target Population:

- Cuyahoga County residents, adults 18 and over, any race, any gender, any sexual orientation, any
 religion, and lower than average socioeconomic status that meet the criteria for a DSM (American
 Psychiatric Association's Diagnostic and Statistical Manual) substance use disorder and/or criteria
 for a mental health diagnosis.
- They are active participants in one of the specialty dockets operated by the Cuyahoga County Court of Common Pleas or the City of Cleveland Municipal Court.

Anticipated Number of Clients to be Served: 51

Number of Staff Required to Implement Program: 37

Steps to Ensure Program Continuity if Staff Vacancies Occur:

Qualified staff are cross trained and able to step into other roles when positions are vacated.
 CATS recruits on a continuous basis. The agency promotes from within, and staff provides
 continuity of service to clients and will assist in whatever way possible. CATS operates as a field
 site and accepts interns from CWRU, CSU, UA, John Carroll, Tri-C and online educational
 programs. The agency often recruits from interns and access the schools' databases to post open
 positions.

Funding Priority:

24/7 Access

Program Goals:

- 60% of clients will achieve sobriety
- 60% of clients will reduce factors associated with continuing or relapsing substance use
- 60% of clients will increase factors associated with achieving or maintaining sobriety

Program Metrics:

- SUD use subscale of the Brief Addiction Monitor (BAM)
- Risk factors subscale of the Brief Addiction Monitor (BAM)
- Protective factors subscale of the Brief Addiction Monitor (BAM)

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 12
- ADAMHS Funded Unduplicated Clients Served: 4
- Total Number of Clients Served: 23
- Total Number of Clients that Completed this Program/Service: 3

Average Cost Per Client: \$1,250

Additional Information:

• This program provides substance use disorder (SUD) treatment as part of a larger Drug Court Specialty Docket. This model is evidence-based and is on the SAMHSA National Registry of Evidence Based Practices. The program is in collaboration with the area's County and Municipal Drug Court Dockets, all who are monitored by SAMHSA. SUD treatment is provided through a wide array of ASAM criteria ranging from 1.0 (outpatient) through 3.5 (high intensity residential). The service array consists of; psychiatric diagnostic evaluations, crisis/ group/individual psychotherapy sessions, assessments, group counseling, IOP, case management, urine drug screens, and residential treatment, all of which are delivered by independent and/or supervised practitioners that are state licensed. These clinicians provide access to multiple levels of care to this population, which is a crucial element of the model as it provides the ability to respond to changing treatment needs of the individual within one single treatment episode, providing a continuity of care. In addition, the program includes a liaison to the courts, an essential element of the model in which the treatment provider and the criminal justice personnel are integrated into one, unified team.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 6
- ADAMHS Funded Unduplicated Clients Served: 12
- Total Number of Clients that were Served: 18
- Total Number of Clients that Completed this Program/Service: 5

Goals Met:

- 100% of clients will have access to SUD treatment regardless of Medicaid coverage
- 75% of clients will have a decrease in risk factors associated with SUD

• 75% of clients will have an increase in protective factors associated with SUD

Metrics Used to Determine Success:

Brief Addiction Monitor

Program Successes:

• 100% of clients have access to SUD treatment, 75% of clients have a decrease in risk factors associated with SUD, and 75% of clients had an increase in protective factors associated with SUD.

Average Cost Per Client in CY21: \$1,144.43

Additional Information:

• This program provides substance use disorder (SUD) as part of a larger Drug Court Specialty Docket. This model is evidence-based and is on the SAMHSA National Registry of Evidence Based Practices. The program is in collaboration with the area's County and Municipal Drug Court Dockets; all who are monitored by SAMHSA. SUD treatment is provided through a wide array of ASAM criteria ranging from 1.0 (outpatient) through 3.5 (high intensity residential). The service array consists of; psychiatric diagnostic evaluations, crisis/ group/individual psychotherapy sessions, assessments, group counseling, IOP, case management, urine drug screens and residential treatment. All of which are delivered by Independent and/or Supervised Practitioners that are state licensed. These clinicians provide access to multiple levels of care to this population, which is a crucial element of the model, as it provides the ability to respond to changing treatment needs of the individual within one single treatment episode, providing a continuity of care. In addition, the program includes a liaison to the courts, an essential element of the model in which the treatment provider and the criminal justice personnel are integrated into one, unified team.

Mental Health Enhanced Substance Use Residential Treatment

This program provides residential treatment for substance use disorders at an ASAM 3.1 level delivered in compliance with CARF standards for individuals who would otherwise not have access to needed services and provides integrated, mental health treatment to address barriers to recovery posed by severe mental illness. The program is effective, consistently meeting benchmarks for success. It provides mental health services and accommodations for clients whose symptoms of mental illness prohibit successful engagement and retention. Staff provide quick access to psychiatry, regardless of insurance coverage. This allows client to have their mental illness addressed timely, without needing to wait for Medicaid approval, significantly reducing the risk of symptom deterioration, behavioral problems, and treatment failures. The psychiatric services are rendered in house, eliminating transportation costs and time away from substance use treatment.

Service arrays consists of all SUD residential services: assessment, group and individual counseling, urinalysis, crisis intervention, case management and ancillary groups. In addition, clients receive mental health assessments, group, and individual counseling.

The program is accredited by ODRC in addition to CARF, allowing referrals to come from other ODRC accredited organizations with an emphasis on the Cuyahoga County Court of Common Pleas and municipal courts within Cuyahoga County, increasing the reach of the program to serve more clients.

Target Population:

• Cuyahoga County residents, adults 18 and over, any race, any gender, any sexual orientation, any religion, and lower than average socioeconomic status.

 They meet the criteria for a DSM (American Psychiatric Association's Diagnostic and Statistical Manual) substance use disorder. In addition, they meet the criteria for a mental health diagnosis.
 The symptoms of their mental illness pose a barrier to successful engagement and active participation in substance use treatment.

Anticipated Number of Clients to be Served: 88

Number of Staff Required to Implement Program: 9

Steps to Ensure Program Continuity if Staff Vacancies Occur:

Qualified staff are cross trained and able to step into other roles when positions are vacated.
 CATS recruits on a continuous basis. The agency promotes from within, and staff provides
 continuity of service to clients and will assist in whatever way possible. CATS operates as a field
 site and accepts interns from CWRU, CSU, UA, John Carroll, Tri-C and online educational
 programs. The agency often recruits from interns and access the schools' databases to post open
 positions.

Funding Priority:

24/7 Access

Program Goals:

• 100% of clients will have timely access to mental health services

Program Metrics:

Actual number of clients with access to psychiatry

First Six Months of CY22 Provider Outcomes:

Highlights:

• Number of Clients that were Anticipated to be Served: 120

ADAMHS Funded Unduplicated Clients Served: 33

• Total Number of Clients Served: 33

Total Number of Clients that Completed this Program/Service: 22

Average Cost Per Client: \$1,220.69

Additional Information:

This program provides residential treatment for substance use disorders at an ASAM 3.1 level delivered in compliance with CARF standards for individuals who would otherwise not have access to needed services and provides integrated, mental health treatment (psychiatry and counseling) to address barriers to recovery posed by severe mental illness. Service arrays consists of SUD treatment, assessment, individual counseling, group therapy, urinalysis, crisis intervention, case management. In addition, MH treatment; psychiatric diagnostic evaluations, crisis intervention, group & individual psychotherapy sessions are provided. Funding is grant orientated and pays for salaries of direct service staff. Evidence-based practices include Residential Drug Abuse Program (RDAP), Seeking Safety (Trauma-Informed), Straight Ahead (SUD), Gorski's Relapse Prevention, Medication Assisted Treatment (MAT), Thinking For a Change (T4C), Bridges to Recovery (applying EBP to 12-steps) & Motivational Enhancement as well as Morning Meditation and Evening Closure groups drawn from therapeutic community literature, Criminal Conduct and Substance Abuse.

CY21 Provider Outcomes

Highlights:

• Number of Clients that were Anticipated to be Served: 66

• ADAMHS Funded Unduplicated Clients Served: 95

• Total Number of Clients that were Served: 179

• Total Number of Clients that Completed this Program/Service: 39

Goals Met:

• 100% of clients will have access to SUD treatment regardless of Medicaid coverage.

Metrics Used to Determine Success:

Brief Addiction Monitor

Program Successes:

• All clients have access to services regardless of Medicaid coverage, over 65% of the clients to successfully complete had a decrease in risk factors and an increase in protective factors.

Average Cost Per Client in CY21: \$702.57

Additional Information:

• This program provides residential treatment for substance use disorders at an ASAM 3.1 level delivered in compliance with CARF standards for individuals who would otherwise not have access to needed services and provides integrated, mental health treatment (psychiatry and counseling) to address barriers to recovery posed by severe mental illness. Service arrays consists of SUD treatment, assessment, individual counseling, group therapy, urinalysis, crisis intervention, case management. In addition, MH treatment; psychiatric diagnostic evaluations, crisis intervention, group and individual psychotherapy sessions are provided. Funding is grant orientated and pays for salaries of direct service staff. Evidence-based practices include Residential Drug Abuse Program (RDAP), Seeking Safety (Trauma-Informed), Straight Ahead (SUD), Gorski's Relapse Prevention, Medication Assisted Treatment (MAT), Thinking For a Change (T4C), Bridges to Recovery (applying EBP to 12-steps) & Motivational Enhancement as well as Morning Meditation and Evening Closure groups drawn from therapeutic community literature.

SUD Outpatient Program

This program provides outpatient treatment for CARF accredited substance use disorders at an ASAM 2.1 and/or 1.0 level for individuals who would otherwise not have access to needed services due to lack of medical insurance.

Those with substance abuse disorders frequently lack Medicaid. This commonly occurs when their symptoms are the strongest, meaning they don't have medical coverage when they need it most. The service array consists of diagnostic evaluations, crisis intervention, intensive outpatient group counseling, group counseling, individual counseling, case management, peer support MAT and urinalysis.

Evidence-based practices include the outpatient follow-up to Residential Drug Abuse Program (RDAP), Recovery from Trauma, Addiction or both, Gorski's Relapse Prevention, HEAT and Bridges to Recovery (applying EBP to 12-steps).

Target Population:

• Cuyahoga County residents, adults 18 and over, any race, any gender, any sexual orientation, any religion, and lower than average socioeconomic status.

- They meet the criteria for a DSM (American Psychiatric Association's Diagnostic and Statistical Manual) substance use disorder and/or meet the criterial for a mental health diagnosis.
- They meet the criteria for ASAM level 2.1 and/or 1.0 level of care substance abuse treatment.

Anticipated Number of Clients to be Served: 52

Number of Staff Required to Implement Program: 36

Steps to Ensure Program Continuity if Staff Vacancies Occur:

Qualified staff are cross trained and able to step into other roles when positions are vacated.
 CATS recruits on a continuous basis. The agency promotes from within, and staff provides
 continuity of service to clients and will assist in whatever way possible. CATS operates as a field
 site and accepts interns from CWRU, CSU, UA, John Carroll, Tri-C and online educational
 programs. The agency often recruits from interns and access the schools' databases to post open
 positions.

Funding Priority:

Treatment Services – Pooled Funding

Program Goals:

- 100% of clients will have access to needed SUD services regardless of insurance status
- 60% of clients will reduce factors associated with continuing or relapsing substance use
- 60% of clients will increase factors associated with achieving or maintaining sobriety

Program Metrics:

- Number of clients accessing SUD services
- Risk factors subscale of the Brief Addiction Monitor (BAM)
- Protective factors subscale of the Brief Addiction Monitor (BAM)

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 30
- ADAMHS Funded Unduplicated Clients Served: 26
- Total Number of Clients Served: 543
- Total Number of Clients that Completed this Program/Service: 17

Average Cost Per Client: \$1,090.59

Additional Information:

This program provides outpatient treatment for substance use disorders at an ASAM 2.1 and/or 1.0 level delivered in compliance with CARF standards for individuals who would otherwise not have access to needed services. Those with substance abuse disorders frequently lack Medicaid. This commonly occurs when their symptoms are the strongest, meaning they don't have medical coverage when they need it most. The service array consists of psychiatric diagnostic evaluations, crisis/group/individual psychotherapy sessions, assessments, group counseling, IOP, case management, and urine drug screens, all of which are delivered by Independent and/or Supervised Practitioners that are state licensed. Evidence based practices include the outpatient follow-up to Residential Drug Abuse Program (RDAP), Recovery from Trauma, Addiction or both,

Gorski's Relapse Prevention, Medication Assisted Treatment (MAT), and Bridges to Recovery (applying EBP to 12-steps)

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 44
- ADAMHS Funded Unduplicated Clients Served: 44
- Total Number of Clients that were Served: 571
- Total Number of Clients that Completed this Program/Service: 13

Goals Met:

100% of clients will have access to SUD treatment regardless of Medicaid coverage. 65% of clients
who successfully complete the program will have an increase in protective factors associated
with SUD. 65% of clients who successfully complete the program will have a decrease in risk
factors associated with SUD.

Metrics Used to Determine Success:

BAM, specifically the subscales of continued use risk factors and protective factors.

Program Successes:

- All clients have access to services regardless of Medicaid coverage.
- Over 65% of clients who successfully complete have a decrease in risk factors and an increase in protective factors, and over 65% of the clients who successfully complete have a decrease in risk factors and an increase in protective factors.

Average Cost Per Client in CY21: \$1,457.36

Additional Information:

• This program provides outpatient treatment for substance use disorders at an ASAM 2.1 and/or 1.0 level delivered in compliance with CARF standards for individuals who would otherwise not have access to needed services. Those with substance abuse disorders frequently lack Medicaid. This commonly occurs when their symptoms are the strongest, meaning they do not have medical coverage when they need it most. The service array consists of psychiatric diagnostic evaluations, crisis/ group/individual psychotherapy sessions, assessments, group counseling, IOP, case management and urine drug screens. All of which are delivered by independent and/or supervised practitioners that are state licensed. Evidence-based practices include the outpatient follow-up to Residential Drug Abuse Program (RDAP), Recovery from Trauma, Addiction or both, Gorski's Relapse Prevention, Medication Assisted Treatment (MAT), and Bridges to Recovery (applying evidence-based practice to 12-steps).

SUD Residential

This program provides CARF accredited residential treatment for substance use disorders at an ASAM 3.5 or 3.1 level delivered in compliance with CARF standards for individuals who would otherwise not have access to needed services. Those with substance abuse disorders frequently lack Medicaid. This commonly occurs when their symptoms are the strongest, meaning they don't have medical coverage when they need it most.

The service array consists of diagnostic evaluations, crisis intervention, intensive outpatient group counseling, group counseling, individual counseling, case management, peer support and urinalysis.

Evidence-based practices include Residential Drug Abuse Program (RDAP), Seeking Safety (Trauma-Informed), Straight Ahead (SUD), Gorski's Relapse Prevention, Medication Assisted Treatment (MAT), Thinking For a Change (T4C), Criminal Thinking and Substance Abuse (CCSA), Bridges to Recovery (applying EBP to 12-steps) & Motivational Enhancement.

Target Population:

- Cuyahoga County residents, adults 18 and over, any race, any gender, any sexual orientation, any religion, and lower than average socioeconomic status.
- They meet the criteria for a DSM (American Psychiatric Association's Diagnostic and Statistical Manual) substance use disorder. They often also meet the criterial for a mental health diagnosis.
- They meet ASAM criteria for 3.5 or 3.1 level of care substance abuse treatment.
- Lack safe and sober housing and sober social supports.

Anticipated Number of Clients to be Served: 6

Number of Staff Required to Implement Program: 47

Steps to Ensure Program Continuity if Staff Vacancies Occur:

Qualified staff are cross trained and able to step into other roles when positions are vacated.
 CATS recruits on a continuous basis. The agency promotes from within, and staff provides
 continuity of service to clients and will assist in whatever way possible. CATS operates as a field
 site and accepts interns from CWRU, CSU, UA, John Carroll, Tri-C and online educational
 programs. The agency often recruits from interns and access the schools' databases to post open
 positions.

Funding Priority:

24/7 Access

Program Goals:

- 100% of clients will have access to needed SUD services regardless of insurance status or HMO approval for continued treatment
- 60% of clients will reduce factors associated with continuing or relapsing substance use
- 60% of clients will increase factors associated with achieving or maintaining sobriety

Program Metrics:

- Number of clients accessing or continuing SUD services
- Risk factors subscale of the Brief Addiction Monitor (BAM)
- Protective factors subscale of the Brief Addiction Monitor (BAM)

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 5
- ADAMHS Funded Unduplicated Clients Served: 3
- Total Number of Clients Served: 659
- Total Number of Clients that Completed this Program/Service: 0

Average Cost Per Client: \$8,610.47

Additional Information:

• This program provides residential treatment for substance use disorders at an ASAM 3.5 level delivered in compliance with CARF standards for individuals who would otherwise not have access to needed services. Those with substance abuse disorders frequently lack Medicaid. This commonly occurs when their symptoms are the strongest, meaning they don't have medical coverage when they need it most. The service array consists of psychiatric diagnostic evaluations, crisis intervention/group/individual psychotherapy sessions, assessments, group counseling, case management, and urine drug screens. All of which are delivered by independent and/or supervised practitioners that are state licensed. Evidence based practices include Residential Drug Abuse Program (RDAP), Seeking Safety (Trauma-Informed), Straight Ahead (SUD), Gorski's Relapse Prevention, Medication Assisted Treatment (MAT), Thinking For a Change (T4C), Bridges to Recovery (applying EBP to 12-steps), Motivational Enhancement Therapy (MET), and Criminal Conduct and Substance Abuse.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 4
- ADAMHS Funded Unduplicated Clients Served: 1
- Total Number of Clients that were Served: 421
- Total Number of Clients that Completed this Program/Service: 0

Goals Met:

- 100% of clients will have access to SUD treatment regardless of Medicaid coverage
- 65% of clients who successfully complete the program will have an increase in protective factors associated with SUD
- 65% of clients who successfully complete the program will have a decrease in risk factors associated with SUD

Metrics Used to Determine Success:

• BAM, specifically the subscales of continued use risk factors and protective factors.

Program Successes:

 All clients have access to services regardless of Medicaid coverage. Over 65% of the clients who successfully complete have a decrease in risk factors. Over 65% of the clients who successfully complete had an increase in protective factors.

Average Cost Per Client in CY21: \$2,288.66

Additional Information:

• This program provides residential treatment for substance use disorders at an ASAM 3.5 level delivered in compliance with CARF standards for individuals who would otherwise not have access to needed services. Those with substance abuse disorders frequently lack Medicaid. This commonly occurs when their symptoms are the strongest, meaning they do not have medical coverage when they need it most. The service array consists of; psychiatric diagnostic evaluations, crisis intervention/group/individual psychotherapy sessions, assessments, group counseling, case management, urine drug screens. All of which are delivered by independent and/or supervised practitioners that are state licensed. Evidence-based practices include

Residential Drug Abuse Program (RDAP), Seeking Safety (Trauma-Informed), Straight Ahead (SUD), Gorski's Relapse Prevention, Medication Assisted Treatment (MAT), Thinking For a Change (T4C), Bridges to Recovery (applying EBP to 12-steps) & Motivational Enhancement.

SUD Room & Board

This program funds Room & Board for clients requiring CARF accredited residential levels of care. CATS provides two residential levels of care, ASAM 3.1, low intensity residential services and 3.5, high intensity residential services. Per ASAM criteria, neither level of care provides for room and board, an obvious and essential element of residential treatment.

The room & board provides a safe environment in which risk factors associated with continued use and relapse of substances are greatly reduced and protective factors flourish. In accordance with Maslow's hierarchy of needs, basic needs such as shelter, and food must be met before clients can work on higher needs such as self-efficacy and recovery.

This service array consists of the 24/7 physical operations that the facility must provide; to maintain the security, maintenance, and health and safety standards in which physical plant and food services follow laws, codes, and certifications. These services are mandated and audited by: Ohio Department of Health, OhioMHAS and the Commission on the Accreditation of Rehabilitation Facilities, American Correction Association.

This program provides services that are not subject to Medicaid reimbursement.

Target Population:

- Cuyahoga County residents, adults 18 and over, any race, any gender, any sexual orientation, any religion, and lower than average socioeconomic status
- They meet the criteria for a DSM (American Psychiatric Association's Diagnostic and Statistical Manual) substance use disorder. They often also meet the criterial for a mental health diagnosis
- They meet ASAM criteria for 3.5 or 3.1 level of care
- They lack funding for room and board
- They lack safe and sober housing and sober social supports
- Adult 18-65+, 100-199% of the federal poverty level

Anticipated Number of Clients to be Served: 282

Number of Staff Required to Implement Program: 47

Steps to Ensure Program Continuity if Staff Vacancies Occur:

Qualified staff are cross trained and able to step into other roles when positions are vacated.
 CATS recruits on a continuous basis. The agency promotes from within, and staff provides
 continuity of service to clients and will assist in whatever way possible. CATS operates as a field
 site and accepts interns from CWRU, CSU, UA, John Carroll, Tri-C and online educational
 programs. The agency often recruits from interns and access the schools' databases to post open
 positions.

Funding Priority:

24/7 Access

Program Goals:

100% of clients active in ASAM 3.5 and 3.1 levels of care will have room and board

Program Metrics:

Number of clients receiving room and board

First Six Months of CY22 Provider Outcomes:

Highlights:

• Number of Clients that were Anticipated to be Served: 293

• ADAMHS Funded Unduplicated Clients Served: 141

• Total Number of Clients Served: 141

• Total Number of Clients that Completed this Program/Service: 111

Average Cost Per Client: \$1,809.99

Additional Information:

• This program funds room and board for clients requiring a residential level of care. CATS provides two residential levels of care, ASAM 3.1, low intensity residential services and 3.5, high intensity residential services. Per ASAM criteria, neither level of care provides for room and board, an obvious and essential element of residential treatment. The room and board provide a safe environment in which risk factors associated with continued use and relapse of substances are greatly reduced and protective factors flourish. In accordance with Maslow's hierarchy of needs, basic needs such as shelter, and food must be met before clients can work on higher needs such as self-efficacy and recovery. This service array consists of the 24/7 physical operations that the facility must provide to maintain security and maintenance, as well as the health and safety standards of physical plant and food services (compliance with laws, codes, and certifications). These services are mandated and audited by the Ohio Department of Health, OhioMHAS, Ohio Dept. of Rehabilitation & Corrections, Commission on the Accreditation of Rehabilitation Facilities, and American Correction Association.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 269
- ADAMHS Funded Unduplicated Clients Served: 224
- Total Number of Clients that were Served: 699
- Total Number of Clients that Completed this Program/Service: 49

Goals Met:

• 100% of clients will have room and board while participating in ASAM 3.5 and/or 3.1 level of care substance use treatment.

Metrics Used to Determine Success:

Brief Addiction Monitor

Program Successes:

• 100% of clients have room and board while participating in ASAM 3.5 and/or 3.1 level of care substance use treatment.

Average Cost Per Client in CY21: \$1,811.09

Additional Information:

• This program funds Room & Board for clients requiring a residential level of care. CATS provides two residential levels of care, ASAM 3.1, low intensity residential services and 3.5, high intensity residential services. Per ASAM criteria, neither level of care provides for room and board, an obvious and essential element of residential treatment. The room & board provides a safe environment in which risk factors associated with continued use and relapse of substances are greatly reduced and protective factors flourish. In accordance with Maslow's hierarchy of needs, basic needs such as shelter, and food must be met before clients can work on higher needs such as self-efficacy and recovery. This service array consists of the 24/7 physical operations that the facility must provide; to maintain the security, maintenance, and health & safety standards in which physical plant and food services comply with laws, codes & certifications. These services are mandated and audited by: Ohio Department of Health, OhioMHAS, Ohio Dept. of Rehabilitation & Corrections, Commission on the Accreditation of Rehabilitation Facilities, American Correction Association.

Employment Services

An important DSM diagnostic criterion is the consideration of how substance use has affected role obligations including employment and education. This negative effect results in unemployment and/or under employment. This lack of employment or other meaningful, structured time is a risk factor for continued and/or relapsed use of substances, creating a repeating cycle.

This employment program is a collaboration between CATS and OhioMeansJobs, the Ridge Project and other local, employment-based community partners who come on site to enroll clients into their respective programs, all of which include actual job placement, a feature missing from most employment services as they focus on soft skills only. The onsite aspect of the program eliminates interference with residential substance use treatment as employment services are scheduled around treatment. Low cost and/or free education and training prior to job placement are additional essential elements. The employers work closely with CATS on accommodating treatment schedules for clients and insuring a safe, sober, supportive environment. These factors contribute to longer term recovery and are unique aspect of this program.

Although employment is a crucial element of recovery from substance use and mental illness, the services provided by employment programs are not subject to Medicaid reimbursement. This program has been operating without funding since its inception. Although it has been very successful with most clients finding and maintaining gainful employment, there is a high risk it will need to be terminated due to lack of funding to maintain it.

Target Population:

- Cuyahoga County residents, adults 18 and over, any race, any gender, any sexual orientation, any religion, lower than average socioeconomic status
- They meet the criteria for a DSM (American Psychiatric Association's Diagnostic and Statistical Manual) substance use disorder. They often also meet the criterial for a mental health diagnosis.
- History of substance use and/or mental illness has interfered with gainful employment.
- Adult 18-65+, 100-199% of the federal poverty level.

Anticipated Number of Clients to be Served: 75

Number of Staff Required to Implement Program: 2

Steps to Ensure Program Continuity if Staff Vacancies Occur:

Qualified staff are cross trained and able to step into other roles when positions are vacated.
 CATS recruits on a continuous basis. The agency promotes from within, and staff provides
 continuity of service to clients and will assist in whatever way possible. CATS operates as a field
 site and accepts interns from CWRU, CSU, UA, John Carroll, Tri-C and online educational
 programs. The agency often recruits from interns and access the schools' databases to post open
 positions.

Funding Priority:

• Employment Programs

Program Goals:

 80% of clients will be gainfully employed or engaged in training/education programs needed for gainful employment

Program Metrics:

 Actual number of clients who are gainfully employed or engaged in training/education programs needed for gainful employment

First Six Months of CY22 Provider Outcomes: N/A - New Program for CY23

Transportation

Research suggests and internal client surveys indicate that lack of transportation is a significant barrier to accessing needed, CARF accredited substance use and/or mental health services. Although transportation is an obvious need, it is not subject to Medicaid reimbursement.

This program funds the purchase of bus tickets for clients without other options to get back and forth to SUD treatment in ASAM 3.5, 3.1, 2.1 and 1.0 levels of care and sober living. For clients that do not receive bus tickets, this program would fund drivers who can transport clients to necessary medical and behavioral healthcare services for clients in SUD treatment 3.5 or 3.1 levels of care. These clients have urgent needs of primary health care (CARF standards demand physicals for residential admissions), and specialty clinics (prenatal care, hepatitis, diabetes are some common examples). Some of these clients already have community behavioral healthcare providers and need transportation to their services for continuity of care. Public transportation is not an option for many clients in a residential level of care because 1) accessing the community alone poses a significant continued use/relapse risk, 2) their supervising authority does not approve independent outside movement due to the risk of recidivism.

It will also cover the cost of ride share programs in the unlikely scenario of a disruption to the RTA schedule. The ability to provide transportation will insure the delivery of wraparound services, the integration of medical treatment, behavioral healthcare, and substance abuse treatment.

Target Population:

- Cuyahoga County residents, adults 18 and over, any race, any gender, any sexual orientation, any religion, lower than average socioeconomic status
- They meet the criteria for a DSM (American Psychiatric Association's Diagnostic and Statistical Manual) substance use disorder. They often also meet the criterial for a mental health diagnosis.
- Adult 18-65+, 100-199% of the federal poverty level.

Anticipated Number of Clients to be Served: 1,444

Number of Staff Required to Implement Program: 9

Steps to Ensure Program Continuity if Staff Vacancies Occur:

- Qualified staff are cross trained and able to step into other roles when positions are vacated.
- CATS recruits on a continuous basis. The agency promotes from within, and staff provides
 continuity of service to clients and will assist in whatever way possible. CATS operates as a field
 site and accepts interns from CWRU, CSU, UA, John Carroll, Tri-C and online educational
 programs. The agency often recruits from interns and access the schools' databases to post open
 positions.

Funding Priority:

• Removing Barriers

Program Goals:

• 100% of clients will have transportation to needed services

Program Metrics:

• The actual number of clients who have transportation to needed services

First Six Months of CY22 Provider Outcomes: N/A – New Program for CY23

Sober Housing

This is a Level-III (NARR application submitted June 2022; awaiting date for accreditation interviews and site visit) sober living setting which is housed in CATS' residential units. It is temporary in nature, giving time and space for client to secure permanent, safe, and sober housing, something that is very challenging to do while their focus is on skill building during residential treatment. CATS provides a safe space for them to stay while engaged in outpatient services and practicing learned recovery skills in the community. Clients are not charged room and board for the first 30 days, allowing time to secure employment and/or resume SSI/SSDI payments. Afterwards, clients must pay for room and board in preparation for independent living. As part of a continuum of care provided by CATS, there is quick and effective placement into higher levels of care when needed so substance use needs are continuously met without interruption. There is on site support, safe storage of medication, structured activity and access to peer support, outpatient SUD and MH treatment and MAT.

Dedicated house managers provide support, monitoring, motivational enhancement, and coaching. They conduct weekly house meetings and ensure compliance with NARR standards. The structure and support of this program enhances the likelihood of success for clients who meet the criteria for residential care but are prematurely placed in an outpatient level of care due to the Medicaid HMO's refusal to fund the former. This program provides services that are not subject to Medicaid reimbursement.

Target Population:

- Cuyahoga County residents, adults 18 and over, any race, any gender, any sexual orientation, any religion, lower than average socioeconomic status
- They meet the criteria for a DSM (American Psychiatric Association's Diagnostic and Statistical Manual) substance use disorder. They often also meet the criterial for a mental health diagnosis.
- These clients lack a safe and sober residence to go to after completion of residential treatment which poses a high risk of continued and/or relapsed use of substances.
- Some of these individuals do not meet the criteria for residential treatment. Others are assessed to meet the criteria for residential treatment but are transitioned to ASAM outpatient levels of care prematurely due to Medicaid's refusal to fund the needed residential levels of care.

Number of Staff Required to Implement Program: 6

Steps to Ensure Program Continuity if Staff Vacancies Occur:

Qualified staff are cross trained and able to step into other roles when positions are vacated.
 CATS recruits on a continuous basis. The agency promotes from within, and staff provides
 continuity of service to clients and will assist in whatever way possible. CATS operates as a field
 site and accepts interns from CWRU, CSU, UA, John Carroll, Tri-C and online educational
 programs. The agency often recruits from interns and access the schools' databases to post open
 positions.

Funding Priority:

High Quality Housing

Program Goals:

- 60% of clients will maintain sobriety
- 60% of clients will transition to long-term safe and sober housing

Program Metrics:

- Urinalysis results
- Actual number of clients who transition to long-term safe and sober housing

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 96
- ADAMHS Funded Unduplicated Clients Served: 24
- Total Number of Clients Served: 40
- Total Number of Clients that Completed this Program/Service: 16

Average Cost Per Client: \$1,743.46

Additional Information:

• This is a Level-III sober living setting which is housed in CATS' residential units. It is temporary in nature, giving time and space for clients to secure permanent, safe, and sober housing, something that is very challenging to do while their focus is on skill building during residential treatment. CATS provides a safe space for them stay while engaged in outpatient services and practicing learned recovery skills in the community. Room and board are provided free of charge for the first 30 days. Afterwards, clients must pay for room and board in preparation for independent living. As part of a continuum of care provided by CATS, there is quick and effective placement into higher levels of care when needed so substance use needs are continuously met, without interruption. Pending accreditation.

CY21 Provider Outcomes: N/A – New Program beginning in 2022

	Community Assessment & Treatment	2021 First Outcome		2022 First Outcome	
Provider:	Services	Count:	200	Count:	92
		2021 Final Outcome		2022 Final Outcome	
Instrument:	Brief Addiction Monitor	Count:	169	Count:	73
Program:	Substance Use Disorder Treatment	2021 % of Final:	84.50%	2022 % of Final:	79.35%

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.

Population	Evaluation Year	SubScale	First Outcome Average	Final Outcome Average	Average Difference	Significance
Adults (18+ years)	2021	Drug_Use	4.03	0.71	-3.32	Significant at p<.05
Adults (18+ years)	2021	Protective	11.69	12.79	1.1	Not Significant
Adults (18+ years)	2021	Risk	10.38	5.79	-4.59	Significant at p<.05
Adults (18+ years)	2022	Drug_Use	2.47	1.58	-0.89	Not Significant
Adults (18+ years)	2022	Protective	11	13	2	Not Significant
Adults (18+ years)	2022	Risk	9.68	7.53	-2.16	Not Significant

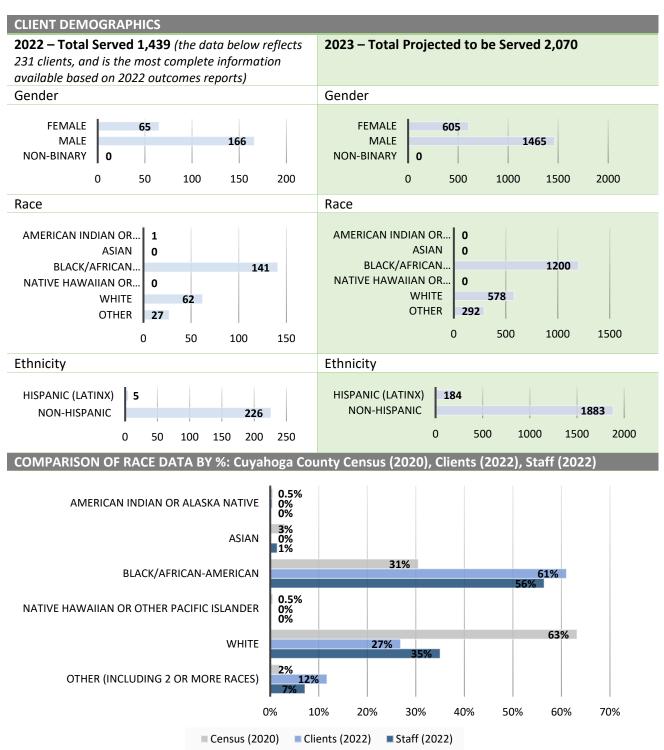
Focus on Diversity: Community Assessment & Treatment Services

Program(s): Drug Court Sustainability; Employment Services; Mental Health Enhanced Substance Use Residential Treatment; SUD Outpatient Program; SUD Residential; SUD Room & Board; Transportation

Diversity, Equity and Inclusion STRENGTH from program proposal: To achieve their goal, Community Assessment & Treatment Services noted that they will "work with our clients, our staff and our community to establish an acceptance and awareness of the cultural

diversity of our agency, our community and our country."





Note: These are the best estimates based on available information. Figures may be estimated or rounded, and may not equal 100%.



CY2023 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program	2022 FINAL CONTRACT AMOUNT	2023 CONTRACT RECOMMENDATIONS	PRIORITY
Premiere Care of Ohio, LLC dba Community Medical			
Services			
Pooled Funding:			
Treatment Services	\$ -	\$ -	

Premiere Care of Ohio dba Community Medical Services

Community Medical Services is a Commission on Accreditation of Rehabilitation Facilities (CARF)-accredited substance use disorder treatment program, providing outpatient medication-assisted treatment via medication, counseling, and community-based services.

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

Community Medical Services

Community Medical Services provides American Society of Addiction Medicine (ASAM) Level 1 outpatient opioid medication assisted treatment services for clients who have a diagnosis of opioid use disorder (OUD) as determined by DSM criteria. Treatment services include medication for opioid use disorder (methadone, buprenorphine, naltrexone), counseling, group therapy, and case management. All medication is administered by trained nursing staff. Clients meet with medical providers who conduct physical health assessments, medication monitoring appointments, including increasing or decreasing dosage of medication, and provide referrals for additional physical health conditions. Urine drug screens are collected monthly, or as appropriate, and are used as a therapeutic tool for the counselor to discuss with the client as part of their treatment plan, and for the provider to determine the appropriate therapeutic dose of medication that is right for everyone.

The medication is only one component of medication-assisted treatment. The counseling and supportive services are crucial in assisting clients in achieving their recovery goals. Clients will meet with counselors to identify their goals for treatment and then meet regularly with counselors to work towards those goals through individual and group therapy. Client engagement is another essential service at the clinic. The front desk and counselors work to outreach clients to ensure all individuals receive contact from the clinic at least once per week. This engagement allows the staff to build strong relationships with the clients and helps encourage clients to stay engaged with their counseling services and know they have open access when in need or during a crisis.

Target Population:

- Adults 18 years of age or older with a diagnosis of opioid use disorder (OUD).
- Less than 100% of the federal poverty level

Anticipated Number of Clients to be Served: 75

Number of Staff Required to Implement Program: 18

Steps to Ensure Program Continuity if Staff Vacancies Occur:

• CMS currently operates six OTPs throughout the state of Ohio which allows CMS to utilize its instate staff to provide coverage in emergency situations to ensure continuity of services. CMS has a contract with staffing agencies that support nursing and medical provider roles to safeguard that last minute staffing changes do not impact nursing or provider coverage for clients. Additionally, CMS proactively recruits for job positions that impact clinic operations and to ensure compliance with case load ratios.

Funding Priority:

Removing Barriers

Program Goals:

Reduce payment as a barrier to seeking substance use treatment

- Achieve 90-day client retention of 80% across CY23
- Increase collaboration across all levels of care

Program Metrics:

- Number of individuals who apply for and receive Medicaid funding and number of clients receiving ADAHMS Board funding for direct services
- Percentage of intakes who are still engaged in treatment after 90 days; and percentage of clients who received weekly engagement in first 90 days
- Number of Memorandum of Understandings (MOUs) with system partners and number of referrals from system partners (behavioral health agencies, first responders, emergency departments, skilled nursing, and residential treatment)

First Six Months of CY22 Provider Outcomes: N/A – New Program for CY23

Focus on Diversity: Premiere Care of Ohio dba Community Medical Services

Program(s): Community Medical Services

Diversity, Equity and Inclusion STRENGTH from program proposal:

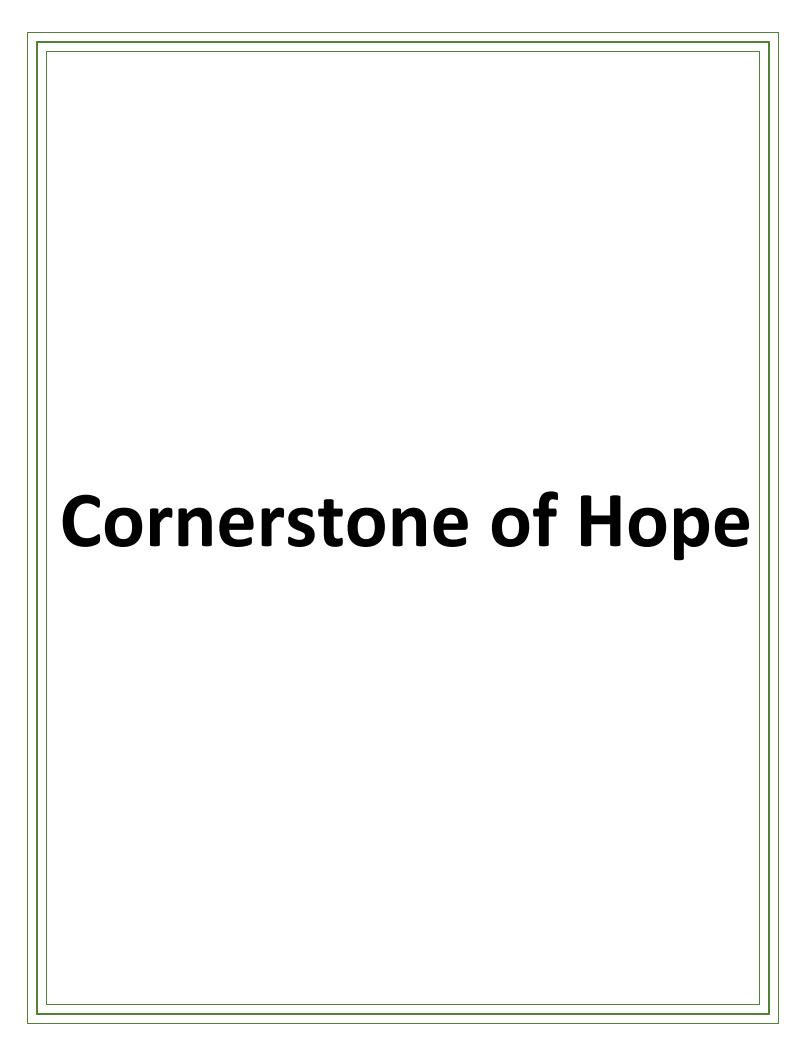
The agency has a policy or polices related to non-discrimination, equal employment opportunity, and/or harassment based on protected categories of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), language, disability, marital status, sexual orientation, or military status.



2022	2023 – Total Projected to be Served 75							
Gender	Gender							
Program is new to the ADAMHS Board	FEMALE 36 MALE 36 NON-BINARY 3 36 0 10 20 30 40							
Race	Race							
Program is new to the ADAMHS Board	AMERICAN INDIAN OR ASIAN BLACK/AFRICAN AMERICAN NATIVE HAWAIIAN OR WHITE OTHER 2 0 10 20 30 40 50							
Ethnicity	Ethnicity							
Program is new to the ADAMHS Board	HISPANIC (LATINX) 5							

Program is new to the ADAMHS Board

Note: These are the best estimates based on available information. Figures may be estimated or rounded, and may not equal 100%.



CY2023 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program		2022 FINAL CONTRACT AMOUNT		2023 CONTRACT COMMENDATIONS	PRIORITY
Cornerstone of Hope					
Bereavement Support Group		40,000	\$	50,000	Peer Support
Bereavement Youth Summer Camp		25,000	\$	30,000	Peer Support
Suicide Loss/Overdose Educational Series	\$	15,000	\$	20,000	Prevention
Total	\$	80,000	\$	100,000	

Cornerstone of Hope

The goal of Cornerstone of Hope is to make life and living possible again, and to find new hope after the loss of a loved one.

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

Bereavement Youth Summer Camp Program

The Bereavement Youth Summer Camp Program is a one-of-a-kind experience for local children who have experienced the death of a loved one. Grieving children face many setbacks, including feeling isolated, withdrawn, and that no one else understands the pain of loss that they have experienced. Many campers have lost a parent, and many in a traumatic way such as due to suicide, murder, or overdose. These types of loss can add extra complications for children, who can have problems understanding the circumstances of loss, both developmentally and fundamentally.

The camp program is a way to offer grief care to children and teens by providing a safe space for grief interventions, peer support, memorial activities, and fun and engaging trips, games, and special events. All activities are provided in an age-appropriate way.

Before camp, all prospective campers and their families have a meeting with the camp coordinator to discuss the child's loss, mental health history, behavioral issues, and assess the child for camp readiness. In that meeting, staff also introduce the camper to the experience, and answer any questions from the camper or the family. Two bereavement camps are held:

- CAMP CORNERSTONE: A weeklong camp for grieving children ages 6-12. The camp program is a
 combination of grief support and traditional camp activities, with grief therapy in the mornings,
 field trips in the afternoons, and plenty of fun activities. The camp is held at Cornerstone of
 Hope's campus in Independence. Camp Cornerstone ends with a memorial ceremony in which
 families also attend.
- 2. CAMP ERIN: The largest national bereavement program for youth grieving the death of a significant person in their lives. Children and teens ages 8-17 attend a transformational weekend overnight camp that combines fun camp activities with grief education and emotional support. Led by grief professionals and trained volunteers, Camp Erin provides an opportunity for youth to increase levels of hope, enhance self-esteem, and especially to learn that they are not alone. Camp Erin is held as part of the national program but funded and staffed by Cornerstone of Hope. Camp Erin is held at an overnight camp location, typically about a one-hour from. Transportation to and from camp is provided.

Target Population:

- Bereavement Youth Summer campers include children ages 6-17 who have experienced the death of a loved one. Camp Cornerstone is for ages 6-12 and Camp Erin is for children ages 8-17.
- In Camp Cornerstone 2022, exactly 50% of campers had lost a father, which is an astounding figure. Overall, 61.5% of campers had lost a parent. Also, 33% of campers had lost a loved one to overdose, suicide, or murder.
- Campers last year were 60% female, 40% male, and 17% African American, 3% Asian, 71% Caucasian, 4% Latino, 5% Multiracial, and 1% Unknown.
- All socioeconomic categories

Anticipated Number of Clients to be Served: 100

Number of Staff Required to Implement Program: 15

Steps to Ensure Program Continuity if Staff Vacancies Occur:

As a small organization, staffing for programs is very important. Staff vacancies are typically filled
quickly, internally, or externally. For the bereavement summer youth camp program, the agency
utilizes several staff clinicians and clinical interns to work at the camps. If there is a vacancy, staff
can draw from other clinicians or PRN staff. The agency also utilizes volunteers for some of the
aspects of camp programs like food preparation, registration, games, etc.

Funding Priority:

Peer Support

Program Goals:

- To provide two quality, professionally-led bereavement camp experiences for grieving children and teens in Northeast Ohio combining grief care, fun, and engaging activities
- To provide therapeutic interventions to children and teens who have lost a loved one and-help them process their loss and reduce negative grief reactions

Program Metrics:

- To serve more than 100 grieving children in the Camp Cornerstone and Camp Erin programs
- Children will express their feelings and emotions; children will participate in grief interventions; grief reactions will be normalized; children will experience peer support

First Six Months of CY22 Provider Outcomes:

Highlights:

• Number of Clients that were Anticipated to be Served: 50

• ADAMHS Funded Unduplicated Clients Served: 78

• Total Number of Clients Served: 78

Total Number of Clients that Completed this Program/Service: 77

Average Cost Per Client: \$850

Additional Information:

• Cornerstone exceeded camper participation totals for both Camp Cornerstone in July and Camp Erin in August. Camp Coordinator, JoAnn Borer, spent months preparing the camp curriculum, planning field trips, organizing therapeutic interventions, communicating with parents, writing new policies and procedures, meeting with camp staff, gaining and training volunteers, meeting with all children and families and assessing them for camp readiness, and much more. She also marketed the program heavily, attended camp fairs, reached out to schools, social service agencies and more. During camp, children enjoyed the "Travel" theme which included trips to PlayCLE, the Cleveland Botanical Gardens, Lakewood Park and the Emerald Marina of the Cleveland Metroparks. Campers were able to express feelings and discuss their experiences of losing a loved one, using an "emotions suitcase," "coping skills passport," and a "grief road map," amongst many other interventions supervised by clinical staff and trained volunteers. The campers' growth during the week was astounding, and they made meaningful connections with other campers who truly understood what they had experienced. The last day of camp always concludes with a beautiful memorial service attended also by the campers' families. This special event is always very emotional for all involved – campers, family, and staff alike.

CY21 Provider Outcomes: N/A – New Program beginning in 2022

Traumatic Loss Support Groups

Bereavement Support Groups for Suicide Loss, Overdose Loss, Murder Loss, and Complicated Loss are offered each quarter and run weekly for ten weeks. The groups are closed groups to enhance the peer support experience, and each support group member goes through an intake process prior to beginning group to ensure group readiness. Each group is facilitated by two professional facilitators and run weekly for ten weeks with 120-minute sessions that include dinner.

Each group has a unique, evidence-based curriculum so that the specialized needs of grieving individuals can be met. The specialized curriculum for each group enables the group members to experience peer support and provides a safe space to express feelings of grief and trauma that often accompany these tragic forms of loss. Cornerstone strives to offer a peaceful and homelike environment at support groups. The dinner period before the group begins provides additional time for peer support.

The Traumatic Loss Support Group Program provides professional interventions and peer support. Within the groups, grieving individuals can express their true emotions surrounding their loss, which are often raw and painful. Facilitators guide the participants through the weekly curriculum, enable a safe space for sharing, normalize the participants' grief feelings, and provide education on coping strategies. During groups, facilitators lead clients through topics including confusion, sadness, anger, guilt, and other grief reactions. The support groups are structured to accommodate the highly sensitive and traumatic nature of the loss, as well as the societal stigma that is associated with these types of losses. The curriculum for each group focuses on unique circumstances associated with suicide loss, overdose loss, murder loss, and complicated loss.

As participants move through the support group curriculum, they learn healthy coping strategies that can mitigate negative effects of bereavement. By learning healthy coping strategies, individuals have a decreased chance of developing depression or taking on negative behaviors such as substance abuse. With the ability to develop healthy coping strategies, bereavement support services are preventative and can disrupt cycles of substance abuse that can exist within families and communities. The goal of this program is that support group participants will express their feelings, tell their story, experience peer support, heal from loss, and move forward with hope.

Target Population:

- Adults who have experienced the death of a loved one due to overdose, to suicide, to murder, and adults who have experienced the death of a loved one, and for whom the relationship was difficult, whether due to abuse, mental illness, addiction, estrangement, etc.
- Adults ages 18-65+, All socioeconomic categories

Anticipated Number of Clients to be Served: 70

Number of Staff Required to Implement Program: 18

Steps to Ensure Program Continuity if Staff Vacancies Occur:

 Vacancies are typically filled quickly, internally, or externally. There are several individuals on staff who can coordinate groups as well as perform intake assessments if the agency is unable to fill a vacancy internally or externally. For the support group program, the agency utilizes several experienced group facilitators, and has a list of facilitators to outreach in the event a facilitator is unavailable for a quarter.

Funding Priority:

Peer Support

Program Goals:

- Bereavement Support Groups will be provided for Suicide, Overdose, Murder, and Complicated Loss in a safe and compassionate environment for 10 sessions per group led by a licensed clinician
- Support Group participants will experience peer support and show positive outcomes after their group experience

Program Metrics:

- Serve 70+ grieving adults who have experienced the loss of a loved one to overdose, suicide, murder, or complicated loss in the 10-week group program
- 100% of clients will share their story and express feelings; >90% of clients will learn healthy
 coping strategies; >80% will experience peer support; and >75% will increase their ability to cope
 with grief

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 35
- ADAMHS Funded Unduplicated Clients Served: 39
- Total Number of Clients Served: 39
- Total Number of Clients that Completed this Program/Service: 39

Average Cost Per Client: \$1,400

Additional Information:

• This year's Traumatic Loss Support Groups included two rounds of Suicide Loss, two rounds of Overdose Loss, and one round of Murder Loss. However, seeing the need for an additional group just for parents, staff added a group for Suicide Loss for Parents, dedicated to that specific type of loss. In the future, staff may pursue parents' groups for suicide or overdose. All support groups, including traumatic loss continue to be very popular. After the restrictions changed due to the pandemic, many of grievers want to have an in-person experience with other peers. Groups are held not in sterile offices, but in rooms with couches and comforts of home. Staff continue to offer meals and refreshments at support groups to add to the home-like feel of the experience. During the first week, most of the food is not touched as individuals are just getting comfortable. By the second and third weeks, meals are consumed, and group members are engaged in lively conversations. Many groups continue to meet beyond the Cornerstone of Hope experience. For instance, the suicide loss for parents' groups continues to meet weekly on the same day in restaurants and coffee shops.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 75
- ADAMHS Funded Unduplicated Clients Served: 87
- Total Number of Clients that were Served: 87

• Total Number of Clients that Completed this Program/Service: 87

Goals Met:

- Individuals grieving a loss due to overdose, suicide, murder, or complicated loss will have access to professionally led bereavement support groups
- Support Group participants will experience emotional support, healing, and regain hope
- Support Group participants will share experiences and bond with others who have had a similar loss

Metrics Used to Determine Success:

- Number of Clients Served
- Evaluation Scores

Program Successes:

- 87 Support Group Participants were served overall, 42 for suicide loss, 20 for overdose loss, 18 for murder loss, seven for complicated loss
- The average evaluation scores showed that most support group participants had a better
 understanding of grief, could communicate their feelings, learned coping strategies, and found
 hope for their future. The average evaluation scores showed that most support group
 participants felt that they could share their story with others.

Average Cost Per Client in CY21: \$1,201

Additional Information:

• The support group program continues to be in high demand, especially for these types of traumatic losses. Staff is working to increase the number of facilitators to serve more individuals and increase the diversity of the agency's workforce. The bonds that many individuals form at the support group extend well beyond the program, with some groups that continue to meet in coffee shops and restaurants. The words of participants are the most important: "The group experience was for me more than one-on-one. It was raw at times, which was good. It was an opportunity to bond with others who are experiencing the same kind of loss. I am glad that I got to be a part of group therapy."

Suicide Loss Educational Series and Overdose Loss Educational Series

A six-week series for suicide loss runs monthly; a weekly series for overdose loss; and a monthly series for overdose loss. Following a suicide or overdose death, those left behind have many feelings of confusion about what led to their loved one's death, and face deep societal stigma as to the cause of death. These factors can add extra difficulties to bereavement.

These informational series are for adults looking to learn more about suicide or overdose, or for those grieving the loss of a loved one to suicide or overdose. Suicide and overdose have a devastating impact on families, friends and communities, and specialized support for survivors can help them move forward from loss. Risk factors for survivors of suicide include intrusive thoughts and memories, attempts to prevent the thoughts and emotions related to the event, depressive symptoms and hopelessness, and lower scores for feelings of happiness and satisfaction with life. A smaller group of suicide survivors may be at risk of severe psychological distress and suicidal behavior. By discussing suicide loss, presenting

educational information, and normalizing grief reactions for participants who are processing loss, survivors can feel that they are supported and equipped with more information to help them cope with grief, and some of the risks can be prevented.

In the next six months, the agency will slightly change the curriculum topics to appeal to more participants and increase marketing efforts about this program as well as add program partners to copresent this series.

Target Population:

Adults ages 18-65+, All socioeconomic categories

Anticipated Number of Clients to be Served: 150

Number of Staff Required to Implement Program: 4

Steps to Ensure Program Continuity if Staff Vacancies Occur:

 If there is a vacancy, staff can draw upon additional clinical and facilitator resources to ensure that services continue. The agency developed its own curriculum for this program, which can be delivered by several staff.

Funding Priority:

Prevention

Program Goals:

- To present educational material surrounding suicide loss and overdose in an informal way through a consistent series of programs
- To provide grief normalization and education on "chasing the why" behind the loss, as well as addressing the stigma, in a compassionate environment

Program Metrics:

- To provide 10-12 educational series sessions throughout the year serving 150+ individuals
- Participants will learn facts and mental health circumstances surrounding suicide and/or overdose loss, participants' grief reactions will be normalized, and the stigma behind the losses will be addressed

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 45
- ADAMHS Funded Unduplicated Clients Served: 125
- Total Number of Clients Served: 125
- Total Number of Clients that Completed this Program/Service: 0

Average Cost Per Client: \$96

Additional Information:

 Staff facilitated the Suicide Educational Monthly Series as well as one round of the Suicide Friday Night Series. These have been decently attended, with engaging participation from the attendees. Educational Director, Pete Bliss, who has years of experience in working with suicide postvention, reports that many of the attendees are "Chasing the Why" of suicide. He helps by providing information common to survivors of suicide loss, as well as some of the mental health

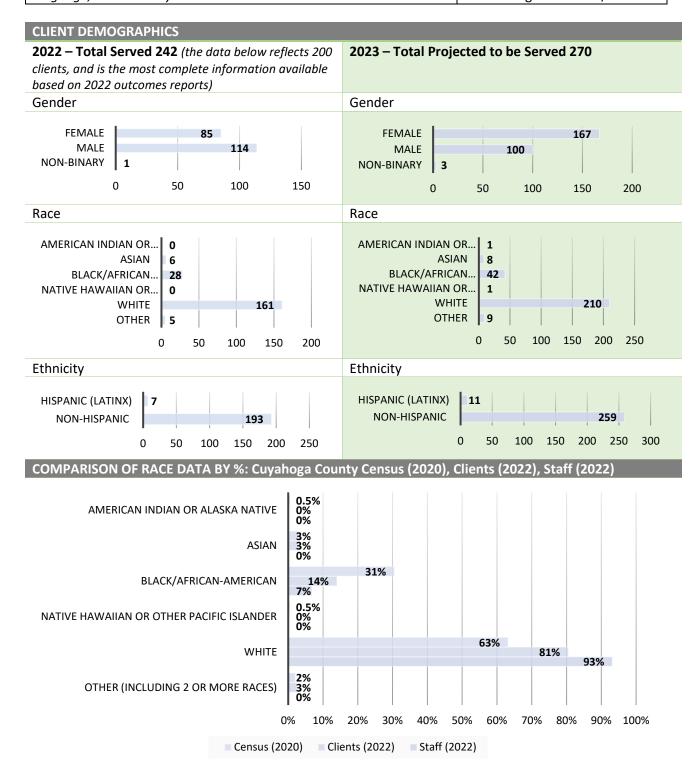
issues that are experienced by individuals who die by suicide. Due to low turnout in Fall 2021, staff needed time to rework the Overdose group. One idea for Fall 2022 is to relaunch the Overdose series with a new title and to increase marketing of the group series. Overdose differs from suicide in many ways and some families are not as surprised by an overdose loss if their loved one had struggles with substance misuse. Staff hopes that increasing marketing efforts and adjusting the group focus will result in a more successful Overdose series.

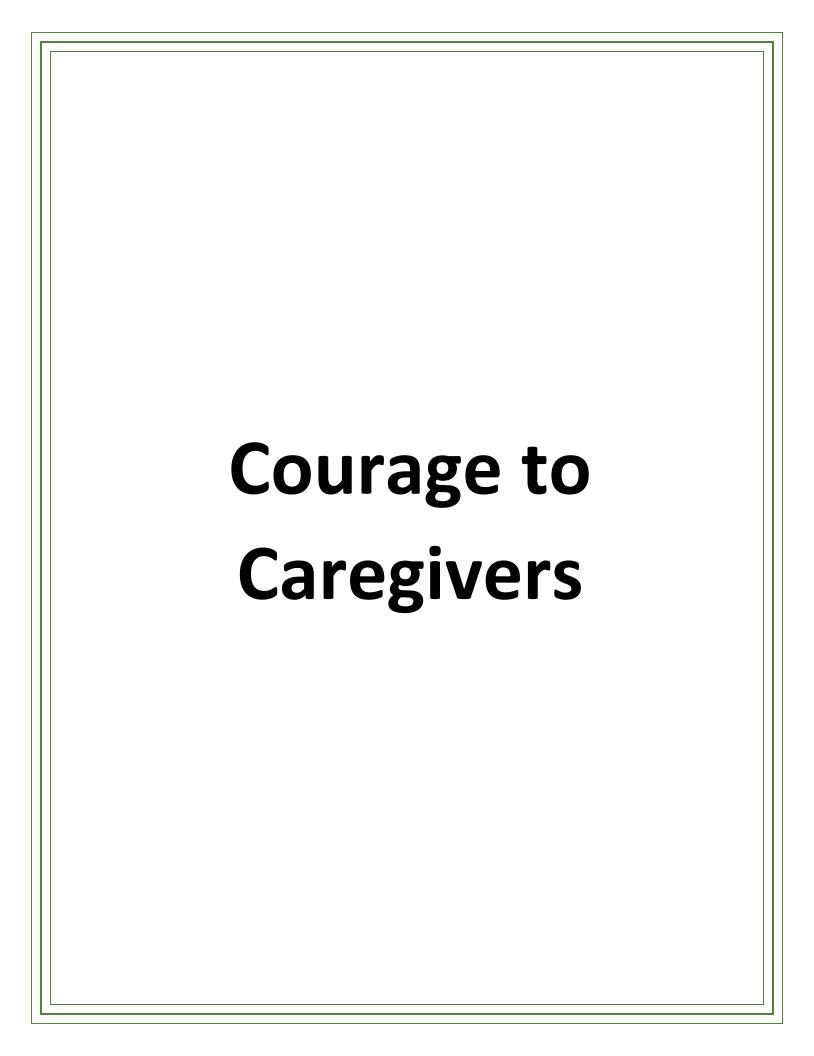
CY21 Provider Outcomes: N/A – New Program beginning in 2022

Focus on Diversity: Cornerstone of Hope

Program(s): Bereavement Youth Summer Camp Program; Suicide Loss Educational Series and Overdose Loss Educational Series; Traumatic Loss Support Groups

Diversity, Equity and Inclusion STRENGTH from program proposal: Actively and continuously seeking to be an organization that is culturally competent and diverse, Cornerstone of Hope noted that they are "committed to diversity in the following areas: culture, age, gender, sexual orientation, spiritual beliefs, socioeconomic status, language, and ethnicity." Region: Central/S





CY2023 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program		2022 FINAL CONTRACT AMOUNT		2023 CONTRACT COMMENDATIONS	PRIORITY
Courage to Caregivers, Inc.					
Support Groups for Mental Illness Caregivers	\$	25,000	\$	25,000	Prevention
Total	\$	25,000	\$	25,000	

Courage to Caregivers

Courage to Caregivers is a support group program for caregivers.

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

Support Groups for Mental Illness Caregivers

Courage to Caregivers is in the caregiver burnout prevention business with a mission to provide hope, support, and courage to caregivers and loved ones of those living with mental illness. The innovative curriculum-based Support Groups are co-facilitated by both a professional (licensed counselor or social worker) as well as a trained peer specialist volunteer who has experience caring for a loved one living with mental illness. The self-designed curriculum includes 12 themes and 40 topics all focused on building resilience in caregivers. This curriculum focuses on the caregiver and improving their well-being in order to provide better care to their loved ones. The program curriculum was developed and is delivered with trauma-informed care best practices. Clients come to groups with many of their own strengths, coping skill, and resiliency, but, in the midst of intense caregiving, it is easy to forget to put these into practice. Groups help by providing affirming language, support and accountability to put these skills into practice.

With the addition of the new program evaluation tool, the Adult Carer Quality of Life Questionnaire, the curriculum is being revamped internally to give greater focus to the subscales within the tool.

Each support group begins with a brief check-in where caregivers can report any challenges or wins for the week. This builds community and reduces isolation, which has been vital for caregivers during the pandemic. Both the curriculum and topic delivery by staff are based in trauma-informed care with a leader emphasis placed on the group to be a judgment-free and shame-free zone. The leaders provide an overview of the resilience topic and invite a vigorous discussion around the topic. The discussion includes barriers to success as well as empowerment of caregivers. Each month clients are invited to set goals based on that month's theme and topics and report at the end of the month their success or barriers to success.

Target Population:

- Through Courage to Caregiver's registration process, the agency captured the following current client demographics:
 - Age:
 - **18-25 4%**
 - **26-35 4%**
 - **36-45 17%**
 - **46-55 22%**
 - **56-65 39%**
 - 66 and over 13%
 - Race:
 - Caucasian 74%
 - BIPOC 26%
 - o **Gender**:
 - Female 96%
 - Male 4%
 - Nonbinary 0%
- Adult 18-65+, all socioeconomic categories

Anticipated Number of Clients to be Served: 36

Number of Staff Required to Implement Program: 9

Steps to Ensure Program Continuity if Staff Vacancies Occur:

Courage to Caregivers offers programs virtually, so clients can attend on the night of their
choosing. Were a staff vacancy to occur, the team would be able to shift clients to other evenings.
The agency also has a list of qualified, credentialed substitute support group leaders who help
cover groups during scheduled time off for permanent leaders who could be tapped to cover on
either on a permanent or temporary basis.

Funding Priority:

Prevention

Program Goals:

- Expand the coping strategies for the stress of caregiving in 67% of participants
- Increase caregivers' quality of life in a minimum of 75% of participants
- Enhance caregivers' personal growth and ability to take care of their emotional and physical health in a minimum of 75% of participants
- Increase caregivers' ability to more confidently and competently care for their loved one living with mental illness in a minimum of 50% of participants

Program Metrics:

- Caring Stress subscale score of the Adult Carer Quality of Life Questionnaire (AC-QoL) and End of Year Narrative Interviews conducted by staff
- Seven subscale scores of Adult Carer Quality of Life Questionnaire (AC-QoL). These subscales are: Support for Caring, Caring Choice, Caring Stress, Personal Growth, Sense of Value, Ability to Care and Carer Satisfaction (this list excludes the Money Matters subscale as our curriculum does not include this component) and End of Year Narrative Interviews conducted by staff
- End of Year Narrative Interviews conducted by staff

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 30
- ADAMHS Funded Unduplicated Clients Served: 23
- Total Number of Clients Served: 47
- Total Number of Clients that Completed this Program/Service: 0

Average Cost Per Client: \$350.00

Additional Information:

• The Support Group Program is continuing to meet the needs and goals of clients. The innovative and original curriculum focuses on resilience, empowerment and developing and using coping skills for the stress of caregiving. The Support Group leaders continue to see vast personal growth and lifetime changes in clients, often when a caregiver might not see it in themselves. The agency moved from a simple stress scale measuring caregiving stress before and after participation in support group on a scale of 0-10 weekly to the researched and validated Adult Carer Quality of

Life Scale (ACQOL) (Subscale: Caring Stress) and the Perceived Stress Scale (PSS) administered at onboarding, bi-yearly, and end of the year or closure. Staff continue to do End of Year interviews with participants. Caregivers most often call us in crisis. They are already burnt out. These support groups focus on caregivers' overall health and well-being. Healthier, stronger caregivers provide healthier, better care to their loved ones, thereby creating healthier, stronger families. One of the program participants said recently, "Support Group helps me be more hopeful and even though everyone is still struggling, my outlook towards the problem has changed. I feel more able to let go and let other things/people take over. I don't feel so responsible for outcomes in my life and the lives of my loved ones." Courage to Caregivers witnesses successes like these every day. Strategic community outreach continues to focus on diversifying outreach efforts to increase the diversity of participants as the agency continues to find many barriers to serving people of color. This, in addition to the barriers noted above, has the agency considering how to adapt groups to meet participants where they are. Courage to Caregivers now has a Support Group Leader that is a woman of color that they hope will help attract and retain a diverse group of participants.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 15
- ADAMHS Funded Unduplicated Clients Served: 41
- Total Number of Clients that were Served: 69
- Total Number of Clients that Completed this Program/Service: 0

Goals Met:

 Decrease the stress of caregiving and caregiver burden. Improve satisfaction with life for caregivers. Empower caregivers to take care of their own emotional health, thereby improving their ability to take care of their loved one. Provide a source of short and long-term support.
 Reduce the loss of hope during a mental illness crisis.

Metrics Used to Determine Success:

Self-Report weekly and Perceived Stress Scale, narrative exit interview

Program Successes:

- 95% reported support group helped them reduce stress
- 100% reported support group improved their satisfaction with life
- 95% reported group encouraged them to take care of their health
- Satisfaction reported

Average Cost Per Client in CY21: \$353

Additional Information:

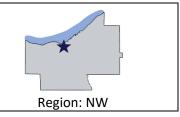
• The Support Group Program is continuing to meet the needs and goals of clients. The innovative and original curriculum focuses on resilience, empowerment and developing and using coping skills for the stress of caregiving. Support Group leaders continue to see vast personal growth and lifetime changes in clients. As part of the end of year interview the agency received the following feedback from one of its participants: "I didn't even realize how much I was MISSING this one hour to get in touch with MY feelings, desires, goals with life. It's a MOMENT to get in touch with ME - by getting in touch with life. You can tell yourself to meditate or pray - yet, this

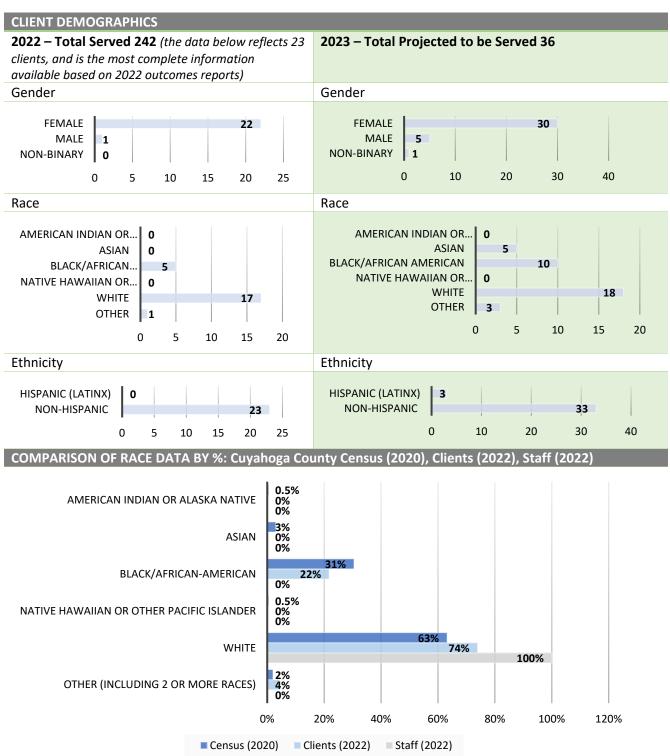
one hour allows me to stop - reflect - and spend time on myself and focus on where I want to go in the future. We have good intentions to do things - yet, this forces me to set aside this time each week." Courage to Caregivers is honored to witness successes like these every day. The agency's methods of data collection, including in-group stress assessments, the Perceived Stress Scale and End of Year Interviews, continue to prove success by the numbers. Staff is involved in coaching and check ins as informal measurements during the year. Leaders conduct the curriculum-based groups through the lens of empowerment and caregiving coaching. The methods are rooted in deep, empathetic listening and pull from Cognitive Based Therapy and Motivational interviewing. The agency has placed emphasis on Trauma Informed Care with a new all staff training done this year and refreshers planned for each upcoming year. The agency placed special attention on avoiding burnout for both participants and professional caregivers (staff).

Focus on Diversity: Courage to Caregivers

Program(s): Support Groups for Mental Illness Caregivers (3)

Diversity, Equity and Inclusion STRENGTH from program proposal: Courage to Caregivers is committed to being a "culturally competent organization with a focus on providing support that is based in trauma-informed care and appreciates the unique adverse childhood and other traumatic experiences encountered in life by participants, volunteers and staff alike."





Note: These are the best estimates based on available information. Figures may be estimated or rounded, and may not equal 100%.

Cuyahoga County Corrections Planning Board TASC

CY2023 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program		2022 FINAL CONTRACT AMOUNT		2023 CONTRACT RECOMMENDATIONS	PRIORITY	
Court of Common Pleas						
CC Correction Center Women's Re-entry	\$	100,000	\$	100,000	Harm Reduction	
Total	\$	100,000	\$	100,000		
Pooled Funding:						
Adult Treatment Drug Court	\$	-	\$	-		
Treatment Capacity Expansion	\$	-	\$	-		

Cuyahoga County Corrections Planning Board TASC

The Corrections Planning Board is a governmental entity under the auspices of the Cuyahoga County Common Pleas Court (CPC) and functions as the administering organization to Treatment Alternatives to Street Crime (TASC). TASC's mission is to provide an objective and effective bridge between the Criminal Justice System and the treatment community.

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

Adult Treatment Drug Court

The services provided by TASC are imbedded in the Adult Treatment Drug Court/Veteran's Court programs and include clinical assessments and case management services to accomplish the goals of the Specialty Dockets by increasing access to treatment. Licensed clinical staff (counselors, social workers, or chemical dependency counselors) deliver the TASC strategy.

TASC adheres to the philosophy of Ohio TASC, its orthodoxy, and incorporate into its operation the ten critical elements identified by the Bureau of Justice Assistance: 1) broad-based support by justice; 2) broad-based support by the treatment community; 3) an independent TASC Unit with a designated administrator; 4) policies and procedures for regular staff training; 5) a management information program evaluation system; 6) clearly defined client eligibility criteria; 7) screening procedures for early identification of TASC candidates within the justice system; 8) documented procedures for assessment and referral; 9) policies, procedures, and technology for monitoring TASC client drug use through urinalysis or other physical evidence; and, 10) monitoring procedures for ascertaining client's compliance with established treatment criteria and regularly reporting the progress to referring justice system components. The program is unique from others trying to accomplish similar goals by virtue of its distinctive position in the County's criminal justice system.

TASC serves as a bridge from the Court and Probation to client treatment through assessment and determination of the appropriate level of care by facilitating customer follow-through with the assistance of TASC case management. TASC programming contributes to client success through a holistic approach, addressing specific substantive issues including employment, vocational, and educational needs; housing in an environment that is free from AODs; medical and psychological abstinence from AOD use. The Veterans Treatment Court has peer support available to the veterans in the program. These peer supporters are not only veterans who volunteer for this role, but they are also in recovery adding an additional layer of support with the role. All masters-level clinicians are being trained in Eye-Movement Desensitization Reprocessing (EMDR).

Target Population:

- Adults ages 18-65+
- 78% were white and 21% were Black
- Participants who completed the Adult Treatment Drug Court/Veteran's Court Assessment had the following primary diagnosis: 39.5% Opioid Use Disorder; 19.5% Alcohol Use Disorder; 14.9% Cocaine Use Disorder
- All socioeconomic categories

Anticipated Number of Clients to be Served: 190

Number of Staff Required to Implement Program: 1

Steps to Ensure Program Continuity if Staff Vacancies Occur:

• When staff vacancies occur, clients will receive continuity of care with staff transferred into the position and/or the Clinical Coordinator will step in to provide coverage.

Funding Priority:

• Treatment Services - Pooled Funding

Program Goals:

- Specialty Docket participants will be abstinent for at least 90 days prior to graduation
- Specialty Docket graduates will not incur a new arrest (new criminal charge) while participating in the program.
- Improve coping mechanisms to address risk factors and protective factors

Program Metrics:

- 50% of individuals receiving services will successfully complete treatment and maintain abstinence from substances for 90 days prior to graduation
- 50% of graduates will not have incurred a new charge while an active participant in the program
- Brief Addiction Monitor risk factors will decrease, and protective factors will increase for 60% of successfully discharged participants

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 117
- ADAMHS Funded Unduplicated Clients Served: 56
- Total Number of Clients Served: 138
- Total Number of Clients that Completed this Program/Service: 30

Average Cost Per Client: \$112.50

Additional Information: N/A

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 220
- ADAMHS Funded Unduplicated Clients Served: 55
- Total Number of Clients that were Served: 207
- Total Number of Clients that Completed this Program/Service: 70

Goals Met:

- 50% of individuals receiving services will complete treatment and maintain abstinence
- < 20% of graduates will recidivate with new charges at six- and 12-months post-discharge
- BAM risk factors will decrease/protective factors will increase for over 60% of successfully discharged participants

Metrics Used to Determine Success:

- Number of clients who successfully graduate Drug Court
- New charges within six-months and 12-months post-discharge
- BAM completed at admission vs BAM completed at successful discharge

Program Successes:

- 70 clients (59.3%) successfully graduated Drug Court
- CMC Docket & CPC docket at 12 months: 0 clients out of 28 (100%) were arrested on new felony or major misdemeanor charges. A six-month recidivism check: 0 clients out of 45 (100%) were arrested on new felony or major misdemeanor charges.
- Protective Factors: 53 increased/maintained scores at Time 2. Mean at Time 1 was 13.4/Time 2 was 20.9 (increase of 7.5). Risk Factors: 49 decreased/maintained scores at Time 2. Time 1 mean was 8.9/Time 2 was 3.6 (decrease of 5.3).

Average Cost Per Client in CY21: \$246.93

Additional Information: N/A

Treatment Capacity Expansion

With the support of the ADAMHS Board, TASC Assessment Specialists will provide the following services to clients: Assessment-TASC will provide clinical assessments for clients who have been referred through Common Pleas Court and Cleveland Municipal Court. Assessors meet individually with clients in the TASC office or the County Jail to conduct the interviews using DSM 5 criteria to determine a diagnosis and ASAM criteria to determine treatment needs; Intensive Outpatient Services - TASC seeks to link substance use disordered offenders to therapeutic interventions that include the Matrix Model and TREM-W Model (Women's Trauma, Recovery and Empowerment Model) for IOP services. Intake appointments for IOP are scheduled at the time of a client's assessment; Outpatient Treatment Services - The Outpatient Treatment program is a six-week program using psychoeducational and cognitive behavioral techniques to impart recovery skills and relapse prevention skills. Each group meets one time per week for two hours; Case Management - Participants will be provided case management as a part of their TASC experience to link them with community resources that will directly address their needs identified from the assessment and their treatment plan.

All Master's-level, licensed Clinicians are being trained on Eye Movement Desensitization and Reprocessing (EMDR) Therapy to use as an intervention during individual counseling sessions.

Target Population:

- Adults 18+, majority were ages 28-32 (19.76%) followed by ages 23-27 (17.94%)
- Primary diagnosis: 29.9% Alcohol Use Disorder and 26.4% Opioid Use Disorder
- All socioeconomic categories

Anticipated Number of Clients to be Served: 801

Number of Staff Required to Implement Program: 1

Steps to Ensure Program Continuity if Staff Vacancies Occur:

• When staff vacancies occur, clients will receive continuity of care with staff transferred into the position, caseloads dispersed to other staff, and/or Clinical Coordinator.

Funding Priority:

Treatment Services – Pooled Funding

Program Goals:

- Participants will be abstinent at discharge
- Participants will not incur a new arrest (new criminal charge) while participating in the program
- Improve coping mechanisms to address risk factors and protective factors
- Participants will be assessed with a biopsychosocial assessment in a timely manner

Program Metrics:

- 50% of participants will complete treatment and be abstinent for 30 days prior to discharge
- 50% of participants will not incur a new arrest (new criminal charge) while participating in the program
- Brief Addiction Monitor risk factors will decrease, and protective factors will increase for 60% of successfully discharged participants
- 90% of participants in the jail will be assessed within five days of referral, and 90% of participants will be assessed within 10 days of referral

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 406
- ADAMHS Funded Unduplicated Clients Served: 142
- Total Number of Clients Served: 303
- Total Number of Clients that Completed this Program/Service: 13

Average Cost Per Client: \$193.44

Additional Information:

Covid protocols in the jail can be limiting in that appointments are needed to meet with clients and the visits occur behind glass rather than face to face. Further, if a client is put in a covid pod/isolation after the referral is received, it creates a delay in the client being seen as well. Staffing issues in the jail have, though occurring seldomly, caused a delay in seeing a client in the jail (i.e., not enough staff to bring a client up to visitation, etc.). Clients who are in jail who were referred as part of a Presentence Investigation Report (PSI) are often seen closer to their sentencing hearing. This allows TASC staff to prioritize urgent referrals or referrals set for transport to treatment.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 1,000
- ADAMHS Funded Unduplicated Clients Served: 75
- Total Number of Clients that were Served: 537
- Total Number of Clients that Completed this Program/Service: 50

Goals Met:

• Provide treatment services helping clients abstain from AOD by addressing service needs.

Metrics Used to Determine Success:

- Number of referrals received, and number of assessments completed.
- Successful completion of treatment (50%); Less than 20% recidivism at six- and 12-months postdischarge
- BAM Protective Score Increase/Risk Score Decrease.
- Successful completion of treatment (50%)
- Less than 20% recidivism at six-and 12-months post-discharge
- BAM Protective Score Increase/Risk Score Decrease.

Program Successes:

- 417 referrals for jail assessments received and 361 were seen
- 48.5% successfully completed group

Average Cost Per Client in CY21: \$394.05

Additional Information: N/A

 A women's IOP group is not currently being facilitated as the position has not been filled. No outcomes recorded

Women's Reentry

The Court/Corrections Planning Board and the Sheriff's Department proposes to implement and adhere to an evidence-based trauma informed cognitive behavioral treatment modality for its gender specific SUD Treatment Services Program for Incarcerated Females at the CCCC to increase access to treatment. Sentenced moderate to high-risk female participants will be screened by CCCC Social Services Specialists for drug abuse and referred to TASC for assessment. Based on ASAM criteria, TASC Assessment Specialist will provide the following services: Intensive Outpatient Treatment (IOP), Outpatient Treatment (OP), Individual Counseling, and Case Management.

Linkages to community agencies for treatment services and other post release programming (e.g., employment, literacy, mental health) will be included in each individual participant's case plan. The program requires .3 Clinical Coordinator with advanced licensure who will provide oversight and supervisor to 1 licensed clinician to provide services to 48 female inmates during CY23.

During CY21, 44,765 females were booked into the CCCC. Females compose 12% of the total jail population. Of those females, 58% are black, 36% are white, 4% are Hispanic, and 1% are other. 75% of female inmates are detained during the pre-trial phase which is defined as those who are confined but not convicted. 25% of the female population is serving a sentence at the CCCC. Of those females, 46% are black, 44% are white, 4% are Hispanic, and 4% are other.

All masters-level licensed clinical staff are being trained using Eye Movement Desensitization and Reprocessing (EMDR) Therapy as an intervention technique in individual counseling sessions.

Target Population:

• High-risk and high-need adult female Cuyahoga County Correction Center (CCCC) inmates, presenting with or previously diagnosed with a substance use disorder (SUD).

• All socioeconomic categories

Anticipated Number of Clients to be Served: 48

Number of Staff Required to Implement Program: 1.3

Steps to Ensure Program Continuity if Staff Vacancies Occur:

• When staff vacancies occur, clients will receive continuity of care with staff transferred into the position and/or the Clinical Coordinator conducting the group.

Funding Priority:

Harm Reduction

Program Goals:

- Increase access to SUD programming for women held in the Cuyahoga County Correction Center
- Improve coping mechanisms to address risk factors and protective factors

Program Metrics:

- 48 women will be screened for admission to the program
- Brief Addiction Monitor risk factors will decrease, and protective factors will increase for 60% of successfully discharged participants

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 48
- ADAMHS Funded Unduplicated Clients Served: 30
- Total Number of Clients Served: 30
- Total Number of Clients that Completed this Program/Service: 0

Average Cost Per Client: \$111.11

Additional Information:

• The agency continued to perform jail assessments while in-person services impacting IOP were suspended.

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 96
- ADAMHS Funded Unduplicated Clients Served: 63
- Total Number of Clients that were Served: 63
- Total Number of Clients that Completed this Program/Service: 0

Goals Met:

• To increase women's reentry SUD programming for females incarcerated at CCCC.

Metrics Used to Determine Success:

Number who completed the program successfully and BAM data.

Program Successes:

• COVID-19 protocols in the jail suspended in-person services. IOP services unable to be performed. Jail assessments continued through secure glass barrier.

Average Cost Per Client in CY21: \$111.11

Additional Information:

• It is anticipated that the Jail IOP portion of the program will reconvene during the 2022 calendar year.

		2021 First Outcome		2022 First Outcome	
Provider:	Cuyahoga County Corrections Planning Board	Count:	668	Count:	167
		2021 Final Outcome		2022 Final Outcome	
Instrument:	Brief Addiction Monitor	Count:	558	Count:	125
Program:	Substance Use Disorder Treatment	2021 % of Final:	83.53%	2022 % of Final:	74.85%

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.

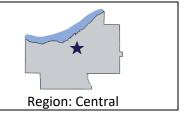
Population	Evaluation Year	SubScale	First Outcome Average	Final Outcome Average	Average Difference	Significance
Adults (18+ years)	2021	Drug_Use	1.55	0.36	-1.18	Significant at p<.05
Adults (18+ years)	2021	Protective	14.64	16.92	2.28	Significant at p<.05
Adults (18+ years)	2021	Risk	5.2	3.8	-1.4	Significant at p<.05
Adults (18+ years)	2022	Drug_Use	1.4	0.17	-1.23	Significant at p<.05
Adults (18+ years)	2022	Protective	15.9	16.15	0.25	Significant at p<.05
Adults (18+ years)	2022	Risk	7.9	4.35	-3.55	Significant at p<.05

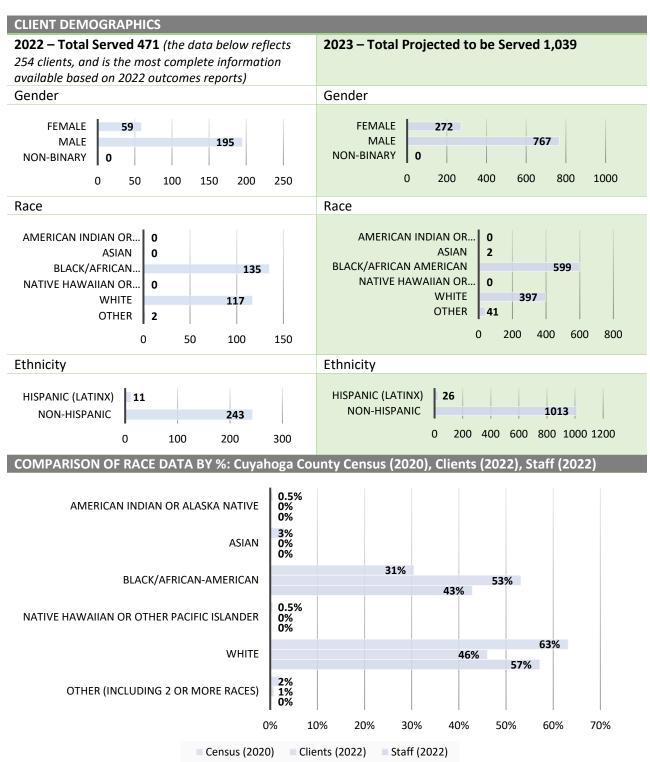
Focus on Diversity: Cuyahoga County Corrections Planning Board TASC

Program(s): Adult Treatment Drug Court; Treatment Capacity Expansion; Women's Reentry

Diversity, Equity and Inclusion STRENGTH from program proposal:

The agency has a policy or polices related to non-discrimination, equal employment opportunity, and/or harassment based on protected categories of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), language, disability, marital status, sexual orientation, or military status.





Note: These are the best estimates based on available information. Figures may be estimated or rounded, and may not equal 100%.

Cuyahoga County Domestic Relations Court

CY2023 PROVIDER FUNDING RECOMMENDATIONS

Agency/Program		2022 FINAL CONTRACT AMOUNT		023 CONTRACT OMMENDATIONS	PRIORITY
CC Domestic Relations Court					
Families First	\$	65,000	\$	90,000	Prevention
Total	\$	65,000	\$	90,000	

Cuyahoga County Domestic Relations Court

Cuyahoga County Domestic Relations Court facilitates the Families First Program.

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

Families First Program

The Families First Program (FFP) links parents and children to community resources and services, provides extended parenting time while in treatment and recovery, improves co-parent relationships and reduces post-decree involvement. The overarching goal of FFP is to provide families with the supports and skills necessary to effectively co-parent in a manner that contributes to healthy and successful children.

An intervention program designed to support parents who are experiencing substance use disorder, mental health issues, and/or domestic violence, FFP is designed to identify families facing divorce who are experiencing mental health, substance use disorders, and/or domestic violence; link parents with mental health, substance use, and/or domestic violence services to promote healing, awareness, and wellness; promote equal parental involvement and access through dynamic parenting time schedules; and reduce the number of post-decree motions surrounding parenting time for families with a history of mental health, substance use disorders, or who have experienced violence.

FFP is a voluntary tool utilized by families seeking to address issues of mental health and/or substance use and domestic violence prior to divorce. The goal of the program is to provide links to various levels of treatment services including education services, outpatient and inpatient treatment.

FFP provides centralized case management through Moore Counseling and Mediation Services (MCMS), connecting clients to treatment providers and wrap around services, and providing an encouraging and supportive atmosphere to enable them to gain stability and long-term skills to support mental, sober and overall health. A specialized case manager assists in not only brokering services but monitoring compliance to ensure the Court can act in the best interests of the children involved. Judicial compliance monitoring ensures that the parties are adhering to court ordered conditions and mandates and monthly team meetings with case managers and program staff support client success.

Services provided for FFP clients include clinical assessment by licensed clinicians, intensive case management (in or outpatient), mental health treatment (in or outpatient), substance use disorder treatment (in or outpatient and aftercare), conflict resolution, drug testing, parenting classes/coaching, supervised parenting time via certified family advocates, employability skills training, mental health services for children (individual counseling, art therapy), supportive services for children (anger management, mentoring, pro-social activities), coordination of community based services, domestic violence counseling, financial assistance for emergency services (bus passes, clothing, food, housing), and Guardian ad Litem services to assist in determining the best interest of the child.

Target Population:

- FFP serves clients with substance use and/or mental health disorders and families with a DV Civil Protection Order and MH/SUD affecting their ability to parent.
- All Ages, All socioeconomic categories

Anticipated Number of Clients to be Served: 70

Number of Staff Required to Implement Program: 4

Steps to Ensure Program Continuity if Staff Vacancies Occur:

- Court personnel assigned to the program are Cuyahoga County Domestic Relations Court
 employees who are trained in all aspects of program administration, such that if there is a
 vacancy, program clients are not affected. Judge Tonya Jones is the founder of the program.
 However, all five Cuyahoga County Domestic Relations Court judges refer cases to the program.
 As a result of this organizational structure, clients in the program continue to receive services
 consistent with the contract when staff vacancies occur.
- MCMS is similarly situated in that if there is a Case Manager vacancy, MCMS assigns existing staff to fill the Case Manager role, seamlessly transferring duties to the new Case Manager.

Funding Priority:

Prevention

Program Goals:

- Identify and screen parents at risk for criminogenic risks, substance use and/or mental health disorders
- Clinically assess those parents identified as at risk for substance use and/or mental health disorders
- Increase the number of parents meeting treatment goals based on assessment and treatment plan of the assigned licensed clinician
- Increase the number of parents and children successfully engaged in a recovery plan
- Increase the number of parents connected to community resources for parenting and employment assistance at the conclusion of their case

Program Metrics:

- 90% of parents meeting eligibility criteria will be screened for criminogenic risk, substance use and mental health disorders
- 70% of parents screened and referred to MCMS for an assessment will complete the assessment
- 70% of parents diagnosed as needing treatment will meet treatment goals
- 70% of parents will actively work their recovery plan post treatment
- 80% of parents will be connected to community resources for parenting and employment

First Six Months of CY22 Provider Outcomes:

Highlights:

- Number of Clients that were Anticipated to be Served: 32
- ADAMHS Funded Unduplicated Clients Served: 9
- Total Number of Clients Served: 52
- Total Number of Clients that Completed this Program/Service: 13

Average Cost Per Client: \$1,120.69

Additional Information: N/A

CY21 Provider Outcomes

Highlights:

- Number of Clients that were Anticipated to be Served: 48
- ADAMHS Funded Unduplicated Clients Served: 66
- Total Number of Clients that were Served: 66
- Total Number of Clients that Completed this Program/Service: 14

Goals Met:

- Identify and screen parents at criminogenic risk, substance use and/or mental health disorders
- Clinically assess those parents identified as at risk for substance use and/or mental health disorders
- How many parents are meeting the treatment goals based on assessment and treatment plan of the licensed clinician assigned
- How many parents and minors are successfully engaged in a recovery plan after their case is completed
- How many parents are connected to community resources for parenting and employment assistance at the conclusion of their case

Metrics Used to Determine Success:

- 90% of parents identified as eligible will be screened for criminogenic risk, substance abuse and mental health issues
- 70% of parents screened and referred to MCMS for an assessment will complete assessment
- 70% of parent diagnosed as needing treatment will meet treatment goals
- 70% of parents actively working a recovery plan (post-treatment)
- 80% of parents will be connected to community resources for parenting and employment

Program Successes:

- 100% of eligible participants received a clinical assessment for treatment
- 100% of clients referred to MCMS completed their assessments
- 100% of clients are meeting the treatment goals set by the case managers
- 94% of clients with a recovery plan met treatment goals
- 100% of clients are connected to community resources for basic needs and support by the MCMS case managers

Average Cost Per Client in CY21: \$984.84

Additional Information:

• The program expanded its reach to "low risk" domestic violence cases with children and involve participants that have a Domestic Violence Civil Protection Order in place. These cases have an increased need for supervised visitation and increase the cost of service. Due to the protection orders, clients require creative modifications for the ability to co-parent. Staff had to increase the use of mentors for minors and teenagers who have witnessed domestic violence and designated community supervised visitation professionals to be on-site during these visits and drop-offs.

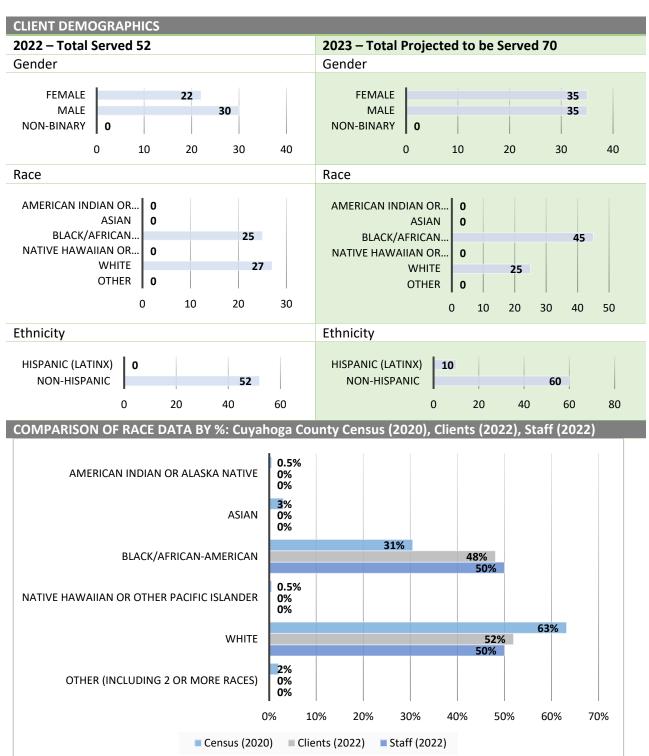
Focus on Diversity: Cuyahoga County Domestic Relations Court

Program(s): Families First Program

Diversity, Equity and Inclusion STRENGTH from program proposal:

The agency has a policy or polices related to non-discrimination, equal employment opportunity, and/or harassment based on protected categories of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), language, disability, marital status, sexual orientation, or military status.





Note: These are the best estimates based on available information. Figures may be estimated or rounded, and may not equal 100%.