

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

## GENERAL MEETING MINUTES NOVEMBER 16, 2022

### ADAMHS BOARD OF DIRECTORS PRESENT:

J. Robert Fowler, Ph.D.	Patricia James-Stewart, M.Ed., LSW
Ashwani Bhardwaj	Basheer Jones
Gregory X. Boehm, M.D.	Katie Kern-Pilch, MA, ATR-BC, LPC-S
Erskine Cade, MBA	Rev. Max M. Rodas, MA
Sadigoh C. Galloway, MSW, LSW, LICDC-CS	Sharon Rosenbaum, MBA
Gwendolyn A. Howard, LSW, MSSA	Harvey A. Snider, Esq.

**ABSENT:** Bishara W. Addison, Reginald C. Blue, Ph.D., Rev. Benjamin F. Gohlstin, Sr., Daniel Kelly, Steve Killpack, MS

**BOARD STAFF PRESENT:** Scott Osiecki, Chief Executive Officer, Carole Ballard, Danielle Clark, Vince Crowe, Erin DiVincenzo, Tami Fischer, Ben Goodwin, Madison Greenspan, Felicia Harrison, Esther Hazlett, Bill Hebble, Anthony Henderson, Jr., Myra Henderson, Woo Jun, Britany King, Linda Lamp, Mark Onusko, Clare Rosser, Jessica Saker, Allison Schaefer, Starlette Sizemore, Maggie Tolbert

### **1. CALL TO ORDER**

Board Chair, J. Robert Fowler, Ph.D., called the General Meeting to order at 4:00 p.m. Dr. Fowler read into the record the Board's Mission Statement: *"Enhance the quality of life for our community through a commitment to excellence in mental health and addiction prevention, treatment and recovery services coordinated through a person-centered network of community supports."*

### **2. AUDIENCE INPUT ON AGENDA ITEMS**

No audience input on agenda items was received.

*[Ms. Sharon Rosenbaum, MBA, and Mr. Harvey A. Snider, Esq., arrived.]*

### **3. APPROVAL OF MINUTES**

The minutes from the October 12, 2022 Special Meeting, October 19, 2022 Committee of the Whole Meeting and October 26, 2022 General Meeting were approved as submitted.

Ms. Katie Kern-Pilch presented a "Proclamation of Admiration, Praise and Gratitude to the Employees of the ADAMHS Board of Cuyahoga County by the Board of Directors." She cited that the ADAMHS Board of Cuyahoga County is fortunate to have a dedicated staff committed to the mission and vision of the Board while ensuring that prevention, treatment and recovery services are available to the residents of Cuyahoga County. The ADAMHS Board of Directors has always held the Board staff in the highest regard as partners and as the civic employees who position the Board and its service delivery system for success in a continually changing and increasingly demanding behavioral healthcare environment. The employees of the ADAMHS Board approach their important work in an open, transparent and collaborative manner with the Board of Directors, clients, families, providers, public and private partners and many other stakeholders. The ADAMHS Board of Directors wishes to recognize and extend utmost appreciation to the staff for the compassion and dedication continually shown – especially when meeting the challenges brought forward by the COVID-19 pandemic, continually transforming opioid epidemic, racial injustice and the increased need for mental health awareness and services.

The ADAMHS Board of Directors expresses its deepest admiration, praise, respect and gratitude to each and every ADAMHS Board employee. The ADAMHS Board of Directors recognizes the ADAMHS Board employees as the unsung heroes who work behind the scenes carrying out the daily operations that maintain our community behavioral health system. This proclamation presented to the staff by the Board of Directors shall be entered into the official records of the ADAMHS Board of Cuyahoga County.

### **4. RECOGNITION OF CLIENT ARTWORK DISPLAY: NOVEMBER 2022**

The ADAMHS Board's monthly client art display program showcases client artwork, highlights our provider agencies, recognizes the benefits of art therapy and celebrates the recovery community. The monthly client art display program can be seen in-person and virtually on the Board's website.

Ms. Madison Greenspan, External Affairs Officer, reported on the artwork produced by Wendy B, which was also on display at Front Steps Housing and Services *All About the Arts* event that transpired on Friday, November 4, 2022. This interactive display includes a description of what this artwork represents regarding her journey with mental health. In the absence of Wendy B., a certificate of appreciation will be presented at a later date.

## **5. CHAIR'S REPORT**

Dr. Fowler reported that the ADAMHS Board of Directors participated in an Annual Training/Retreat that was held on Saturday, October 29th, from 9:00 a.m. to 12:00 p.m. at the Board's administrative office. The Annual Training/Retreat included presentations by Ms. Cheri Walter, Chief Executive Officer, and Ms. Liz Henrich, Associate Chief Executive Officer, of the Ohio Association of County Behavioral Health Authorities (OACBHA), Ms. Tami Fischer, Chief Administrative Officer, and Mr. Scott Osiecki, Chief Executive Officer. The goal of the training was to further instruct the Board of Directors on roles and responsibilities, the State of the State, Robert's Rules of Order, the Board's Table of Organization (TO) and the Board's Request for Proposals (RFP) process. Dr. Fowler shared that this was an effective training/retreat and a morning well spent.

*[Mr. Erskine Cade, MBA, arrived.]*

## **6. PRESENTATION: OVERDOSE PREVENTION SITES (OPS)**

Gregory X. Boehm, M.D., Ohio Society of Addiction Medicine (OHSAM), Regional Director ASAM, Board certified Psychiatry, Addiction Medicine, Child and Adolescent Psychiatry and ADAMHS Board of Director, reported that OPS were previously called safe injection sites (SISs), and shared as to whether all can begin a discussion regarding how to set up safe OPSs; what are OPSs, how do they work and do they work. SISs are places where clinical staff can provide sterile syringes and overdose prevention; consisting of the following:

- Fentanyl testing strips, Spectrometer
- Naloxone IV to reverse overdose
- Provide primary care
- HIV and HEP C testing
- Treatment for skin abscess and infections
- Connection to Medicaid, housing, on-going medical care, Medication Assisted Treatment (MAT), behavioral and addiction treatment
- Connection to wrap-around services for harm reduction, social services, education and employment.

Dr. Boehm reported that the case for Supervised Injection Sites in the United States, which was published in the "American Family Physician" 2022 (Jorge Finke, M.D., and Jie Chan, M.D., Bowdoin Street Health Center, Dorchester, Massachusetts) included reduced overdose deaths in the first month; and reduced health care costs and crime, especially property crime, which is drug related property crime. 80% of property crime is connected to drug use. Also, 26% net reduction in overdose deaths in the area surrounding a supervised injection site in Vancouver, Canada, compared with the rest of the city. Dr. Boehm reported that a supervised injection site in Barcelona, Spain, was associated with a 50% reduction in overdose mortality from 1991 to 2008.

When comparing heroin versus fentanyl, a lethal dose consists of 15-20 mg of heroin; and a lethal dose of fentanyl is 2 mg. No matter what individuals think they are purchasing, the drugs are laced with fentanyl and a speck is enough to kill an individual. Particular to fentanyl, the cause of death is not only impaired respiratory center, as in "stopped breathing in sleep", but also "Wooden Chest Syndrome" "Chest Wall Rigidity", whereby a patient cannot breathe because the thoracic and abdominal muscles are overstimulated and become rigid. At overdose prevention sites, staff would be able to provide intubation, which is a process where a healthcare provider inserts a tube through a person's mouth or nose, then down into their trachea (airway/windpipe). The tube keeps the trachea open so that air can get through. Staff would also provide a neuromuscular blockade to stop the effect of the chest wall rigidity. Esmeron is provided in those cases to reverse, but only if intubation is provided in the meantime to keep the individual breathing.

Dr. Boehm referenced a few charts. The first chart shared identified the national drug-involved overdose deaths among all ages, 1999-2020, which reflected a huge rise in overdose deaths due to synthetic opioids other than methadone (primarily fentanyl) over

the last five years. The second chart, “National Overdose Deaths Involving Any Opioid, Number Among All Ages, by Gender, 1999-2020” reflects that more males than females die as a result of overdose deaths involving any opioid. In 2020, there was a 27% increase in overdose deaths. In 2021, there was a 15% increase in overdose deaths (107,375) and the latest statistics from March 2021 to March 2022 reflect a total of 109,403 overdose deaths. Dr. Boehm noted that there are some minorities that are particularly at risk – overdose deaths for Black men have tripled from 2015 to 2020 as compared to the overall overdose deaths, which is reflective of a 75% increase. Also, teenagers are especially at risk – 300% increase in fatal overdose deaths.

Dr. Boehm reported that Ohio is number three in sex trafficking due to cartels relying on both drug and sex trafficking. He shared that they believe Ohio is number three due, in part, to the interstate system – East West: I 90, 80, 70; North South: I 71, 75, 77 – which can transport drugs and victims quickly from the East Coast to the West Coast. According to “Dreamland” by Sam Quinones, shows that Crawford County in Ohio is one of the two spots in America where drug cartels purposely try to transport all illegal drugs. The other spot is Charlotte, North Carolina; and from there they can distribute all drugs up and down the East Coast (New York, Boston and all the way down to Miami). From Crawford County, which is halfway between Cleveland and Columbus – Mansfield area – drug cartels can transport to the entire Midwest (Detroit, Chicago, Milwaukee and Nashville). Sam Quinones, who comes to Cleveland approximately three times a year, was a journalist that lived in Mexico for ten years and documented the distribution of drugs from Mexico. Presently, fentanyl is made in labs in China and China brings this drug to Mexico because those pipelines exist to this day.

On Thursday, March 17, 2022, authorities busted a million dollar Mexico-to-Cleveland drug ring. Federal prosecutors seized a warehouse located at 7719 Carnegie Avenue with \$13 million in drug trafficking. This location was a key part of a multimillion dollar drug operation that moved more than 1,000 pounds of cocaine to the Cleveland area from Mexico over the past three years.

Besides saving lives, reducing infections, and improving healthcare, it radically reduces health care costs, crime and recidivism:

- Reduced 911 calls for overdose
- Reduced emergency ambulance runs
- Reduced emergency room treatment for overdose
- Reduced high frequency conditions: HEP C, HIV, Abscess, Infections
- Reduced emergency room for chronic pain, injuries, asthma, Diabetes mellitus (DM), Hypertension (HTN), Congestive Heart Failure (CHF), renal
- Reduced property crime: 80% drug related

There are 155 OPSs globally, including 47 in Canada and two in New York City. In Vancouver and Toronto, OPSs have been legally sanctioned since 2003. Vancouver first started in 1995: “Cain Report” by the Coroner. Support and funding came from local businesses. The first two months of operation at first publicly recognized United States OPSs for individuals between 18 – 71 years of age, 37.6% were homeless patients and 17% had their own room or apartment. During the first two months of Overdose Prevention Center (OPC) operation, trained staff responded 125 times to mitigate overdose risk. In response to opioid-involved symptoms of overdose, naloxone was administered 19 times and oxygen 35 times, while respiration or blood oxygen levels were monitored 26 times. In response to stimulant-involved symptoms of overdose (also known as overamping), staff intervened 45 times to provide hydration, cooling, and de-escalation as needed. Emergency medical services responded five times, and participants were transported to emergency departments three times. No fatal overdoses occurred in OPCs or among individuals transported to hospitals.

In Canada, SISs are associated with lower overdose mortality (88 fewer overdose deaths per 100,000 person-years (PYs) and 67% fewer ambulance calls for treating overdoses. Overdose deaths decreased from 253 to 165 per 100,000 PYs. Average monthly ambulance calls with naloxone treatment for suspected opioid overdose decreased from 27 to nine (relative risk reduction of 67%). A cost-benefit analysis of a hypothetical site in Baltimore, Maryland, predicted that it would generate \$7.8 million in savings at an annual cost of \$1.8 million. Another estimate in New York City predicted that one SIS could save \$800,000 to \$1.6 million in annual health care costs from opioid overdoses. On the other hand, the following challenges exist:

- Funding: currently only private foundations
- Workforce shortage – Certified Nurse Practitioners (CNP), Medical Doctors (M.D.s)
- Location: where in the Cleveland area
- Community relations and public perception
- Partner with law enforcement

Dr. Boehm responded to questions from the Board of Directors and stated that further discussion would need to be had regarding all aspects stated above. Judge David Matia shared that he heard a woman speak at the City Club recently; and she provided a statistic that the number of individuals that die is the equivalent of a 747 airplane crashing every day in this country. One thing to remember today is that no one recovers when they are dead. Things are not getting better. Every year more individuals die in a county with a population that is stagnating and/or shrinking; and we need to do whatever we can to reduce individuals from dying. This is a politically difficult task, but the time has really come to investigate all options for saving lives so individuals have tomorrow and children have parents. Judge Matia also stated that he wonders how much would be saved if there was not a drug problem in this county; and how crime would be eviscerated. This is a proposed idea of a safe injection site where you have a trained professional to Narcan someone. (The PowerPoint presentation is attached to the original minutes stored in the Executive Unit.)

Judge Matia referenced that Dr. Boehm talked about possibly linking individuals with MAT and that would really be buprenorphine. Later on, in the agenda the Board of Directors will be voting on a policy that he believes is woefully inadequate. He stated that he runs the MAT docket of the county's Drug Court. Most of the individuals are not on Vivitrol these days. Most individuals are on buprenorphine and they do not have places to send them. This policy that the Board of Directors is moving to adopt is an easy out, side stepping of the issue. If this Board acted and required people receiving funds from this Board, treatment providers, to allow individuals on all forms of MAT, that would really help. Everybody would come to the table. There is a new form of buprenorphine that is a long term injectable, sublocade, that is available now and is a game changer. The argument that residences make against buprenorphine is that individuals will share and/or sell, will be set aside by a long term injectable. Just allowing a residence to house individuals on Vivitrol is not moving forward; and individuals do not die when they relapse on buprenorphine as often as individuals who relapse on anything else. Buprenorphine is a linebacker that attaches itself to an individual's dopamine receptors to prevent fentanyl from attaching and pushing the individual into respiratory arrest. He cited Dr. Papp by stating that it is medically malpractice not to put someone on buprenorphine. Vivitrol helps control the cravings, but that policy will not move the body forward; and the Board of Directors has the tremendous power of persuasion with the powers of the purse. Judge Matia indicated that as a Drug Court Judge since 2008 – every year the number of deaths go up – we could do better than this policy; and asked that the Board of Directors to reconsider before thinking that progress has been made.

## **7. NEW POLICY STATEMENT REVIEW**

Mr. Woo Jun, Director of Risk Management, presented the second reading regarding the following new policy statement:

### ➤ Medication Assisted Treatment in Recovery Housing Policy

Mr. Jun reported that the Medication Assisted Treatment in Recovery Housing Policy is to ensure that recovery housing providers in Cuyahoga County provide a sober, safe, and healthy living environment to individuals with substance use disorder, including individuals utilizing MAT. Recovery housing is housing for individuals recovering from substance use disorder that provides an alcohol and drug-free living environment, assistance with obtaining substance use disorder services, and other recovery assistance, and may also include peer support.

One of the most effective and life-saving treatments for substance use disorder is MAT. MAT is the use of prescribed medications, in combination with counseling and behavioral health therapies, to provide a "whole-patient" approach to the treatment of substance use disorder. Medications used in MAT are approved by the Food and Drug Administration (FDA) and MAT programs are clinically driven and tailored to meet each client's need.

However, some traditional, abstinence-based recovery housing providers require abstinence of all drugs, including prescribed medications such as methadone, buprenorphine, naltrexone, etc., and will not take individuals utilizing MAT. The Americans with Disabilities Act (ADA) protects individuals with substance use disorder who are in treatment or recovery, including individuals utilizing MAT, and thus, recovery housing providers denying individuals access to MAT may be in violation of the ADA. It is the policy of the ADAMHS Board to ensure that individuals have access to various evidence-based treatment options, including MAT, and that recovery housing providers that receive funding from the ADAMHS Board (directly or indirectly) will accept individuals utilizing MAT.

Before entering into a contract with recovery housing providers directly or through a contract with a provider overseeing a recovery housing network, the ADAMHS Board will verify that the recovery housing provider accepts individuals utilizing MAT. To comply with this policy, recovery housing providers must accept at least one prescribed medication used in MAT.

During the term of the contract, if the ADAMHS Board substantiates the claim that a recovery housing provider does not accept at least one prescribed medication used in MAT, the ADAMHS Board may recommend termination of the contract to its Board of Directors subject to the “Appeal of Board Decision” Policy.

Mr. Osiecki provided a brief update on correspondence received from Judge Matia, who wrote about MAT and the ADA. Judge Matia stated that many recovery facilities and sober houses in our community do not accept individuals suffering from Substance Use Disorder (SUD) who are on MAT. This practice is illegal and violates the ADA. Judge Matia has recommended that the ADAMHS Board should not be financially supporting organizations that violate the ADA.; and has asked the Board to adopt a policy requiring any financial recipient of ADAMHS Board funds to be in compliance with the ADA. in regard to MAT.

Mr. Osiecki has spoken with Ms. Lori Criss, Director of the Ohio Department of Mental Health and Addiction Services (OhioMHAS), regarding MAT and was informed that the ADA clearly outlines that individuals who are taking legally prescribed medication to treat opioid use disorder are protected under the act. After much discussion regarding this matter and taking into account that some individuals are committed to the abstinence based modality, it was agreed that the ADAMHS Board funded homes would accept some form of MAT. This provides individuals with options as to what they would like to do, rather than forcing every single residence to accept every form of MAT. This provides individuals with an option, and giving the recovery homes an option as well; but no one would receive funding if they did not accept individuals on some form of MAT.

Judge Matia was requested to provide additional input on this matter. He stated that there are three main forms of MAT, one of which is methadone, which requires an individual to go to a methadone clinic generally every day and has worked well in New York City; whereby there are plenty of methadone distribution sites. However, there are only two locations in Cuyahoga County and to require treatment homes to transport their clients every day – or allow them to leave early on in recovery would not be a good thing. As a result, his main focus is buprenorphine, which is also known as Suboxone (an opioid), and if prescribed properly with no euphoric effect, an individual can drive a bus on these medications and/or do brain surgery. No one overdoses and dies on these medications. The other form that is really popular is Vivitrol, which is a long term injectable form of naltrexone. Science shows that individuals using buprenorphine or Suboxone, in conjunction with a multifaceted treatment program have much better outcomes than an individual using an abstinence only approach to sobriety.

When individuals are coming out of the Cuyahoga County Jail, they are being placed on buprenorphine; and when being sent to treatment, there are a couple of treatment providers – Community Assessment and Treatment Services (CATS), Matt Talbot – and women can be sent to Hitchcock Center for Women. He stated that he cannot send them to Stella Maris, as they will not take them. If these individuals flunk out of one of these facilities, he is without options. More importantly, after the treatment facility, when the individual is being sent to a sober house; and if the sober house that is funded by the Board had to accept all forms of MAT, we would have better outcomes. Better scientific outcomes and less deaths for people by adopting a more restrictive policy as to how the Board funds treatment centers and recovery homes.

Ms. Allison Schaefer, Director of Adult Behavioral Health Programs, shared statistics relative to MAT. Out of the 21 recovery housing providers that the Board directly contracts with, none refuse clients on MAT, however:

- 14 accept all forms of MAT: methadone, Suboxone and Vivitrol.
- Four accept all but methadone.
- Three accept only Vivitrol.

Of the eight homes within the Housing Recovery Network that the Board funds with Cleveland Treatment Center (CTC) – none refuse clients on MAT, however:

- Six accept all forms of MAT.
- One accepts all but methadone.
- One accepts only Vivitrol.

Of the 18 homes with the Recovery Housing Network that the Board funds with Stella Maris:

- Two do not accept clients on MAT.
- Two accept all forms of MAT.
- Three accept all but methadone.
- 11 only accept Vivitrol.

Dr. Boehm reported that he concurs with Judge Matia's position relative to MAT; and recommended that all Sober Housing allow all forms of MAT, or at least Vivitrol and Suboxone. Mr. Osiecki responded that we would be limiting the options regarding individual choice. After a lengthy discussion regarding this matter, Dr. Fowler and Mr. Erskine Cade were of the opinion that this policy should be referred back to committee for further discussion. However, due to budget decisions, a decision must be made regarding this discussion. Ms. Sadigoh Galloway stated that once we start talking about having a straight line with all recovery housing accepting all forms of MAT, we start to remove some of the rights away from the tenants. You may have some tenants that do not want to be in a house with someone else that is on a particular form of MAT; and they should have that option to go somewhere else. This would be closing the door on some of the tenants' rights. Ms. Galloway also stated that she agreed that for Drug Court and the advancement of recovery, it does make sense in a perfect world. Once we start making a blanket approach, we need to start thinking about the population being served as well; not just how easy this would be for the courts and for the ADAMHS Board as well. You are thinking about an individual's life, tenants, and clients have rights too. You are forcing them into a pool that works well for all, including improved change right away, and some things take time – and they deserve an opportunity to make a decision themselves.

Ms. Sharon Rosenbaum stated that from a financial perspective, the Board of Directors could vote on the budget as it stands and support these houses; and take on in the next couple of months a discussion and study as to whether the Board should make this a requirement. For clarification, Dr. Fowler reiterated that the Board could pass this motion in favor of the budget as it stands; with the caveat that the Board continue to review this policy – in committee – with the possibility of changing the policy as time goes on.

Given no further discussion regarding the new policy statement proposed, a call for a motion was entertained.

**Motion to approve the new Policy Statement labeled Medication Assisted Treatment in Recovery Housing Policy.** MOTION: S. Galloway / SECOND: S. Rosenbaum / AYES: A. Bhardwaj, G. Boehm, E. Cade, S. Galloway, G. Howard, P. James-Stewart, K. Kern-Pilch, M. Rodas, S. Rosenbaum, H. Snider / NAYS: B. Jones / ABSTAIN: None / **Motion passed.**

#### **8. SUPPORT OF OHIOMHAS COMMUNITY CAPITAL ASSISTANCE APPLICATIONS FOR EMERALD DEVELOPMENT AND ECONOMIC NETWORK, INC. (EDEN, Inc.)**

Mr. Jun reported that the ADAMHS Board approved and submitted a State Fiscal Year (SFY) 2021-2026 Community Capital Plan to OhioMHAS in October 2019 (Resolution No. 19-10-01) to identify capital projects that benefit clients living with mental illness and/or substance use disorders. OhioMHAS Assurance Statement requires the ADAMHS Board to assure the building will be used for the purpose described in the Application unless written authorization is obtained from OhioMHAS. The OhioMHAS Assurance Statement requires the ADAMHS Board approve the Application with an assurance of an intent to support applicant's program consistent with the Application, and in addition, to annually monitor the program and operations of the facility. OhioMHAS requests a board resolution from the ADAMHS Board to reaffirm and provide support for EDEN, Inc.'s Expansion Phase II and EDEN, Inc.'s Transition Age Youth (TAY).

EDEN, Inc.'s Expansion Phase II includes new construction and expansion of EDEN, Inc.'s scattered site portfolio located at 703 E. 162nd St. in Cleveland, 3907 Brookside Drive in Cleveland, and 11710-12 Nelson Court in Lakewood. 703 East 162nd Street will be a new construction duplex; 3907 Brookside Drive will be a new construction three-bedroom accessible unit for mobility impairment with a contemporary design; and 11710-12 Nelson Court will be a rehabilitation of four existing one-bedroom apartments and adding a two-bedroom apartment on top of the roof of the existing structure. All new and rehabbed units will feature conformity to the latest energy codes and promote energy efficiency. Included in the architecture is the selection of durable products, low Volatile Organic Compounds (VOC) paint, and attractive, modern kitchens and bathrooms. The total cost of this project is \$2,252,250 with a \$450,000 request from OhioMHAS. No ADAMHS Board funding is required. A total of eight permanent supportive housing units will serve at least 15 individuals and a maximum of 22 individuals.

EDEN, Inc.'s TAY includes new construction of a three story, 50-unit permanent supportive housing development located 1415-1430 East 45th Street in Cleveland with approximately 51,587 square feet. The project will feature 38 one-bedroom and 12 two-bedroom units for young adults ages 18-24 who have experienced homelessness, including those who may be parenting. Each unit will contain a full kitchen, bath, and living room with building amenities to include a community room with a learning kitchen, computer room, an indoor children's play area, fitness room, administrative space and other support office and social services space. The total cost of this project is \$16,331,377 with a \$750,000 request from OhioMHAS. No ADAMHS Board funding is required. A total of 50 new permanent supportive housing units with a total of 62 individuals for transitional-aged youth (18-24) and their children. Mr. Richard Carr, Director of Real Estate Development & Construction from EDEN, Inc., was present to respond to any questions Board of Directors may have had.

Mr. Jones inquired with Mr. Carr as to whether EDEN, Inc. is working with unions relative to the expansion and construction of these programs; in addition to statistics regarding the percentage of individuals employed. Mr. Carr responded that the projects were competitively bid and consist of minority contracting entities and professionals. He also stated that the City of Cleveland's protocols are being utilized; in addition to the Section 3 Program requirements, which require a higher number of workers from the local community. EDEN, Inc. has done this for a number of years to ensure that all requirements are met.

Mr. Jones asked the Board as to whether we have our own qualifications when it comes to minority participation in new buildings and workers. Mr. Osiecki reported that the Board does not own the buildings nor provide capital funding. The funding in question is from the State of Ohio, thus state rules are followed. Mr. Jones also asked as to whether the Board has established requirements relative to the provider agencies being funded. Ms. Felicia Harrison responded that there is no requirement for the Board's provider agencies; however, when looking at the Board's operational budget, the Board utilizes the percentage identified in the Ohio Revised Code (ORC).

Mr. Osiecki stated that the Board's provider agencies are nonprofits and are not owned by a particular individual. Mr. Jones clarified that this could be for employees of the provider agencies and not ownership. Mr. Osiecki highlighted that the information was provided during orientation. Mr. Jones stated that he was asking his question twice and stated that he did not like his intelligence insulted. After a discussion regarding this matter, Rev. Max Rodas shared that he is getting tired of the lack of respect for the Chief Executive Officer; and was not sure of what the question was, but the emotions took over; and that Mr. Jones felt disrespected and asked for clarification of Mr. Jones' question. Mr. Jones responded that with all due respect, his question was not to Rev. Rodas, it was to the Director; and stated that Rev. Rodas thinks that he is disrespecting the Director. Rev. Rodas shared that in the spirit of the conversation, it is toxic. Mr. Jones stated that the point that he is missing is that when he has a question, just like everyone else that has a question, he expects to have the question answered, not to be tossed around, not to be disrespected, and he had a question for the Director and the Director did not finish answering the question. Then he was speaking to the Chair and the young lady kept interrupting, so as a Board member, like himself, if he has a question, his questions deserve to be answered.

Mr. Cade reported that several things were covered during the New Board of Director Orientation session, including the percentage of allocations to minority contractors. To have a repetitive conversation regarding this matter is counterproductive. With all due respect, we need to have respect for the Board as to how we go through these processes, in terms of what has been covered; and the Board's time should not be wasted to rehash this material. Mr. Jones responded that we all have views. Ms. Rosenbaum shared that the Board of Directors should be able to ask questions, but for many years there has a tone amongst the Board of Directors – of cooperation and civility – and raised voices are not really helpful; so, if everyone can show mutual respect, the Board's work will get done.

- **RESOLUTION NO. 22-11-01**  
**APPROVAL OF COMMUNITY CAPITAL PLAN APPLICATIONS FOR EMERALD DEVELOPMENT AND ECONOMIC NETWORK, INC. EXPANSION PHASE II AND TRANSITION AGE YOUTH (TAY)**

**Motion to approve Resolution No. 22-11-01.** MOTION: S. Rosenbaum / SECOND: K. Kern-Pilch / AYES: A. Bhardwaj, G. Boehm, E. Cade, S. Galloway, G. Howard, P. James-Stewart, B. Jones, K. Kern-Pilch, M. Rodas, S. Rosenbaum, H. Snider / NAYS: None / ABSTAIN: None / **Motion passed.**

## **9. FINANCE REPORTS**

Ms. Felicia Harrison, Chief Financial Officer, highlighted the September 2022 Finance Reports, Contracts and Amendments as listed below.

### **BOARD VOUCHER & EXPENDITURE REPORTS – SEPTEMBER 2022**

Ms. Harrison reported that the Administrative Budget that was approved for Calendar Year (CY) 2022 was \$7,374,726.62 and for September Actual YTD 2022, the total expenses were \$5,433,350.48; that is roughly 74% of the total Administrative Budget. As a result, the Board is on track with expenses for the first nine months. Ms. Harrison highlighted that relative to the Board Voucher Report for September 2022, the expenses appear normal.

The Funding Source Budget to Actual YTD, September 2022, displays the Board's total revenue budget for administrative operations and grants. The total revenue expected to be received from Federal, State and local levy funds is \$73,548,249; and through the end

of September 2022, the Board has received \$68,900,930.45. The bulk of these funds consists of the Board's annual amount from the County levy subsidy of \$43,463,659. Ms. Harrison reported that 94% of the budget has been received.

The Revenues By Source By Month report reflected that in September 2022, the Board received revenues of \$3,531,086.01. As a result, the Total Revenues By Source By Month is \$68,900,930.45.

The ADAMHS Board Budget vs. Actuals for 2022 reflect that September YTD Actual is \$55,945,011.60 that is roughly 66% of the Board's anticipated expenditures for the calendar year. Ms. Harrison noted that the Diversion Center's expenditures are reflected on this report.

Revenue and Expenditures All Accounting Units By Month January through September 2022 includes administrative accounts as well as grant accounts. The total expenditures for September 2022 is \$6,540,457.31; bringing the total expenditures for Calendar Year 2022 to \$55,945,011.60. This total includes the ADAMHS Board's Administration, Opportunities for Ohioans with Disabilities (OOD) Grant, the State Opioid Response (SOR) Grant and Other Grants.

The Revenues and Expenditures Grants YTD, September 2022 YTD reflects the Grant Accounting Units that include the OOD Grant, Other Grants and SOR Grant. The total expenditures for grants YTD is \$3,810,739.20.

The Diversion Center Revenues and Expenditures YTD September 2022 YTD reflects a total of \$3,947,239.19. The total revenue for the Diversion Center for September 2022 is \$1,010,118.77 and the total operating expenses for September 2022 is \$565,074.65.

The Cash Flow Report, September 2022 shows the 2020 Actual, 2021 Actual and YTD thru September 2022. This report shows a comparison of the available beginning balance, total available resources, expenditures and available ending balance. The available ending balance through September 2022 is \$54,546,032.07 and includes the County levy funds, which will be spent down throughout 2022.

*[Mr. Basheer Jones left.]*

- **RESOLUTION NO. 22-01-02  
ACCEPTING THE REPORT OF THE CEO ON EXPENDITURES AND VOUCHERS PROCESSED FOR PAYMENT DURING  
SEPTEMBER 2022**

**Motion to approve Resolution No. 22-11-02.** MOTION: P. James-Stewart / SECOND: K. Kern-Pilch / AYES: A. Bhardwaj, G. Boehm, E. Cade, S. Galloway, G. Howard, P. James-Stewart, K. Kern-Pilch, M. Rodas, S. Rosenbaum, H. Snider / NAYS: None / ABSTAIN: None / **Motion passed.**

#### **10. CUYAHOGA COUNTY DEPARTMENT OF CHILDREN AND FAMILY SERVICES (DCFS) SHORT TERM EMERGENCY CHILDCARE PROGRAM**

Mr. Osiecki reported that Cuyahoga County executive leadership began a cross-system collaborative planning and RFP process to address the DCFS placement crisis. Collaborating public child-serving systems included: Cuyahoga County Department of Health and Human Services, Cuyahoga County DCFS, Family and Children First Council (FCFC), the ADAMHS Board of Cuyahoga County, the Cuyahoga County Board of Developmental Disabilities (CCBDD), and Cuyahoga County Juvenile Court (CCJC). Contributing factors to the placement crisis include difficulties recruiting and maintaining a DCFS and behavioral healthcare provider workforce, treatment level licensed foster/kinship homes, and residential and community-based treatment staff who can provide intensive home-based treatment (IHBT). The Centers was selected for the Short-term Emergency Childcare program through the RFP review process that included all systems. Each public child-serving system agreed to contribute \$1.2 million to Cuyahoga County to be used towards the Short-term Emergency Childcare program. A Memorandum of Understanding (MOU) will be developed by Cuyahoga County and signed by each system to outline the details of this collaboratively funded program. The County Executive signed a three-year contract with The Centers in September of 2022 that was ratified by County Council in October 2022. There will be a reconciliation process to determine how much each system will contribute for the remaining two years of the contract.

The Centers will administer the Short-term Emergency Childcare program, which is a cross-system joint-funded program for children with significant co-occurring multi-system needs who are in the custody of DCFS and in need of an emergency placement. The program will serve multi-system hard-to-place youth who may have been declined or removed from multiple settings and are often



left to stay in the DCFS administration building, hospitals, the detention center or residential treatment programs while DCFS completes a local and nation-wide search for a long-term/permanent placement. The Centers will provide eight beds with length of stays up to 14 days in a congregate care setting and provide 24/7 supervision, therapeutic services, resources and supports, and room and board to an estimated 150 to 200 youth. The Centers have agreed to accept all youth referred by DCFS with no “eject” or “reject” restrictions. Each child served will receive appropriate and necessary individualized supervision and accommodations to meet co-occurring needs related to behavioral health, medical, developmental disabilities, conduct or juvenile offending to ensure the personal safety and wellbeing of themselves and others until a long-term placement or living arrangement is identified. The Centers has formed a strategic partnership with the Cleveland Christian Home. DCFS Short-term Emergency Childcare program will be located at this site in a newly renovated area of the historic building. The Centers is in the process of hiring staff for this program and will not begin accepting referrals until they have a workforce to provide 24/7 supervision and full program operations.

- **RESOLUTION NO. 22-11-03**  
**CUYAHOGA COUNTY DEPARTMENT OF CHILDREN AND FAMILY SERVICES (DCFS) SHORT-TERM EMERGENCY CHILDCARE PROGRAM**

**Motion to approve Resolution No. 22-11-03.** MOTION: K. Kern-Pilch / SECOND: G. Boehm / AYES: A. Bhardwaj, G. Boehm, S. Galloway, G. Howard, P. James-Stewart, K. Kern-Pilch, M. Rodas, S. Rosenbaum, H. Snider / NAYS: None / ABSTAIN: E. Cade / **Motion passed.**

#### **11. CY2023 AGREEMENTS WITH CLASS 2 RESIDENTIAL FACILITIES (ADULT CARE FACILITIES/ACF)**

Ms. Schaefer reported that the ADAMHS Board has developed a list of Class 2 Residential Facilities (Adult Care Facilities/Group Homes) to provide safe, decent and affordable housing for individuals living with mental illness. The ADAMHS Board utilizes its Residential Assistance Program (RAP) funds to provide up to \$1,100 per month per client to the operators of Class 2 Residential Facilities. The Board also provides \$200 per RAP client (not receiving Social Security Income/Social Security Disability Income (SSI/SSDI)) for personal living expenses.

RAP is intended to provide financial rental assistance to indigent/low-income adult clients (18 and over) receiving Therapeutic Behavioral Services (TBS) and/or Community Psychiatric Supportive Treatment (CPST) services from a contract agency of the ADAMHS Board so that the client can live in a Class 2 Residential Facility in the community. RAP is targeted for indigent/low-income adult clients that are discharge ready from an institutional environment such as a hospital, nursing home, jail, Class 1 Residential Facility (RCF), Cuyahoga County Diversion Center or Crisis Stabilization Unit. Once the RAP recipient starts receiving SSI/SSDI, they are required to apply for the OhioMHAS Residential State Supplement (RSS) program, which requires the client to have Social Security and Medicaid. Once approved, the client transitions off of the RAP program, and onto the OhioMHAS funded RSS program. In May of 2022, the ADAMHS Board of Directors approved (not to exceed) \$3,000 to contract with Thrive Behavioral Health Center, Inc. to assist the ADAMHS Board in providing each Adult Care Facility (ACF) with a Peer Seal of Quality. Each listed Class 2 Residential Facility has been visited in 2022 and meets Peer Seal of Quality standards. (Attachment A, CY 2022 list of recommended Class 2 Residential Facilities (ACFs) for contracting is attached to the original Resolution stored in the Executive Unit.)

- **RESOLUTION NO. 22-11-04**  
**APPROVAL OF CY2023 AGREEMENTS FOR ADAMHS BOARD CLASS 2 RESIDENTIAL FACILITIES**

**Motion to approve Resolution No. 22-11-04.** MOTION: H. Snider / SECOND: S. Rosenbaum / AYES: A. Bhardwaj, G. Boehm, E. Cade, S. Galloway, G. Howard, P. James-Stewart, K. Kern-Pilch, M. Rodas, S. Rosenbaum, H. Snider / NAYS: None / ABSTAIN: None / **Motion passed.**

#### **12. CONTRACTS**

1. Crisis Intervention Team (CIT) Training Supplemental Contracts for the Diversion Center – \$63,350
  - Traumatic Players of Cleveland, Inc. - \$19,800
  - Cuyahoga Community College - \$43,550

Ms. Harrison reported that the purpose of these contracts is to enhance the Countywide CIT 40 Hour Training by contracting for supplemental resources like actors for scenario based activities and use of the Cuyahoga Community

College Public Safety Training Scenario Village. These contracts will serve up to 500 or more officers for the second year of training.

As part of the Countywide CIT Training, officers will spend the week of training at the Tri C Public Safety Center for their CIT Training. The ADAMHS Board will contract with Traumatic Players of Cleveland who will provide “actors” to assist by performing various scenarios of people in crisis. Scenario based training will occur on Fridays with the support of the resources at the Public Safety Center and Traumatic Players of Cleveland. Officers will be paired and engage these “actors” during their scenarios, demonstrating active listening skills, tactical communication and non-lethal engagement. The ADAMHS Board will contract with Cuyahoga Community College Public Safety Training Center for the use of the Simulated Scenario Village. Scenario Village is a newly developed training facility located on the campus of Cuyahoga Community College in Parma. Scenario Village is made up of a series of mobile props such as a “house”; “emergency room”; “fast food restaurant”; “apartment building”; and “group home”. These props will be used to conduct the scenario based activities between “actors” and the “officers”. As part of the Scenario Village, officers will also utilize the Virtra Simulator which displays computerized scenarios in which officers will demonstrate de-escalation skills in order to reduce the use of force. Board staff recommend approval of the following contracts in the amount of \$63,350 to enhance the Countywide CIT Training with law enforcement officers throughout Cuyahoga County. These contracts are with Traumatic Players of Cleveland for \$19,800 for the use of “actors” for scenario based activities and Cuyahoga Community College for the use of Scenario Village for \$43,550 for the term of January 1, 2023 through December 15, 2023.

2. State Opioid & Stimulant Response (SOS) Grant, Year 01 – \$1,941,741.90
  - 12 Step Life/Ethel Hardy House - \$143,320
  - Ascent Powered by Sober Grid - \$86,000
  - B. Riley Homes - \$118,239
  - Briermost Foundation - \$107,500
  - Griffin Homes Sober Living, Inc. - \$107,500
  - I’m In Transition Ministries - \$114,656
  - The MetroHealth System - \$200,648
  - Mommy and Me, Too! - \$107,500
  - NORA (Peer Support) - \$107,500
  - NORA (Recovery Housing) - \$197,065
  - Point of Freedom (Peer Support) - \$156,598
  - Recovery First-A Better Way - \$121,822
  - Thrive for Change - \$75,243
  - White Butterfly Peer Support (Woodrow) - \$48,730
  - Women of Hope - \$101,800
  - Woodrow Project (Peer Support) - \$46,579.90
  - Woodrow Project (Recovery Housing) - \$101,041

OhioMHAS has received a biannual State Opioid Response award from the Substance Abuse and Mental Health Services Administration (SAMHSA). OhioMHAS now refers to this as the SOS grant. OhioMHAS is partnering with local ADAMHS boards to implement treatment and recovery programs that expand access to MAT, as well as access to housing and peer support for those with Opioid Use Disorder (OUD), or a history of opioid overdose or stimulant use disorders. The Ohio SOS Project focuses on building a community system of care (prevention, early intervention, treatment, and recovery support) that emphasizes service integration between physical health, emergency health care, behavioral health care, criminal justice, and child welfare for persons with OUD and stimulant use disorders. This amount represents the first installment of funding for the federal fiscal year ending September 29, 2023. OhioMHAS intends to award additional funding for the fiscal year to the Boards for SOS in early 2023, following the closeout of SOR 2.0, Year 02. Board staff are requesting the Board to accept funding from OhioMHAS as part of the SOS opportunity for the period September 30, 2022 through September 29, 2023 in the amount of \$1,941,741.90 and enter into contracts with the providers listed above for the specified amounts.

3. Suicide Prevention Awareness Advertising
  - JEMOH Enterprises, LLC - \$23,400

The purpose of this campaign is to raise awareness of signs of suicide, how to help others and connect to resources for help, promote the crisis hotline, and promote the ADAMHS Board in the community. This is a continuation of advertising to the Greater Cleveland religious, senior and online communities that was approved through the Cuyahoga County Suicide Prevention Coalition at their May 2021 meeting. The advertising package includes:

- o monthly newspaper ads and articles in the OHIO Life NEWS, distributed in 150 churches, senior buildings, and high traffic areas in Greater Cleveland
- o quarterly newspaper ads and articles in the English-Spanish Community Builder, plus bonus editions
- o posters, displays and information to the local churches
- o social media impressions through OHIO Life NEWS and Community Builder online and through Instagram and Facebook
- o FCB Radio Network's advertising at a rate of 12 times per day, 84 spots per week, with a total of eight interviews

Based on estimated impressions, thousands of individuals will be exposed to the campaign online. The campaign will also reach audiences at 150 select locations throughout Cuyahoga County. Funding has been set aside in the Board's CY2023 Operating Budget for suicide prevention advertising. Board staff recommend that the Board approve advertising for CY2023 through JEMOH Enterprises, LLC, at a total amount of \$23,400.

4. Agreements with Attorneys for Civil Commitment Hearings – \$100 per hearing and \$150 per hearing for special hearings
  - Ronald Balbier
  - Steve Canfil
  - Paul Friedman
  - Scott Friedman
  - Ted Friedman

By law (Ohio Revised Code 5122), the ADAMHS Board is required to ensure that persons temporarily detained for involuntary hospitalization actually meet the legal criteria for civil commitment. Probate court shall refer to ADAMHS Boards an affidavit to assist the court in determining whether persons temporarily detained for involuntary hospitalization are subject to court-ordered treatment and whether alternatives to hospitalization are available. Attorneys represent the Board at civil commitment hearings to ensure that persons subject to court-ordered treatment have due process. Attorneys represent the Board at over 1,000 hearings per year.

Attorneys will be compensated \$100 per hearing and motion, and \$150 per special hearing. Attorneys may also be compensated \$100 per hour for additional services, so long as those additional services receive prior approval from the ADAMHS Board. Attorney Paul Friedman files motions on behalf of the ADAMHS Board. Board staff recommend approval of contracting with the Attorneys identified above for \$100 per hearing/motion/hour and \$150 per special hearing for the term of January 1, 2023 through December 31, 2023.

5. Cleveland Division of Police Co-Responder Program – \$238,050
  - FrontLine Service - \$119,025
  - Murtis Taylor Human Services System - \$119,025

The purpose of the Cleveland Police Co-Responder Team (CRT) is to divert people in crisis to the least restrictive alternative and linkages to services. There are four Districts with CRT in place. One team is in the process of coming back on-line as it was previously unavailable due to staffing issues. The City of Cleveland applied for and received a federal grant from the U.S. DOJ COPS office in November of 2021. The City of Cleveland experienced numerous delays in moving the COPS grant through its legislative process due to a new administration. The City of Cleveland, along with the ADAMHS Board, met with the Project Manager from the COPS grant to explain the delay and was advised that the City of Cleveland will be eligible to apply for an extension of the grant period beyond September 2023 due to the late start.

Cleveland Police CRT responds to crisis calls received via Cleveland Division of Police Dispatch for mental health related crisis in the community. Cleveland Police CRT operates 40 hours per week on second shift. A Crisis Specialist is paired with a Specialized CIT Officer in a single car in order to respond to calls. The Crisis Specialist in collaboration with the

Specialized CIT Officer engages with, and responds to, the person's needs, provides assessment and triage to the least restrictive options in the community. Cleveland Police CRT provides follow up on crisis calls from other officers within their assigned police district as well as engage high utilizers of services in order to decrease the need for public safety assistance. FrontLine Service is assigned to Districts 1, 2 and 3 and Murtis Taylor is assigned to Districts 4 and 5. The Crisis Specialist along with CIT Officers work collaboratively together with other aspects of public safety such as Emergency Medical Services (EMS) and dispatch in order to reduce the high utilizers of services by providing ongoing monitoring and support. Board staff recommend approval of accepting \$238,050 for the COPS grant from the City of Cleveland for the Cleveland Police CRT and contract with FrontLine Service in the amount of \$119,025 and Murtis Taylor Human Services System in the amount of \$119,025 for the term of October 1, 2021 through September 30, 2023.

- **RESOLUTION NO. 22-11-05**  
**APPROVAL AND RATIFICATION OF CONTRACTS**

**Motion to approve Resolution No. 22-11-05.** MOTION: M. Rodas / SECOND: G. Howard / AYES: A. Bhardwaj, G. Boehm, E. Cade, S. Galloway, G. Howard, P. James-Stewart, K. Kern-Pilch, M. Rodas, S. Rosenbaum, H. Snider / NAYS: None / ABSTAIN: None / **Motion passed.**

### **13. CONTRACT AMENDMENTS**

1. Amendment to Resolution No. 21-11-07, Awarding OhioMHAS Behavioral Health/Criminal Justice (BH/CJ) Linkages Program Carryover Funding and Replacement of Board Funding – \$94,783.29
  - Recovery Resources - \$39,000
  - Murtis Taylor Human Services System - \$55,783.29

The Community Based Correctional Facility (CBCF) provides a sentencing option that diverts appropriate male felons from the state prison system. The program aims to aid offenders in making positive behavioral and lifestyle changes to decrease the likelihood of continued criminal behavior. CBCF programs give offenders an opportunity to remain in their community while addressing such issues as mental health needs, substance abuse, thinking and decision-making skills, education, employment, anger management, and other life skills.

Recovery Resources was awarded \$83,333 from SFY22 Behavioral Health Criminal Justice (BH/CJ) funding in addition to SFY21 Carryover funds of \$82,076.58 for linkage programming at the CBCF. Due to staffing issues at the agency, Recovery Resources was not able to utilize all BH/CJ funding. This resulted in a significant carryover amount in SFY22. Recovery Resources was awarded \$78,000 for CY22 to provide Jail Liaison services and Murtis Taylor Human Services System was awarded \$155,612 for CY22 to provide Jail Liaison/Suburban Jail Liaison services. Unspent CY22 Board funds of \$39,000 for the second half of CY22 will be rescinded from the Recovery Resources contract and \$55,783.29 for the second half of CY22 will be rescinded from the Murtis Taylor Human Services System's contract. BH/CJ OhioMHAS funds will be utilized for these programs. Approximately 400 individuals with mental health/substance use disorder diagnoses at the Cuyahoga County jail (Jail Liaisons) in CY22. Approximately 250 individuals with mental health/substance use disorder diagnoses and municipal court involvement (Suburban Liaisons) in CY22. Board staff are requesting the Board of Directors amend Resolution No. 21-11-07 to reduce Board funding to Recovery Resources by \$39,000 and Murtis Taylor Human Services System by \$55,783.29 in CY22, to be replaced with OhioMHAS carryover funding of \$94,783.29 for the term of July 1, 2022 through December 31, 2022.

2. Amendment to Resolution No. 22-01-04, University Settlement Community Coalition Prevention Services University Settlement – No-cost Term Extension

Mr. Earl Pike, Executive Director of University Settlement, requested support through the ADAMHS Board towards implementation of a one-year comprehensive assessment and planning process to better understand the complex needs of Slavic Village using SAMSHA's Strategic Prevention Framework (SPF). Research has shown that prevention plans are most effectively developed and implemented when they begin from an understanding of the complex behavioral problems within their complex environmental contexts. SAMSHA developed the SPF to offer prevention planners a comprehensive approach to understanding and addressing the substance misuse and related behavioral health problems facing their states and communities. SPF is comprised of five steps (Assessment, Capacity, Planning, Implementation

and Evaluation), two guiding principles (Cultural Competence and Sustainability) and a few defining characteristics such as being data-driven, dynamic and an iterative circular model that is reliant on a team approach with a coalition of diverse community partners involved at each step of the process.

University Settlement was founded in 1926 to serve two purposes: to be a settlement house for immigrants settling in Cleveland, and to serve as a training ground for Case Western Reserve University (CWRU) social work and nursing students. Over the years, services have evolved to meet the needs of the ever-changing community; however, the dedication to the residents of the Slavic Village neighborhood has not wavered. Today, University Settlement's mission encapsulates the purpose of the organization then, and now: to provide individuals and those we serve with the resources by which they can learn, grow, and thrive. Broadway Slavic Village centers on Fleet Avenue, and on the Broadway and East 55th intersection and consists of zip codes 44127 and 44105. It is bordered to the west and northwest by Cuyahoga Valley, to the north by the Central neighborhood, to the east by the neighborhoods of Union–Miles Park and Kinsman, the suburbs of Cuyahoga Heights and Newburgh Heights to the west and southwest and Garfield Heights to the south.

Slavic Village is one of the most deeply challenged communities in Ohio with poverty, unemployment, disinvestment, poor housing, decaying infrastructure, environmental toxins such as lead, depopulation, and crime mean that, even in good times, Slavic Village struggles to rise above chronic, everyday hardships and obstacles. High among those challenges is alcohol and other drug abuse, including widespread tobacco use and vaping, as well as undiagnosed and untreated mental illness. The neighborhood has experienced profound changes, including shifts in resident demographics. The area was once a settling ground for immigrants coming to America due to the booming employment offered by the local steel mills. However, the crash of the housing market in 2010 left the community devastated; Slavic Village became “ground zero” for the foreclosure crisis, with more foreclosures per census tract than any other community in the entire country. The main zip code served by University Settlement, 44127, remains more economically distressed than 99.5% of zip codes in the country. Today the area is over 52% African American, and currently experiences a poverty rate of 46%, and a child poverty rate of 62%. About 12% of the community is Latinx. On every measure of well-being, Broadway Slavic Village ranks near the bottom: some of Ohio's highest lead toxicity and asthma rates among children, significant unemployment and crumbling infrastructure, high personal and property crime and significant isolation.

University Settlement is seeking a no-cost extension due to project delays related to workforce issues for the term of January 1, 2022 through December 31, 2023. The position requirements have been modified to improve the hiring process. University Settlement of Slavic Village will implement a one-year comprehensive assessment and planning process to identify and address the needs of Slavic Village, utilizing SAMSHA's SPF for community planning. By the end of 2023, University Settlement will complete the SPF and any other requirements necessary to request funding from SAMHSA towards implementation of the resulting plan. As part of the SPF process, University Settlement will complete community assessments, review and catalog available resources, reach out to and engage key community partners, facilitate a community-wide planning coalition, and any additional steps necessary to understand the complex needs of the Slavic Village community and develop an informed prevention plan. Ms. Erin DiVincenzo, Director of Prevention and Children's Behavioral Health Programs, responded to questions Board of Directors had.

- **RESOLUTION NO. 22-11-06**  
**APPROVAL OF CONTRACT AMENDMENTS**

**Motion to approve Resolution No. 22-11-06.** MOTION: G. Boehm / SECOND: H. Snider / AYES: A. Bhardwaj, G. Boehm, E. Cade, S. Galloway, G. Howard, P. James-Stewart, K. Kern-Pilch, M. Rodas, S. Rosenbaum, H. Snider / NAYS: None / ABSTAIN: None / **Motion passed.**

#### **14. CY2023 ADAMHS BOARD BUDGET**

Mr. Osiecki reported that several inquiries were received from the Board of Directors based upon their review of the budget material and that questions were answered as they came in. He also highlighted that the Board of Directors recently received revised CY2023 budget material and requested Board approval of the CY2023 Board's Operational Budget and CY2023 Service Provider Contracts.

Mr. Harvey Snider complimented staff for their efforts relative to the presentation of the CY2023 ADAMHS Board budget material. Additional Board of Directors concurred.

- **RESOLUTION NO. 22-11-07**  
**APPROVAL OF CALENDAR YEAR 2023 OPERATIONAL BUDGET**

**Motion to approve Resolution No. 22-11-07.** MOTION: H. Snider / SECOND: G. Boehm / AYES: A. Bhardwaj, G. Boehm, E. Cade, S. Galloway, G. Howard, P. James-Stewart, K. Kern-Pilch, M. Rodas, S. Rosenbaum, H. Snider / NAYS: None / ABSTAIN: None / **Motion passed.**

- **RESOLUTION NO. 22-11-08**  
**APPROVAL OF CALENDAR YEAR 2023 SERVICE PROVIDER CONTRACTS**

**Motion to approve Resolution No. 22-11-08.** MOTION: S. Rosenbaum / SECOND: K. Kern-Pilch / AYES: A. Bhardwaj, G. Boehm, E. Cade, S. Galloway, G. Howard, P. James-Stewart, K. Kern-Pilch, M. Rodas, S. Rosenbaum, H. Snider / NAYS: None / ABSTAIN: None / **Motion passed.**

## **15. CHIEF EXECUTIVE OFFICER'S REPORT**

Mr. Osiecki shared information regarding the following items of discussion:

- **County Council Public Safety Committee:**
  - Ms. Maggie Tolbert, Assistant Chief Clinical Officer, and Mr. Osiecki attended the County Council Public Safety Committee meeting on Tuesday, November 1, 2022.
  - Mr. Osiecki reported that they were there at the request of the County Executive because the Diversion Center's one year contract extension was on the agenda.
  - The Committee passed the contract on to the full Council for approval which it did approve on Wednesday, November 9, 2022.
- **County Executive Meeting:**
  - Members of the Board's Executive Team met with Mr. Armond Budish, Cuyahoga County Executive, and members of his team on Tuesday, November 1, 2022, to discuss St. Vincent Charity Medical Center and the Board's support of The MetroHealth System.
- **Inter-hospital System Meeting:**
  - Ms. Tolbert, Dr. Leslie Koblentz, Chief Clinical Officer Consultant, and Mr. Osiecki were invited to participate in the Inter-hospital System meeting, which included all of the hospital systems in Cuyahoga County.
  - The meeting specifically focused on the closing of St. Vincent Charity Medical Center's inpatient psychiatric services and the operation of the Psychiatric Emergency Services.
  - Dr. Kathryn Burns, Consultant, and Board staff plan to participate in future meetings.
- **Care Response Update:**
  - On Friday, October 14, 2022, ADAMHS Board staff attended a Care Response Work Session with other participants from Magnolia Clubhouse, Policy Matters Ohio, REACH NEO, the Mental Health and Addiction Advocacy Coalition (MHAC), and consultants from R Strategy Group, ThriveAtWork and Henton Plus Consulting.
  - The group also included Dr. Mark Hurst, former Director and Medical Director of OhioMHAS and Medical Director of the Ohio Department of Health (ODH).
  - Ms. Carole Ballard, Director of Education and Training, and Ms. Clare Rosser, Chief of Strategic Initiatives, contributed to the conversation meant to help the consultant team conduct research on care response. The consultant team is supported by local foundations.
  - Care response is a health-first, non-police approach to respond to individuals experiencing a mental health and/or addiction crisis.
  - The ADAMHS Board cited care response as a priority in our last budget cycle and is considering ways to support these initiatives countywide. Recently, the City of Cleveland announced plans to develop a care response program within their Community Relations department.
- **Cleveland Clinic Panel:**

- Mr. Osiecki was the moderator for a panel on Saturday, November 5, 2022, as part of a training on MAT hosted by the Cleveland Clinic. Judge Matia, Ms. Erin Helms, Ms. Martina Moore and Mr. Mark Saffran were the panelists.
- **Northeast Ohio Black Health Coalitions' Annual Executive Board Meeting:**
  - Ms. Tolbert, and Mr. Osiecki attended the Northeast Ohio Black Health Coalitions' Annual Executive Board Meeting on Thursday, November 3, 2022.
  - A documentary on Coronavirus in the Black Community was shown.
- **Front Steps Housing *All About the Arts* Event:**
  - On Friday, November 4, 2022, Mr. Osiecki was a guest speaker at Front Steps housing *All About the Arts* Event.
  - Front Steps Housing and Services will be hosting the Board's January General Meeting.
- **The Centers Site Visit:**
  - Ms. DiVincenzo participated in a site visit with The Centers at their facility at Cleveland Christian Home.
  - This site that will help house and provide services to hard to place children in Custody of DCFS.
  - Ms. DiVincenzo reports that the facility is under construction and that there will be another tour – probably in December – with an expected opening date during January 2023.
  - 14 of the staff have been hired and they are in the process of being trained.
- **Meeting with Councilwoman Conwell:**
  - Ms. Tami Fischer, Chief Administrative Officer, and Mr. Osiecki met on Wednesday, November 16, 2022, with County Councilwoman Conwell and Ms. LeVine Ross, County Council Policy Advisor.
  - It was an informal meeting as Councilwoman Conwell is the Health & Human Services Committee Chair and she wanted to get caught-up on a few issues.
  - Discussion included the Board's partnership with DCFS, the Diversion Center, St. Vincent Charity Medical Center, The MetroHealth System and plans for our cash balance.
- **Staff Update:**
  - Mr. Osiecki shared the following updates related to recruitment:
    - Ben Goodwin, Adult Behavioral Health Specialist II (Criminal Justice)
      - Mr. Goodwin started at the Board on Monday, October 31, 2022, has a bachelor's degree in Criminology and Sociology; and has more than eight years of experience in the public service and law enforcement field.
      - Mr. Goodwin came to the Board from the Cuyahoga County Common Pleas Court Drug Court, where he was a Probation Officer.
      - Mr. Goodwin reports to Ms. Schaefer.

## 16. NEW BUSINESS

No new business was received.

## 17. FOLLOW-UP

No follow-up was received.

## 18. AUDIENCE INPUT

Ms. Anita Bradley, founder and Executive Director of the Northern Ohio Recovery Association (NORA), commended the Board for their stance relative to the MAT Policy.

## 19. UPCOMING BOARD MEETINGS:

- Bylaws Ad Hoc Committee Meeting: November 30, 2022
- Bylaws Ad Hoc Committee Meeting: December 7, 2022
- Bylaws Ad Hoc Committee Meeting: December 14, 2022
- Community Relations & Advocacy Committee Meeting: January 4, 2023
- Planning & Oversight Committee Meeting: January 11, 2023

- Finance & Operations Committee Meeting: January 18, 2023
- General Meeting: January 25, 2023
- Faith-based Outreach Committee Meeting: February 1, 2023
- Planning & Oversight Committee Meeting: February 8, 2023
- Finance & Operations Committee Meeting: February 15, 2023
- General Meeting: February 22, 2023

***There being no further business, the meeting adjourned at 5:55 p.m.***

***Submitted by: Linda Lamp, Executive Assistant***

***Approved by: \_\_\_\_\_  
J. Robert Fowler, Ph.D., Chairperson, ADAMHS Board of Cuyahoga County***