



**PLANNING & OVERSIGHT COMMITTEE
WEDNESDAY, MARCH 8, 2023**

2012 West 25th Street, Cleveland, Ohio 44113 / United Bank Bldg. / Ohio Room – 6th Floor

Committee Mission Statement: *The Planning & Oversight Committee, in cooperation with all partners, advocates for and monitors programs, policies and practices which are continually improved to meet the needs of clients, their families, and the community.*

AGENDA

1. **Call to Order** – *Kathleen Kern-Pilch, MA, ATR-BC, LPC-S, Committee Chair*
2. **Public Comment on Agenda Items** – *Kathleen Kern-Pilch*
3. **Approval of Minutes:** February 8, 2023 – *Kathleen Kern-Pilch*
4. **Presentation:**
 - *St. Clair House/Buckeye Therapeutic Community (TC) – Vince Crowe, Adult Behavioral Health Specialist II (Residential) / Myra Henderson, Adult Behavioral Health Specialist II*
 - *Lovell Custard, President and Chief Executive Officer, Murtis Taylor Human Services System (MTHSS)*
 - *Beckie Kenney, LPCC-S, Vice President of Clinical Services & Chief Quality Officer, MTHSS*
 - *Paula Williams, Residential Supervisor, MTHSS*
5. **Client Satisfaction Survey** – \$60,000 – (Action Requested) – *Clare Rosser, Chief of Strategic Initiatives*
6. **Review of Policy Statement Renewal** – (Action Requested) – *Woo Jun, Director of Risk Management*
 - **Guidelines for Detoxification Services Funded with Non-Medicaid Dollars**
7. **Review of New Policy Statement** – (Action Requested) – *Woo Jun*
 - **Subrecipient Monitoring for Federal Grants Policy**
8. **Probationary Period Review for New Programs** – *Woo Jun*
9. **New Business**
10. **Follow-up**
11. **Public Comment Period**
12. **Upcoming March and April Board Meetings:**
 - Finance & Operations Committee Meeting: March 15, 2023
 - General Meeting: March 22, 2023

- Faith-based Outreach Committee Meeting: April 5, 2023
- Nominating Committee Meeting: April 12, 2023
- Planning & Oversight Committee Meeting: April 12, 2023
- Finance & Operations Committee Meeting: April 19, 2023
- General Meeting: April 26, 2023

PLANNING & OVERSIGHT COMMITTEE

Kathleen Kern-Pilch, MA, ATR-BC, LPC-S, Committee Chair

Gregory X. Boehm, M.D., Committee Vice Chair

Reginald C. Blue, Ph.D.; J. Robert Fowler, Ph.D.; Sadigoh C. Galloway, MSW, LSW, LICDC-CS;
Benjamin F. Gohlstin, Sr.; Patricia James-Stewart, M.Ed., LSW; Basheer Jones; Elaine Schleiffer

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

PLANNING & OVERSIGHT COMMITTEE MINUTES FEBRUARY 8, 2023

Committee Members Present: Katie Kern-Pilch, MA, ATR-BC, LPC-S, Committee Chair, Gregory X. Boehm, M.D., Reginald C. Blue, Ph.D., J. Robert Fowler, Ph.D., Sadigoh C. Galloway, MSW, LSW, LICDC-CS, Rev. Benjamin F. Gohlstin, Sr., Patricia James-Stewart, M.Ed., LSW, Elaine Schleiffer / Other Board Members: Harvey A. Snider, Esq.

Absent: Basheer Jones

Board Staff Present: Carole Ballard, Danielle Clark, Erin DiVincenzo, Tami Fischer, Ben Goodwin, Felicia Harrison, Anthony Henderson, Myra Henderson, Woo Jun, Britany King, Leslie Koblentz, Linda Lamp, Nancy Mundy, Mark Onusko, Clare Rosser, Jessica Saker, Allison Schaefer, Maggie Tolbert

1. **Call to Order**

Ms. Katie Kern-Pilch, Planning & Oversight Committee Chair, called the meeting to order at 4:03 p.m. Ms. Sadigoh Galloway read into the record the Committee Mission Statement: *“The Planning & Oversight Committee, in cooperation with all partners, advocates for and monitors programs, policies and practices which are continually improved to meet the needs of clients, their families, and the community.”*

2. **Public Comment on Agenda Items**

No public comment on agenda items was received.

3. **Approval of Minutes**

The Planning & Oversight Committee minutes of January 11, 2023 were approved as submitted.

4. **MetroHealth Behavioral Health Hospital/Psychiatric Emergency Department Update**

Ms. Maggie Tolbert, Assistant Chief Clinical Officer, introducing Ms. Beverly Lozar, BSN, MPA, Vice President, Behavioral Health Hospital Operations, The MetroHealth System. Ms. Lozar, who has been with MetroHealth since April 2021, provided an update regarding their hospital and psychiatric emergency department in Cleveland Heights. She stated that prior to opening the new facility in Cleveland Heights, the Main Campus had 20 beds. However, once the new facility opened in Cleveland Heights on October 8, 2022, she stated that 20 beds were transitioned from the main campus to open a 20 bed Mood Unit and a 20 bed Thought Disorder Unit for adults. 8 beds are also dedicated as psych/medical beds. It was noted that ADAMHS Board staff had the opportunity to visit the facility prior to their grand opening.

Ms. Lozar reported that In 2019/2020, The MetroHealth System envisioned building a hospital to make up a portion of the deficit of approximately 250 beds that were in the community. However, with two hospitals in the community closing their psychiatric beds, The MetroHealth System’s opening will only accommodate for this loss. She stated that the need for inpatient beds was overwhelming. In the fourth quarter of 2021 they had 200 patients that The MetroHealth System saw; and in the fourth quarter of 2022, they had 300 patients that they saw, thus had a 150% growth since opening their doors and being available to patients in the community. When The MetroHealth System originally envisioned the hospital, they estimated that the patients that come to The MetroHealth Emergency Department and The MetroHealth System would fill up 40 to 50 beds; and presently are at approximately 98% occupancy. She stated that their plans are to open an additional eight beds by the end of March 2023, open the Dual Diagnosis Unit by the second quarter, and additional units in the third and fourth quarters of 2023; to have 112 beds open by the end of the calendar year.

Ms. Lozar reported that the only thing standing in their way is the staffing pattern – trying to recruit enough personnel to fill the need. Upon the closure of University Hospitals Richmond and St. Vincent Charity Medical Center, they were able to hire a significant number of staff that wanted to be employed in the behavioral health field. She reported that last Summer, they opened a Partial Hospitalization Program and Intensive Outpatient Program, which are stepdown levels of care that are available in Cleveland Heights as well. Ms. Lozar indicated that they are presently staffed for about 40, soon to be 50 beds; and with the individuals in orientation, will have enough staff to open 60 beds mid-year. Ms. Lozar shared that they hired 115 individuals last year for the new hospital; and probably have another 50 to 60 clinicians hired.

After a lengthy discussion of workforce development, Ms. Lozar indicated that organizations need to work together to continue to develop more opportunities for our students to learn about behavioral health early on. She shared that The MetroHealth System works with Cleveland State University (CSU) for psychology undergraduates. She shared that CSU came to The MetroHealth System and stated that their undergraduates do not have any clinical experience. As a result, each semester, a small program that is led by a psychologist at The MetroHealth System takes 6 to 8 psychology students for a clinical rotation of 8 to 10 hours weekly; whereby college credit is earned. Presently, their retention rate for staff is 80% to 90%. Ms. Lozar shared that the Psychiatric Emergency Department is still planned, but delayed and responded to any questions the board of Directors had. Ms. Kern-Pilch thanked Ms. Lozar for her presentation and offered continued success in Cleveland Heights.

5. Presentation:

Children's Residential Workforce Crisis

Ms. Erin DiVincenzo, Director of Prevention and Children's Behavioral Health Programs, introduced representatives from three provider agencies to present on the children's residential workforce crisis: Ms. Jennifer Blumhagen Yarham, MSSA, LISW-S, Executive Director at Applewood Centers and Associate Director at Wingspan Care Group; Mr. Jeffrey A. Lox, LISW-S, ACSW, Executive Director at Bellefaire Jewish Children's Bureau (JCB); and Ms. Kiersten Watkins, Assistant Vice President of Program Administration at OhioGuidestone.

Applewood Centers, Bellefaire JCB and OhioGuidestone provide 24/7 treatment for youth and adolescents with a variety of mental health, attachment and/or substance abuse issues; who demonstrate self-injurious and aggressive behaviors and/or have moderate to severe autism. Entry level residential staff require a significant amount of training and supervision to learn how to interact therapeutically with clients, monitor and supervise adherence to individualized safety plans and the appropriate use of physical restraints. Pay for Children's Residential Treatment provider staff is extremely low compared to the responsibilities and difficulties of the position, and low pay is one of the deterrents in attracting and retaining staff. Since the onset of the COVID-19 pandemic, the ADAMHS Board contract children's residential and crisis stabilization providers have reported an increase in staffing shortages due to resignations and the inability to attract qualified workers. The staffing shortages caused programs to close cottages on their campuses, decline admissions for youth with safety needs which require additional supervision and/or place all admissions on hold until staffing levels could be replenished.

The ADAMHS Board provided various funding amounts to Applewood Centers, Bellefaire JCB and OhioGuidestone to assist with the children's residential staffing crisis. For Applewood Centers and Bellefaire JCB funding was provided during the term of May 1, 2021 through June 30, 2022; and for OhioGuidestone, funding was provided for the term of November 15, 2021 through June 30, 2022. This funding was used as an immediate action step to assist with the remediation of the significant staffing crisis and to prevent the closure of cottages on the residential campuses. Funding was used to increase pay rates for staff, increase retention, and enhance recruitment and training efforts.

Ms. Blumhagen Yarham reported that ADAHMS Board Residential Workforce funding helped the Applewood Residential Program maintain staffing levels and avoid closing the unit. A positive suggestion for staff retention is acknowledging that residential staff is seen for their commitment and appreciated, perhaps documented with a plaque.

Mr. Lox reported it has been difficult to fully staff residential units because they are competing with other employment opportunities that offer higher salaries, less stress and more desirable work shifts. His suggestion was to create a mentoring system to provide additional support for new employees as they transition onto the residential unit as staff.

Bellefaire JCB staff are represented by SEIU 1199. When they raise wages, they must do so equally within job classifications. Bellefaire JCB used these funds to increase starting wages from \$12 to \$13.50, which they had to do across all of Bellefaire JCB. ADAMHS funds were used to increase effected staff across the entire Residential division (any staff working to support children in residential – nurses, group therapists, etc.). As of January 2023, staffing issues continue to be the singular challenge to operations at Bellefaire JCB. The current number of staff is even less than at the end of the reporting period.

Per Bellefaire JCB, the 63% retention rates referred to the number of new staff hired during the funding period who remain employed at the end of the funding period. Bellefaire JCB onboarded many new staff (173), but only showed a net gain of

eight over the funding period. They continued to lose staff employed prior to the funding period in addition to the 37% hired during the funding period.

Ms. Watkins reported that four of OhioGuidestone's eight units are closed on campus because of low staffing numbers. She acknowledged ADAMHS Residential Workforce funding allowed their agency to pay incentives to encourage staff not to call off and to pick up weekend or afterhours shifts.

The incentives provided by each of the three provider agencies included the following:

- Applewood Centers enhanced the orientation process for new hires. An experienced residential staff member was assigned as a "coach" to work side by side with new employees and assist with in-the-moment teaching and support. Invested in the paid version of Handshake, a recruitment platform that provided access to applicants from colleges and universities, allowed providers to host virtual job fairs and other recruitment and sourcing activities. Expanded training for new staff including increasing the number of agency TCI trainers.
- Bellefaire JCB enhanced the orientation process for new hires. An experienced residential staff member was assigned as a "coach" to work side by side with new employees and assist with in-the-moment teaching and support. Invested in the paid version of Handshake.
- OhioGuidestone changed weekend shifts to allow staff to pick half a shift instead of committing to an entire shift. Changed onboarding process to bring in new staff more quickly. Offered unexpected gift card appreciations weekly when staff were nominated by a co-worker. Conducted stay interviews. Human Resources (HR) conducted WOW sessions with all staff to discuss wins, opportunities, and "what we can do differently." Offered monthly residential training for all staff and recorded for the training for those that could not attend in person. Offered incentives for hard to fill shifts, weekend shifts, and for not calling off for the entire month. Raised starting wages from \$13.50 to \$14 and moved to a level system within job categories so staff had opportunities to grow in job development and wages.

(The *Summary of Children's Residential Staffing Crisis Funding* chart is attached to the original minutes stored in the Executive Unit.)

6. Sponsorship of *The Impact of Police Use of Force on the Mental Health of the Black Community*

Ms. Carole Ballard, Director of Education and Training, reported that the Cleveland Community Police Commission (CPC) was established to provide community input on police policies to help strengthen relationships between officers and the communities they serve. Better policies will help ensure policing in Cleveland is safe, effective, and that people's civil rights are upheld. The CPC was established in 2015 as part of the terms of the Consent Decree between the City of Cleveland and the U.S. Department of Justice (DOJ). Following an investigation, the DOJ determined there was a pattern of excessive force used by the Cleveland Division of Police (CDP). These findings were documented in the DOJ's findings letter. The Consent Decree outlined the work that needed to be done so CDP policies, practices and procedures comply with Constitutional law.

The American Psychiatric Association (APA) recognizes the profoundly negative impact that police brutality on black males has on their mental health, as well as the mental health of the black community [and] encourages initiatives that foster direct collaboration between law enforcement and black communities in order to engender trust, cooperation, and understanding. The CPC is dedicated to bringing information and education on the status of Black mental well-being and establish access to treatment and care for the mental health, bodies and souls of the Black community before, during and after traumatic police encounters. Community partners that support the event include: Cleveland City Council; National Congress of Black Women; Greater Cleveland Pastor's Association; Fatherhood Initiative; Cleveland Municipal School District; Akron University; Cleveland State University; National Center for Urban Solutions; Spread the Love Foundation; CEO 360; Angelo Miller Foundation; African American Men's Wellness Agency; Alpha Pi Alpha Fraternity, Delta Alpha Lambda Chapter; Project Lift; Black Lives Matter; Cuyahoga County Community College; Murtis Taylor; WOVU 95.9 Radio; Omega Fraternity; YWCA; Ghetto Therapy; Citizens for a Safer Cleveland, and Serenity Health & Wellness Corporation. Funding is also being requested from: St. Luke's Foundation; HealthComp; Woodruff Foundation; MetroHealth; Cleveland Foundation and the Fowler Foundation.

Sponsorship of *The Impact of Police Use of Force on the Mental Health of the Black Community* aligns with the ADAMHS Board's faith-based and Diversity, Equity and Inclusion (DEI) initiatives and continued work with the Mental Health Response

Advisory Committee (MHRAC) and law enforcement to reimagine and reshape our mental health, addiction and recovery network into an equity-based system of inclusion.

The Impact of Police Use of Force on the Mental Health of the Black Community is a series of mini conversations that will be held from March through May 2023 that will culminate in a larger Community Conversation in July 2023, that is being sponsored by the Cleveland Police Commission:

- o March 23, 2023 Conversation Focus: Black Women - You Are My Sister. Hosted By: YWCA Greater Cleveland
- o April 29, 2023 Conversation Focus: Black Men - Real Men Real Talk. Hosted by: Alpha Phi Alpha Fraternity - Delta Alpha Lambda (Cleveland Chapter)
- o May 2023 Conversation Focus: Black Youth - For Our Future. Hosted by: Tri-C
- o July 2023 Combined Large Conversation - The Conversation: How Police Violence and Brutality Impacts the Black Community Conversation. Hosted by Black Lives Matter Cleveland, Citizens for a Safer Cleveland and The Angelo Miller Foundation

This series of conversations will look at the ways in which police policies and practices, including use of force, affects the mental and physical health of Black men, Black women and Black youth. These conversations will focus on presenting data, listening to attendees' lived experiences, and providing resources to develop solutions. Information gathered from this event will be documented, researched and analyzed in a continuing effort to gather more evidence to help inform better police training, practices and policies in Cleveland. These efforts will also be a source of information on how to connect to resources to begin building healthy Black men, and by extension, families and community including the men and women who serve as law enforcement officers. This conversation will aim to look at some of the ways in which police use of force affects the mental and physical health of Black communities and especially Black men including the impact of years of life lost in the community, adverse mental health impact from direct and indirect exposure, and public "safety" as detrimental to public health.

After the Community Conversation and through August 31, 2024, attendees will be able to access mental health counseling and other support at no cost. The CPC is requesting \$25,000 from the ADAMHS Board of Cuyahoga County to serve as a sponsor to defray costs associated with *The Impact of Police Use of Force on the Mental Health of the Black Community*. As a sponsor, the ADAMHS Board of Cuyahoga County will be identified as a sponsor on printed and digital materials, participate in the planning of the Community Conversation, and present a break-out session during the Community Conversation. The Community Conversation is expected to attract 500 individuals and will include continental breakfast, keynote speaker, break-out sessions, lunch, a closing with a local or national talent and comments by the Cleveland CPC. The CPC is also requesting \$50,000 of new pooled funding from the ADAMHS Board of Cuyahoga County to be drawn down to cover the cost of mental health and other related services for attendees through August 31, 2024 – with a referral for continued services as needed. Some of the services may be billable under insurance from provider agencies, while the pooled funding would cover services for the uninsured, as well as services that are not billable under insurance. Ms. Shalenah Williams, MA, Community Engagement & Project Coordinator of the Cleveland CPC, was present to respond to any questions the Board of Directors had.

Motion to approve \$25,000 to serve as a sponsor of *The Impact of Police Use of Force on the Mental Health of the Black Community* to defray costs associated with hosting the event and to approve \$50,000 of new pooled funding to be drawn down to cover the cost of mental health and other related services for attendees through August 31, 2024 to the Finance & Operations Committee. MOTION: R. Blue / SECOND: P. James-Stewart / AYES: G. Boehm, R. Blue, R. Fowler, S. Galloway, B. Gohlstin, P. James-Stewart, E. Schleiffer / NAYS: None / ABSTAIN: None / **Motion passed.**

[Rev. Benjamin F. Gohlstin, Sr., left.]

7. Murtis Taylor Conditional Release Unit Funds

Ms. Allison Schaefer, Director of Adult Behavioral Health Programs, reported that Recovery Resources has historically been the community provider identified by the ADAMHS Board to provide Forensic Monitoring and Conditional Release services. Judges temporarily stopped discharges of Conditional Release Unit (CRU) clients from Northcoast Behavioral Healthcare (NBH) in early 2022 as a result of coordination and communication barriers. Discharges were later resumed. Staffing and ongoing collaboration/coordination served as a barrier for Recovery Resources in relation to Forensic Monitoring and

Conditional Release services. As a result, these services will transition to Murtis Taylor Human Services System (MTHSS) (Resolution No. 23-01-04). MTHSS has a history of working with the forensic population – specifically through the Outpatient Competency Restoration and CARES programs. These funds are in conjunction with state pass through funding for the Forensic Monitor allocation.

The CRU provides intensive community support services for persons found Not Guilty by Reason of Insanity (NGRI) and granted Conditional Release. The CRU works closely with the Forensic Monitor, providing case management and coordination for Conditional Release clients in the community and institutional settings. The CRU also includes a psychiatrist. Board staff recommend to the Board of Directors to approve funding to MTHSS for the CRU for the term of March 1, 2023, through June 30, 2024 in the amount of \$306,769.75. Mr. Lovell Custard, President and Chief Executive Officer of MTHSS, was present to respond to any questions the Board of Directors had.

Motion for Board of Directors to approve funding to Murtis Taylor Human Services System for the Conditional Release Unit for the time period March 1, 2023 through June 30, 2024 in the amount of \$306,769.75 to the Finance & Operations Committee. MOTION: R. Fowler / SECOND: E. Schleiffer / AYES: G. Boehm, R. Blue, R. Fowler, S. Galloway, P. James-Stewart, E. Schleiffer / NAYS: None / ABSTAIN: None / **Motion passed.**

8. I'm In Transition Ministries Transportation Program

Ms. Schaefer reported that I'm In Transition Ministries was one of the primary utilizers of Life Long Transportation. LLC's transportation services. I'm In Transition Ministries' Recovery Housing (Ohio Recovery Housing Certified) offers safe, structured, and supportive, drug and alcohol-free housing, equipped with comprehensive care and monitoring. 12-step meetings, evidence-based practices and Recovery Oriented activities are also implemented to meet each client's specific needs. I'm In Transition offers fully furnished and remodeled homes, equipped with full kitchens, laundry facilities, game rooms, work out areas, wi-fi and computer access, air conditioner/heat, and COVID-19 sanitation stations.

This request is to amend the CY2023 Contract for I'm In Transition Ministries to reallocate \$59,355 of \$259,355 from its Recovery Housing program to create a Transportation program in response to the closure of Life Long Transportation, LLC. I'm In Transition Ministries will hire a third-party transportation company to provide transportation services to its Recovery Housing residents to attend appointments, specifically Intensive Outpatient Treatment (IOP). Board staff recommend to the Board of Directors to amend Resolution No. 22-11-08 to I'm In Transition Ministries' CY2023 Contract to reallocate \$59,355 of \$259,355 from its Recovery Housing program to create a Transportation program for the term of January 1, 2023 through December 31, 2023. Ms. Jennifer Calloway, Founder and Director of I'm in Transition Ministries, was present to respond to any questions the Board of Directors had.

Motion for Board of Directors to amend Resolution No. 22-11-08 to I'm In Transition Ministries CY2023 Contract to reallocate \$59,355 of \$259,355 from its Recovery Housing program to create a Transportation program for the term of January 1, 2023 through December 31, 2023 to the Finance & Operations Committee. MOTION: R. Blue / SECOND: R. Fowler / AYES: G. Boehm, R. Blue, R. Fowler, S. Galloway, P. James-Stewart, E. Schleiffer / NAYS: None / ABSTAIN: None / **Motion passed.**

9. Cuyahoga County Diversion Center 2022 Year-end Review

Ms. Clare Rosser, Chief of Strategic Initiatives, reported on the Cuyahoga County Diversion Center 2022 year-end review. She reported that there are three areas of responsibility in the Cuyahoga County contract with the ADAMHS Board. These areas of responsibility include:

- FrontLine Service – Call Center
- Oriana House, Inc. – Operations
- ADAMHS Board – Crisis Intervention Team (CIT) Training

The contract total was \$9,568,319.95; and for 2022, the total expenses were identified as \$9,145,860.62, which is 96% of the total. The ADAMHS Board investment consisted of non-contract related expenses for the National Alliance on Mental Illness (NAMI) and the CIT training stipend. NAMI spent 92% of the contractually obligated funds and the CIT training stipend spent 46% of the contractually obligated funds.

Ms. Rosser reported that the number of calls to FrontLine Service are trending up, but the proportion of where the calls originate remains largely the same. About 30% of calls originate from law enforcement. In Quarter 4 of Calendar Year 2022, 334 calls originated from the community and 88 calls originated from law enforcement. She noted that FrontLine Service's Call Center is a 24/7/365 call-in line – 216.623.6888 – for law enforcement and others to screen for eligibility for the Diversion Center. From May 2021 through December 31, 2022, of 1,617 total calls, FrontLine Service authorized 1,481 individuals to go to the Diversion Center. The remaining 136 callers, 73 were referred to services that better fit their needs. 27 were denied by the Diversion Center, and 36 had other circumstances. 29% of the calls to FrontLine Service for the Diversion Center are from police officers. 71% of the calls to FrontLine Service for the Diversion Center are from all other categories: self, friends, family members, and agencies.

Since the opening of the Diversion Center in May 2021 until December 31, 2022, 809 admissions occurred (551 new clients and 258 returning clients) from 1,604 contacts. 558 admissions came from self, family/friend or an agency. 251 admissions came from law enforcement (109 pre-arrest and 142 non-criminal). Admissions are trending up. From the 1st Quarter CY2022, the monthly average was 41 as compared to the 4th Quarter CY2022, the monthly average was 68, which is a 66% increase.

Ms. Rosser reported that the operations of the Diversion Center with 50 beds is facilitated by Oriana House, Inc. Since the opening of the Diversion Center, 809 admissions/intakes were completed. This means the clients arrived onsite either through police transport or other means and completed the admission process. This total includes repeat clients. 1,604 contacts have occurred to date. "Contacts" are instances when a potential client arrived at the Diversion Center. From those 1,604 contacts, the admissions process was completed 809 times. When an individual is eligible for admission, it is still the individual's choice to stay at the Diversion Center.

The client experience for all 809 admissions from May 2021 through December 31, 2022 included: Serious Mental Illness (SMI) = 188; Substance Use Disorder (SUD) = 123; and SMI-SUD = 498. The average length of stay was 4.63 days. The results of a Client Satisfaction Summary (July 2022 through September 2022) was shared. Of the 23 surveys that were received, which was a 15% response rate, 100% agreed that upon arrival, staff helped them to understand program rules and what was expected of them.

Ms. Rosser shared that the Diversion Center referred 451 clients to 90 partner agencies. The top three agencies for referrals included: FrontLine Service = 42 referrals (5%), Signature Health = 40 referrals (5%), and Y-Haven = 34 referrals (4%). 451 of 809 were connected to a behavioral health direct service provider, system partner, or another referral. At least 21% have followed through with a referral (verified by electronic enrollment and claims systems). Upcoming analysis of data entries for a longer time period likely will show a higher follow-up number. 358 refused or did not receive connections – transferred to another facility for health reasons = 69, left Against Medical Advice (AMA) = 285 or involuntarily discharged due to violation of rules = 4. Overall, since inception, 56% of clients completed the program successfully and 9% of clients transferred to another facility for health reasons.

Through a special focus on law enforcement, Ms. Rosser shared that FrontLine Service received 293 calls from police during CY2022 with the following outcomes:

- 265 calls from police were authorized by FrontLine Service to go to the Diversion Center
- 140 client admissions were from police
- 51 clients from police completed successfully

30 of 59 Law Enforcement Departments have used the Diversion Center since its inception, which is 51%. CIT training to law enforcement in Cuyahoga County (excludes City of Cleveland) included 67 agencies (police departments, security/protective services, etc.) since March 2021 for a total of 1,075 trained personnel. Overall, officers recognize the Diversion Center as a resource, saying that with this program "officers know how to best help individuals with addiction and mental illness." Ms. Rosser responded to questions the Board of Directors had. (The PowerPoint presentation is attached to the original minutes stored in the Executive Unit.)

[Mr. Harvey A. Snider, Esq., left.]

10. Client Satisfaction Survey

Ms. Rosser reported that as part of the Board's Strategic Plan and Diversity, Equity and Inclusion (DEI) initiative, Board staff is working to develop an annual client satisfaction survey to help elevate client voice and choice in our decision-making. Board staff solicited a proposal for the development of a client satisfaction survey and expects to bring it to the Board of Directors during the March 2023 Board of Directors meeting cycle.

11. New Business

Ms. Kern-Pilch reminded all in attendance that one of the Board's goals is to schedule and hold one General Meeting per quarter in the community at a service provider location. This arrangement provides the Board of Directors an opportunity to visit and meet provider staff at their facility. As a result, the ADAMHS Board's General Meeting of Wednesday, February 22, 2023, will be held at Front Steps Housing and Services, 2554 West 25th Street, Cleveland, Ohio 44113.

12. Follow-up

No follow-up was received.

13. Public Comment Period

No public comment was received.

14. Upcoming February and March Board Meetings:

- Finance & Operations Committee Meeting: February 15, 2023
- General Meeting: February 22, 2023
- Community Relations & Advocacy Committee Meeting: March 1, 2023
- Nominating Committee Meeting: March 8, 2023
- Planning & Oversight Committee Meeting: March 8, 2023
- Finance & Operations Committee Meeting: March 15, 2023
- General Meeting: March 22, 2023

There being no audience comment or further business, the meeting adjourned at 5:40 p.m.

Submitted by: Linda Lamp, Executive Assistant

Approved by: Kathleen Kern-Pilch, MA, ATR-BC, LPC-S, Planning & Oversight Committee Chair

Murtis Taylor Human Services System Housing

Presented By:

Lovell Custard, CEO

Beckie Kenney, CQO

Paula Williams, Residential Supervisor

March 8th 2023

Cuyahoga County ADAMHS Board Planning and Oversight Meeting

1

Buckeye Therapeutic Community Class I Residential Facility



2

Facility Description

- Buckeye TC is a Class I Residential Facility designed to provide residential treatment to adults diagnosed with a severe mental illness and who could benefit from a structured residential setting.
- Buckeye TC is a fourteen-bed, co-ed facility with one handicap accessible unit, three single bedrooms, and five double bedrooms.



3

Program Description

- Buckeye TC is a program that operates on a psychosocial model, it is client oriented, and driven to meet the needs of severely mentally disabled adults through the coordination of therapeutic, community, and family resources.
- Buckeye TC provides rehabilitation and environmental support activities that assist those served to reduce the symptoms of psychiatric illness, build resilience and improve their quality of life and integration into the community.

4

Program Description

- Residents are responsible for assisting with menu planning, cooking, cleaning, and day-to-day personal care skills.
- All activities are under the 24-hour supervision of the residential staff.
- Residents also participate in groups that focus on de-institutionalization, self-awareness, relationships with others, community socialization, and many other daily living skills.



5

Program Goals

- Reduce the symptoms of mental illness
- Build resilience and improve quality of life and community integration
- Improve coping and daily living skills and strategies

6

Referral Process

- Eligibility Criteria:
 - Mentally ill diagnosed persons referred by the ADAMHS Board
 - Case Manager required
- Case Manager is required to submit Coordinated Adult Residential Referral (CARR) to the Cuyahoga County ADAMHS Board
 - <https://www.adamhsc.org/home/showpublisheddocument/5013/637890010881770000>
- Contact Person: Paula Williams, Residential Supervisor
(216)283-4400 ext. 2872

7

Saint Clair House



8

Facility Description

- Murtis Taylor Human Services System collaborates with Saint Clair House a 501 c (3) community housing non-profit corporation to provide services to their residents.
- SCH is an all-male facility with 10 individual units.
- Residents must be able to live independently and cook their own meals and clean their units.



9

Program Description

- MTHSS provides Peer Support Services to the Residents of SCH on-site.
- SCH provides rehabilitation and environmental support activities that assist those served to reduce the symptoms of psychiatric illness, build resilience, and improve their quality of life and integration into the community.
- Residents are responsible for assisting with menu planning, cooking, cleaning and day-to-day personal care skills.
- Residents also participate in groups that focus on de-institutionalization, self-awareness, relationships with others, community socialization, and many other daily living skills with a goal to reduce the symptoms of psychiatric illness, build resilience and improve quality of life and community integration, improve coping and daily living skills and strategies.

10

Peer Support Services

- Peer Support Services are provided to self-identified individuals in recovery from mental illness, substance abuse, or both.
- A Peer Support Specialist is certified by the Ohio Mental Health and Addiction Services and has declared that he/she is in recovery and has a lived experience of mental illness, substance abuse disorder, or co-occurring mental health and substance abuse disorders.
- Peer Support Specialists work to inspire hope of recovery; share lived experience to foster connectedness and build relationships with peers.
- PSS listen to and understand peers' pain and isolation while exhibiting empathy and support; assist in exploring options and overcoming barriers.
- PSS support peers in implementing a relapse prevention plan and assist peers in adopting a proactive role in their own behavioral and physical health.

11

Program Goals

- Build resilience and improve quality of life and community integration
- Improve coping skills and strategies
- Decrease homelessness while increasing stable housing

12

How To Apply

- Contact Residential Supervisor Paula Williams at (216)283-4400 ext. 2872.
- Paula Williams will provide the SCH application and all other required documents.
- Residents rent is 30% of their income.



Agenda Process Sheet
Date: March 8, 2023

- | | |
|--|---|
| <input type="checkbox"/> Community Relations & Advocacy Committee | <input type="checkbox"/> Faith-Based Outreach Committee |
| <input checked="" type="checkbox"/> Planning & Oversight Committee | <input type="checkbox"/> Finance & Operations Committee |
| <input type="checkbox"/> Committee of the Whole | <input type="checkbox"/> General Meeting |

Topic: Client Satisfaction Survey

Contractual Parties: Brown Consulting, LTD

Term: March 1, 2023 through December 31, 2023

Funding Source(s): ADAMHS Board

Amount: \$60,000

- New Program**
 Continuing Program
 Expanding Program
 Other: Evaluation

Service Description:

- Brown Consulting, LTD, will design and administer a survey to clients of the ADAMHS Board of Cuyahoga County’s provider network. The survey will gather needed data that will be useful to the Board in informing future planning of the mental health, addiction, prevention and recovery service delivery system within Cuyahoga County.
- The 2023 survey will be an independent measurement of a representative sample of individuals served through the provider network and will provide baseline data.
- In addition to designing and conducting the survey in 2023, Brown Consulting will provide the ADAMHS Board with all templates, documents, tools and processes utilized to gather data for this report so the process can be replicated in-house or by other vendors if desired for future years.
- *See the included proposal for additional details.*

Background Information:

- NOTE: During the February 22, 2023 General Meeting, the ADAMHS Board of Directors voted to approve the Chief Executive Officer to enter into a contract with Brown Consulting for \$60,000 so that the project timeline could move forward during the month of March, with the caveat that complete information and timeline will be brought before the Board during the March meeting cycle for ratification.
- In the 2021-2025 ADAMHS Board Strategic Plan, the Board identified conducting an annual, independent client feedback and satisfaction survey as a priority action under “Goal 2: Measuring Impact.”
- The survey is also a priority in the ADAMHS Board Diversity, Equity and Inclusion (DEI) Strategic Implementation Plan, as a way to formalize client feedback in decision-making, and evaluate cultural responsiveness of providers and services.
- Brown Consulting, LTD, is an Ohio-based firm that specializes in the behavioral healthcare industry, and is certified as both a Women-Owned (WBE) and Veteran-Friendly Business Enterprise (VBE).

- Brown Consulting has conducted independent peer reviews in the ADAMHS Board provider network in the past and is a trusted research partner for the Board.

Number of Individuals to be served:

- ADAMHS Board staff will work with Brown Consulting to determine a representative sample of clients to be surveyed, based on provider agency size, type, level of care, etc., as well as annual number of clients served.

Funding Use:

- Funds will be used to engage Brown Consulting, LTD, to design and administer the 2023 Client Satisfaction Survey for the ADAMHS Board of Cuyahoga County, and provide templates, documents, tools and processes to replicate the survey in the future.

Client & System Impact:

- Consulting services will result in a Client Satisfaction Survey that will elevate client voice in the continuation and development of quality behavioral health and recovery services.

<p>Metrics <i>(How will goals be measured)</i></p>	<ul style="list-style-type: none"> • Successful completion of the following objectives: <ul style="list-style-type: none"> ○ Develop a survey tool to determine the areas of focus, need, cultural responsiveness, and patterns of utilization within the local provider network. ○ Ensure proper sampling size for each level of care, demographic, etc. to include accessibility of survey to all parties. ○ Identify all advocacy groups and include the groups in survey sample (i.e., client advocacy / education, etc.). ○ Identify the perception of clients concerning current service delivery system capabilities and future needs through survey tool responses. ○ Compile all data from various platforms to ensure Board’s goal is met regarding sampling size from clients county-wide. ○ Present report of all data and findings to the Board.
<p>Evaluation/ Outcome Data <i>(Actual results from program)</i></p>	<ul style="list-style-type: none"> • N/A

Recommendation to Board of Directors from Board Staff and/or from Board Committee(s):

- To ratify the contract between the ADAMHS Board and Brown Consulting in the amount of \$60,000 to design, administer and report findings of a Client Satisfaction Survey.

PROPOSAL FOR CLIENT SATISFACTION SURVEY

prepared for

ADAMHS BOARD OF CUYAHOGA COUNTY

Cleveland, Ohio

Clare Rosser, Chief of Strategic Initiatives

prepared by

BROWN CONSULTING, LTD

121 N. Erie Street
Toledo, Ohio 43604
(419) 241-8547
1-800-495-6786
FAX (419) 241-8689



February 2023

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PREFACE

Since 1987, Brown Consulting has provided Behavioral Services Research, Planning, Consultative and Management Services for hundreds of organizations throughout the United States. Utilizing the combined expertise of senior staff and associates, all consulting and training services are customized to the special needs of each assignment. Brown Consulting, Ltd. brings a rich diversity to all assignments. Providing a full range of training, planning, management and consultative services, Brown Consulting, Ltd. pursues only those projects and assignments in which it can make a significant and meaningful contribution to the needs of our clients. Benefits of this approach have been an extremely high level of satisfaction among clients.

INTRODUCTION

In February 2023, Rhonda Weber, President, Brown Consulting, Ltd, discussed with Ms. Clare Rosser, Chief of Strategic Initiatives, ADAMHS Board of Cuyahoga County, Cleveland, Ohio, the organization's desire to develop, design and deliver a county-wide client satisfaction survey in both English and Spanish to gain input from clients as it relates to the current service delivery network and use the data from the survey as a baseline for future planning needs of the ADAMHS Board of Cuyahoga County.

As a result of this discussion, Brown Consulting, Ltd. believes the ADAMHS Board of Cuyahoga County can best be served through the development of a short-term consultative arrangement that would provide the full range of expertise necessary to the successful completion of the project. The proposal for consultation includes components and tasks not specifically discussed as necessary ingredients to the planning process. These efforts are incorporated based on the experience of Brown Consulting, Ltd. because their inclusion will significantly contribute to a



successful development and delivery of the survey to clients while gathering the data / input necessary to gain needed input from persons served within the ADAMHS Board of Cuyahoga County's service delivery network.

PROJECT GOAL AND OBJECTIVE

The purpose of this proposal is to outline an approach that will result in the successful development and delivery of a client satisfaction survey to the clients of the ADAMHS Board of Cuyahoga County's provider network that will measure the effectiveness of the services and programs in this provider network. The survey design and delivery process will culminate in a report of findings to be utilized by the Board to inform its future needs as it relates to its service delivery network. The primary goal for the project is listed below, followed by the project objectives. Specific tasks to complete each objective are identified in the methodology section of this proposal.

PROJECT GOAL

Design and deliver a survey to the clients of the ADAMHS Board of Cuyahoga County's provider network to gather needed data that will be useful to the Board in informing the future planning of the service delivery system within Cuyahoga County.

- Objective 1:** Develop a survey tool to determine the areas of focus, patterns of utilization within the local environment and drive client input.
- Objective 2:** Assist client in creating a sample of those to be surveyed to ensure proper sampling size for each level of care, demographic, etc. to include accessibility of survey to all parties.
- Objective 3:** Identify all advocacy groups and include in survey sample (i.e., client advocacy / education, etc.).
- Objective 4:** Identify the perception of clients concerning current service delivery system capabilities and future needs through survey tool responses.
- Objective 5:** Compile all data from various platforms to ensure Board's goal is met regarding sampling size from clients county-wide.
- Objective 6:** Present Report of all data / findings to the Board.



PROJECT APPROACH

In order to achieve the primary goal and objectives defined for this project, the following approach will be utilized by Brown Consulting, Ltd. The project will be completed over the course of eight (8) months (March 2023 – October 2023) or as otherwise scheduled by client.

PHASE I — PROJECT PLANNING

- Collaborate with client to ensure the development of the survey embodies all aspects of area to be included (i.e., agency size, agency type, level of care, etc.).
- Discuss project schedule, identify stakeholder participants, and confirm deliverables.
- Develop survey tool to include all areas meaningful to the desired client outcomes/ report for this project.

PHASE II – SURVEY DELIVERY

- Complete delivery of survey to all identified client groups (i.e., client advocacy, education advocacy, etc.)
- Client will provide the needed database of those to be surveyed. Brown Consulting will utilize the following platforms in the order listed below to gather responses from clients:
 - Electronic (email / text) – developed survey will be delivered to client sampling via email and / or text.
 - Direct mail – delivered to advocacy listing.
 - Interviews / phone calls – to those clients that may not respond to other platforms.

PHASE III — DEVELOPMENT OF REPORT /PRESENTATION OF FINDINGS

Using the results of the survey, Brown Consulting will:

- Compile all data from the various platforms utilized to deliver the survey to clients.
- Present Survey Report Findings to ADAMHS Board of Cuyahoga County's Governing Body.
- Provide client with all templates / documents, tools and the processes utilized to gather data for this report so the process can be replicated in-house if desired.
- Provide ADAMHS Board of Cuyahoga County with twenty-one (21) bound copies and an electronic copy of the Survey Report.



PROJECT EXECUTION

The following sequence to tasks will be necessary to the successful update of the Strategic Plan. Also indicated are the timing and projected person-days necessary to accomplish each task.

METHODOLOGY

TASKS		Completion Schedule
#1	PROJECT PLANNING Develop and design a client satisfaction survey tool to be delivered in both English and Spanish formats to the database of clients provided by ADAMHS Board. Discuss project schedule and deliverables.	March-April
#2	SURVEY DELIVERY Survey will be delivered via email, text, direct mail, or phone interviews (as needed for those that do not respond to electronic surveys)	May - August
#3	COMPILATION OF DATA Consultants to compile all data from the various survey platforms to use for creation of report of findings.	September
#4	PRESENTATION OF SURVEY RESULTS Consultant to present to Board's Governing Authority the results of the survey's findings.	October

PROJECT TEAM

Alyssa Putman, Lead Consultant, Brown Consulting, Ltd. Mrs. Putman earned her Bachelor's in Psychology, Master's in Healthcare Administration and Master's in Business Administration degrees from the University of Saint Francis in Fort Wayne, Indiana and a Graduate Certificate in Accounting from Southern New Hampshire University. Mrs. Putman has over 9 years of operational management experience in behavioral healthcare including administrating and supervising mental health and addiction services in both the inpatient and outpatient levels of care. Mrs. Putman has also been involved and responsible for start-up behavioral health programs in



additional to expansion of program size and service lines for both distinct part units and freestanding psychiatric units. Mrs. Putman has had direct oversight and responsibilities for accreditation preparation and ongoing regulatory compliance with CMS, TJC, DNV, HFAP, CARF and various state licensure bodies, program planning and development, performance improvement, staff development, completion of organizational assessments, feasibility analysis, and facilitation of organizational strategic planning.

Mr. Joe Dildine, Brown Consulting, Ltd. Mr. Dildine has over 30 years of managerial and supervisory experience in both clinical and non-clinical environments. His experience includes strategic planning, program development and evaluation, and operations management in both residential and outpatient settings. He is an independently Licensed Professional Clinical Counselor with Supervisory Endorsement (LPCC-S) in the State of Ohio. He earned his Bachelor of Science in Business and Management ('86) from the University of Maryland and Master of Science in Counseling and Human Development ('94) from Troy State University.

Ms. Karen R. Trail, Consultant, Brown Consulting, Ltd. Mrs. Trail has over twenty (20) years of experience in the behavioral health community with over fourteen years as a mental health clinician and crisis interventionist working with both adults and adolescents. She holds a Bachelor of Social Work from the University of Toledo (2000) and Licensed Social Worker (LSW) since 2001. Karen holds a Master's in Counseling from Spring Arbor University (2006) and has worked in the criminal justice system for over nineteen years conducting investigations, training department staff, supervising and communicating court orders, etc. She currently serves as Chief Probation Officer in the Oregon Probation Department.



PROJECT COSTS

The total cost for the project as proposed shall be \$60,000.00. The projected number of consulting days to complete this project is forty (40) days. Brown Consulting, Ltd. will commit five (5) consulting days per month for the project's duration (March – October). This fee is inclusive of all expenses to be incurred with this project (correspondence, mailing, survey tools, travel, lodging, quality Xeroxing, etc.).

BILLING

Unless otherwise agreed, one invoice for 50% of the amount due for services (\$30,000.00) will be submitted to begin the project, and a final invoice for 50% of the amount for services provided (\$30,000.00) will be submitted at the project's completion. Payments are due fifteen (15) days from invoice date.

NO HIRE

The client agrees not to solicit for employment or employ any Brown Consulting, Ltd. consultant assigned to work on this engagement for two years after the client's engagement is completed.

CLIENT RESPONSIBILITY

The client will be responsible for making available all information necessary to Brown Consulting to move the project forward in a timely manner (i.e., scheduling of key personnel, current documents, etc., needed to move project forward). If information is not received from client as needed to complete the project, Brown Consulting, Ltd. cannot be held responsible for not meeting deadlines submitted within this proposal for services.

Brown Consulting will not be held responsible for any changes in client's scheduling once project is underway. Unless agreed upon by both parties, invoicing of the project will be submitted to client as stated within this proposal and client will be responsible for timely submission of payments.



TIMING AND AVAILABILITY

The proposed project will be completed as stated within this proposal with an end date of October 31, 2023. Brown Consulting, Ltd. is prepared to begin the project within three (3) weeks or as otherwise scheduled.

BENEFITS OF CONTRACT

There are major benefits to be realized in a relationship with Brown Consulting, Ltd. for these services.

1. **Awareness and Appreciation.** Ohio-based specialists in non-profit governmental behavioral healthcare, Brown Consulting, Ltd. maintains a strong awareness and appreciation for the financial, operational, policy and service challenges facing community planning boards and service delivery systems within the State of Ohio.
2. **Familiarity.** Brown Consulting, Ltd. maintains an appreciation for the planning and funding challenges faced by the ADAMHS Board of Cuyahoga County and Boards throughout the state.
3. **Experience and Expertise.** Brown Consulting, Ltd. has a proven track record and expertise in providing a full range of consultative services. Senior staff and associates offer more than 200 years combined professional experience in the field of behavioral healthcare. Clients include a range of non-profit and governmental organizations. Approximately 80% of client base represents non-profit and governmental organizations.
4. **Customized Services.** Unlike many consulting groups, Brown Consulting, Ltd. does not use a "cookie cutter" approach to the completion of its projects. All services are customized to meet the special needs of our clients, resulting in a high level of satisfaction among our clients.
5. **Interactive Approach.** Brown Consulting, Ltd. strives to ensure each client's needs are fully addressed through a "spirit" of cooperation, communication, and mutual respect.

SUMMARY

In summary, Brown Consulting, Ltd. believes this proposal addresses the major components and objectives necessary to the development, design and delivery of the client satisfaction survey as well as the reporting of those findings to the ADAMHS Board of Cuyahoga County. Brown Consulting, Ltd. would welcome the opportunity to partner with the Board and its stakeholders to ensure the successful completion of this project.



ADAMHS BOARD OF CUYAHOGA COUNTY

CLIENT SATISFACTION SURVEY PROJECT

CONTRACT ACCEPTANCE

My signature indicates acceptance of this proposal and is your permission to begin execution of this project.

Rhonda Weber, President
Brown Consulting, Ltd.

Signature

Title
ADAMHS Board of Cuyahoga County

Date

Visit our website at www.danbrownconsulting.com for a listing of our clients.

RETURN FAX TO:

Brown Consulting, Ltd.
121 N. Erie Street Toledo, Ohio 43604
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(419) 241-8547
FAX (419) 241-8689



ALCOHOL, DRUG ADDICTION AND MENTAL HEALTH SERVICES BOARD OF
CUYAHOGA COUNTY (ADAMHS BOARD)

POLICY STATEMENT

SUBJECT: GUIDELINES FOR WITHDRAWAL MANAGEMENT SERVICES
DETOXIFICATION SERVICES FUNDED WITH NON-MEDICAID DOLLARS

EFFECTIVE DATE: April 26, 2023 (tentative) – 1st of 2 Readings October 24, 2018

PURPOSE

To ensure that residents of Cuyahoga County in need of withdrawal management services funded by the ADAMHS Board have sufficient aftercare planning as recommended by the American Society of Addiction Medicine (ASAM) criteria, and to expand access of withdrawal management to those afflicted with substance use disorder (SUD).

The Alcohol, Drug Addiction and Mental Health Services Board (ADAMHS Board) is establishing guidelines for the use of non-Medicare ambulatory and inpatient detoxification services funding, as the initial process for the recovery and aftercare planning, to expand access to persons in Cuyahoga County. All detox requests will require prior authorization with aftercare plan in place for both first and second detoxification requests. The expectation is for the aftercare planning for residential, half-way housing, outpatient or intensive outpatient to be made after the assessment in the form of a signed commitment by the client.

BACKGROUND

Withdrawal management is the initial process towards recovery from a substance use disorder and is designed to manage the acute and potentially dangerous physiological side effects of withdrawal from alcohol, opiates, and other substances. However, withdrawal management alone does not address the psychological, social, and behavioral problems associated with addiction, and therefore, does not produce lasting behavioral changes necessary for recovery. Withdrawal management services includes a formal assessment with recommendations for further treatment per ASAM criteria. The ASAM criteria is the most widely used and comprehensive set of guidelines for placement, continued stay, and transfer or discharge of patients with addiction and co-occurring conditions. Detoxification services are most effective when followed by ongoing treatment in an intensive outpatient or a residential setting. Receiving repeated withdrawal management services detoxification in the absence of ongoing treatment is not effective for long-term success. Given the current economic climate and anticipated decreases in funding, the ADAMHS Board has an obligation to establish a process by which individuals without insurance for this service can access non-Medicare dollars for detoxification services.

The ADAMHS Board recognizes that withdrawal management detoxification is not treatment. Given the reluctance of some clients to accept ongoing treatment following withdrawal management detoxification, the ADAMHS Board has been utilizing a continuum of best practices to overcome both client and system barriers. Thus, this Policy represents a continuation of, and an expansion of the best practices already utilized by providers. Such practices may include but are not limited to:

- SUD case management,
- Recovery coaches/peer support services,
- Developing treatment goals,
- Relapse prevention,

- Contingency management,
- Withdrawal management practice protocols,
- Motivational interviewing,
- Mindfulness mediation,
- Cognitive behavioral therapy,
- Art/music therapy,
- Linkage to the next level of care per ASAM criteria or given a list of referral sources,
- Holding clients until a bed is available for the next level of care,
- Verification of linkage,
- Assistance with transportation,
- Referral to 12 Steps, and
- Distribution of NARCAN and fentanyl test strips.

~~(1) specialized case management, (2) recovery coaches, (3) setting expectations for treatment, (4) motivational interviewing, (5) holding clients over in detoxification until treatment is available, (6) phone verification of linkage, (7) assistance with transportation, and (8) case conferences between providers and the Board.~~

Lastly, Finally and most importantly, the service provider contract language stipulates that providers must prioritize SUD treatment for those clients being discharged from withdrawal management detoxification. The detoxification guidelines in this policy are designed to work when these strategies have been unsuccessful.

POLICY and PROCESS:

It is the policy of the ADAMHS Board not to limit the number of times a client may receive withdrawal management services at any ADAMHS Board funded withdrawal management provider. Additionally, since withdrawal management is of a brief duration, providers shall provide discharge planning by linking clients to the next level of care per ASAM or provide harm reduction tools. A client receiving withdrawal management services shall not exceed a length of stay of five (5) days without prior authorization from the ADAMHS Board. For any such request, the provider shall submit clinical documentation for justification and authorization via the ADAMHS Board's secure fax line at (216) 241-3928.

- ~~Individuals presenting at any ADAMHS Board funded detoxification agency for detoxification services shall be required to get prior approval for any detoxification services greater than one episode of detoxification services in a twelve (12) month period.~~
- ~~Sub-acute detoxification services are of a brief duration and linkage to other formal and informal services shall be made.~~
- ~~Length of stay (LOS) not to exceed five (5) days without prior authorization from the ADAMHS Board.~~
- ~~In case of a prolonged stay exceeding five (5) days, the provider shall submit clinical documentation to the board for review and authorization.~~
- ~~Clients who request additional episodes of detoxification within a 12-month period shall utilize alternative funding sources other than Non-Medicaid.~~
- ~~Providers shall work on a discharge plan with clients to establish the next level of care following detoxification services (e.g. outpatient or residential).~~
- ~~All current and future clients will be informed of this policy in writing.~~
- ~~Exceptions to this policy will require written approval by the ADAMHS Board designated~~

staff.

- ~~1. This policy excludes pregnant women and medical emergencies (i.e., individuals who are in active or impending withdrawal from alcohol and/or other drugs).~~

RESPONSIBILITIES AND PROCEDURES:

~~When a client presents at any ADAMHS Board funded withdrawal management provider, the screening information will be taken and sent to the ADAMHS Board to be entered into a database. The screening information will include, but is not limited to the client's name, date of birth, and social security number, and sent to the ADAMHS Board's secure fax line at (216) 241-3928. ADAMHS Board staff will follow-up with a verification email to the provider approving the withdrawal management services.~~

~~Additionally, ADAMHS Board staff will evaluate the effectiveness each provider's withdrawal management services and aftercare planning by reviewing the frequency of a client returning for withdrawal management services by having regular meetings and reviewing GOSH claims data of clients frequently returning withdrawal management. With the findings, ADAMHS Board staff will work with providers to ensure that each provider is following the best practices for withdrawal management services and aftercare planning.~~

- ~~1. When a client presents at any ADAMHS Board funded detoxification agency the screening information will be taken and sent to the ADAMHS Board to be entered into a database. The screening form will include but is limited to the client's name, birth date, social security number, and client ID number, if available.~~
- ~~2. The Board designated staff will query the database to determine if the client has had services within a twelve (12) month period. This information will be returned to the agency within twenty-four hours or the next business day.~~
- ~~3. If the client has not had service within a twelve (12) month period, the agency will admit the client according to Detoxification Protocol.~~
- ~~4. If the client has had services within a twelve (12) month period, the agency will inform the client that he/she is not eligible for services, why, and make the appropriate referrals for the client.~~
- ~~5. If a client returns for a second detoxification and the agency supports this request, the agency must submit justification why the Board should fund a second detoxification episode along with the screening information. It will be reviewed by the designated board staff for the final decision.~~
- ~~6. Agencies have the discretion to provide detoxification beyond the first episode at their own cost.~~
- ~~7. Enforcement:
 - ~~a. Board Staff will collaborate on the enforcement of this Policy.~~
 - ~~b. Enforcement of this policy will consist of regular review of billings and regular meetings with the agencies that currently provide detoxification services.~~~~

THE REVIEW PANEL

- ~~1. The Review Panel will be a standing committee that consists of the Chief Clinical Officer and two ADAMHS Board staff members.~~
- ~~2. The Review Panel will be used when:
 - ~~a. A client files an appeal of a decision, which cannot be resolved internally.~~
 - ~~b. A family member files a grievance or appeals a decision which cannot be resolved internally.~~~~

- ~~c. The referring provider files an appeal of a decision, which cannot be resolved internally.~~
- ~~d. The detoxification provider agency files an appeal of a decision, which cannot be resolved through conversation with the Board.~~
- ~~e. The Board makes a formal call to question a decision and strongly suggest the Review Process be initiated.~~

Supersedes and retires: Guidelines for Detoxification Services Funded with Non-Medicaid Dollars, effective **October 24, 2018** September 17, 2014.

Reference: Ohio Revised Code 340.033

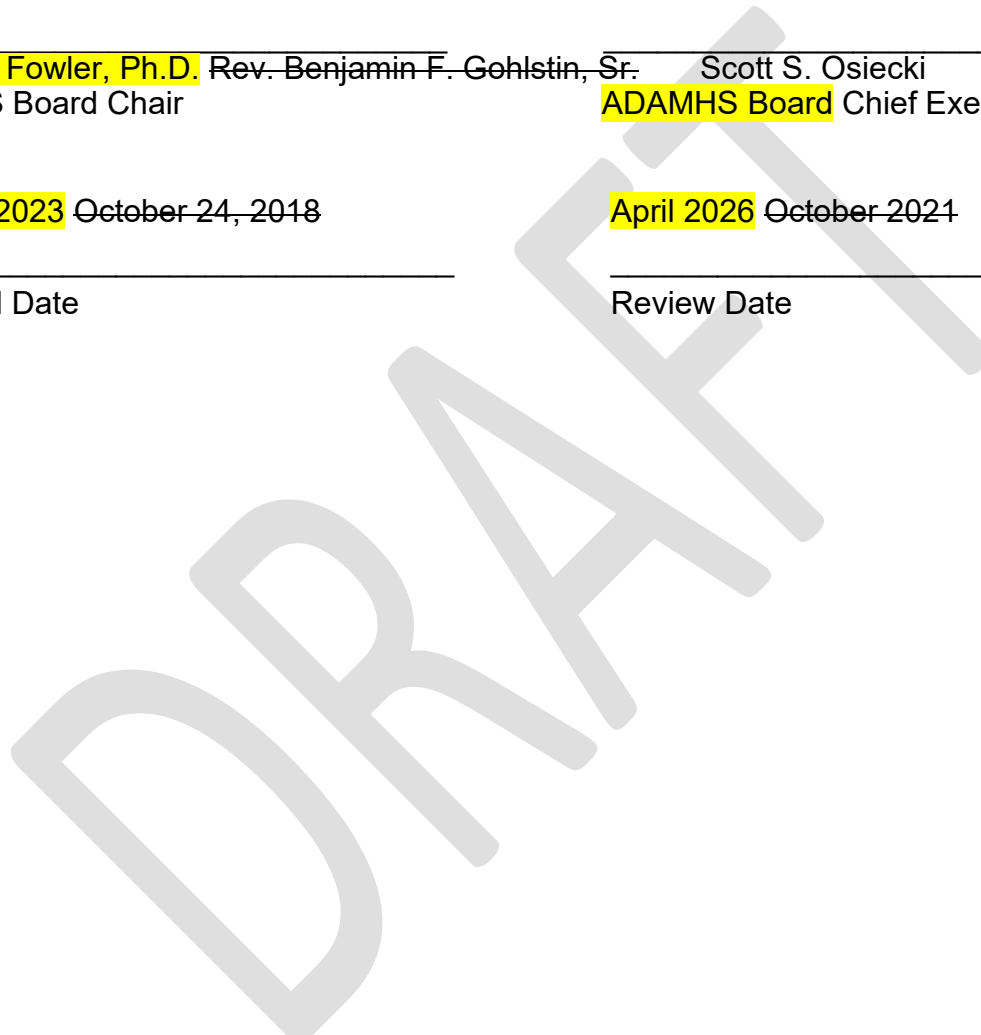
J. Robert Fowler, Ph.D. Rev. Benjamin F. Gohlstin, Sr. ADAMHS Board Chair	Scott S. Osiecki ADAMHS Board Chief Executive Officer
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April 26, 2023 ~~October 24, 2018~~

April 2026 ~~October 2021~~

Approval Date

Review Date



**ALCOHOL, DRUG ADDICTION AND MENTAL HEALTH SERVICES
BOARD OF CUYAHOGA COUNTY (ADAMHS BOARD)**

POLICY STATEMENT

SUBJECT: GUIDELINES FOR WITHDRAWAL MANAGEMENT SERVICES

EFFECTIVE DATE: April 26, 2023 (tentative) – 1st of 2 Readings

PURPOSE

To ensure that residents of Cuyahoga County in need of withdrawal management services funded by the ADAMHS Board have sufficient aftercare planning as recommended by the American Society of Addiction Medicine (ASAM) criteria, and to expand access of withdrawal management to those afflicted with substance use disorder (SUD).

BACKGROUND

Withdrawal management is the initial process towards recovery from a substance use disorder and is designed to manage the acute and potentially dangerous physiological side effects of withdrawal from alcohol, opiates, and other substances. However, withdrawal management alone does not address the psychological, social, and behavioral problems associated with addiction, and therefore, does not produce lasting behavioral changes necessary for recovery. Withdrawal management services includes a formal assessment with recommendations for further treatment per ASAM criteria. The ASAM criteria is the most widely used and comprehensive set of guidelines for placement, continued stay, and transfer or discharge of patients with addiction and co-occurring conditions. Receiving repeated withdrawal management services in the absence of ongoing treatment is not effective for long-term success.

The ADAMHS Board recognizes that withdrawal management is not treatment. Given the reluctance of some clients to accept ongoing treatment following withdrawal management, the ADAMHS Board has been utilizing a continuum of best practices to overcome both client and system barriers. Thus, this Policy represents a *continuation* of, and an *expansion* of the best practices already utilized by providers. Such practices may include but are not limited to:

- SUD case management,
- Recovery coaches/peer support services,
- Developing treatment goals,
- Relapse prevention,
- Contingency management,
- Withdrawal management practice protocols,
- Motivational interviewing,
- Mindfulness mediation,
- Cognitive behavioral therapy,
- Art/music therapy,
- Linkage to the next level of care per ASAM criteria or given a list of referral sources,
- Holding clients until a bed is available for the next level of care,
- Verification of linkage,
- Assistance with transportation,
- Referral to 12 Steps, and
- Distribution of NARCAN and fentanyl test strips.

Lasty, the service provider contract language stipulates that providers must prioritize SUD treatment for those clients being discharged from withdrawal management.

POLICY

It is the policy of the ADAMHS Board not to limit the number of times a client may receive withdrawal management services at any ADAMHS Board funded withdrawal management provider. Additionally, since withdrawal management is of a brief duration, providers shall provide discharge planning by linking clients to the next level of care per ASAM or provide harm reduction tools. A client receiving withdrawal management services shall not exceed a length of stay of five (5) days without prior authorization from the ADAMHS Board. For any such request, the provider shall submit clinical documentation for justification and authorization via the ADAMHS Board's secure fax line at (216) 241-3928.

RESPONSIBILITIES

When a client presents at any ADAMHS Board funded withdrawal management provider, the screening information will be taken and sent to the ADAMHS Board to be entered into a database. The screening information will include, but is not limited to the client's name, date of birth, and social security number, and sent to the ADAMHS Board's secure fax line at (216) 241-3928. ADAMHS Board staff will follow-up with a verification email to the provider approving the withdrawal management services.

Additionally, ADAMHS Board staff will evaluate the effectiveness each provider's withdrawal management services and aftercare planning by reviewing the frequency of a client returning for withdrawal management by having regular meetings and reviewing GOSH claims data of clients frequently returning withdrawal management services. With the findings, ADAMHS Board staff will work with providers to ensure that each provider is following the best practices for withdrawal management services and aftercare planning.

Supersedes and retires: Guidelines for Detoxification Services Funded with Non-Medicaid Dollars, effective October 24, 2018

Reference: Ohio Revised Code 340.033

J. Robert Fowler, Ph.D.
ADAMHS Board Chair

April 26, 2023

Approval Date

Scott S. Osiecki
ADAMHS Board Chief Executive Officer

April 2026

Review Date

**ALCOHOL, DRUG ADDICTION AND MENTAL HEALTH SERVICES
BOARD OF CUYAHOGA COUNTY (ADAMHS BOARD)**

POLICY STATEMENT

SUBJECT: SUBRECIPIENT MONITORING FOR FEDERAL GRANTS POLICY

EFFECTIVE DATE: April 26, 2023 (tentative) – 1st of 2 Readings

PURPOSE

To ensure that the ADAMHS Board monitors programmatic and financial activities of its subrecipients in order to assure proper stewardship of Federal awards.

BACKGROUND

The Office of Management and Budget (OMB) Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, 2 CFR 200 (Uniform Guidance), sets forth standards for obtaining consistency and uniformity in organizations expending Federal awards. In instances where the award recipient subcontracts with another organization to perform duties required or necessitated by the award, the award recipient is considered to be a pass-through entity. As a pass-through entity, the award recipient has monitoring obligations to ensure that a subrecipient uses the subaward for authorized purposes and that the goals of the award are achieved.

POLICY

It is the policy of the ADAMHS Board that it will adhere to regulations set forth in Uniform Guidance, sections 2 CFR 200.331 and 200.332, by performing a risk assessment prior to issuing a subaward and implementing risk-based monitoring activities accordingly to provide reasonable assurance that a subrecipient will administer the subaward for authorized purposes only and achieve the programmatic goals.

PROCEDURE

Subrecipient vs. Contractor: The ADAMHS Board will make a determination as to whether the entity that receives a subaward is a subrecipient or contractor.

- A subrecipient is a non-Federal entity that received a subaward from a pass-through entity to carry out a part of a Federal award and subject to compliance requirements under Uniform Guidance.
- A contractor is a non-Federal entity that provides goods and services ancillary to the Federal award and not subject to compliance requirements under Uniform Guidance.

Pre-award Risk Assessment of a Subrecipient: Before making a subaward to a subrecipient, the ADAMHS Board will evaluate the subrecipient's risk of noncompliance with Federal statutes, regulations, and the terms and conditions of the subaward for purposes of determining the appropriate subrecipient monitoring, which may include consideration of such factors as:

- The total amount of the award;
- The type of organization (i.e. government, nonprofit, or for-profit);
- The subrecipient's prior experience with the same or similar subawards with the ADAMHS Board;
- Whether the subrecipient has an exclusionary record that identifies it being excluded from receiving Federal contracts or any other issues identified in the System for Award Management (SAM.gov);

- The results of previous audits, including whether or not the subrecipient receives a Single Audit, and the extent to which the same or similar subaward has been audited; and
- Whether the subrecipient has new personnel, or new or substantially changed systems.

Ongoing Risk-Based Monitoring: Based on the pre-award risk assessment of the subrecipient, the ADAMHS Board will implement a risk-based monitoring plan which may include the following:

- Review of invoices and supporting documents to show that costs are supported by adequate documentation such as detailed transaction reports, vendor invoices, canceled checks, time and attendance records, and etc. to ensure:
 - Invoices are submitted in a timely manner, generally within 90 days;
 - Invoices are within the budgeted time period;
 - Expenses on invoices are within the awarded budget and are reasonable, allocable, and allowable;
 - Current and cumulative expenses invoiced to date are correct, including the indirect cost rate; and
 - Cost sharing requirements are met and accurate, if applicable;
- Review of program reports to ensure that programmatic goals of the Federal award are being met;
- Periodic meetings to discuss implementation of programmatic goals;
- Impose specific subaward conditions;
- Provide training and technical assistance on program related and invoice related matters;
- Perform on-site review(s);
- Issue a Corrective Action Plan (CAP) for any substantial programmatic and financial issues;
- Follow-up and ensure the subrecipient takes action to address deficiencies found through audits, onsite reviews, and other means; and
- If substantial programmatic and financial issues remain in implementation of the programmatic goals, the ADAMHS Board may recommend termination of the contract to its Board of Directors.

Supersedes and retires: Not Applicable

Reference: 2 CFR 200.331 - 332

J. Robert Fowler, Ph.D.
ADAMHS Board Chair

Scott S. Osiecki
ADAMHS Board Chief Executive Officer

Approval Date

Review Date

PROBATIONARY PERIOD REVIEW FOR NEW PROGRAMS (2-MONTH REVIEW)



Woo Jun, Director of Risk Management
March 2023

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CY2023 New Programs

Provider	Program
Birthing Beautiful Communities	Our Wellness Network
Circle Health Services	Transportation
Community Medical Services/Premiere Care of Ohio	Opioid Treatment Program
Community Assessment & Treatment Services	Transportation
Community Assessment & Treatment Services	Employment
Frontline Service	Housing First Client Assistance
It's Not a Moment. It's a Movement	The Faith Movement
Jordan Community Residential Center	Supported Employment
Magnolia Clubhouse	Transportation
The MetroHealth System	Psychiatric Emergency Department
Northern Ohio Recovery Association	Crisis Intervention and Harm Reduction Services
Sister of Charity Health System	Crisis and Recovery Services




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	<ul style="list-style-type: none"> <input type="checkbox"/> As the Provider is <u>not</u> making sufficient progress in implementing its program, the ADAMHS Board will extend the probationary period for 3 months and notify the Provider's CEO/Executive Director the reasoning behind the extending of the probationary period. (5-Month Review) <input type="checkbox"/> As the Provider is <u>not</u> making sufficient progress in implementing its program, the ADAMHS Board will recommend to its Board of Director termination of the program. (5-Month Review & 8-Month Review) 	
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ADAMHS Board Recommendation

- ADAMHS Board's Recommendation
 - 2-Month Review
 - Good progress – maintain monitoring schedule
 - Needs Improvement – Notice and Probationary Period Review sent to Executive Director/CEO
 - 5-Month Review
 - Remove probationary status
 - Extend probationary period for 90 days
 - Recommend termination to Board of Directors
 - 8-Month Review (if probation was extended)
 - Remove probationary status
 - Recommend termination to Board of Directors



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Diversity, Equity, and Inclusion (DEI)

- The Provider is implementing this program with a strong commitment to diversity, equity, and inclusion.
 - Agree
 Disagree
- May include a review of:
 - Projected client demographics vs. actual client demographics
 - Reviewing Provider's DEI Policy and seeing if there are action items
 - DEI training or educational opportunities
 - Reaching out to underserved populations
 - Reaching out to minority candidates for employment



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2-Month Review Results

Provider	Program	2-Month Review
Birthing Beautiful Communities	Our Wellness Network	Sufficient Progress
Circle Health Services	Transportation	Sufficient Progress
Community Medical Services/Premiere Care of Ohio	Opioid Treatment Program	Sufficient Progress
Community Assessment & Treatment Services	Transportation	Sufficient Progress
Community Assessment & Treatment Services	Employment	Sufficient Progress
Frontline Service	Housing First Client Assistance	Sufficient Progress
It's Not a Moment. It's a Movement	The Faith Movement	Sufficient Progress
Jordan Community Residential Center	Supported Employment	Sufficient Progress
Magnolia Clubhouse	Transportation	Sufficient Progress
The MetroHealth System	Psychiatric Emergency Department	Needs Improvement
Northern Ohio Recovery Association	Crisis Intervention and Harm Reduction Services	Sufficient Progress
Sister of Charity Health System	Crisis and Recovery Services	Sufficient Progress



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New Programs

- Birthing Beautiful Communities: Our Wellness Network
 - Sufficient Progress
 - CAP – Needs to start invoicing
- Circle Health Services: Transportation
 - Sufficient Progress
 - CAP – Needs to start invoicing
- Community Medical Services (Premiere Care of Ohio): Opioid Treatment
 - Sufficient Progress
 - CAP – Needs to better coordinate with local and corporate office to correctly fill out GOSH access request, get GOSH training, and start submitting claims



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New Programs

- Community Assessment & Treatment Services: Employment
 - Sufficient Progress
- Community Assessment & Treatment Services: Transportation
 - Sufficient Progress
- Frontline Service: Housing First Client Assistance
 - Sufficient Progress
 - CAP – Needs to start invoicing



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New Programs

- It's Not a Moment. It's a Movement: The Faith Movement
 - ▣ Sufficient Progress
 - CAP – Needs to start invoicing
- Jordan Community Residential Center: Supported Employment
 - ▣ Sufficient Progress
 - CAP – Needs to start invoicing
- Magnolia Clubhouse: Transportation
 - ▣ Sufficient Progress
 - CAP – Needs to start invoicing



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New Programs

- The MetroHealth System: Psychiatric Emergency Department (PED)
 - ▣ Needs Improvement
 - CAP – Due to construction delays of the PED, it is anticipated that PED will not open until the end of summer. Need firm commitment when services will commence.
- Northern Ohio Recovery Association: Crisis Intervention & Harm Reduction
 - ▣ Sufficient Progress
 - CAP – Needs to start invoicing
- Sisters of Charity Health System: Crisis & Recovery Services
 - ▣ Sufficient Progress
 - CAP – Needs to start invoicing



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ANY
QUESTIONS
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Woo Jun, jun@adamhsc.org or (216) 509-9093