

GENERAL MEETING WEDNESDAY, MARCH 22, 2023 ♦ 4:00 P.M.

2012 West 25th Street - United Bank Building (Sixth Floor) - Ohio Room

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.

AGENDA

- CALL TO ORDER J. Robert Fowler, Ph.D., Board Chair
- AUDIENCE INPUT ON AGENDA ITEMS J. Robert Fowler, Ph.D.
- 3. RECOGNITION OF CLIENT ARTWORK DISPLAY: MARCH 2023 Beth Zietlow-DeJesus, Director of External Affairs
 - Future Directions
- 4. APPROVAL OF MINUTES: February 22, 2023 J. Robert Fowler, Ph.D.
- CHAIR'S REPORT J. Robert Fowler, Ph.D.
- 6. PRESENTATIONS:
 - THE OPIOID EPIDEMIC IN CUYAHOGA COUNTY Beth Zietlow-DeJesus
 - CLIENT RIGHTS REPORT Bill Hebble, Client Rights Officer II / Christina Bohuslawsky-Brown, Client Rights Officer II
- 7. COMMUNITY RELATIONS & ADVOCACY COMMITTEE REPORT Patricia James-Stewart, M.Ed., LSW, Committee Chair
- RESOLUTION NO. 23-03-01 APPROVAL OF 2023 ADVOCACY ACTION AGENDA
- 8. **NOMINATING COMMITTEE REPORT** J. Robert Fowler, Ph.D.
- 9. PLANNING & OVERSIGHT COMMITTEE REPORT Gregory X. Boehm, M.D., Committee Vice Chair

PRESENTATION:

PROBATIONARY PERIOD REVIEW FOR NEW PROGRAMS – Woo S. Jun, Esq., Director of Risk Management

POLICY STATEMENT RENEWAL – 1st of 2 Readings

GUIDELINES FOR DETOXIFICATION SERVICES FUNDED WITH NON-MEDICAID DOLLARS

NEW POLICY STATEMENT REVIEW – 1st of 2 Readings

- > SUBRECIPIENT MONITORING FOR FEDERAL GRANTS POLICY
- 10. FINANCE & OPERATIONS COMMITTEE REPORT Sharon Rosenbaum, MBA, Committee Chair

- RESOLUTION NO. 23-03-02 ACCEPTING THE REPORT OF THE CEO ON EXPENDITURES AND VOUCHERS
 PROCESSED FOR PAYMENT DURING JANUARY 2023
- RESOLUTION NO. 23-03-03 APPROVAL AND RATIFICATION OF CONTRACTS:
 - 1. Client Satisfaction Survey
 - Brown Consulting, LTD \$60,000
 - 2. Ohio Department of Mental Health and Addiction Services (OhioMHAS): Psychotropic Drug Reimbursement Program
 - Cuyahoga County Sheriff's Department \$44,489
 - 3. OhioMHAS: Medication-Assisted Treatment (MAT) Reimbursement Program
 - Cuyahoga County Sheriff's Department \$17,781
 - 4. 2023 Problem Gambling and Suicide Prevention Awareness Activities and Campaign Not to exceed \$125,000
 - Media and Digital Campaign (Spotify, Fox 8, Radio One, La Mega, iHeart, Lamar, Cleveland Jewish News and other local publications) Not to exceed \$114,000
 - Translation Services, printed materials and promotional items (LanguageLine Solutions, Brothers Printing and other vendors TBD) - \$10,000
 - Problem Gambling Symposium Sponsorship (Recovery Resources at MetroHealth System) Not to exceed \$1,000
 - 5. 2023 Annual Meeting Brunch, Awards Ceremony and Client Art Show
 - Holiday Inn Cleveland South Not to exceed \$35,000

End of Consent Agenda

- 11. EXECUTIVE SESSION J. Robert Fowler, Ph.D.
 - PURPOSE:
 - Discuss Personnel Matter
 - Discuss Hospital Trade Secrets
- 12. CHIEF EXECUTIVE OFFICER'S REPORT Scott S. Osiecki
 - Diversion Center Update
 - Health and Human Services (HHS) Follow up Meeting
 - One Ohio Region 3 Advisory Committee
 - U.S. Department of State International Visitor Leadership Program
 - Stella Maris 75th Diamond Anniversary Public Officials Reception
 - Sponsorships
- 13. NEW BUSINESS
- 14. FOLLOW-UP
- 15. AUDIENCE INPUT
- 16. UPCOMING APRIL AND MAY BOARD MEETINGS:
 - 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
 - Community Relations & Advocacy Committee Meeting: May 3, 2023
 - Nominating Committee Meeting: May 10, 2023
 - Planning & Oversight Committee Meeting: May 10, 2023
 - Finance & Operations Committee Meeting: May 17, 2023
 - General Meeting: May 24, 2023

BOARD OF DIRECTORS

J. Robert Fowler, Ph.D., Chairperson

Patricia James-Stewart, M.Ed., LSW, Vice Chair • Katie Kern-Pilch, MA, ATR-BC, LPC-S, Second Vice Chair Bishara W. Addison • Ashwani Bhardwaj • Reginald C. Blue, Ph.D. • Gregory X. Boehm, M.D. • Erskine Cade, MBA Sadigoh C. Galloway, MSW, LSW, LICDC-CS • Rev. Benjamin F. Gohlstin, Sr. • Basheer Jones • Steve Killpack, MS Rev. Max M. Rodas, MA • Sharon Rosenbaum, MBA • Harvey A. Snider, Esq.

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

GENERAL MEETING MINUTES FEBRUARY 22, 2023

ADAMHS BOARD OF DIRECTORS PRESENT:

J. Robert Fowler, Ph.D.

Bishara W. Addison

Ashwani Bhardwaj

Erskine Cade, MBA

Sadigoh C. Galloway, MSW, LSW, LICDC-CS

Patricia James-Stewart, M.Ed., LSW

Katie Kern-Pilch, MA, ATR-BC, LPC-S

Steve Killpack, MS

Sharon Rosenbaum, MBA

Harvey A. Snider, Esq.

Rev. Benjamin F. Gohlstin, Sr.

ABSENT: Gregory X. Boehm, M.D., Reginald C. Blue, Ph.D., Basheer Jones, Rev. Max M. Rodas, MA

BOARD STAFF PRESENT: Scott Osiecki, Chief Executive Officer, Danielle Clark, Vince Crowe, Erin DiVincenzo, Ben Goodwin, Felicia Harrison, Anthony Henderson, Woo Jun, Britany King, Linda Lamp, Nancy Mundy, Mark Onusko, Clare Rosser, Jessica Saker, Allison Schaefer, Starlette Sizemore, Michaele Smith, Maggie Tolbert

1. CALL TO ORDER

Board Chair, J. Robert Fowler, Ph.D., called the General Meeting to order at 4:01 p.m. and read into the record the Board 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.

3. WELCOME

Ms. Sherri Brandon, MNO/MSSA, CDCA, Chief Executive Officer of Front Steps Housing and Services, welcomed all to St. Joseph Commons, which is their permanent supported housing project that was built two years ago to provide housing and behavioral health services to 68 individuals as well as services to the community. Front Steps Housing and Services is dedicated to ending homelessness by providing individuals and families in Cuyahoga County with permanent housing and lifelong solutions to increase self-sufficiency and independence.

4. APPROVAL OF MINUTES

The minutes from the January 25, 2023 General Meeting were approved as submitted.

5. CHAIR'S REPORT

Dr. Fowler reported that several changes have been made to the ADAMHS Board of Directors committee structure. Rev. Benjamin F. Gohlstin, Sr., has agreed to serve as Chair of the Faith-based Outreach Committee and Ms. Patricia James-Stewart has agreed to continue to serve as the Vice Chair of the Faith-based Outreach Committee. Ms. Bishara W. Addison has agreed to serve as Vice Chair of the Finance & Operations Committee.

Dr. Fowler shared that there are three vacancies on the ADAMHS Board of Directors. These Board of Director vacancies consist of two Cuyahoga County vacancies and one State (Ohio Department of Mental Health and Addiction Services (OhioMHAS)) vacancy. Should anyone in attendance know of a viable candidate for ADAMHS Board of Director membership, please forward an email to Ms. Linda Lamp, Executive Assistant, for additional information.

6. CUYAHOGA COUNTY FATALITY REVIEW COMMITTEES' PRESENTATION

Ms. Allison Schaefer, Director of Adult Behavioral Health Programs, reported that a presentation from various fatality review committees in Cuyahoga County will be shared. She highlighted that several ADAMHS Board staff attend different fatality review committees, and each staff member will be introducing the committee that they attend. Ms. Shaefer noted that Ms. Becky Karns, Committee Chair of the Overdose Fatality Review, who is with the Cuyahoga County Board of Health, was not able to be in attendance for a presentation but may attend a future meeting to answer any guestions the Board of Directors may have.

Ms. Nancy Mundy, Clinical Adult Utilization Review Specialist, introduced Mr. Dean Jenkins, Committee Chair of the Domestic Violence Fatality Review Committee and Chief Probation Officer for Cleveland Municipal Court. Mr. Jenkins reported that the mission of the Domestic Violence Fatality Review Committee is to assist in the prevention of injuries and deaths occurring in the county resulting from intimate partner violence by conducting detailed examinations of all homicides connected to the violent interactions of individuals engaged in intimate relationships. The committee has three objectives. The first objective is to discover the causes of intimate partner-related homicides. The second objective is to disseminate information about identified gaps in service delivery to those involved in abusive-intimate partner relationships. The third objective is to make recommendations for coordinating the community's response to filling the gaps identified. Mr. Jenkins reported that the Domestic Violence Fatality Review defines a domestic violence fatality as a death that arises from an abuser's efforts to seek power and control over an intimate partner.

Responsibilities of the Domestic Violence Review Committee include the following:

- Identify fatalities eligible for review each year. All cases reviewed must have reached a final legal disposition (when applicable). Cases that involve the perpetrator committing suicide may be reviewed as soon as the committee is ready.
- Cases will be moved to the next year's list if they are not fully disposed of on the initial list.
- Conduct a review following an established review process.
- Review and suggest issues to be addressed to public and private institutions to further protect victims of domestic violence.
- Routinely update the Domestic Violence Task Force on gaps and operating issues of the review committee.
- Annually issue a detailed report of what has been learned during the calendar year which can be supported by trends in Cuyahoga County.

Mr. Jenkins shared that all information must be kept confidential by the review committee. Any decedent/fatality information obtained or discussed during the case review shall not be disclosed by any member of the review committee. All review committee participants must sign a confidentiality statement that will be kept with all other pertinent review committee work; this document shall be renewed annually. New members of the committee must sign the document before they are permitted to attend a meeting. In some instances, not all committee members will have full access to victim and or decedent identification. Some fatality review committee members, including mental health providers, medical providers, and victim service providers, may be bound by federal or state laws that prevent them from sharing information without a release from the appropriate party, which may be difficult or impossible to obtain in the event of a homicide.

The Domestic Violence Review Committee consists of individuals from a variety of organizations. These organizations include the following:

- The Medical Examiner's Office
- The Cleveland Police Department
- Cleveland Probation Department
- Cuyahoga County Probation
- All Cuyahoga County Hospitals
- Children and Family Services
- Journey Center for Safety & Healing
- Ohio Department of Rehabilitation and Correction (ODRC) Parole
- Cuyahoga County Prosecutor's Office
- Cuyahoga County Witness Victim Services
- FrontLine Service
- ADAMHS Board of Cuyahoga County
- All new or replacing committee members must sign the Confidentiality agreement. If the Chairperson has a request for a
 new member, it must be brought to the committee as a whole before they can attend a meeting.

Mr. Jenkins shared Lethality Indicators, which included examples of Anti-Social Behavior and Failure of Community Control; as well as the method of review and the actual Cuyahoga County Domestic Violence Fatality Review Committee Data Collection Form. He also responded to questions from the Board of Directors. (The PowerPoint presentation is attached to the original minutes stored in the Executive Unit.)

Ms. Britany King, Children's Behavioral Health Specialist, and Mr. Mark Onusko, Behavioral Health Prevention Specialist, introduced Ms. Lorrie Considine, RN, Committee Chair of the Fetal Infant Mortality Review & Child Fatality Review Committee and from the Board of Health. Ms. Considine reported that the Child Fatality Review (CFR) is identified in the Ohio Revised Code (ORC) and every county has one. They review the deaths of all children under 18 years of age. Also, the CFR is strictly confidential and has the authority to request records and dictates who sits on the CFR Board. The CFR's approach is multidisciplinary and interagency. Required members include Medical Examiner/Coroner, police department, Department of Children and Family Services (DCFS), public health, mental health, and a pediatrician. Other members include hospital social workers, school nurse, county prosecutor, Women, Infants, and Children (WIC), home visiting programs—MomsFirst & Bright Beginnings, Juvenile Court, Emergency Medical Services (EMS), Witness Victim Center, and Invest in Children.

The purpose of CFR is to note trends such as racial inequities, types of deaths and risk factors. The CFR also recognizes social, economic, environmental, medical and safety factors that contribute to a child's death (SDOH); identify gaps in service, barriers or system issues; encourage interagency communication and collaboration to improve systems, and health and safety of children to prevent deaths. There are two review teams: the Medical Examiner (ME) Review, which meets monthly and the Fetal Infant Mortality Review, which meets quarterly. The ME cases include reviewing homicides, suicides, accidents, sleep related deaths and some medical cases. Through a health equity lens, there is an opportunity to attain full health potential of health inequities, such as differences in length of life, quality of life, rates of disease, disability and death, severity of disease, and access to treatment; and to collect data for local and national use regarding causes, risk factors and trends.

The role of the members is:

- Review agency's records about the child/family
- Come prepared to share that information at the meeting
- Agency liaison take recommendations for internal improvement back to the agency
- Feedback loop report on action by the agency
- Keep dialogue open, respectful, and cooperative
- Maintain confidentiality
- Practice self-care

Ms. Considine shared recommendations and interventions; and provided a chart identifying the total Child Suicide Deaths per Year from 2012 to 2021.

Ms. Considine also reported on the Fetal Infant Mortality Review (FIMR). This committee reviews fetal and infant deaths to understand social, economic, medical, behavioral, and environmental issues related to these deaths; and consists of a multi-disciplinary and multi-agency team that is confidential, not fault finding. They utilize the Life Course Perspective and Health Equity Lens, which includes the health of the mother before, during, and after her pregnancy for the opportunity to attain the full health potential through health inequities – differences in length of life, quality of life, rates of disease, disability and death, severity of disease, and access to treatment. FIMR components are as follows:

- Identifies risk factors, strengths, social determinants of health, and discusses root causes
- Pinpoints local infant mortality issues through the review of infant and fetal deaths
- Develops recommendations for system & policy changes
- Implements the recommendations
- Improve birth outcomes and reduce racial disparities in infant deaths

Through the FIMR process, policy change and system change can transpire for healthier moms, babies and families. The family interview is scheduled with parent(s) who respond to outreach letters. This enables parents to tell "their story" and "their child's story". Information obtained can determine community services that worked, and community services needed but did not receive barriers. This interview provides grief support, resources, and referrals. The Case Review Team (CRT) meets four times per year, whereby case summaries are presented, risk factors identified to determine gaps or barriers to services and strengths in family/services for recommendations. The Cuyahoga County CRT consists of the following:

- Children and Family Services
- ADAMHS Board of Cuyahoga County
- Neonatologist
- Hospital Social Worker

- Nurse Midwife/Patient Navigator
- Maternity Nurse Managers
- Maternal Fetal Medicine
- Neighborhood Leadership Institute
- Neighborhood Family Practice
- Home Visiting Program
- Medicaid Representative
- Pathways HUB
- Reproductive Health Staff
- Program Abstractor/Coordinator
- FIMR Interviewer
- Public Health Epidemiologist

The role of the Community Action Team (CAT) is to act on recommendations, increase visibility of issues related to infants, women and families in the community and ensure continuity of policy and system changes. The current CAT is the Cleveland Cuyahoga partnership. Ms. Considine reported that the community initiatives include grand rounds to discuss patient provider communication, palm card for Emergency Rooms in the county with labor and delivery services and to address transportation barriers with the Baby on Board Project. Ms. Considine also responded to questions from the Board of Directors. (The PowerPoint presentation is attached to the original minutes stored in the Executive Unit.)

[Mr. Erskine Cade, MBA, arrived.]

Ms. Schaefer introduced Commander Ali Pillow, Commission Chair from the Cleveland Division of Police. Commander Pillow reported that the Cleveland Homicide Review Commission's mission is to solve homicides in a more efficient and effective manner, to gain a better understanding of homicide through strategic problem-solving analysis, to develop innovative and effective responses and prevention strategies that result in a reduction of homicides and to help better focus available prevention and intervention resources. The Cleveland Homicide Review Commission is an initiative of the Cleveland Division of Police, with the support of the Cuyahoga County Prosecutor's Office and the U.S. Attorney's Office for the Northern District of Ohio Northern Ohio Violent Crime Consortium; and is based on the Milwaukee Homicide Review Commission – that is recognized as a national model. The assumptions of leadership included the following:

- Homicide is preventable
- A collaborative and well-coordinated effort will lead to change
- Data-driven strategies are essential
- Multi-level responses help ensure meaningful, robust, and sustainable results

Commander Pillow stated that the participants and operations include the Law Enforcement Review and the Service Provider Review. The Law Enforcement Review started in 2018 with local, state, and federal law enforcement and other criminal justice professionals meeting monthly to review open homicide cases examining the victims, offenders, associates, witnesses, circumstances, and setting of homicide events. The Service Provider Review started in 2019 with service providers and law enforcement meeting quarterly to review closed or cleared cases including government and nonprofit organizations that address mental health, substance abuse, education, health, criminal justice, etc., issues.

During the Law Enforcement Review, the information shared stays within the group; and accomplishments include a higher solve rate, improved information sharing even within the Cleveland Division of Police and a recent focus on high risk individuals. During the Service Provider Review, challenging issues that require extensive discussion and research are done by partner agencies (i.e., St. Vincent Charity Medical Center legal, Cuyahoga County Medical Examiner's Office and Legal Department, etc.) and a Memorandum of Understanding (MOU) is agreed on and signed by all – information to stay within the group. He shared that there continues to be hesitancy by some agencies to share information on victims and perpetrators as cases are reviewed, but information that is shared provides a good sense of system involvement and where improvements should be made. Accomplishments of the Service Provider Review is the establishment of the Gateway Program by Juvenile Court and FrontLine Service targeting youth placed in residential facilities, the assessment of witness/victim services, training for law enforcement and community agencies on trauma-informed practices related to homicides, research and planning for expanded victim/witness relocations and expanded use of cameras.

Commander Pillow reported that the Community Review is not yet operational; and discussions continue to implement this final review. After a brief discussion of the Cleveland Homicide Review Commission, Commander Pillow responded to questions from the Board of Directors. (The PowerPoint presentation is attached to the original minutes stored in the Executive Unit.)

7. FAITH-BASED OUTREACH COMMITTEE REPORT

Rev. Gohlstin, Sr., Faith-based Outreach Committee Chair, reported on the Faith-based Outreach Committee meeting held on Wednesday, February 1, 2023, at 4:00 p.m. The Board of Directors heard the following items of discussion:

■ Faith-based Outreach Progress Report

Ms. Starlette Sizemore, Director of Special Projects, reported that the Third Quarter Report contains 10 pages of in-depth analysis of information that includes measurements for all eight faith-based providers individually, plus combined data; along with observations about outcomes. The full report is available on the ADAMHS Board's website.

The mission of the Faith-based outreach initiative is to recognize and advocate spirituality in the recovery process; connect the spiritual perspective with other interventions and best practices; and promote the concept that treatment works and people recover. Due to program differences and ages of program participants, several measurement instruments were used. A chart was shared that showed combined results from all providers using the same measurement tool. The grand total of individuals served for all eight faith-based providers in 2022 was 619; and the expected annual total was 864.

Ms. Sizemore highlighted that there are various means for measuring the effectiveness of these programs through three measurement instruments: Devereux Student Strengths Assessment (DESSA) Outcomes, Devereux Adult Resilience Survey (DARS), and Quizzes/Evaluation, which includes Mental Health First Aid (MHFA) and Awareness & Education. Ms. Sizemore shared that for the first three quarters, the breakdown of individuals served in each of the measurement instruments included the following: DESSA 123 individuals, DARS 291 individuals, MHFA 34 individuals, and Awareness and Education 171 individuals, for a total of 619 individuals.

MHFA is designed to teach individuals how to spot the signs and symptoms of mental illness and provide help on a first aid basis. Individuals who are participating in a MHFA training provided by a faith-based program provider are expected to successfully complete the course evaluation/quiz and score at least 60% based on the following topics: Helpful Things to Say; Myths and Facts-Suicide and Self-Injury; Suicidal Thoughts and Behaviors; Panic Attacks; Traumatic Events; Auditory Hallucinations; Psychosis; and Substance Use Disorders. Participants demonstrated on a quiz a passing level of competence of 100%. No one participated in a MHFA program during the First Quarter of 2022; however, in the Second Quarter Far West Center had 8 individuals and in the Third Quarter had 11 individuals and National Alliance on Mental Illness (NAMI) Greater Cleveland had 15 individuals in the Second Quarter and no individuals in the Third Quarter.

The Awareness & Education programs are designed to present a variety of mental health and substance use knowledge to raise their level of education and awareness. These programs are being done by the Far West Bridges Program, NAMI Greater Cleveland and the Galilean Theological Center (GTC). The total number of individuals for each of the faith-based providers for the first three quarters is as follows: Far West Bridges Program 18 individuals, NAMI Greater Cleveland 100 individuals and GTC 53 individuals.

Ms. Sizemore reported on a variety of current highlights from each of the eight faith-based providers.

Program Provider Presentations

GTC - Substance Use Disorders Educational & Training Program for Latinx Clergy & Church Leaders

Rev. Dr. Felix Muniz, Executive Director of GTC, reported that GTC is a 501(c)(3) non-profit organization whose mission statement is to provide introductory theological education, training, and job-readiness skills for ministry, leadership, and employment in the Hispanic-Latino churches throughout Northeast Ohio. Their goal is to provide ministerial training and sound theological education to Hispanic/Latino church leaders who generally do not have access to traditional theological institutions due to language barriers, socio-economic status and/or formal education. GTC has a partnership with Ashland Theological Seminary with the purpose to train people for bachelor exempt status for application to the master's program.

The GTC Substance Use Disorders Educational and Training Program for Latinx Clergy and Church Leaders has two components: Component I. Spiritual Caregiving to Help Addicted Persons and Families (21 hours) and Component II. Licensing & Credentialing (40 hours).

Rev. Dr. Muniz reported that GTC's goal was to enroll, train and educate 40 pastors & church leaders in substance use disorders in 2022; and shared the following:

- 53 participants were registered for the program
- 47 participants completed Component I and moved on to Component II.
- All 47 participants successfully completed both Components I & II
- 24 participants are certified as Chemical Dependency Counselor Assistant (CDCA)
- 23 participants are certified as CDCA Preliminary
- 25% of participants are currently employed in treatment facilities

It's Not a Moment. It's a Movement (INAMIAM)

Pastor Kyle Earley, Chief Executive Officer and Founder of INAMIAM, reported that INAMIAM was formed in 2018 with the mission to increase awareness, educate, and promote action-focused strategies for policy change and community connections through community-organized leadership, training, and culturally appropriate services. INAMIAM is a 501(c)(3) nonprofit charitable organization serving Northeast Ohio.

INAMIAM Programs include Youth Empowerment Program (YEP), Activist Academy and The Faith Movement (TFM). YEP has offered services to over 400 students in the Akron Public Schools for six years. They are currently in six buildings improving school climate and family life through:

- Mental Health Prevention and Education
- Academic Enrichment
- Health & Wellness

Activist Academy provides skill-building and guidance for emerging leaders to take on new responsibilities and stand in the spotlight as effective advocates for their communities. TFM provides faith leaders with tools and resources necessary for developing Mental Health Ministries aimed at reducing the stigma of mental illness and integrating the important role of spirituality within the treatment and recovery process. Program Initiatives include the following:

- Gas On God
- TFM Voter Engagement Program
- Opioid Harm Reduction
- Mentally Mangled Mental Health Summit

Paster Earley also reported on the Mentally Mangled Mental Health Summit. He reported that the Summit had 83 attendees. Over 85% expressed interest in developing a mental health ministry, 90% feel unequipped to establish or sustain mental health ministries in their church, 90% expressed a need for training and technical assistance to increase mental health awareness, 80% desired continued conversations and seek connections to counseling services for themselves and members of their institutions of faith and 45% have never attended counseling due to stigmas associated with mental health.

Sponsorship: Impact of Police Use of Force on the Mental Health of the Black Community

Mr. Scott Osiecki, Chief Executive Officer, 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 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:

- March 23, 2023 Conversation Focus: Black Women You Are My Sister.
- o Hosted By: YWCA Greater Cleveland
- April 29, 2023 Conversation Focus: Black Men Real Men Real Talk. Hosted by: Alpha Phi Alpha Fraternity Delta Alpha Lambda (Cleveland Chapter)
- May 2023 Conversation Focus: Black Youth For Our Future. Hosted by: Tri-C
- 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 these events 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 Cleveland 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 and Project Coordinator of the Cleveland CPC, was present to respond to any questions the Board of Directors had.

8. PLANNING & OVERSIGHT COMMITTEE REPORT

Ms. Katie Kern-Pilch, Planning & Oversight (P&O) Committee Chair, reported on the P&O Committee meeting held on Wednesday, February 8, 2023, at 4:00 p.m. The Board of Directors heard the following items of discussion:

- Ms. Maggie Tolbert, Assistant Chief Clinical Officer, introduced Ms. Beverly Lozar, Vice President of Behavioral Health Hospital Operations, The MetroHealth System, who provided an update regarding their hospital and Psychiatric Emergency Department in Cleveland Heights; whereby 20 beds were transitioned from main campus to open a 20 bed Mood Unit and a 20 bed Thought Disorder Unit. Eight beds are also dedicated as psych/medical beds. They are at 98% occupancy. ADAMHS Board staff had an opportunity to attend the facility's dedication last summer. Ms. Lozar stated that opening the Psychiatric Emergency Department is still planned but delayed.
- Ms. Erin DiVincenzo, Director of Prevention and Children's Behavioral Health Programs, introduced three provider agencies to present on the children's residential workforce crisis:
 - Jennifer Blumhagen Yarham, Executive Director at Applewood Centers, reported that ADAHMS Board 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.
 - O Jeffrey Lox, Executive Director at Bellefaire Jewish Children's Bureau (JCB), reported that 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.
 - Kiersten Watkins, Assistant Vice President of Program Administration at OhioGuidestone, said that four of their 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 after hours shifts.
- There were three action items that were discussed:
 - 1. The Sponsorship of The Impact of Police Use of Force on the Mental Health of the Black Community for \$75,000.
 - 2. Murtis Taylor Human Services System Conditional Release Unit Funds for \$306,769.75.
 - 3. To amend Resolution No. 22-11-08, I'm In Transition Ministries CY2023 contract to reallocate funds from its recovery Housing Program to create a transportation program.
- 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

Ms. Rosser noted that calls are increasing, with the fourth quarter receiving 334 from the community and 88 from law enforcement. Since opening the Diversion Center in May 2021 until December 31, 2022, there were a total of 809 admissions: 551 new clients and 258 returning, for 1,604 contacts. Through her PowerPoint presentation, Ms. Rosser shared various statistics which addressed the client experience, and a satisfaction survey. 56% of clients successfully completed the program. She highlighted that 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 reported that as part of the Board's Strategic Plan and 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.

Mr. Osiecki reported that Board staff recently received a proposal for the client satisfaction survey; and stated that staff would like to commence the process during March 2023. The total cost of the proposal is \$60,000. Mr. Osiecki noted that he would like to provide half down to start the services in March, with the caveat that complete information and timeline will be brought before the Board during the March Board of Directors meeting cycle for ratification.

Motion 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. MOTION: S. Rosenbaum / SECOND: B. Gohlstin / AYES: B. Addison, A. Bhardwaj, E. Cade, S. Galloway, B. Gohlstin, P. James-Stewart, K. Kern-Pilch, S. Killpack, S. Rosenbaum, H. Snider / NAYS: None / ABSTAIN: None / Motion passed.

9. FINANCE REPORT

Ms. Sharon Rosenbaum, Finance & Operations (F&O) Committee Chair, reported on the F&O Committee meeting held on Wednesday, February 15, 2023, and highlighted the Vouchers, Contracts and Contract Amendments as listed below.

CONSENT AGENDA: Resolution Nos. 23-02-01 through 23-02-03

RESOLUTION NO. 23-02-01 ACCEPTING THE REPORT OF THE CEO ON EXPENDITURES AND VOUCHERS PROCESSED FOR PAYMENT DURING DECEMBER 2022

Ms. Rosenbaum reported that the Administrative Budget that was approved for CY2022 was \$7,374,726.62 and for December Actual Year to Date (YTD) 2022, the total administrative expenses were \$6,803,392.37; that is roughly 92% of the total Administrative Budget. As a result, the Board is on track with expenses for 2022. Ms. Rosenbaum highlighted that relative to the Board Voucher Report for December 2022, the last entry for internal adjustment to grant account for \$60,191.42 was due to transferring the funding out of the account to obtain a zero balance in the grant account.

The Funding Source Budget to Actual YTD, December 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 December 2022, the Board has received \$76,217,428.71. The bulk of these funds consists of the Board's annual amount from the County levy subsidy of \$43,463,659. Ms. Rosenbaum reported that 104% of the budget has been received.

The Revenues By Source By Month report reflected that in December 2022, the Board received revenues of \$1,886,841.80. As a result, the Total Revenues By Source By Month is \$76,217,428.71.

The ADAMHS Board Budget vs. Actuals for 2022 reflect that December YTD Actual is \$74,631,839.35 that is roughly 88% of the Board's anticipated expenditures for the calendar year.

Revenue and Expenditures All Accounting Units By Month January through December 2022 includes administrative accounts as well as grant accounts. The total expenditures for December 2022 is \$5,178,803.08; bringing the total expenditures for CY2022 to \$74,631,839.35. 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, December 2022 YTD reflects the Grant Accounting Units that include the OOD Grant, Other Grants and SOR Grant. The total expenditures for grants YTD is \$4,484,530.77.

The Diversion Center Revenues and Expenditures YTD December 2022 YTD reflects the total operating expenses is \$5,225,373.16. Total revenue received through the end of December is \$5,227,402.87.

The Cash Flow Report, December 2022 shows the 2020 Actual, 2021 Actual and YTD through December 2022. This report shows a comparison of the available beginning balance, total available resources, expenditures and available ending balance. The available ending balance through December 2022 is \$43,175,702.58.

• RESOLUTION NO. 23-02-02 - APPROVAL AND RATIFICATION OF CONTRACTS:

1. Metrics Collection System Renewal

- WizeHive, Inc. - \$27,850

The ADAMHS Board awards funding to approximately 200 programs annually through a Request For Proposals (RFP) process. The review process involves handling copious numbers of documents and data and is extremely time consuming to conduct. Currently, automation support for the process is extremely limited in terms of options. Beyond the simple mechanics of accepting and confirming providers' RFP submissions, managing the volume of files and data requires extreme care to ensure the integrity of the RFP submissions are maintained. After the RFP review and selection process is complete, another labor-intensive process begins to collect contractually defined program metrics as identified in the providers' contract Attachment 1's. On a routine basis, typically monthly, staff monitor dedicated email accounts and verify that providers have submitted requisite metrics data in a timely manner. If data has been submitted on time and in the correct format, it is then manually copied into spreadsheets.

The first year of this solution provided automation to support the entirety of the process significantly reducing the administrative burden currently placed on Board staff. RFPs were submitted directly into the WizeHive system by providers, all while maintaining deadlines that were established by the Board. RFP scoring by staff was also efficiently completed within the system, allowing for simple and straight-forward review by Executive staff. The system ensures the data entered by providers is consistent, complete, and accessible to staff. WizeHive also provides the capability to collect numerous metrics that we have collected through various avenues in the past and currently, such as SurveyMonkey. This provides the Board the added option of keeping this data within one system. This aims to eventually eliminate the labor-intensive paperwork for program metrics replacing it with the direct entry into the system by providers. New scoping if services will allow for providers to directly submit service level assessment metrics (such as the Brief Addiction Monitor, Ohio Scales, and Devereux Adult Resilience Survey (DARS)) to the Board without the use of large file submissions.

The WizeHive system is a cloud-based, software as a service (SAAS) solution focused on the full lifecycle of program contract awards to include posting of program funding opportunities (RFP's), online provider RFP submissions, multistage internal RFP reviews, and the collection of program metrics as defined during the RFP submission process. Additionally, a new scope of current services to allow for direct entry of service-level assessment metrics to be entered directly into the system. Board staff recommend to the Board of Directors to approve a renewal contract with WizeHive, Inc. for their cloud-hosted information management system for the term of March 1, 2023 through February 28, 2024 in the amount of \$22,050 and to approve the new scope of service from WizeHive, Inc. to allow for direct entry of service-level metrics in the amount of \$5,800.

2. Conditional Release Unit Funding

- Murtis Taylor Human Services System - \$306,769.75

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 because 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.

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

- Cleveland Community Police Commission (Fiscal Agent: Black Lives Matter) - \$75,000 (\$25,000 for Sponsorship & \$50,000 Pooled Funding for Mental Health Services)

Board staff recommend to the Board of Directors 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.

RESOLUTION NO. 23-02-03 – APPROVAL OF CONTRACT AMENDMENTS:

- Amendment to Resolution No. 22-07-02, State Opioid Response (SOR) 2.0 Carryover: Harm Reduction Pilot Project No Cost Term Extension
 - Ohio Department of Health (Kloxxado kits)
 - Ohio Department of Health (Naloxone kits)
 - Brave Technology Coop
 - AEK Illinois Supply Co. (Emergency Cabinet)
 - Area Wide Inc. Naloxone Vending Machines
 - Program Administration (TBD)

OhioMHAS has offered the Board one-time, SOR 2.0 Carryover funding, to be spent by September 29, 2022 when federal funding for SOR 2.0 ends. Funding must be expended according to SOR funding restrictions, to address Opioid or Stimulant Use disorders. Resolution No. 22-07-02 is being amended to extend the time period for this Harm Reduction Pilot Project based on a No Cost Extension from OhioMHAS.

Harm reduction resources will be purchased during the funding period, to be made available throughout the upcoming months. These include:

- Overdose reversal kits (Narcan [4 mg] and Kloxxado [8 mg])
- o Naloxone emergency cabinets to be placed in the community for rapid access and bystander rescue
- o Naloxone vending machines to make free kits available to the community as a preventive measure
- o Program administration/maintenance fees to ensure restocking and tracking of kits
- The Brave app, an alert system for individuals using substances, which enables persons to contact 911 in the event of a medical emergency
- Overdose sensors and buttons that can be placed in high incidence overdose areas that alert emergency services or bystander rescuers in the event of an overdose.

As many as 24,000 overdose reversal kits will be available and up to 100 individuals per day are expected to utilize the app once localized. This one-time funding will be used to make lifesaving harm reduction resources available in places identified as having high levels of overdoses such as medical offices, shelters, stores or other public areas. Board staff recommend to the Board of Directors to amend Resolution No. 22-07-02 to extend the time period of the OhioMHAS SOR 2.0 Carryover funding for the Harm Reduction Pilot Project until September 29, 2023.

- 2. Amendment to Resolution No. 22-11-05, State Opioid and Stimulant Response (SOS) Grant, Year 1, Increase in Funding \$2,709,527.95
 - 12 Step Life/Ethel Hardy House \$56,680
 - Ascent Powered by Sober Grid \$34,000
 - B. Riley Homes \$46,761
 - Briermost Foundation \$42,500
 - Griffin Homes Sober Living, Inc. \$42,500
 - I'm In Transition Ministries \$45,344
 - The MetroHealth System \$79,352
 - Mommy and Me, Too! \$42,500
 - NORA (Peer Support) \$42,500
 - NORA (Recovery Housing) \$77,935
 - Point of Freedom (Peer Support) \$61,929.95

- Recovery First-A Better Way \$48,178
- Thrive for Change \$29,757
- White Butterfly Peer Support (Woodrow) \$19,270
- Women of Hope \$40,200
- Woodrow Project (Peer Support) \$18,420.10
- Woodrow Project (Recovery Housing) \$39,959

OhioMHAS has received a biannual SOR 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 Medication Assisted Treatment (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 2.

OhioMHAS has received a No Cost Extension from SAMHSA, enabling the Department to expend its remaining SOR 2.0 funding until September 29, 2023.

o SOR is now called SOS Response.

OhioMHAS has awarded its remaining SOR 2.0 funding to ADAMHS Boards statewide to provide funding equivalent to each Board's original SOR 2.0 award. This amount represents the second installment of funding for the federal fiscal year ending September 29, 2023. The ADAMHS Board has partnered with the providers listed above to expand access to MAT and recovery support services to persons in Cuyahoga County with OUD and stimulant use disorders. The SOS programs provide direct access to MAT, recovery housing (including housing for women with minor children, people of color and the LGBTQ community), outreach, and peer support for persons struggling with OUD or stimulant disorders. Providers are required to report client-level data using the SAMHSA Government Performance Reporting Act (GPRA) Tool; data collection is monitored by the OhioMHAS evaluation contractor. Clients are interviewed at intake, and six months post intake. Board staff recommend to the Board of Directors to accept additional funding from OhioMHAS in the amount of \$767,786.05 and amend Resolution No. 22-11-05 to approve contract amendments with the providers listed above in the amounts above for their respective SOS programs for the term of September 30, 2022 through September 29, 2023.

- 3. Amendment to Resolution No. 22-11-08, Transportation Program
 - I'm In Transition Ministries No New Funding

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.

- 4. Amendment to Resolution No. 20-05-02, Cleveland Division of Police, Department of Justice, Bureau of Justice Assistance (BJA) Co-Responder Project Gap Funding \$120,000
 - FrontLine Service \$45,000
 - Murtis Taylor Human Services System \$75,000

Cleveland Police indicated through their data collection that more than half of the clients at St. Vincent Psychiatric Emergency Department are brought in by police.

o 97% of those who are brought in by police are from the Cleveland Division of Police.

A BJA study indicates that police spend up to 7% of their time responding to crisis calls. Crisis calls disproportionately consume much of an officer's time, and most are not a result of criminal behavior but an emotional crisis in the community. Across the country, police departments report that jails and prisons are the largest de facto mental health facilities in the country.

The City of Cleveland communicated to the ADAMHS Board that it will be using American Rescue Plan Act (ARPA) funding to continue and expand the Co-Responder program at the conclusion of the no cost extension on March 31, 2023.

- The proposed funding will need to go through the City of Cleveland's legal and legislative process to get a contract to the ADAMHS Board and may not be ready by March 31, 2023.
- In the event that a contract for the Co-Responder program will not be in place at the conclusion of the no cost extension, the ADAMHS Board will provide gap funding to FrontLine Service and MTHSS to allow the program to continue through June 30, 2023.

In September 2022, this Board approved a no cost extension through March 31, 2023 to allow the providers to spend down the remaining funds in the BJA grant. In May 2020, the ADAMHS Board approved contracts with FrontLine Service and MTHSS for the Co-Responder Program to divert people in crisis to the least restrictive alternative and linkage to services.

- o The Co-Responder Teams operate 40 hours per week, second shift.
- The Crisis Specialist is paired with a Crisis Intervention Team (CIT) Officer in a single car in order to respond to the calls.
- The Crisis Specialist, in collaboration with the CIT Officer engages and responds to the person's needs, provides assessment and triage to the least restrictive options in the community.
- The Co-Responder Teams provide follow-up on crisis calls from other officers within their assigned police district as well as engage high utilizers of service in order to decrease the need for public safety assistance.
- o Frontline Service is assigned to District 3. MTHSS is assigned to Districts 2 and 4.
- Crisis Specialists along with CIT Officers work collaboratively with other aspects of public safety such as Emergency Medical Services (EMS) and dispatch in order to reduce the high utilizers of service by providing ongoing monitoring and support.

Board staff recommend to the Board of Directors to amend Resolution No. 20-05-02, Cleveland Division of Police Co-Responder Project, to extend the term of the contracts with both FrontLine Service and MTHSS until June 30, 2023, and add funding to FrontLine Service in the amount of \$45,000 and MTHSS in the amount of \$75,000.

- 5. Amendment to Resolution No. 23-01-04, Community Collective Impact Model for Change (CCIM4C) 2.0: Addressing Social Determinants of Health in Minority and Underserved Communities Initiative
 - NAMI Greater Cleveland \$39,559

Social determinants of health (SDoH) affect a wide range of health risks and outcomes and contribute to health inequities across communities. Poor SDoH are linked to mental and behavioral health issues and impact SUD prevention and mental health promotion services across the lifespan. Considering the impact of SDoH when planning for prevention services can improve health outcomes and promote health equity. To provide support to behavioral health boards as they engage in community-based processes as they plan SUD prevention and mental health promotion services and programming, OhioMHAS, Ohio University's Voinovich School of Leadership and Public Service, the Pacific Institute for Research and Evaluation (PIRE), and other key partners are collaborating on the

implementation of the Community Collective Impact Model for Change 2.0: Addressing Social Determinants of Health in Minority and Underserved Communities Initiative. YouthMOVE is a national youth-led, youth-driven, chapter-based organization dedicated to improving services and systems that support positive growth and development by uniting the voices of individuals who have lived experience in various systems including mental health, juvenile justice, education, and child welfare. NAMI and YouthMOVE are connected at the state level to organize and coordinate state-wide youth initiatives and projects.

Ohio University has allocated funding to provide support to behavioral health boards as they engage in communitybased processes to plan SUD prevention and mental health promotion services and programming. The CCIM4C Initiative is funded in a phased approach. Current funding is for Phase 3. Two Co-directors are required to participate, one board staff and one community partner from Recovery Resources. Phase 2 of the initiative resulted in the creation of a Three-year Prevention Plan for Cuyahoga County. The goal is to improve social determinants of health for youth in minority and underserved communities by increasing capacity for youth engagement in behavioral health program development and improving access to behavioral health related prevention and wellness programs. For Phase 3, ADAMHS Board and Recovery Resources Co-directors will implement Year 1 of the plan which ends March 14, 2023. The objective for Year 1 is to plan and develop a youth-led advisory group in Cuyahoga County that will give underserved and minority youth a platform to provide voice on developing meaningful programs and improving access to services and resources. The ADAMHS Board selected NAMI Greater Cleveland to develop and implement a youthled advisory group (YouthMOVE Cuyahoga) and complete the marketing component of the project. NAMI Greater Cleveland will work with YouthMOVE Ohio to recruit, train and support disconnected youth with multi system involvement in Cuyahoga County as peer leaders and system advocates for the YouthMOVE Cuyahoga program. Board staff are recommending that the Board of Directors amend the existing Community Collective Impact Model for Change 2.0 agreement to identify NAMI Greater Cleveland as the provider for the youth-led advisory group and marketing component of the project and to enter into a contract with NAMI Greater Cleveland in the amount of \$39,559 for the term of January 1, 2022 through March 14, 2023.

Motion to approve the Consent Agenda (Resolution Nos. 23-02-01 through 23-02-03). MOTION: H. Snider / SECOND: B. Gohlstin / AYES: B. Addison, A. Bhardwaj, E. Cade, S. Galloway, B. Gohlstin, P. James-Stewart, K. Kern-Pilch, S. Killpack, S. Rosenbaum, H. Snider / NAYS: None / ABSTAIN: None / Motion passed.

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

10. CHIEF EXECUTIVE OFFICER'S REPORT

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

Governor's Proposed OhioMHAS Budget:

- Mr. Osiecki provided an update on House Bill (HB) 33: SFY2024-2025 Biennial Budget as it pertains to OhioMHAS line items, information about proposed language changes in Ohio Revised Code (ORC) 340 and 5119, and details about proposals in other parts of the budget that may have an impact on local mental health and addiction services.
- Every two years, the governor releases budget recommendations for the Ohio House and Senate to consider. By June 30, 2023, the General Assembly must present a budget bill to the governor to sign.
- The Governor's budget not only recommends funding, but also sets priorities.
- For OhioMHAS, workforce is a major priority in this budget. IN conjunction with federal funds already appropriated, OhioMHAS would invest \$663 million over the biennium to grow opportunities in the behavioral health workforce to increase career awareness and adequately recruit, retain, and support modern practice.
- Other priorities include:
 - Increasing access to outpatient treatment care;
 - Supporting a strategic research agenda to develop best practice strategies that result in improved treatment and recovery;
 - o Investing in 988 and other crisis supports; and the important role of prevention and early intervention.
- Additional highlights from the recommended budget include:
 - \$20 million for allocations to ADAMHS Boards for local priorities in prevention, early intervention and suicide prevention;

- \$20.5 million to improve community treatment and recovery supports for Ohioans living with severe mental illness, including expanding the Clubhouse model; and
- o \$16 million for forensic services to protect the needs of people with mental illness in the criminal justice system;
- Taking into account federal and General Revenue funds, the full funding recommendation for Fiscal Year 2024 for OhioMHAS is \$1.3 billion (or a 10.7% increase from FY 2023). Funding for FY 2025 is \$1.2 billion (or a 12.4% decrease from FY 2024).

DEI Update:

- In just the first two months of this year, the Board has seen significant progress in the DEI initiative.
- Mr. Osiecki thanked the Board and staff for providing responses to the DEI Priorities Survey that went out in January 2023 to help set the direction for the DEI initiative for Calendar Year 2023. The top priorities selected in the survey were:
 - o Identify marginalized groups and challenges with accessing the system;
 - o Establish DEI metrics to include in evaluating the effectiveness of providers and overall service areas;
 - Conduct annual, independent client and family feedback and satisfaction surveys.
- Mr. Osiecki highlighted the demographic charts representing the ADAMHS Board of Directors and staff. The Board is told that we have the most diverse staff and leadership in local government. The charts show that we have DEI principles as an established practice in hiring and leadership, and always have. Mr. Osiecki shared that he is personally proud of the diversity of the ADAMHS Board staff. These are race and gender demographics, but what is not shown on the charts is the depth of diversity of staff that have lived experience.
- The Board continues to update other internal documents and processes to prioritize DEI, most recently updating the Probationary Program Review form to track progress on DEI efforts at new providers or programs.
- The Board has made efforts to reach non-English speaking members of our community by translating information about client rights, ADAMHS Board general information, our Strategic Plan and DEI Plan brief summaries, as well as information on overdose and Naloxone, suicide and problem gambling into Spanish, Arabic, Chinese, Russian and Ukrainian. The External Affairs team is working on getting those posted online, and the gambling information has already been shared with local partners.
- During this time, the Board has also seen tremendous buy-in from our provider agencies on our DEI efforts:
 - At the January All-Provider Meeting, Board staff requested participation from the provider network on our project to review job descriptions to identify bias and improve equitable hiring. This intersects with our workforce efforts to build a diverse and fully staffed behavioral health network. The response was overwhelming 15 provider agencies volunteered and provided 79 job descriptions. The Board's DEI consultant is reviewing a representative sample and will provide a report that we will make available to all provider agencies.
- The Board has scheduled a series of online DEI trainings for February, March and April. The first one was held Tuesday, February 21, 2023, on the topic of microaggression, and had 114 participants, which included staff, a few Board members, and almost 70 staff members from provider agencies. These trainings are specifically for our staff, provider agency staff and the ADAMHS Board members.
- The Board's Client Rights staff has also been working with the Board's DEI consultant to develop specialized training for our network on the topic of client voice. That training will be announced later this year.
- On the topic of client voice, the Board solicited and received a proposal for the development of a client satisfaction survey in both English and Spanish. Board staff are reviewing the proposal and expect to bring this to the Board next month
- The Board's DEI consultant also met with the Human Resources staff to review recruiting and onboarding practices for the Board, which will help inform the workforce projects that are underway.
- This has all happened just since the first of the year, thus Board staff feel that confident through implantation efforts relative to the DEI plan.

MetroHealth Update

- Mr. Osiecki met with Dr. Airica Steed, President and Chief Executive Officer of The MetroHealth System, on Tuesday, February 14, 2023.

St. Vincent/Stella Maris Site Visit

- Mr. Osiecki, Ms. Tolbert, and Ms. Schaefer met with Stella Maris and St. Vincent/Sisters of Charity leadership to discuss a new partnership.

- Stella Maris plans to expand detoxification services on the Stella Maris campus.
- Residential and Recovery Housing beds (accepting Medication Assisted Treatment MMAT)) will be added on St. Vincent's campus. Partial Hospitalization (PHP), Intensive Outpatient (IOP) and MAT access will also be available on St. Vincent's campus.

Gund Foundation's Thriving Families and Social Justice Program

- Mr. Osiecki attended a conversation hosted by the Gund Foundation with Mr. John Burkhart, Program Director for the Public Welfare Foundation, who was visiting Cleveland last week to learn more about our local justice system and to understand if there might be ways the Public Welfare Foundation can help advance local priorities.
- Approximately 15 representatives from various County, City and local organizations participated in this event.
- There is an interest from the Public Welfare Foundation to invest in Cleveland.
- The Public Welfare Foundation is a national philanthropy based in Washington, D.C. that has a long and distinguished history in supporting efforts in both the adult and youth arenas to help make the justice system more just.

Staff Update

- Ms. Jessica Torres, Project Manager for the Opiate Data Analysis Sharing and Integration Initiative, which is a grant-funded position, has decided to resign from her position at the Board to obtain a more permanent position with the County.
- The Board has received a similar grant, so the Board will work to fill this vacant position. Funding will expire in September 2025

11. NEW BUSINESS

No new business was received.

12. FOLLOW-UP

No follow-up was received.

13. AUDIENCE INPUT

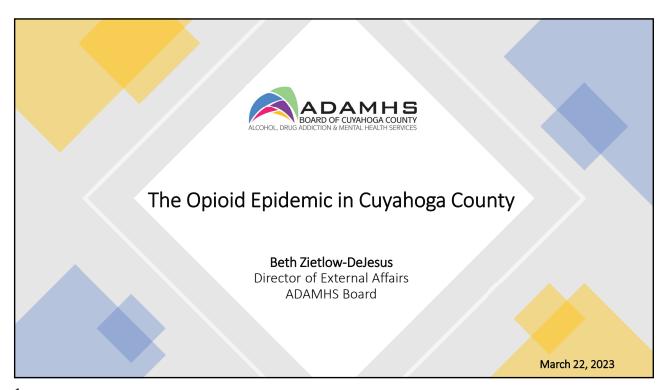
No audience input was received.

14. UPCOMING MARCH AND APRIL BOARD MEETINGS:

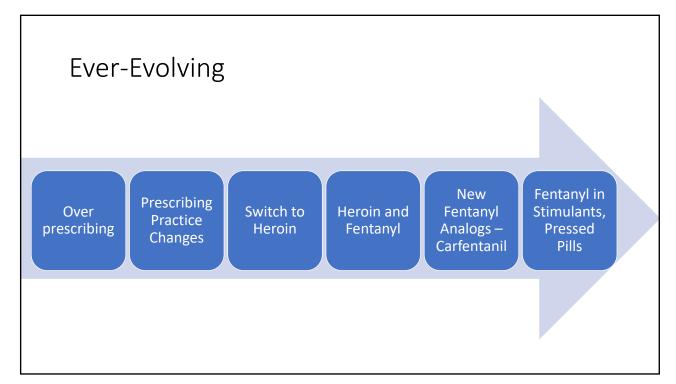
- Community Relations & Advocacy Committee Meeting: March 1, 2023
- Nominating Committee Meeting: March 8, 2023
- Planning & Oversight Committee Meeting: March 8, 2023
- Finance & Operations Committee Meeting: March 15, 2023
- General Meeting: March 22, 2023
- Faith-based Outreach Committee Meeting: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

Dr. Fowler noted that Board members and staff are invited to tour Front Steps Housing and Services at the conclusion of the meeting.

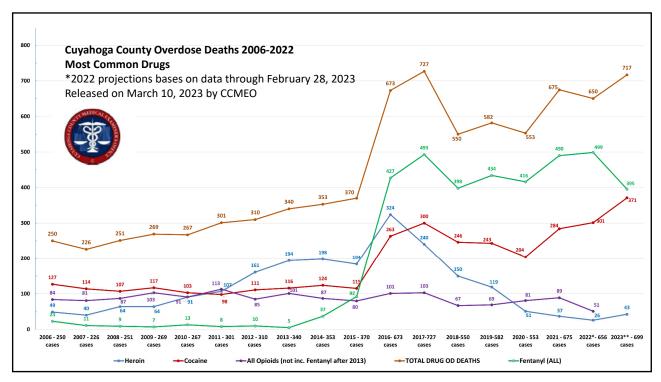
There being no furt	her business, the meeting adjourned at 5:46 p.m.
Submitted by:	Linda Lamp, Executive Assistant
Approved by:	J. Robert Fowler, Ph.D., Chairperson, ADAMHS Board of Cuyahoga County



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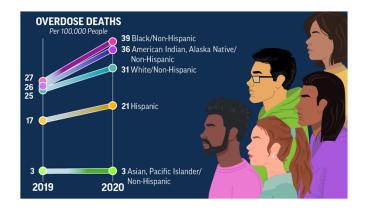


3

2021 Overdose Fatality Trends

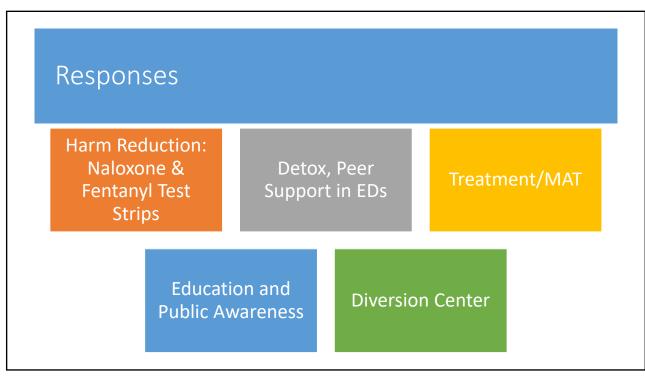
Drugs Contributing to Cause of Death	Total
Overdose Fatalities	675
Fentanyl	490 (73%)
Cocaine	281
cocaine and fentanyl	244 (87%)
Methamphetamine	91 (13%)
meth and fentanyl	70 (77%)

Emerging Trends



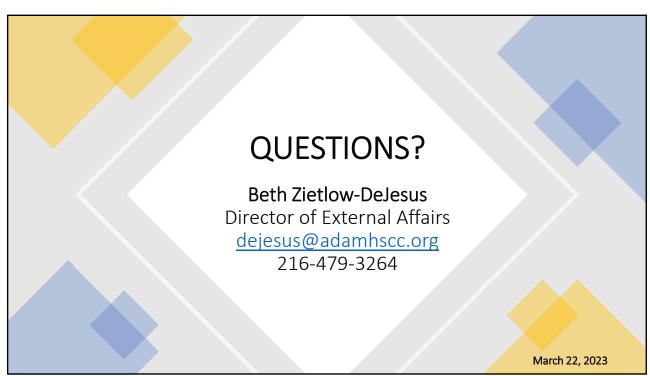
- Increase in African American fatalities related to cocaine and fentanyl mixtures since 2019 in Cuyahoga County, and the United States.
- Currently at 36%

5



6







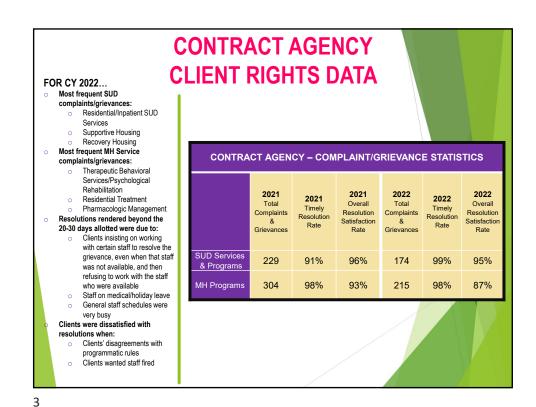
CLIENT RIGHTS REPORT CALENDAR YEAR 2022

BILL HEBBLE, MSW – CLIENT RIGHTS OFFICER II CHRISTINA BOHUSLAWSKY BROWN – CLIENT RIGHTS OFFICER II

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THIS REPORT CONTAINS <u>TWO</u> DIFFERENT SETS OF DATA:

- 1. CONTRACT AGENCY CLIENT RIGHTS DATA FROM CY2022
 - ▶ This data is aggregated from 67 community agencies which the ADAMHS Board has a core contract with – all contract agencies satisfied their reporting requirements.
 - Each contract agency is responsible for collecting and sharing this data with the ADAMHS Board.
 - ➤ The ADAMHS Board reviewed and consolidated each individual data set into one comprehensive report showcased in this document.
- 2. ADAMHS BOARD CLIENT RIGHTS DATA FROM CY2022
 - This data is tracked and logged by both ADAMHS Board Client Rights Officers.
 - ▶ Data includes inquiries, complaints, and grievances received by clients, the ADAMHS Board about Mental Health Agencies, SUD Services, and Adult Care Facilities (ACF).
 - Data is categorized by call type; nature of call, and resolution.



CONTRACT AGENCY CLIENT RIGHTS DATA Most frequently grieved Client Rights: SUBSTANTIATED VS. UNSUBSTANTIATED **GRIEVANCES** The right to be treated with consideration and respect SUBSTANTIATED UNSUBSTANTIATED for personal dignity, GRIEVANCES **GRIEVANCES** autonomy, privacy. SUD 17 70 The right to reasonable Services/Programs protection from physical, Certified MH sexual, or emotional abuse 9 42 Services and inhumane treatment. The right to be advised and the right to refuse observation by others and by techniques such as oneway vision mirrors, tape recorders, video recorders, television, movies, ALLEGATIONS OF ABUSE AND NEGLECT photographs or other audio OTAL ALLEGATION and visual technology. TOTAL 0 STANTIA

CONTRACT AGENCY CLIENT RIGHTS DATA

- For CY2022, we collected demographic data from contract agencies only if the agency had it. These numbers are not comprehensive, and only represent demographic data from 22 contract agencies.
- In an effort to uphold high standards of diversity, equity, and inclusion, the ADAMHS Board has requested that all contract agencies track this demographic data in CY2023

GRIEVANCES BY DEMOGRAPHIC DATA						
	SUD Services/Programs	Certified MH Services	Dual			
Race:						
African American/Black	119	35	18			
Caucasian/White	308	13	4			
American Indian/Native Hawaiian/Other	1	0	0			
Gender:						
Female	246	24	7			
Male	224	28	21			
Non-Binary	3	1	0			
Ethnicity:						
Non-Hispanic/Non- Latino/Non-Latinex	46	41	31			
Hispanic/Latino/Latinex	44	3	0			

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ADAMHS BOARD CLIENT RIGHTS DATA

- As in years past, clients continue to make up the highest volume of contacts.
- CY2022 indicated a significant increase in calls received from other entities such as law enforcement, correctional facilities, non-contracted agencies, judiciaries, nursing homes, etc.
 - Over the last few years, the Client Rights Department's relationships with all aspects of the social services continuum have grown and strengthened exponentially.
 - Agencies and entities who provide non-MH/SUD related services feel comfortable contacting the ADAMHS Board Client Rights Officers to request general MH/SUD information and ask for guidance and referrals in an effort to maintain continuity of care for our mutual clients.

WHO CONTACTED THE BOARD IN 2022?					
CLIENTS	1,249				
OTHER					
(L.E., NON-CONTRACT	E77				
AGENCIES, CCBDD,	577				
NURSING HOMES, ETC.)					
FAMILY/FRIENDS OF	502				
CLIENTS	302				
CONTRACT AGENCIES &	481				
ACFs	701				
HOSPITALS	64				

ADAMHS BOARD CLIENT RIGHTS DATA

- CY2022 resulted in overall fewer contacts and complaints/grievances than CY2021.
 - During the COVID19 pandemic, we experienced higher-than-average volumes of calls and complaints/grievances as both - clients and providers - were trying to understand and navigate the MH/SUD continuums within pandemic conditions and restraints.
 - In CY2021,these numbers remained high as the community grappled with a "new normal".
 - By CY2022, the "new normal" became standard, and these numbers began trending fewer.

CONTACT VOLUME AND FILED COMPLAINT/GRIEVANCE TOTALS					
	Total Contacts Made to Board	Total Complaints/Grievances Filed with Board			
CY2021	2,957	1,044			
CY2022	2,873	828			

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ADAMHS BOARD CLIENT RIGHTS DATA

Very few formal grievances filed in 2022

- ADAMHS Board CROs put a lot of time and effort into resolving clients' concerns at the <u>complaint level</u> which prevented a lot of formal grievances from being filed.
- While clients certainly have a right to file complaints & grievances against provider agencies with the ADAMHS Board, the ADAMHS Board CROs have <u>always</u> encouraged clients to first address their concerns directly with the *agency* CROs. We do this because, logistically, it simply makes sense, and we have found that clients are often amenable to addressing their concerns first with the agency, which is very efficient.

SUBSTANTIATED VS. UNSUBSTANTIATED GRIEVANCES FILED WITH BOARD					
	SUBSTANTIATED GRIEVANCES	UNSUBSTANTIATED GRIEVANCES			
SUD Service/Program	5	1			
Certified MH Service	2	6			
Housing	7	6			

Most frequently grieved Client Rights:

- The right to be treated with consideration & respect for personal dignity, autonomy, & privacy.
- The right to participate in any appropriate & available service that is consistent with an individual service plan, regardless of the refusal of any other service.
- The right to reasonable protection from physical, sexual, or emotional abuse & inhumane treatment.

ADAMHS BOARD CLIENT RIGHTS DATA

- This data is included in the overall totals from the previous slides but has been extracted here to showcase Housing and Adult Care Facility (ACF) statistics.
 - Many Housing/ACF complaints received in CY2022 were related to clients' concerns about housing vouchers and voucher programs.
 - ADAMHS Board CROs worked cooperatively with clients, ACF operators, and voucher administrators to find answers to the questions that resulted in the complaint, and ultimately resolve the clients' concerns.

HOUSING and ACF COMPLAINT TOTAL					
	<u>2021</u>	2022			
TOTAL HOUSING- RELATED CALLS	861	714			
TOTAL CALLS RESULTING IN FORMAL COMPLAINT	379	292			

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ADAMHS BOARD CLIENT RIGHTS DATA

- The ADAMHS Board Client Rights Officers began collecting data on client ethnicity at the start of CY2022.
- Data on client preferred pronouns started being collected at the start of the second quarter of CY2022.
- When asked about ethnicity and preferred pronouns, clients are not obligated or required to provide a response and are simply tallied in the "Unknown/Other" category.

WHO WE SERVED IN CY2022						
	CLIENTS SERVED IN- PERSON, BY PHONE, & E-MAIL					
Ethnicity:						
African American/Black	981					
Caucasian/White	741					
Hispanic/Latino	29					
Asian	3					
Unknown/Other	1,119					
Preferred Pronouns:						
He/His	921					
She/Her	689					
They/Them	19					
Other/Unknown	539					

ACCOMPLISHMENTS OF 2022...

- We maintained regular contact with our provider agency CROs by hosting:
 - Monthly Virtual CRO Meetings:
 - We covered a lot of information at these meetings throughout the year and invited presenters to provide materials about things relevant to our colleagues and the work they do:
 - O Housing Resources; CARR Application process; RAP Program
 - Cuyahoga County Court of Common Please MH/DD Specialty Docket
 - HIPAA/42CFR overview
 - CRO Annual Report overview and instructions
 - Agency CROs showcased upcoming events, new programs, changes to programs, etc.
 - Quarterly Virtual CRO Orientations (to train new provider agency CROs!!):
 - January 2022, April 2022, August 2022, & October 2022
- We spent a lot of time in the community with our clients:
 - Our Monthly Client Lunch-n-Learn Series was held in a new location each month so that clients could learn about the various resources and programs in Cuyahoga County:
 - Future Directions
 - Murtis Taylor (2 different locations)
 - o EDEN Inc. (2 different locations)
 - Summer and Winter Client Outings:
 - We took a road trip to Kemba LIVE! in Columbus to attend Ohio's 2022 Recovery Celebration hosted by OACBHA. Clients enjoyed a festival-style party which included food, prizes, and live entertainment!
 - We hosted our Annual Client Holiday Event at the Cleveland Museum of Art. Clients attended a delicious luncheon and had an opportunity to tour the museum.

We were very active in various advisory groups including the Cuyahoga County Advisory Committee for Persons with Disabilities as well as the Eliminating Structural Racism Advisory Committee.

In order to maintain and uphold high diversity, equity, and inclusion standards, we began tracking various demographic information of the community members we serve on a day-to-day basis. This data will help us better see and understand tendencies and trends.

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2022 ADAMHS BOARD CLIENT RIGHTS DATA													
	January	February	March	April	May	June	July	August	September	October	November	December	YTD Tota
# of Calls	212	174	282	226	229	218	233	291	187	227	227	230	2736
# Of Visits	0	1	3	3	4	3	5	2	5	4	1	5	36
# of Emails	9	8	16	5	11	3	5	7	6	5	6	20	101
Total # of Contacts:	221	183	301	234	244	224	243	300	198	236	234	255	2873
Total # of Repeat Contacts:	28	16	36	18	26	23	29	29	18	28	22	22	
Total # of MUIs Received:	185	58	52	40	60	52	74	45	38	30	57	34	725
Complaints by Type:													
SUD Prevention:	0	0	0	0	0	0	0	0	0	0	0	0	
SUD Treatment:	5	2	14	5	12	7	4	11	4	9	2	7	
MH-Psyc:	7	2	18	11	9	5	18	10	1	8	5	12	
MH-CPST Services:	6	3	8	6	9	6	2	12	4	1	1	1	
Housing:	21	14	32	28	16	18	30	43	17	26	18	29	1
Crisis Intervention:	0	0	0	0	0	0	1	1	0	0	0	0	
Other:	10	20	31	16	16	19	37	22	27	16	15	20	1
Total # of Complaints:	49	41	103	66	62	55	92	99	53	60	41	69	790
	49	41	103	bb	62	55	92	99	53	60	41	69	/90
Grievances by Type: SUD Prevention:	0	0	0			0			0	0	0	0	
				0	0	0	0	0					
SUD Treatment:	0	0	1	0	4	0	0	0	0	1	0	1	-
MH-Psyc:	0	0	0	0	1	1	1	0	0	0	0	1	
MH-CPST Services:	0	0	1	0	0	0	0	0	3	0	0	0	
Housing:	3	0	3	0	0	0	0	1	2	3	0	1	
Crisis Intervention:	0	0	0	0	0	0	0	0	0	0	0	0	
Other:	0	1	1	1	1	0	1	2	2	1	0	0	
Total # of Grievances:	3	1	6	1	6	1	2	3	7	5	0	3	38
General Inquaries by Type:													
SUD Prevention:	0	0	1	1	0	0	0	0	0	0	0	0	
SUD Treatment:	26	20	17	29	17	10	17	12	16	14	20	16	
MH-Psyc:	30	29	46	33	33	24	17	25	14	11	32	28	
MH-CPST Services:	9	3	17	9	11	6	4	9	3	9	6	10	
Housing:	33	31	32	38	30	49	33	45	23	37	27	44	
Crisis Intervention:	0	0	0	3	4	3	13	8	0	6	9	0	
CCBDD:	0	0	0	0	0	0	0	0	0	0	0	0	
DIP:	0	0	0	0	0	0	1	0	0	0	1	1	
Other:	73	53	76	52	82	74	63	89	77	94	93	86	
Total # of Inquaries:	171	136	189	165	177	166	148	188	133	171	188	185	2017
Additional Statistics:													
Client Ethnicities:													
African American	76	41	116	94	85	77	86	106	57	79	68	96	
Caucasian	30	27	85	62	72	51	86	94	54	49	58	73	
Hispanic/Latino	3	1	1	3	1	0	2	3	1	8	4	2	
Asian	0	0	0	0	1	0	1	1	0	0	0	0	
Unknown and N/A	112	114	99	75	85	96	68	96	86	100	104	84	
Client Pronouns:	***	214				- 20			30	200	204	34	_
He/Him	N/A	N/A	N/A	98	89	85	102	137	90	83	99	138	
She/Her	N/A	N/A	N/A	75	75	65	97	98	56	82	69	72	!
They/Them	N/A	N/A	N/A	1	9	2	0	2	1	4	0	0	1
Unknown and N/A	N/A N/A	N/A N/A	N/A N/A	60	71	72	44	63	51	67	66	45	-

GOALS FOR 2023...

- Use the ADAMHS Board 5-Year Strategic Plan in combination with the diversity, equity, and inclusion initiative to advocate for client access and client choice.
- Continue broadening client's awareness and understanding of various community resources.
- o Expand the diversity of advocacy opportunities for clients in the community.

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IF YOU HAVE ANY QUESTIONS OR NEED ADDITIONAL INFORMATION, PLEASE DON'T HESITATE TO CONTACT

BILL HEBBLE, MSW CLIENT RIGHTS OFFICER II HEBBLE@ADAMHSCC.ORG 216-241-3400 X825

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

RESOLUTION NO. 23-03-01

APPROVAL OF 2023 ADVOCACY ACTION AGENDA

WHEREAS, the ADAMHS Board of Cuyahoga County develops and approves an Advocacy Action Agenda each year to focus its efforts and develop messages to legislators, state agencies, policy makers, clients, families, providers and the general public to advance important behavioral health issues; and,

WHEREAS, at the beginning of each year, the prior year's Advocacy Action Agenda is reviewed by the Community Relations and Advocacy Committee to determine success, a new agenda is set and recommended to the full Board by the Committee for the current year; and,

WHEREAS, the Advocacy Action Agenda for 2023 was developed with the over-arching goal of promoting recovery of individuals living with mental illness and addictions by adopting and acting on the six 2021-2025 Strategic Plan Goals, which align with the Recovery Oriented System of Care principles:

- 1. Strengthening Service Delivery System
- 2. Measuring Impact
- 3. Maximizing Available Funding
- 4. Maintaining a High-Performing Organization
- 5. Strengthening Behavioral Health Workforce
- 6. Sharing Information; and,

WHEREAS, Advocacy Action Agenda takes into action the steps of the Diversity, Equity and Inclusion (DEI) Strategic Implementation Plan, which is designed to overlay the bullets above through the lens of DEI; and,

WHEREAS, the Advocacy Action Agenda is in addition to the advocacy and collaboration that the Board provides on a daily basis through its work of ensuring that mental health, addiction treatment and prevention and recovery services and supports are available to help children and adults reach and sustain recovery; and,

WHEREAS, adoption and implementation of the 2023 Advocacy Action Agenda will help facilitate the implementation of the Recovery Oriented System of Care by focusing Board efforts, activities, decisions and funding to advance recovery issues and initiatives.

NOW, THEREFORE, BE IT RESOLVED:

 The ADAMHS Board of Directors ado 	pts the 2023 Advocacy	Action Agenda.
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2. The ADAMHS Board of Directors authorizes the Chief Executive Officer to distribute the 2023 Advocacy Action Agenda to the community.

On the motion of	, seconded by	, the foregoing
resolution was adopted.		

NAYS:	General Meeting Packet
1A I U.	Dogo 21

AYES:

ABSTAIN:		
DATE ADOPTED:		



Agenda Process Sheet Date: March 22, 2023

■ Community Relations & Advocacy Committee□ Planning & Oversight Committee□ Committee of the Whole		□ Faith-Based Outreach Committee□ Finance & Operations Committee■ General Meeting	
Topic:	Acceptance of 2023 Advocacy Action	on Agenda	
Contractual Parties:	N/A		
Term:	March 31 through December 31, 20	23	
Funding Sources:	ADAMHS Board Funding if Needed		
Amount:	N/A		
□ New Program ■Co	ntinuing Program □Expanding Pro	ogram ■Other: Advocacy Action Agenda	

Service Description:

• The Advocacy Action Agenda is designed to inform the Board, community and system providers of the advocacy goals for each year.

Background Information:

- The ADAMHS Board of Cuyahoga County develops and approves an Advocacy Action Agenda each year
 to develop messages to legislators, state agencies, policy makers, clients, families, providers and the
 general public to advance important behavioral health issues.
- At the beginning of each year, the prior year's Advocacy Action Agenda is reviewed to determine success and a new agenda is set for the current year.
- The 2022 Advocacy Action Agenda was developed with the overarching goal of promoting recovery of individuals living with mental illness and substance use disorders by adopting and acting on the six 2021-2025 Strategic Plan Goals, which align with the Recovery Oriented System of Care principles:
 - 1. Strengthening Service Delivery System
 - 2. Measuring Impact
 - 3. Maximizing Available Funding
 - 4. Maintaining a High-Performing Organization
 - 5. Strengthening Behavioral Health Workforce
 - 6. Sharing Information
- The 2023 Advocacy Action Agenda was developed with the same overarching goal as above and also
 takes into action the steps of the Diversity, Equity and Inclusion (DEI) Strategic Implementation Plan,
 which is designed to overlay the bullets above through the lens of DEI.

• The Advocacy Action Agenda is in addition to the advocacy and collaboration that the Board provides on a daily basis through its work of ensuring that mental health, addiction treatment and prevention and recovery services and supports are available to help children and adults reach and sustain recovery.

Number of Individuals to be Served:

 Nearly 7,500 clients receiving Board funded support and treatment services, agencies providing services, as well as the entire population of Cuyahoga County.

Funding Use:

As needed from ADAMHS Board funding.

Client & System Impact:

Adopting and implementing an Advocacy Action Agenda helps to better serve clients and improve the
overall Cuyahoga County mental health and addiction recovery support system by focusing Board efforts,
activities, decisions and funding to advance important behavioral health issues and initiatives.

Metrics (How will goals be measured)	Yearly review of Advocacy Agenda items to determine if items have been completed, completed and ongoing, or ongoing into the next year.
Evaluation/ Outcome Data (Actual results from program)	 See CY22 Advocacy Action Agenda Review of the twelve action items: 1 was Completed 11 were Completed & Ongoing

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

- Acceptance of 2023 Advocacy Action Agenda.
- Approved by the Community Relations & Advocacy Committee on March 1, 2023.

Stay Informed About Advocacy Efforts

The Alcohol, Drug Addiction and Mental Health Services (ADAMHS) Board of Cuyahoga County offers Cuyahoga County residents an opportunity to stay informed and become involved as advocates for mental health and alcohol and other substance use disorder issues. Clients, family members, providers and the public may request placement on the ADAMHS Board's email distribution list.

Being on our distribution list allows you to stay informed by receiving the latest news and action alerts about legislation and other issues impacting mental health and alcohol and other substance use issues in Cuyahoga County, the state of Ohio and the United States.

To have your name placed on our email distribution list, or to obtain more information about the Advocacy Action Agenda, contact:

Beth Zietlow-DeJesus, Director of External Affairs dejesus@adamhscc.org 216-241-3400, ext. 812

Find client and family information, service providers, facts about mental health and alcohol and other substance use disorders, news and legislation, Board publications and general information about the ADAMHS Board on the website: www.adamhscc.org. Be sure to follow us on Social Media (Facebook, Twitter and Instagram) @ADAMHSBoardCC.



J. Robert Fowler, Ph.D. Board Chair Scott S. Osiecki Chief Executive Officer



2023 Advocacy Action Agenda



Art in this booklet was created by Cynthia S.

Overarching Advocacy Objectives for 2023:

The Alcohol, Drug Addiction and Mental Health Services (ADAMHS) Board of Cuyahoga County has developed this *Advocacy Action Agenda* to guide its advocacy efforts for 2023. This agenda was developed with the overarching goal of promoting recovery of individuals living with mental illness and substance use disorders by adopting and acting on the six 2021-2025 Strategic Plan Goals, which align with the Recovery Oriented System of Care principles and are overlaid in the Diversity, Equity and Inclusion Strategic Implementation Plan:

- 1. Strengthening Service Delivery System.
- 2. Measuring Impact.
- 3. Maximizing Available Funding.
- 4. Maintaining a High-Performing Organization.
- 5. Strengthening Behavioral Health Workforce.
- 6. Sharing Information.

The ADAMHS Board uses the Advocacy Action Agenda to develop messages to legislators, state agencies, policy makers, clients, families, providers and the general public to advance important behavioral health issues.

Goals:

- NEW Support OhioMHAS and OACBHA's State Fiscal Year 2024-2025 Budget Recommendations.
- NEW Advocate for Problem Gambling Awareness related to online sports betting and suicide prevention.
- NEW Support efforts for the development of a behavioral health crisis center with local and state partners.
- NEW Advocate with providers, partners and OhioMHAS for increased Medicaid rates.
- NEW Ensure systemwide education and awareness of the Diversity, Equity and Inclusion Initiative.

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DRAFT

- Educate all stakeholders about 988, the new number for the national suicide prevention LifeLine.
- Increase community-based and grassroots Suicide
 Prevention Education and expand Suicide Prevention
 coalition membership.
- Support OACBHA's efforts in the modernization of Ohio Revised Code 340.
- Advocate for data sharing with state and local agencies.
- Collaborate with OhioMHAS and OACBHA to expand access to a core safety net of crisis services.
- Support co-responder and care response team projects.



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



Woo Jun, Director of Risk Management March 2023

1

CY2023 New Programs

Provider -	Program •
Birthing Beautiful Communities	Our Wellness Network
	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 Assocation	Crisis Intervention and Harm Reduction Services
Sister of Charity Health System	Crisis and Recovery Services



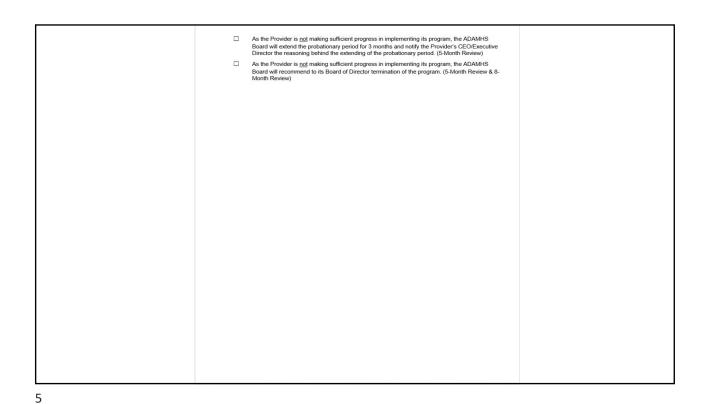
Probationary Period Policy

- □ Summary of the Probationary Policy
 - 6-month probation allows the ADAMHS Board to ensure success of new programs by more frequent monitoring and give technical assistance
 - Remove probationary status
 - Extend probationary period
 - Recommend to terminate the program



3

	Probationary Period Review for New Programs		Click or tap here to enter text.			
Provider Name: Click or tap here to enter text. Program Name: Click or tap here to enter text.		8.	 The Provider is submitting accurate and timely invoices or claims in GOSH. (Finance to provide feedback separately) 			
□ 2-Month Review □ 5-Month Review □ 8-Month Review (if probation is extended)			□ Agree □ Disagree			
1.	The Provider has not deviated from its intended scope in implementing this program. (i.e., changes in		If you 'Disagree' with this statement, please provide an explanation.			
	program services, location, etc.) □ Agree □ Disagree		Click or tap here to enter text.			
		9	The Provider is making progress in program implementation as determined by the metrics. (i.e., number			
	If you 'Disagree' with this statement, please provide an explanation. Click or tap here to enter text.	0.	of clients, etc.)			
2.	The Provider has made progress in hiring staff or has staff in place to implement the program.		☐ Agree ☐ Disagree			
2.	☐ Agree ☐ Disagree		If you 'Disagree" with this statement, please provide an explanation.			
	If you 'Disagree" with this statement, please provide an explanation.		Click or tap here to enter text.			
	Click or tap here to enter text.	10.	The Provider is implementing this program with a strong commitment to diversity, equity, and inclusion.			
3.	The Provider submits timely program reports. (Compliance to provide feedback separately)		(i.e., serving diverse clients, employing a diverse workforce, DEI training, etc.)			
	□ Agree □ Disagree		☐ Agree ☐ Disagree			
	If you 'Disagree' with this statement, please provide an explanation.		If you 'Disagree" with this statement, please provide an explanation.			
	Click or tap here to enter text.		Click or tap here to enter text.			
4.	The Provider attends all meetings related to this program.	11.	Overall, the Provider is making good progress in implementing the program.			
	☐ Agree ☐ Disagree		☐ Agree ☐ Disagree			
	If you 'Disagree" with this statement, please provide an explanation.		If you 'Disagree" with this statement, please provide an explanation.			
	Click or tap here to enter text.	12.	Click or tap here to enter text. Document any technical assistance given, if applicable. (Please be specific as possible)			
5.	The Provider communicates all relevant material issues in a timely manner regarding the program.	12.	Click or tap here to enter text.			
	☐ Agree ☐ Disagree	13	Corrective Action Plan (CAP), if applicable. (Please be specific as possible)			
	If you 'Disagree" with this statement, please provide an explanation.	15.	Click or tap here to enter text.			
	Click or tap here to enter text.		Due Date of CAP: Click or tap to enter a date.			
6.	The Provider does not have any apparent administrative irregularities. (i.e., difficult approval process,	14.	The ADAMHS Board's recommendation is the following:			
	many changes in a short period of time, move office all of a sudden, high turnover of non-program staff, etc.) (Compliance to provide feedback separately)		☐ As the Provider is making sufficient progress in implementing its program, the ADAMHS Board			
	Agree Disagree		will continue to monitor its progress. (2-Month Review)			
	If you 'Disagree" with this statement, please provide an explanation.		☐ As the Provider is <u>not</u> making sufficient progress in implementing its program, the ADAMHS			
	Click or tap here to enter text.		Board will notify the Provider's CEO/Executive Director regarding the areas the program needs improvement. (2-Month Review)			
7.	The Provider does not have any conflict of interest that became apparent since the RFP process.		□ As the Provider is making sufficient progress in implementing its program, the ADAMHS Board			
	□ Agree □ Disagree		will remove the probationary status. (5-Month Review & 8-Month Review)			
	If you 'Disagree" with this statement, please provide an explanation.					
	ii you bibugioo marano statement, picase provide an explanation.					



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



Diversity, Equity, and Inclusion (DEI)

The Provider is implementing this program with a strong commitmen
o 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



7

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 Assocation	Crisis Intervention and Harm Reduction Services	Sufficient Progress
Sister of Charity Health System	Crisis and Recovery Services	Sufficient Progress



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



C

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



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



11

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







POLICY STATEMENT RENEWAL

1st of 2 Readings – March 22, 2023

 GUIDELINES FOR DETOXIFICATION SERVICES FUNDED WITH NON-MEDICAID DOLLARS

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-Medicaid 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-Medicaid 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.

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

staff.

I. 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:
 - 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.

Reference: Ohio Revised Code 340.033

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

J. Robert Fowler, Ph.D. Rev. Benjamin F.	Gohlstin, Sr. Scott S. Osiecki
ADAMHS Board Chair	ADAMHS Board Chief Executive Officer
<mark>April 26, 2023</mark> 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.	Scott S. Osiecki
ADAMHS Board Chair	ADAMHS Board Chief Executive Officer
April 26, 2023	April 2026
Approval Date	Review Date



NEW POLICY STATEMENT REVIEW

1st of 2 Readings – March 22, 2023

SUBRECIPIENT MONITORING FOR FEDERAL GRANTS POLICY

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

<u>Subrecipient vs. Contractor</u>: 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.

<u>Pre-award Risk Assessment of a Subrecipient</u>: 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:
 - o 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);

Supersedes and retires: Not Applicable

- 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.

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



CONSENT AGENDA

Resolution Nos. 23-03-02 through No. 23-03-03

- RESOLUTION NO. 23-03-02
 ACCEPTING THE REPORT OF THE C.E.O. ON EXPENDITURES AND VOUCHERS FOR PAYMENT DURING JANUARY 2023
- RESOLUTION NO. 23-03-03
 APPROVAL AND RATIFICATION OF CONTRACTS

(As listed on the General Meeting Agenda)

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

RESOLUTION NO. 23-03-02

ACCEPTING THE REPORT OF THE CHIEF EXECUTIVE OFFICER ON EXPENDITURES AND VOUCHERS PROCESSED FOR PAYMENT DURING JANUARY 2023

WHEREAS, the Alcohol, Drug Addiction and Mental Health Services Board of Cuyahoga County (ADAMHS Board) in Resolution No. 22-11-07 appropriated funds for ADAMHS Board operations on a calendar year cycle; and,

WHEREAS, the ADAMHS Board has authorized the Chief Executive Officer to disburse funds for the purpose specified in the appropriation; and,

WHEREAS, the Chief Executive Officer certified that the vouchers on the attached list which were submitted to the County Fiscal Office for payment during January 2023 are in conformance with the Board appropriations for CY2023.

NOW, THEREFORE, BE IT RESOLVED THAT:

- 1. The report of the Chief Executive Officer be accepted and recorded in the minutes.
- 2. The Chief Executive Officer acted within the authority of the Board Appropriation Resolution in processing the subject vouchers.

On the motion of foregoing resolution was adopted.	, seconded by	, the
AYES:		
NAYS:		
ABSTAIN:		
DATE ADOPTED:		

Alcohol, Drug Addiction & Mental Health Services Board of Cuyahoga County Administrative Budget YTD

January 2023 YTD

		2023 Budget	•	Janaury Actual YTD		Remaining Balance	% of Budget
ADMINISTRATIVE EXPENSES							
SALARIES DECLI AR	Φ	4 000 540 00	Φ	455 777 00	Φ	4 007 704 00	00/
SALARIES - REGULAR	\$	1,963,512.00		155,777.80	\$	1,807,734.20	8%
SALARIES - PART-TIME	\$	20,000.00	\$		\$	20,000.00	0%
SALARIES - UNION	\$	2,238,334.00		168,756.08	\$	2,069,577.92	8%
Total SALARIES	\$	4,221,846.00	\$	324,533.88	\$	3,897,312.12	8%
FRINGE BENEFITS							
MEDICARE	\$	61,217.00	\$	4,516.69	\$	56,700.31	7%
RETIRE-OPERS - REGULAR	\$	612,168.00	\$	40,256.60	\$	571,911.40	7%
HOSPITALIZATION	\$	832,000.00	\$	66,333.33	\$	765,666.67	8%
LIFE INSURANCE	\$	-	\$	20.39	\$	(20.39)	
HEALTH BENEFIT ALLOWANCE	\$	-	\$	86.00	\$	(86.00)	
Total FRINGE BENEFITS	\$	1,505,385.00	\$	111,213.01	\$	1,394,171.99	7%
COMMODITIES				•			
OFFICE SUPPLIES	\$	17,500.00	\$	7.25	\$	17,492.75	0%
COPIER SUPPLIES	\$	20,000.00		16.00	\$	19,984.00	0%
FOOD SUPPLIES	\$	12,500.00		217.49	\$	12,282.51	2%
HOUSEKEEPING SUPPLIES	\$ \$	5,000.00	\$	217.49	φ \$	5,000.00	0%
		•		-		,	
COMPUTER SUPPLIES	\$	20,000.00	\$	0.045.40	\$	20,000.00	0%
ELECTRICITY	\$	72,500.00	\$	9,015.16	\$	63,484.84	12%
Total COMMODITIES	\$	147,500.00	\$	9,255.90	\$	138,244.10	6%
CONTRACTS & PROFESSIONAL	•	450 000 00	•	00 5 45 00	•	000 150 11	4.50/
LS/RENT - BUILDING	\$	450,000.00	\$	69,547.86	\$	380,452.14	15%
TUITION REIMBURSEMENT	\$	7,000.00	\$	-	\$	7,000.00	0%
CONSULTANT SERVICES	\$	414,000.00	\$	22,744.92	\$	391,255.08	5%
ASGN COUN - PSYCHOLOGICAL	\$	110,000.00	\$	15,425.00	\$	94,575.00	14%
RSK MGMT - LIABILITY	\$	100,000.00	\$	-	\$	100,000.00	0%
CONTRACTUAL SERVICES	\$	252,000.00	\$	57,872.44	\$	194,127.56	23%
MAINTENANCE/REPAIR SERVICES	\$	39,700.00	\$	252.03	\$	39,447.97	1%
Total CONTRACTS & PROFESSIONAL	\$	1,372,700.00	\$	165,842.25	\$	1,206,857.75	12%
EQUIPMENT EXPENSE							
NON-CAP EQ - IT SOFTWARE	\$	50,000.00	\$	9,410.92	\$	40,589.08	19%
LEASE/RENTAL FEES	\$	12,000.00	\$	1,354.47	\$	10,645.53	11%
LS/RENT - EQUIPMENT	\$	40,000.00	\$	1,173.30	\$	38,826.70	3%
EQUIPMENT PURCHASE	\$	78,000.00	\$	4,582.28	\$	73,417.72	6%
Total EQUIPMENT EXPENSE	\$	180,000.00		16,520.97		163,479.03	9%
OTHER OPERATING	Ψ	100,000.00	Ψ	10,320.37	Ψ	103,479.03	3 /0
TRAINING/CONFERENCES	\$	12,500.00	Φ		Ф	12,500.00	0%
				-	\$		
MEETINGS	\$	3,000.00	\$	4 455 00	\$	3,000.00	0% 7 %
MEMBERSHIPS/LICENSES	\$	15,500.00	\$	1,155.00	\$	14,345.00	7%
MILEAGE/PARKING	\$	30,000.00	\$	846.57	\$	29,153.43	3%
PUBLICATIONS/SUBSCRIPTIONS	\$	6,000.00	\$	-	\$	6,000.00	0%
ADVERTISING	\$	33,800.00	\$	-	\$	33,800.00	0%
DEPARTMENTAL PARKING	\$	4,500.00	\$	2,260.00	\$	2,240.00	50%
POSTAGE/MAIL SERVICES	\$	14,000.00	\$	-	\$	14,000.00	0%
NON-COUNTY PRINTING	\$	5,000.00	\$	32.00	\$	4,968.00	1%
INDIRECT COSTS	\$	337,483.00	\$	-	\$	337,483.00	0%
NON-CONTRACTUAL SERVICES	\$	1,200.00	\$	450.00	\$	750.00	38%
TELEPHONE	\$	33,000.00	\$	4,654.50	\$	28,345.50	14%
TELE - MOBILITY	\$	12,000.00	\$	923.09	\$	11,076.91	8%
DATA COMMUNICATIONS	\$	25,000.00	\$	2,036.00	\$	22,964.00	8%
FISCAL USE ONLY MISC EXPENSE	\$	120,000.00	\$	15,364.95	\$	104,635.05	13%
Total OTHER OPERATING	\$	652,983.00	\$	27,722.11	\$	625,260.89	4%
TOTAL OF ENATING	Ψ	002,300.00	Ψ	21,122.11	Ψ	020,200.09	7 /0
Total ADMINISTRATIVE EXPENSES	\$	8,080,414.00	\$	655,088.12	\$	7,425,325.88	8%

BOARD VOUCHER REPORT 1/1/2023 THROUGH 1/31/2023

<u>Description</u> <u>Vendor Name</u>		' <u>-</u>	Amount
OFFICE SUPPLIES	W B MASON CO INC	\$	7.25
COPIER SUPPLIES	DEX IMAGING LLC	\$	7.00
COPIER SUPPLIES	DEX IMAGING LLC	\$	9.00
FOOD SUPPLIES	DAVE'S SUPERMARKET INC	\$	64.99
FOOD SUPPLIES	QUENCH USA INC	\$	119.90
FOOD SUPPLIES	DAVE'S SUPERMARKET INC	\$	32.60
ELECTRICITY	UNITED TWENTY FIFTH BLDG	\$	4,911.64
ELECTRICITY	UNITED TWENTY FIFTH BLDG	\$	4,103.52
Con	nmodities	\$	9,255.90
LS/RENT - BUILDING	UNITED TWENTY FIFTH BLDG	\$	34,773.93
LS/RENT - BUILDING	UNITED TWENTY FIFTH BLDG	\$	34,773.93
CONSULTANT SERVICES	LESLIE M KOBLENTZ	\$	2,940.00
CONSULTANT SERVICES	LESLIE M KOBLENTZ	\$	2,940.00
CONSULTANT SERVICES	LESLIE M KOBLENTZ	\$	2,940.00
CONSULTANT SERVICES	LESLIE M KOBLENTZ	\$	2,940.00
CONSULTANT SERVICES	HAYNES KESSLER MYERS	\$	2,164.92
CONSULTANT SERVICES	LESLIE M KOBLENTZ	\$	2,940.00
CONSULTANT SERVICES	LESLIE M KOBLENTZ	\$	2,940.00
CONSULTANT SERVICES	LESLIE M KOBLENTZ	\$	2,940.00
ASGN COUN - PSYCHOLOGICAL	STEVE W CANFIL	\$	900.00
ASGN COUN - PSYCHOLOGICAL	STEVE W CANFIL	\$	800.00
ASGN COUN - PSYCHOLOGICAL	SCOTT JOSEPH FRIEDMAN	\$	700.00
ASGN COUN - PSYCHOLOGICAL	PAUL M FRIEDMAN	\$	1,600.00
ASGN COUN - PSYCHOLOGICAL	PAUL M FRIEDMAN	\$	1,300.00
ASGN COUN - PSYCHOLOGICAL	SCOTT JOSEPH FRIEDMAN	\$	700.00
ASGN COUN - PSYCHOLOGICAL	SCOTT JOSEPH FRIEDMAN	\$	1,300.00
ASGN COUN - PSYCHOLOGICAL	PAUL M FRIEDMAN	\$	2,300.00
ASGN COUN - PSYCHOLOGICAL	TED S FRIEDMAN	\$	400.00
ASGN COUN - PSYCHOLOGICAL	RONALD C BALBIER	\$	700.00
ASGN COUN - PSYCHOLOGICAL	SCOTT JOSEPH FRIEDMAN	\$	200.00
ASGN COUN - PSYCHOLOGICAL	PAUL M FRIEDMAN	\$	2,500.00
ASGN COUN - PSYCHOLOGICAL	SCOTT JOSEPH FRIEDMAN	\$	400.00
ASGN COUN - PSYCHOLOGICAL	STEVE W CANFIL	\$	700.00
ASGN COUN - PSYCHOLOGICAL	RONALD C BALBIER	\$	700.00
ASGN COUN - PSYCHOLOGICAL	J MICHAEL EVANS	\$	225.00
CONTRACTUAL SERVICES	RICE EDUCATION CONSULTING	\$	18,075.00
CONTRACTUAL SERVICES	RICE EDUCATION CONSULTING	\$	18,075.00
CONTRACTUAL SERVICES	IRON MOUNTAIN INFORMATION	\$	5,480.50
CONTRACTUAL SERVICES	IRON MOUNTAIN INFORMATION	\$	292.12
CONTRACTUAL SERVICES	WILLO SECURITY INC	\$	2,692.47

BOARD VOUCHER REPORT 1/1/2023 THROUGH 1/31/2023

<u>Description</u>	<u>Vendor Name</u>		Amount
CONTRACTUAL SERVICES	WILLO SECURITY INC	 \$	2,353.18
CONTRACTUAL SERVICES	WILLO SECURITY INC	\$	3,677.52
CONTRACTUAL SERVICES	IRON MOUNTAIN INFORMATION	\$	894.61
CONTRACTUAL SERVICES	IMPACT SOLUTIONS EAP	\$	300.00
CONTRACTUAL SERVICES	WILLO SECURITY INC	\$	1,930.21
CONTRACTUAL SERVICES	WILLO SECURITY INC	\$	4,033.33
CONTRACTUAL SERVICES	MOOD MEDIA	\$ \$	68.50
MAINTENANCE/REPAIR SERVICES	UNIFIRST CORPORATION		252.03
Contracts & P	rofessional Services	\$	165,842.25
NON-CAP EQ - IT SOFTWARE	NET ACTIVITY INC	\$	3,766.51
NON-CAP EQ - IT SOFTWARE	NET ACTIVITY INC	\$	1,400.00
NON-CAP EQ - IT SOFTWARE	NET ACTIVITY INC	\$	4,244.41
LEASE/RENTAL FEES	PITNEY BOWES GLOBAL FINANCIAL	\$	1,354.47
LS/RENT - EQUIPMENT	DE LAGE LADEN FINANCIAL	\$	1,173.30
EQUIPMENT PURCHASE	DEX IMAGING LLC	\$	1,774.63
EQUIPMENT PURCHASE	CTR SYSTEMS EMPLOYEE	\$ \$	185.76
EQUIPMENT PURCHASE	DC GROUP INC		1,758.50
EQUIPMENT PURCHASE	DEX IMAGING LLC	\$	853.68
EQUIPMENT PURCHASE	DEX IMAGING LLC	\$ \$	9.71
Equipm	Equipment Purchase		16,520.97
MEMBERSHIPS/LICENSES	KAPLAN EARLY LEARNING	\$	1,155.00
MILEAGE/PARKING	DOUGLAS P NICHOLS	\$	50.00
MILEAGE/PARKING	REGINA R SPICER	\$	217.75
MILEAGE/PARKING	OLIVIA ABDLRASUL	\$	27.50
MILEAGE/PARKING	MAGGIE TOLBERT	\$	142.50
MILEAGE/PARKING	BRITANY KING	\$	11.25
MILEAGE/PARKING	CARMEN GANDARILLA	\$	86.88
MILEAGE/PARKING	JOICELYN RENEE WEEMS	\$ \$	119.56
MILEAGE/PARKING	JOICELYN RENEE WEEMS		149.63
MILEAGE/PARKING	MICHAELE A SMITH	\$	41.50
DEPARTMENTAL PARKING	SEP 2022 PARKING PASSES	\$	250.00
DEPARTMENTAL PARKING	OCT 2022 PARKING PASSES	\$	250.00
DEPARTMENTAL PARKING	NOV 2022 PARKING PASSES	\$	250.00
DEPARTMENTAL PARKING	DEC 2022 PARKING PASSES	\$	250.00
DEPARTMENTAL PARKING	2023 PARKING KEY CARDS	\$	1,260.00
NON-COUNTY PRINTING	SETTA TROPHY INC	\$	32.00
NON-CONTRACTUAL SERVICES	PAUL L MARTIN	\$	450.00
TELEPHONE	DAVISSA TELEPHONE SYS	\$	2,699.11
TELEPHONE	CHARTER COMMUNICATION	\$	109.59

BOARD VOUCHER REPORT 1/1/2023 THROUGH 1/31/2023

<u>Description</u>	<u>Vendor Name</u> <u>Amount</u>		
=======================================	=: ====================================	====== ==	=======
TELE - MOBILITY	VERIZON WIRELESS SERVICE	\$	1,845.80
TELE - MOBILITY	VERIZON WIRELESS SERVICE	\$	923.09
DATA COMMUNICATIONS	OHIO STATE UNIVERSITY	\$	725.00
DATA COMMUNICATIONS	AGILE NETWORK BUILDER	\$	586.00
DATA COMMUNICATIONS	OHIO STATE UNIVERSITY	\$	725.00
FISCAL USE ONLY MISC EXPENSE	FIFTH THIRD BANK NEO	\$	13,864.95
FISCAL USE ONLY MISC EXPENSE	HAYWOOD COUNSELING	\$	1,500.00
Othe	r Operating	\$	27,722.11
January	Voucher Total	Ś	219,341.23

Alcohol, Drug Addiction & Mental Health Services Board of Cuyahoga County Funding Source Budget to Actual YTD January 2023 YTD

	2023 Budget	Janaury YTD Actuals	Remaining Balance	% of Budget
ADAMHS ADMINISTRATION	\$ -	\$ 26,533.25	\$ (26,533.25)	
AOD Continuum of Care	\$ 586,004.00	\$ 146,501.00	\$ 439,503.00	25%
AOD Per Capita Prevention	\$ 119,995.00	\$ 23,798.75	\$ 96,196.25	20%
AOD Recovery Housing	\$ 45,900.00	\$ -	\$ 45,900.00	0%
ATP	\$ 300,000.00	\$ 75,000.00	\$ 225,000.00	25%
Casino Gambling Prevention	\$ 207,607.00	\$ 103,803.75	\$ 103,803.25	50%
Casino Gambling Treatment	\$ 207,608.00	\$ -	\$ 207,608.00	0%
Community Investments	\$ 1,825,781.00	\$ 368,300.25	\$ 1,457,480.75	20%
Community Investments - ADAMHS Boards	\$ 50,000.00	\$ -	\$ 50,000.00	0%
Community Investments -Continuum of Care	\$ 34,765.00	\$ -	\$ 34,765.00	0%
Community Transition Program	\$ 750,000.00	\$ 187,500.00	\$ 562,500.00	25%
Corrections Planning Board	\$ 1,500,000.00	\$ 36,899.27	\$ 1,463,100.73	2%
County Subsidy	\$ 43,463,659.00	\$ -	\$ 43,463,659.00	0%
Criminal Justice Forensic Center & Monitoring	\$ 259,608.00	\$ 64,902.00	\$ 194,706.00	25%
Crisis Funds	\$ 512,641.00	\$ -	\$ 512,641.00	0%
Early Childhood (Invest in Children)	\$ 821,241.00	\$ -	\$ 821,241.00	0%
Early Childhood Mental Health Counseling	\$ 441,906.00	\$ -	\$ 441,906.00	0%
Mental Health Block Grant	\$ 848,814.00	\$ 209,953.50	\$ 638,860.50	25%
Miscellaneous	\$ 1,000,000.00	\$ 69,878.25	\$ 930,121.75	7%
Multi-System Adult (MSA) Program	\$ 340,677.00	\$ -	\$ 340,677.00	0%
Northeast Ohio Collaborative Funding	\$ 1,541,738.00	\$ -	\$ 1,541,738.00	0%
ODRC (ACT)	\$ 275,000.00	\$ 38,047.70	\$ 236,952.30	14%
Overdose to Action Grant (Board of Health)	\$ 84,782.00	\$ -	\$ 84,782.00	0%
PATH	\$ 338,339.00	\$ -	\$ 338,339.00	0%
SAMHSA Emergency COVID-19	\$ 438,212.00	\$ -	\$ 438,212.00	0%
SAPT Direct Grants - Gambling (Recovery Res.)	\$ 75,000.00	\$ 6,250.00	\$ 68,750.00	8%
SAPT Direct Grants - TASC (Court of Common Pleas.)	\$ 137,910.00	\$ 34,477.50	\$ 103,432.50	25%
SAPT Direct Grants - Therapeutic Comm (CATS)	\$ 98,551.00	\$ -	\$ 98,551.00	0%
SAPT Pass Through	\$ 2,071,868.00	\$ 155,373.17	\$ 1,916,494.83	7%
SAPT Prevention	\$ 1,382,871.00	\$ 345,717.75	\$ 1,037,153.25	25%
SAPT System of Care/DYS Aftercare	\$ 215,796.00	\$ 34,636.83	\$ 181,159.17	16%
SAPT Treatment	\$ 3,509,071.00	\$ 877,267.75	\$ 2,631,803.25	25%
Specialized Docket Support-Drug Courts	\$ 535,000.00	\$ -	\$ 535,000.00	0%
System of Care State Funds	\$ 405,524.00	\$ 101,381.00	\$ 304,143.00	25%
Title XX	\$ 804,265.00	\$ -	\$ 804,265.00	0%
Total ADAMHS ADMINISTRATION	\$ 65,230,133.00	\$ 2,906,221.72	\$ 62,323,911.28	4%
ADAMHS DOJ GRANTS				
CIP Grant	\$ 283,047.00	\$ 10,658.40	\$ 272,388.60	4%
COSSAP Grant	\$ 1,006,794.00	\$ 19,236.06	\$ 987,557.94	2%
Total ADAMHS DOJ GRANTS	\$ 1,289,841.00	\$ 29,894.46	\$ 1,259,946.54	2%
DIVERSION CENTER	\$ 4,363,012.00	\$ •	\$ 4,363,012.00	0%
OOD GRANT	\$ 443,303.00	\$ -	\$ 443,303.00	0%
OTHER GRANTS				
SAMHSA Early Diversion Grant	\$ 330,000.00	\$ -	\$ 330,000.00	0%
Total OTHER GRANTS	\$ 330,000.00	\$ -	\$ 330,000.00	0%
SOR GRANT	\$ 2,709,000.00	\$ •	\$ 2,709,000.00	0%
TOTAL	\$ 74,365,289.00	\$ 2,936,116.18	\$ 71,429,172.82	4%

Alcohol, Drug Addiction & Mental Health Services Board of Cuyahoga County Revenues By Source By Month

	Jan 2023	Feb 2023	Mar 2023	Q2 - 2023	Q3-2023	Q4 - 2023	Total
ADAMHS ADMINISTRATION	\$ 26,533.25					\$	26,533.25
AOD Continuum of Care	\$ 146,501.00					\$	146,501.00
AOD Per Capita Prevention	\$ 23,798.75					\$	23,798.75
ATP	\$ 75,000.00					\$	75,000.00
Casino Gambling Prevention	\$ 103,803.75					\$	103,803.75
Community Investments	\$ 368,300.25					\$	368,300.25
Community Transition Program	\$ 187,500.00					\$	187,500.00
Corrections Planning Board	\$ 36,899.27					\$	36,899.27
Criminal Justice Forensic Center & Monitoring	\$ 64,902.00					\$	64,902.00
Mental Health Block Grant	\$ 209,953.50					\$	209,953.50
Miscellaneous	\$ 69,878.25					\$	69,878.25
ODRC (ACT)	\$ 38,047.70					\$	38,047.70
SAPT Direct Grants - Gambling (Recovery Res.)	\$ 6,250.00					\$	6,250.00
SAPT Direct Grants - TASC (Court of Common Pleas.)	\$ 34,477.50					\$	34,477.50
SAPT Pass Through	\$ 155,373.17					\$	155,373.17
SAPT Prevention	\$ 345,717.75					\$	345,717.75
SAPT System of Care/DYS Aftercare	\$ 34,636.83					\$	34,636.83
SAPT Treatment	\$ 877,267.75					\$	877,267.75
System of Care State Funds	\$ 101,381.00					\$	101,381.00
Total ADAMHS ADMINISTRATION	\$ 2,906,221.72	\$ -	\$ -	\$ -	\$ -	\$ - \$	2,906,221.72
ADAMHS DOJ GRANTS							
CIP Grant	\$ 10,658.40					\$	10,658.40
COSSAP Grant	\$ 19,236.06					\$	19,236.06
Total ADAMHS DOJ GRANTS	\$ 29,894.46	\$ -	\$ -	\$ -	\$ -	\$ - \$	29,894.46
TOTAL	\$ 2,936,116.18	\$ -	\$ -	\$ -	\$ -	\$ - \$	2,936,116.18

Alcohol, Drug Addiction & Mental Health Services Board of Cuyahoga County Budget vs. Actual Expenses 2023 YTD January 2023 YTD

	January YTD						
	2023 Budget		Actuals	Re	maining Balance	Budget	
JAIL DIVERSION GRANT	\$ 330,000.00	\$	60,810.65	\$	269,189.35	18%	
CIP GRANT	\$ 283,047.00	\$	10,658.40	\$	272,388.60	4%	
COSSAP GRANT	\$ 486,703.00	\$	19,236.06	\$	467,466.94	4%	
ENHANCED DATA GRANT	\$ 520,091.00	\$	-	\$	520,091.00	0%	
DIVERSION CENTER	\$ 4,363,012.00	\$	-	\$	4,363,012.00	0%	
OOD - CASE SVCS CONTRACT	\$ 443,303.00	\$	74,252.51	\$	369,050.49	17%	
SOR GRANT	\$ 2,709,000.00	\$	-	\$	2,709,000.00	0%	
ADMINISTRATIVE EXPENSES	\$ 8,080,414.00	\$	655,088.12	\$	7,425,325.88	8%	
ADULT & FAMILY CARE SERVICES	\$ 562,241.00	\$	31,929.46	\$	530,311.54	6%	
COORDINATION/EVALUATION SERVICES	\$ 1,163,692.00	\$	10,586.20	\$	1,153,105.80	1%	
CRISIS CARE/INTERVENTION	\$ 17,757,846.00	\$	1,195,690.23	\$	16,562,155.77	7%	
DETOXIFICATION	\$ 1,886,400.00	\$	50,441.21	\$	1,835,958.79	3%	
EARLY CHILDHOOD MENTAL HEALTH	\$ 2,084,388.00	\$	168,127.75	\$	1,916,260.25	8%	
EMPLOYMENT SERVICES	\$ 1,647,306.00	\$	108,577.11	\$	1,538,728.89	7%	
FAITH-BASED SERVICES	\$ 463,897.00	\$	10,962.61	\$	452,934.39	2%	
HEALTH MGT INFORMATION SYS	\$ 175,000.00	\$	-	\$	175,000.00	0%	
JUSTICE RELATED SERVICES	\$ 5,156,602.00	\$	415,842.92	\$	4,740,759.08	8%	
MH - OUTPATIENT TREATMENT	\$ 4,051,516.00	\$	142,503.70	\$	3,909,012.30	4%	
OTHER OBLIGATED FUNDS	\$ 5,001,017.00	\$	-	\$	5,001,017.00	0%	
OTHER SERVICES	\$ 2,830,068.00	\$	281,815.86	\$	2,548,252.14	10%	
PASS-THRU PROGRAMS	\$ 3,019,240.00	\$	294,905.10	\$	2,724,334.90	10%	
PREVENTION SERVICES - MH	\$ 760,813.00	\$	84,094.97	\$	676,718.03	11%	
PREVENTION SERVICES - SUD	\$ 2,121,166.00	\$	190,584.39	\$	1,930,581.61	9%	
BOARD PROPERTY EXPENSES	\$ 250,000.00	\$	33,024.21	\$	216,975.79	13%	
PSYCHIATRIC SERVICES	\$ 914,290.00	\$	-	\$	914,290.00	0%	
RECOVERY SUPPORTS	\$ 835,317.00	\$	43,019.33	\$	792,297.67	5%	
RECOVERY SUPPORTS - ART THERAPY	\$ 207,520.00		9,072.72	\$	198,447.28	4%	
RECOVERY SUPPORTS - PEER SUPPORT	\$ 2,903,232.00	\$	342,220.01	\$	2,561,011.99	12%	
RESIDENTIAL ASST PROG (RAP)	\$ 2,500,000.00	\$	73,263.22	\$	2,426,736.78	3%	
RESIDENTIAL TREATMENT HOUSING-MH	\$ 8,734,312.00	\$	1,099,250.03		7,635,061.97	13%	
RESIDENTIAL TREATMENT HOUSING-SUD	\$ 3,678,692.00	\$	185,608.62	\$	3,493,083.38	5%	
SCHOOL BASED SERVICES	\$ 869,151.00	\$	17,096.58	\$	852,054.42	2%	
SOBER RECOVERY BEDS	\$ 2,228,925.00		193,525.22	\$	2,035,399.78	9%	
SOR CRISIS GRANT	\$ 818,626.00		-	\$	818,626.00	0%	
SUD - OUTPATIENT TREATMENT	\$ 2,960,274.00		201,670.81	\$	2,758,603.19	7%	
TOTAL	\$ 92,797,101.00	\$	6,003,858.00	\$	86,793,243.00	6%	

Alcohol, Drug Addiction & Mental Health Services Board of Cuyahoga County Revenue and Expenditures All Accounting Units By Month

		Jan 2023	Feb 2023	Mar 2023	Q2 - 2023	Q3 - 2023	Q4 - 20	23	Total
Revenue									
OFFICE/CONF ROOM RENTAL	\$	1,671.38						\$	1,671.38
FEDERAL GRANT REVENUE	\$	1,694,443.46						\$	1,694,443.46
STATE GRANT REVENUE	\$	1,170,795.20						\$	1,170,795.20
LOCAL MUNI NON-GRANT REVENUE	\$	62,570.39						\$	62,570.39
REFUNDS & REIMBURSEMENT REV	\$	6,635.75						\$	6,635.75
Total Revenue	\$	2,936,116.18	\$ -	\$ -	\$ -	\$ -	\$	- \$	2,936,116.18
Expenditures									
OPERATING EXPENSES									
SALARIES									
SALARIES - REGULAR	\$	155,777.80						\$	155,777.80
SALARIES - UNION	\$	168,756.08						\$	168,756.08
Total SALARIES	\$	324,533.88	\$ -	\$ -	\$ -	\$ -	\$	- \$	324,533.88
FRINGE BENEFITS	Ψ	024,000.00	Ψ	•	Ψ	Ψ	Ψ	Ψ	024,000.00
MEDICARE	\$	4,516.69						\$	4,516.69
RETIRE-OPERS - REGULAR	\$	40,256.60						\$	40,256.60
HOSPITALIZATION	\$	66,333.33						\$	66,333.33
LIFE INSURANCE	\$	20.39						\$	20.39
HEALTH BENEFIT ALLOWANCE	\$	86.00						\$	86.00
Total FRINGE BENEFITS	\$	111,213.01	\$ -	\$ -	\$ -	\$ -	\$	- \$	111,213.01
COMMODITIES	Ψ	111,213.01	Ψ -	Ψ -	Ψ -	Ψ -	Ψ	- ψ	111,213.01
OFFICE SUPPLIES	\$	7.25						\$	7.25
COPIER SUPPLIES	\$	16.00						\$	16.00
	\$	217.49						\$	217.49
FOOD SUPPLIES									
WATER	\$	2,493.64						\$	2,493.64
SEWER	Þ	5,055.31						\$	5,055.31
ELECTRICITY	\$	11,031.70						\$	11,031.70
NATURAL GAS	\$	4,429.62						\$	4,429.62
REFUSE COLLECTION	\$	4,146.92	•	•	•	•	•	\$	4,146.92
Total COMMODITIES	\$	27,397.93	\$ -	\$ -	\$ -	\$ -	\$	- \$	27,397.93
CONTRACTS & PROFESSIONAL	•							•	
LS/RENT - BUILDING	\$	69,547.86						\$	69,547.86
CONSULTANT SERVICES	\$	22,744.92						\$	22,744.92
ASGN COUN - PSYCHOLOGICAL	\$	15,425.00						\$	15,425.00
JUDICIAL SERVICES	\$	22,350.00						\$	22,350.00
CONTRACTUAL SERVICES	\$	281,066.91						\$	281,066.91
MAINTENANCE/REPAIR SERVICES	\$	14,100.11						\$	14,100.11
Total CONTRACTS & PROFESSIONAL	\$	425,234.80	\$ -	\$ -	\$ -	\$ -	\$	- \$	425,234.80
EQUIPMENT EXPENSE									
NON-CAP EQ - IT SOFTWARE	\$	9,410.92						\$	9,410.92
LEASE/RENTAL FEES	\$	1,354.47						\$	1,354.47
LS/RENT - EQUIPMENT	\$	1,173.30						\$	1,173.30
EQUIPMENT PURCHASE	\$	4,582.28						\$	4,582.28
Total EQUIPMENT EXPENSE	\$	16,520.97	\$ -	\$ -	\$ -	\$ -	\$	- \$	16,520.97
OTHER OPERATING									
MEETINGS	\$	1,155.00						\$	1,155.00
MEMBERSHIPS/LICENSES	\$	846.57						\$	846.57
MILEAGE/PARKING	\$	124,621.21						\$	124,621.21
ADVERTISING	\$	2,260.00						\$	2,260.00
DEPARTMENTAL PARKING	\$	8,147.28						\$	8,147.28
NON-COUNTY PRINTING	\$	450.00						\$	450.00
TELEPHONE	\$	5,688.60						\$	5,688.60

Alcohol, Drug Addiction & Mental Health Services Board of Cuyahoga County Revenue and Expenditures All Accounting Units By Month

	Jan 2023	Feb 2023	Mar 2023	Q2 - 2023	Q3 - 2023	Q4 - 2023	Total
TELE - MOBILITY	\$ 1,012.06						\$ 1,012.06
DATA COMMUNICATIONS	\$ 2,036.00						\$ 2,036.00
FISCAL USE ONLY MISC EXPENSE	\$ 15,364.95						\$ 15,364.95
Total OTHER OPERATING	\$ 161,581.67	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 161,581.67
Total 1 ADMINISTRATIVE EXPENSES	\$ 1,066,482.26	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,066,482.26
PROVIDER DIRECT SERVICES							
BEHAVIORAL HEALTH	\$ 2,368,099.86						\$ 2,368,099.86
BEH HLTH - RESIDENTIAL	\$ 1,355,371.96						\$ 1,355,371.96
BEH HLTH - FAMILY SUPPORT	\$ 233,040.02						\$ 233,040.02
CLIENT PREVENTION SERVICES	\$ 152,191.32						\$ 152,191.32
CLIENT TREATMENT SERVICES	\$ 748,108.69						\$ 748,108.69
Total PROVIDER DIRECT SERVICES	\$ 4,856,811.85	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,856,811.85
OTHER SERVICES							
HOUSING ASSISTANCE	\$ 80,563.89						\$ 80,563.89
Total 19 OTHER SERVICES	\$ 80,563.89	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 80,563.89
Total Expenditures	\$ 6,003,858.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 6,003,858.00

Alcohol, Drug Addiction & Mental Health Services Board of Cuyahoga County Revenues and Expenditures Grants YTD

	Tota	al ADAMHS DOJ GRANTS	OOD GRANT	Total OTHER GRANTS	TOTAL
Revenue					
FEDERAL GRANT REVENUE	\$	29,894.46	\$ -	\$ -	\$ 29,894.46
Total Revenue	\$	29,894.46	\$ -	\$ -	\$ 29,894.46
Expenditures					
OPERATING EXPENSES					
CONTRACTS & PROFESSIONAL					
CONTRACTUAL SERVICES	\$	29,894.46	\$ 74,252.51	\$ 60,810.65	\$ 164,957.62
Total CONTRACTS & PROFESSIONAL	\$	29,894.46	\$ 74,252.51	\$ 60,810.65	\$ 164,957.62
Total OPERATING EXPENSES	\$	29,894.46	\$ 74,252.51	\$ 60,810.65	\$ 164,957.62
Total Expenditures	\$	29,894.46	\$ 74,252.51	\$ 60,810.65	\$ 164,957.62

Alcohol, Drug Addiction & Mental Health Services Board of Cuyahoga County 2023 Cash Flow Report JANUARY 2023

	2021 Actual			2022 Actual	YTD thru January 2023		
AVAILABLE BEGINNING BALANCE	\$	29,174,459.62	\$	41,590,113.22	\$	43,175,702.58	
REVENUES							
Office/Conf Room Rental	\$	20,056.56	\$	20,056.56	\$	1,671.38	
Federal Grant revenue	\$	15,142,265.32	\$	15,772,095.84	\$	1,694,443.46	
State Grant Revenue	\$	9,462,828.56	\$	8,519,893.41	\$	1,170,795.20	
Local Gov't Revenue	\$	3,344,158.99	\$	5,227,402.87	\$	-	
Local Muni Non-Grant Revenue	\$	2,788,599.12	\$	2,656,987.76	\$	62,570.39	
Refunds & Reimbursement Revenue	\$	114,789.30	\$	467,141.85	\$	6,635.75	
Fiscal Use Only - Misc Revenue	\$	-	\$	30,000.00	\$	-	
Trans In - Transfer	\$	-	\$	60,191.42	\$	-	
Trans In - Subsidy	\$	43,463,659.00	\$	43,463,659.00	\$	-	
TOTAL REVENUE	\$	74,336,356.85	\$	76,217,428.71	\$	2,936,116.18	
TOTAL AVAILABLE RESOURCES	\$	103,510,816.47	\$	117,807,541.93	\$	46,111,818.76	
EXPENDITURES	7						
Operating Expenses	\$	6,731,663.06	\$	8,083,883.39	\$	901,524.64	
Diversion Center	\$	-	\$	5,225,373.16	\$	-	
ADAMHS Board Grants	\$	-	\$	4,484,530.77	\$	164,957.62	
Provider Direct Services	\$	53,885,506.24	\$	55,528,939.30	\$	4,856,811.85	
Other Services	\$	1,303,533.95	\$	1,309,112.73	\$	80,563.89	
TOTAL EXPENDITURES	\$	61,920,703.25	\$	74,631,839.35	\$	6,003,858.00	
AVAILABLE ENDING BALANCE	\$	41,590,113.22	\$	43,175,702.58	\$	40,107,960.76	

^{**}Operating expenses included the Diversion Center and ADAMHS Board grants until 2022.

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

RESOLUTION NO. 23-03-03

APPROVAL AND RATIFICATION OF CONTRACTS

- 1. Client Satisfaction Survey
- 2. Ohio Department of Mental Health and Addiction Services Psychotropic Drug Reimbursement Program
- 3. Ohio Department of Mental Health and Addiction Services Medicaid-Assisted Treatment (MAT) Reimbursement Program
- 4. 2023 Problem Gambling and Suicide Prevention Awareness Activities and Campaign
- 5. 2023 Annual Meeting Brunch, Awards Ceremony and Client Art Show

WHEREAS, funding has been made available to the Alcohol, Drug Addiction and Mental Health Services Board of Cuyahoga County (ADAMHS Board) for the following programs:

- 1. Client Satisfaction Survey for the time period March 1, 2023 to December 31, 2023 in the amount of \$60,000.00 for the following contract:
 - a. Brown Consulting, LTD; and,
- 2. Ohio Department of Mental Health and Addiction Services (OhioMHAS) Psychotropic Drug Reimbursement Program for the time period July 1, 2022 to December 31, 2022 in the amount of \$44,489.00 for the following contract:
 - a. Cuyahoga County Sheriff's Department; and,
- 3. Ohio Department of Mental Health and Addiction Services (OhioMHAS) Medication-Assisted Treatment (MAT) Reimbursement Program for the time period July 1, 2022 to December 31, 2022 in the amount of \$17,781.00 for the following contract:
 - a. Cuyahoga County Sheriff's Department; and,
- 4. 2023 Problem Gambling and Suicide Prevention Awareness Activities and Campaign for the time period March 31, 2023 to December 31, 2023 in the amount of \$125,000.00 for the following contracts:
 - a. Media and Digital Campaign \$114,000.00
 - Spotify
 - Fox 8
 - Radio One
 - La Mega
 - iHeart
 - Lamar
 - Cleveland Jewish News
 - b. Translation Services, printed materials and promotional items \$10,000.00
 - LanguageLine Solutions
 - Brothers Printing
 - c. Problem Gambling Symposium Sponsorship \$1,000.00
 - Recovery Resources at MetroHealth System; and,
- 5. 2023 Annual Meeting Brunch, Awards Ceremony and Client Art Show for the time period March 31, 2023 to June 30, 2023 in the amount of \$35,000.00 for the following contract:
 - a. Holiday Inn Cleveland South; and,

NOW, THEREFORE, BE IT RESOLVED:

A. The ADAMHS Board of Directors accepts the funds and authorizes payment of any required local match for the following:

- 1. Client Satisfaction Survey for the time period March 1, 2023 to December 31, 2023 in the amount of \$60,000.00 for the following contract:
 - a. Brown Consulting, LTD; and,
- 2. Ohio Department of Mental Health and Addiction Services (OhioMHAS) Psychotropic Drug Reimbursement Program for the time period July 1, 2022 to December 31, 2022 in the amount of \$44,489.00 for the following contract:
 - a. Cuyahoga County Sheriff's Department; and,
- 3. Ohio Department of Mental Health and Addiction Services (OhioMHAS) Medication-Assisted Treatment (MAT) Reimbursement Program for the time period July 1, 2022 to December 31, 2022 in the amount of \$17,781.00 for the following contract:
 - a. Cuyahoga County Sheriff's Department; and,
- 4. 2023 Problem Gambling and Suicide Prevention Awareness Activities and Campaign for the time period March 31, 2023 to December 31, 2023 in the amount of \$125,000.00 for the following contracts:
 - a. Media and Digital Campaign \$114,000.00
 - Spotify
 - Fox 8
 - Radio One
 - La Mega
 - iHeart
 - Lamar
 - Cleveland Jewish News
 - b. Translation Services, printed materials and promotional items \$10,000.00
 - LanguageLine Solutions
 - Brothers Printing
 - c. Problem Gambling Symposium Sponsorship \$1,000.00
 - · Recovery Resources at MetroHealth System; and,
- 5. 2023 Annual Meeting Brunch, Awards Ceremony and Client Art Show for the time period March 31, 2023 to June 30, 2023 in the amount of \$35,000.00 for the following contract: Holiday Inn Cleveland South.
- B. The ADAMHS Board Chief Executive Officer is authorized to execute any necessary contractual agreements.

On the motion of resolution was adopted.	, seconded by	, the foregoing
AYES:		
NAYS:		
ABSTAIN:		
DATE ADOPTED:		



Agenda Process Sheet Date: March 22, 2023

•	Relations & Advocacy Committee Oversight Committee of the Whole	□ Faith-Based Outreach Committee■ Finance & Operations Committee■ General Meeting							
Topic:	Client Satisfaction Survey								
Contractual Parties:	Brown Consulting, LTD								
Term:	March 1, 2023 through December 3	March 1, 2023 through December 31, 2023							
Funding Source(s):	ADAMHS Board								
Amount:	\$60,000								
■ New Program	□Continuing Program □Expan	ding 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.

Metrics (How will goals be measured)	 Successful completion of the following objectives: 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.
Evaluation/ Outcome Data (Actual results from program)	• 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.
- Approved by the Planning & Oversight Committee on March 8, 2023.
- Approved by the Finance & Operations Committee on March 15, 2023.

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.

- 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. <u>Customized Services.</u> 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.
- 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

RETURN FAX TO:

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

Brown Consulting, Ltd.

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

FAX (419) 241-8689





☐ Planning	& Oversight Committee ee of the Whole		e & Operations Committee I Meeting	
Торіс:	Acceptance of OhioN	Acceptance of OhioMHAS Grant Funding for Psychotropic Drug Reimbursement		
Contractual Parties:	Cuyahoga County Sh	Cuyahoga County Sheriff's Department		
Term:	Reimbursement Peri	Reimbursement Period: July 1, 2022 – December 31, 2022		
Funding Source(s):	OhioMHAS Psychotr	OhioMHAS Psychotropic Drug Grant Funds		
Amount:	\$44,489	\$44,489		
□ New Program	□Continuing Program	□Expanding Program	■Other Pass-Through Funds	

Service Description:

 Reimbursement of costs for psychotropic medications distributed to inmates in the Cuyahoga County jails by the Sheriff's Department.

Background Information:

 The ADAMHS Board of Cuyahoga County received notification from OhioMHAS and the Cuyahoga County Sheriff's Department relative to the award granted to the Cuyahoga County Sheriff's Office for the reimbursement of funds expensed for Psychotropic medications in the jail.

Number of Individuals to be Served:

• 15,619 doses of medication

Funding Use:

• Covers the cost of psychotropic medication dispensed by the Cuyahoga County Sheriff's Department in the jail for the period of July 1, 2022 – December 31, 2022.

Client & System Impact: N/A

Metrics (How will goals be measured)	 Number of doses of medication administered Amount of reimbursement for psychotropic medications 		
Evaluation/ Outcome Data (Actual results from program)	July 1, 2022 – December 31, 2022 Reimbursement: • Doses of Medication – 14,313 • Amount of Reimbursement - \$23,972		

•	Acceptance of \$44,489 from OhioMHAS to be distributed to the Cuyahoga County Sheriff's Department
	as pass-through funds for the period July 1, 2022 to December 31, 2022 for Psychotropic Medication.



☐ Planning	& Oversight Committee e of the Whole		e & Operations Committee I Meeting	
Горіс:	•	Acceptance of OhioMHAS Grant Funding for Medication-Assisted Treatment (MAT) Reimbursement Program		
Contractual Parties:	Cuyahoga County Sh	Cuyahoga County Sheriff's Department		
Term:	Reimbursement Peri	Reimbursement Period: July 1, 2022 – December 31, 2022		
Funding Source(s):	OhioMHAS MAT Gra	OhioMHAS MAT Grant Funds		
Amount:	\$17,781	\$17,781		
□ New Program	☐Continuing Program	□Expanding Program	■Other Pass-Through Funds	

Service Description:

 Reimbursement of costs for medications distributed to inmates in the Cuyahoga County jails by the Sheriff's Department.

Background Information:

 The ADAMHS Board of Cuyahoga County received notification from OhioMHAS and the Cuyahoga County Sheriff's Department relative to the award granted to the Cuyahoga County Sheriff's Office for the reimbursement of funds expensed for MAT in the jail.

Number of Individuals to be Served:

2,937 doses of medication

Funding Use:

• Covers the cost of MAT by the Cuyahoga County Sheriff's Department in the jail for the period of July 1, 2022 – December 31, 2022.

Client & System Impact: N/A

Metrics (How will goals be measured)	 Number of doses of medication administered Amount of reimbursement for MAT to inmates 	
Evaluation/ Outcome Data (Actual results from program)	January 1, 2022 – June 30, 2022 Reimbursement • Doses of Medication - 3,755 • Amount of Reimbursement - \$9,305	

- Acceptance of \$17,781 from OhioMHAS to be distributed to the Cuyahoga County Sheriff's Department as pass-through funds for the period July 1, 2022 to December 31, 2022 for the MAT Reimbursement Program.
- Approved by the Finance & Operations Committee on March 15, 2023.



■ Community Relations & Advocacy Committee ☐ Faith-Based Outreach Committee

☐ Planning & Oversight Committee☐ Committee of the Whole		■ Finance & Operations Committee■ General Meeting	
Topic:	2023 Problem Gambling and	d Suicide Prevention A	Awareness Activities and Campaign
Contractual Parties:	Cleveland Jewish News and Translation Services, printed Brothers Printing and other v Problem Gambling Symposic	Media and Digital Campaign (Spotify, Fox 8, Radio One, La Mega, iHeart, Lamar, Cleveland Jewish News and other local publications) – Not to exceed \$114,000 Translation Services, printed materials and promotional items (LanguageLine Solutions, Brothers Printing and other vendors TBD) - \$10,000 Problem Gambling Symposium Sponsorship (Recovery Resources at MetroHealth System) – Not to exceed \$1,000	
Term:	March 31, 2023 – December	March 31, 2023 – December 31, 2023	
Funding Source(s):	ADAMHS Board Operating Budget		
Amount:	Not to exceed \$125,000		
■ New Program	☐Continuing Program ■Ex	panding Program	■Other Awareness Campaign

Service Description:

2023 Problem Gambling and Suicide Prevention Awareness Activities and Campaign

Background Information:

- While most can safely and responsibly gamble, the existence of individuals negatively impacted by gambling cannot be denied. Ohio's statewide survey showed that nearly one in 10 Ohioans who gamble are currently experiencing or are at risk of developing a gambling problem; roughly one in five pathological gamblers attempt suicide, a rate higher than that of any other addiction disorder.
- The Cuyahoga County Problem Gambling coalition advocates for individuals who are negatively impacted by gambling and works with The Problem Gambling Network of Ohio to ensure any gambling expansion includes consumer protections to mitigate harm and funding for prevention, intervention, and treatment services.
- At the beginning of 2023, online sports betting was launched in Ohio and our local community was being
 exposed to massive advertising campaigns. Problem gambling experts know that there will be an increase in
 individuals who are negatively affected by gambling and online sports betting because of the increase that
 was seen in other states that launched similar sports betting.
- To help combat an increase of individuals with gambling disorders and create education related to safe betting practices and how to connect with treatment, Ohio for Responsible Gambling worked with Origo Branding to develop the Ohio Problem Gambling Helpline and a multi-media prevention campaign specifically targeting sports betting. The campaign is called "Pause Before You Play" and is part of the greater "Get Set Before You Bet" problem gambling awareness campaign.

- Calls to the Problem Gambling helpline have doubled (to 1,500 calls) since the launch of sports betting in January, with the largest jump in calls coming from individuals ages 18-34.
- ADAMHS Board staff collaborated with the local Problem Gambling Coalition to connect with Origo and develop a partnership to localize the "Pause Before You Play" campaign and target demographics of individuals at-risk for problem gambling in Cuyahoga County.
- An estimated 137,237 Cuyahoga County adult residents can be categorized as low-risk, moderate-risk, or problem gamblers, which is 13.9% of the general adult population; statewide, the percentage is 10.3% of the general adult population.
- Men (17.6%), particularly African American males (19.5%), are at higher risk than women for problem gambling.
- Individuals ages 25-44 (16.8%) are at the highest risk for problem gambling, followed by younger adults ages 18-24 (15.4%)
- A collaborative approach is needed to help save lives and connect individuals in need to treatment. It is also necessary to educate treatment providers about problem gambling. The Board and partners propose:
 - o **Awareness Campaign**: Utilize the statewide "Pause Before You Play" campaign to target local at-risk populations through a multi-media campaign.
 - Work with Origo to localize the campaign with Cuyahoga County resources and our branding.
 - Purchase digital, streaming, social media, radio, television, print, transit and billboard ads for the localized "Pause Before You Play" campaign and help promote the Problem Gambling Symposium with paid social media, digital, streaming, radio and print ads.
 - Purchase printed materials and promotional items and pay for translation of any materials related to the campaign.
 - Support the Cuyahoga County Problem Gambling Symposium that will be hosted on June 16 at Tri-C Corporate College to increase treatment provider education about problem gambling. The ADAMHS Board will sponsor this symposium in the amount of \$1,000.
- It is important to note that all of the resources inform residents how to connect with care when they are ready for treatment.

Number of Individuals to be Served:

- **Awareness Campaign:** Based on estimated impressions, hundreds of thousands of individuals will be exposed to the campaign, with millions of impressions.
- **Problem Gambling Symposium (June 16 at Tri-C Corporate College)**: The Problem Gambling Coalition hopes to train hundreds of individuals and local treatment providers through the symposium.

Funding Use:

• Expand awareness and education related to problem gambling and suicide prevention.

Client & System Impact:

Increase knowledge about problem gambling to help prevent suicide deaths related to online sports betting.

Program/Service Goals:

 Work with the Problem Gambling Coalition to educate the community about gambling disorders, preparation for safer betting practices and preventing suicide attempts and fatalities related to problem gambling.

Metrics (How will goals be measured)	Measure awareness campaign impressions and link clicks. Translate and distribute printed materials and promotional items. Ensure sponsorship benefits for the Symposium are achieved, number of attendees at symposium.
--	---

Evaluation/	N/A new campaign
Outcome Data	
(Actual results	
from program)	
, , ,	

- Board staff recommends authorization of the 2023 Problem Gambling and Suicide Prevention Awareness Activities and Campaign and allowing the CEO to enter into multiple vendor contracts not to exceed \$125,000.
- Approved by the Community Relations & Advocacy Committee on March 1, 2023.
- Approved by the Finance & Operations Committee on March 15, 2023.



_	& Oversight Committee e of the Whole	■ Finance ■ General	& Operations Committee Meeting		
opic:	2023 Annual Meeting Brunch, Awards Ceremony and Client Art Show				
ontractual Parties:	6001 Řockside Road	Holiday Inn Cleveland South 6001 Rockside Road Independence, OH 44131			
erm:	March 31, 2023 – Ju	March 31, 2023 – June 30, 2023			
unding Source(s):	ADAMHS Board Operating Budget				
mount:	Contract not to exce	Contract not to exceed \$35,000			
New Program	☐Continuing Program	■Expanding Program	■Other Awareness Campaign		

Service Description:

 2023 Annual Meeting Brunch, Awards Ceremony and Client Art Show to be held on May 15 at the Holiday Inn in Independence

Background Information:

- The Annual Meeting has traditionally attracted between 350 and 500 guests and is held during May, which is Mental Health Awareness Month.
- The ADAMHS Board sells tickets to the event to defray the cost of the food and service charge. The contract we enter into will not exceed \$35,000 and the cost to the Board should be less than \$10,000.
- The last two Annual Meetings were held at the Cleveland Marriott East.
- The Holiday Inn in Independence offers a centrally located space with free self-parking and easy highway and bus access and can easily hold up to 500 quests.

Number of Individuals to be Served:

Between 350 and 500 people.

Funding Use:

To defray the cost of the Annual Meeting expenses not covered by ticket sales.

Client & System Impact:

During the Annual Meeting, the Board provides a yearly update to the community and acknowledges
exceptional accomplishments in the community through the presentation of awards to clients, family
members, legislators and professionals. It also showcases client art.

Metrics (How will goals be measured)	 Number of people in attendance at the Annual Meeting. Total cost to the Board after ticket sales.
Evaluation/ Outcome Data (Actual results from program)	 Approximately 300 people attended the 2022 Annual Meeting for which registration was limited due to COVID concerns. \$8,030 amount was raised through ticket sales Marriott Cleveland East Cost was \$11,273 Awards and honoree video cost \$4,892 Total cost to the Board \$8,135

- Board staff recommends authorization of the 2023 Annual Meeting Brunch, Award Ceremony and Client Art Show on Monday, May 15, 2023, allowing the CEO to contract with Holiday Inn Cleveland South in an amount not to exceed \$35,000.
- Approved by the Community Relations & Advocacy Committee on March 1, 2023.
- Approved by the Finance & Operations Committee on March 15, 2023.