



**COMMITTEE OF THE WHOLE MEETING
WEDNESDAY, NOVEMBER 8, 2023
4:00 P.M.**

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

AGENDA

1. **Call to Order** – Patricia James-Stewart, M.Ed., LSW, Board Vice Chair
2. **Public Comment on Agenda Items** – Patricia James-Stewart, M.Ed., LSW
3. **Approval of Minutes: October 18, 2023** – Patricia James-Stewart, M.Ed., LSW
4. **Overview of Recent Provider/Services Survey Results** – Clare Rosser, Chief Strategy and Performance Officer
 - **Racial/Health Equity Assessment**
 - **Client Satisfaction Survey**
 - **Workforce Survey**
5. **CY2024 Agreements with Class 2 Residential Facilities (Adult Care Facilities/ACF)** – Amount Included in CY2024 Budget – (Action Requested) – Allison Schaefer, Director of Adult Behavioral Health Programs
6. **Contracts** – (Action Requested)
 - a. Ohio Department of Rehabilitation and Corrections (ODRC): Parole Assertive Community Treatment (PACT) – Allison Schaefer
 - Recovery Resources - \$275,000
 - b. Piloting a Mental Health Docket Incorporating a Drug Court Model to Improve Outcomes for Adults with Co-Occurring Disorders – \$615,000 – Woo Jun, Chief Operating Officer
 - Catholic Charities - \$340,000
 - Signature Health - \$275,000
 - c. State Opioid & Stimulant Response (SOS) Grant, Year 02 – \$2,709,527.95 – Woo Jun
 - 12 Step Life/Ethel Hardy House - \$200,000
 - B. Riley Homes - \$165,000
 - Briermost Foundation - \$150,000
 - Griffin Homes Sober Living, Inc. - \$150,000
 - I'm In Transition Ministries - \$160,000
 - The MetroHealth System - \$280,000
 - NORA (Peer Support) - \$150,000
 - NORA (Recovery Housing) - \$275,000
 - Point of Freedom (Peer Support) - \$218,527.95
 - Recovery First-A Better Way - \$170,000
 - Road to Hope - \$150,000
 - Thrive for Change - \$105,000
 - White Butterfly Peer Support (Woodrow) - \$68,000
 - Women of Hope - \$100,000
 - Woodrow Project (Peer Support) - \$65,000
 - Woodrow Project (Recovery Housing) - \$141,000
 - Ohio Pharmacy Services (Naloxone) - \$162,000

- d. Agreements with Attorneys for Civil Commitment Hearings – \$200 per hearing/motion/hour – Woo Jun
 - Ronald Balbier
 - Steve Canfil
 - Mark DeFranco
 - Paul Friedman
 - Scott Friedman
 - Ted Friedman
 - e. Crisis Intervention Team (CIT) Training Supplemental Contracts for the Diversion Center – \$63,350 – Carole Ballard, Director of Education and Training
 - Traumatic Players of Cleveland, Inc. - \$19,800
 - Cuyahoga Community College - \$43,550
 - f. Cuyahoga County Suicide Prevention Coalition (CCSPC) Community Outreach to Vulnerable Youth – \$50,000 – Erin DiVincenzo, Director of Prevention and Children’s Behavioral Health Programs
 - Removing the Stigma - \$25,000
 - Colors+ Youth Center - \$25,000
7. **Contract Amendment – (Action Requested)** – Felicia Harrison
 - a. Amendment to Resolution No. 22-11-08, Crisis Intervention and Harm Reduction Services
 - Northern Ohio Recovery Association (NORA) - \$108,000
 8. **Identify Consent Agenda** – Patricia James-Stewart, M.Ed., LSW
 9. **Diversion Center Update** – Scott S. Osiecki, Chief Executive Officer
 10. **Behavioral Health Crisis Center Update** – Scott S. Osiecki
 11. **Review of CY2024 ADAMHS Board Budget** – Scott S. Osiecki
 12. **New Business**
 - 2024 Board Meeting Schedule
 13. **Follow-up**
 14. **Public Comment Period**
 15. **Upcoming November 2023 and January 2024 Board Meetings:**
 - General Meeting: November 15, 2023
 - Community Relations & Advocacy Committee Meeting: January 3, 2024
 - Planning & Oversight Committee Meeting: January 10, 2024
 - Finance & Operations Committee Meeting: January 17, 2024
 - General Meeting: January 24, 2024

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

James T. Dixon ▫ Rebekah L. Dorman, Ph.D. ▫ Sadigoh C. Galloway, MSW, LSW, LICDC-CS ▫ Rev. Benjamin F. Gohlstin, Sr.

Steve Killpack, MS ▫ Sharon Rosenbaum, MBA ▫ Harvey A. Snider, Esq.

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

COMMITTEE OF THE WHOLE MEETING MINUTES OCTOBER 18, 2023

PRESENT: J. Robert Fowler, Ph.D., Board Chair, Bishara W. Addison, Ashwani Bhardwaj, Reginald C. Blue, Ph.D., Gregory X. Boehm, M.D., James T. Dixon, Sadigoh C. Galloway, MSW, LSW, LICDC-CS, Harvey A. Snider, Esq.

ABSENT: Erskine Cade, MBA, Rev. Benjamin F. Gohlstein, Sr., Patricia James-Stewart, M.Ed., LSW, Katie Kern-Pilch, ATR-BC, LPC-S, Steve Killpack, MS, Sharon Rosenbaum, MBA

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

1. CALL TO ORDER

J. Robert Fowler, Ph.D., Board Chair, called the Committee of the Whole Meeting to order at 4:15 p.m.

2. PUBLIC COMMENT ON AGENDA ITEMS

No public comment on agenda items was received.

3. REVIEW OF POLICY STATEMENT RENEWALS

- Clients Rights and Grievance Policy
- Contract Modification Due to Change in Funding Policy
- Management Plan Policy
- Social Media Policy

Mr. Jun highlighted the minor revisions needed to update the policy statements up for renewal, Clients Rights and Grievance Policy, Contract Modification Due to Change in Funding Policy, Management Plan Policy and Social Media Policy. The revisions made to update the policies have been enumerated on separate documents.

Mr. Jun reported that the Clients Rights and Grievance Policy states that it is the policy of the ADAMHS Board to:

- Affirmatively plan for, assure the protection of, monitor, and fully respond to complaints or grievances concerning rights, granted by statute and/or regulation, of clients applying for or receiving services contracted by the ADAMHS Board.
- Fulfill its statutory obligations, through investigation and referral, regarding the alleged abuse and neglect of persons receiving services from those contracted by the ADAMHS Board.
- Ensure ADAMHS Board compliance with all Federal laws, State laws, and administrative rules and regulations regarding client rights, which include, but are not limited to, confidentiality, access to services, and investigations of alleged rights of violations, abuse, and neglect with clients receiving services from the Ohio Department of Mental Health and Addiction Services (OhioMHAS) licensed/certified providers not funded by the ADAMHS Board.

The Contract Modification Due to Change in Funding Policy states that it is the policy of the ADAMHS Board that modification of any or all of its contracts for alcohol, drug addiction, mental health, and related services may occur during the contract term pursuant to notification from a funder to the ADAMHS Board of an increase or decrease in the ADAMHS Board's funds which will be available for disbursement or pursuant to a material change in the ADAMHS Board funding circumstances which necessitates an adjustment in the value of the maximum dollar amount of a contract.

The decision to reduce or increase the maximum dollar amount of a contract shall be made at a public meeting of the ADAMHS Board. Reductions or increases in the contract amount may be made according to any method the ADAMHS Board deems appropriate, subject to law, contract terms, and provisions of the ADAMHS Board policies. Methods may include, but are not limited to, percentage change applied to any or all services and/or selective changes based upon ADAMHS Board priorities and Community Assessment Plan (CAP), evaluation of outcome data and/or GOSH or any other claims/payment adjudication software system generated data, analysis of volume of services, etc.

Modification of the maximum dollar amount of a contract may result in other contract modifications.

The Management Plan Policy states that it is the policy that in the Chief Executive Officer's (CEO's) extended absence, planned or emergency, the CEO will designate Executive responsibility to a member of the Executive Team to serve as Acting CEO.

Executive Team:

Chief Operating Officer

Assistant Chief Clinical Officer

Chief Strategy and Performance Officer

Chief Financial Officer

The Acting CEO will make all decisions to ensure smooth and continued operation of the Board. The CEO or an Executive Team member, when the CEO is unavailable, shall notify the Board Chair when the need for an Acting CEO is required.

In the absence of the CEO, the Acting CEO shall follow Board policy unless a revision has been submitted and approved by the Board of Directors.

The Social Media Policy states that it is the policy that the use of social media be consistent with its mission and vision statement to promote and 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. This policy applies to all social media use on behalf of the ADAMHS Board.

Social media provides opportunities for the ADAMHS Board, its provider agencies, county and community partners, and advocates to share information and knowledge and to foster learning, innovation, collaboration, and education that mental illnesses, substance use disorders, and addictions are treatable brain diseases; that treatment works; that people recover; that evidence-based practices are effective; and to encourage community collaboration.

Given these policy revisions being proposed contain minor modifications of existing policies, a reading at one General Board Meeting is required prior to an official vote for adoption. As there were no other changes proposed, the committee voted to recommend approving the revised policies to the full Board.

Motion for the Board of Directors to recommend approval of renewing the policy statements, Clients Rights and Grievance Policy, Contract Modification Due to Change in Funding Policy, Management Plan Policy and Social Media Policy, to the full Board. MOTION: R. Blue / SECOND: G. Boehm / AYES: B. Addison, A. Bhardwaj, R. Blue, G. Boehm, J. Dixon, S. Galloway, H. Snider / NAYS: None / ABSTAIN: None / **Motion passed.**

4. FINANCE REPORTS

Ms. Felicia Harrison, Chief Financial Officer, reported that the Administrative Budget that was approved for Calendar Year (CY) 2023 was \$8,080,414 and for September Actual Year to Date (YTD) 2023, the total administrative expenses were \$5,856,213.64; that is roughly 72% of the total Administrative Budget. As a result, the Board is on track with expenses for the first nine months of 2023. Ms. Harrison highlighted that relative to the Board Voucher Report for September 2023, there were a few expenses of note that were identified as two entries; whereby expenses were moved to the Comprehensive Opioid, Stimulant, and Substance Abuse Site-Based Program (COSSAP) grant. These expenses were identified as (926.33) and (237.22).

The Funding Source Budget to Actual YTD, September 2023, 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 \$74,365,289; and through the end of September 2023, the Board has received \$46,639,699.72. Ms. Harrison reported that 63% of the budget has been received.

The Revenues By Source By Month report reflect that in September 2023, the Board received revenues of \$1,867,918.24.

The ADAMHS Board Budget vs. Actuals for 2023 reflect that September YTD Actual is \$60,606,473.49, that is roughly 65% of the Board's anticipated expenditures for the calendar year. Ms. Harrison noted that the Diversion Center's expenditures are reflected on this report.

The Revenue and Expenditures All Accounting Units By Month reflect that the total expenditures in September is \$6,189,080.40.

The Revenues and Expenditures Grants YTD, September 2023 YTD reflects the Grant Accounting Units that include the ADAMHS Department of Justice (DOJ) Grants, Opportunities for Ohioans with Disabilities (OOD) Grant, and Other Grants. The total expenditures for grants YTD is \$4,401,341.25.

The Diversion Center Revenues and Expenditures YTD September 2023 YTD reflects a total of \$3,770,537.22. The total revenue reflects a total of \$3,792,158.19.

The Cash Flow Report, September 2023 shows the 2021 Actual, 2022 Actual and YTD thru September 2023. This report shows a comparison of the available beginning balance, total available resources, expenditures and available ending balance. The available ending balance through September 2023 is \$29,208,928.81.

Motion to recommend approval of the Board Voucher and Expenditure Reports for September 2023 to the full Board.

MOTION: S. Galloway / SECOND: R. Blue / AYES: AYES: B. Addison, A. Bhardwaj, R. Blue, G. Boehm, J. Dixon, S. Galloway, H. Snider / NAYS: None / ABSTAIN: None / **Motion passed.**

5. CONTRACTS

ADAMHS Board staff highlighted agenda process sheets for agreements listed below, answered questions and provided clarification for committee members.

- a. Behavioral Health Criminal Justice (BH/CJ) Linkages Program Funding
 - Recovery Resources - \$93,594.43

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

Recovery Resources utilizes BH/CJ funding to provide mental health screenings, linkage to community-based services and educational services in a group setting. This also includes a trauma education group and peer support services. Recovery Resources received BH/CJ funding for SFY2023 to provide services to CBCF inmates diagnosed with Severe Mental Illness, Substance Use Disorders, or co-occurring disorders. Board staff is recommending that the Board Directors accept funding from OhioMHAS for the BH/CJ Program in the amount of \$83,333 for SFY2024 and to contract with Recovery Resources to implement the program for \$93,594.43 which includes approved SFY2023 carryover for the term of July 1, 2023 through June 30, 2024. Ms. Heidi Snyder, MSW, LSW, Supervisor of Forensic Care Coordination at Recovery Resources, was present to respond to questions from the Board Directors.

- b. Community Transition Program (CTP) Funding
 - FrontLine Service - \$686,696.88

Ms. Schaefer reported that the CTP connects individuals with behavioral health diagnoses that are being released from prison to behavioral health services in the community. This program provides support and assistance to improve each person's ability to successfully reintegrate back into the community; and provides direct treatment services prior to (in-reach - when possible) and upon release. This program also provides recovery supports that help eliminate barriers to treatment and reentry and are specific to the participant's needs. A recovery support is a form of assistance intended to help an individual with mental health needs, or a member of the family of such an individual, to initiate and sustain the

individual's recovery. Common recovery supports might include, but are not limited to housing, employment services, peer recovery support, transportation, life skills, spiritual support, and other reentry needs. Lastly, this program provides a variety of Substance Use Disorder (SUD) treatment and recovery services.

FrontLine Service is the sole provider of the CTP, formerly referred to as the Mental Health Prison Reentry, for the adult prison population who are returning to Cuyahoga County. CTP started as a pilot program with FrontLine Service in July 2018 and expanded to include referrals to those in need of SUD treatment and services in 2019. OhioMHAS approved carryover funds from the SFY2023 allocation of \$86,696.88 to be used in conjunction with the SFY2024 allocation of \$600,000 for the program. Based on historical referral data, the program plans to serve approximately 375 clients. Board staff is recommending that the Board Directors approve funding for the CTP to FrontLine Service in the amount of \$686,696.88. This funding is from OhioMHAS and includes \$86,696.88 in approved carryover funds, and the SFY2024 allocation of \$600,000 for the term of July 1, 2023 through June 30, 2024. Ms. Diana Warman, Forensic Program Coordinator at FrontLine Service, was present to respond to questions from the Board Directors.

c. Security Services Contract

- U.S. Protection Services, LLC - Not to exceed \$380,111.45

Mr. Jun reported that the Board currently contracts with Willo Security for armed security guard services through December 31, 2023 and is paid \$23.50 per hour for regular hours, and \$35.25 per hour on designated holidays. In July 2023, the Board Directors authorized Board staff to release a Request for Proposal (RFP) to secure bids for security services for CY2024 and CY2025, with a one-year optional renewal for CY2026. The Board received three proposals to the RFP by the August 23, 2023 deadline. The proposals were reviewed and discussed by the RFP Review Committee, which was appointed by the Board's CEO, looking at the ability to perform the services requested, costs, financial stability, etc.

The RFP Review Committee is recommending that U.S. Protection Services, LLC, formerly known as Willo Security, be awarded a two-year contract for the Board's administrative office and Seasons of Hope building, starting January 1, 2024 through December 31, 2025, with the option for a one-year renewal for CY2026. For designated holidays, the hourly rate will be 1.5 times the hourly rate. U.S. Protection Services, LLC was selected due to its 24-hours, 7-days a week dispatch office, which monitors timekeeping and coverage, hourly rate, and history doing business with the Board.

Armed security guard services are provided at the Board's administrative office, located at 2012 West 25th Street, Cleveland, Ohio, during the hours of 7:00 a.m. - 6:30 p.m., Monday through Friday with an additional guard during Board meetings, as well as the Seasons of Hope building during the hours of 7:00 p.m. - 7:00 a.m., up to seven days a week. Duties include but are not limited to: building opening and closing inspections; foot patrol of building, visual surveillance, visitor check-in and physical presence in the Board's entrance during employee arrival/departure times and evening meetings and Board meetings, responding to emergency situations, completing incident reports and participation in workplace violence reduction trainings and procedure drills. Board staff is recommending that the Board Directors approve a two-year contract with U.S. Protection Services, LLC for armed guard services at the Board's administrative office and Seasons of Hope building in an amount not to exceed \$380,111.45 for the term of January 1, 2024 through December 31, 2025. Mr. Ryan Fioritto, Chief Operating Officer at U.S. Protection Services, LLC, was present to respond to questions from the Board Directors.

- d. Piloting a Mental Health Docket Incorporating a Drug Court Model to Improve Outcomes for Adults with Co-Occurring Disorders – \$615,000 – Woo Jun
- Catholic Charities - \$340,000
 - Signature Health - \$275,000

Mr. Jun reported that Piloting a Mental Health Docket Incorporating a Drug Court Model to Improve Outcomes for Adults with Co-Occurring Disorders will not be considered for contact approval this month due to outstanding questions regarding this program.

- e. Mobile Response and Stabilization Services (MRSS) Infrastructure and Non-Medicaid Youth Pass-through Funding – \$50,000 & Pooled
 - Bellefaire Jewish Children’s Bureau (JCB) - \$16,666.66 & Pooled
 - First Alliance Healthcare of Ohio - \$16,666.67 & Pooled
 - Life Solutions South, LLC - \$16,666.67 & Pooled

Mr. Jun reported that MRSS is a 24/7 crisis service where a team of two providers responds in person within sixty minutes for youth up to age 21. MRSS can provide up to four to six weeks of in-home de-escalation and stabilization. The MRSS team works within the family system to create safety plans, teach skills, provide peer support and link to ongoing services to prevent future crises and reduce the need for out-of-home treatment. MRSS is an evidence-based and trauma informed statewide service, included in Ohio Resilience through Integrated Systems and Excellence (OhioRISE). It has a statewide, centralized call center to triage and dispatch calls to local certified MRSS providers. OhioMHAS is leading the selection and certification of MRSS providers and oversees the implementation and coordination of the statewide call center and MRSS provider network. The crisis is defined by the youth and/or family according to the MRSS model. A team of two MRSS providers responds in person to calls in the community. The MRSS team is comprised of licensed supervisors, licensed therapists, certified peer supporters and has access to a nurse practitioner or psychiatrist.

The Board will serve as the fiscal agent for pass-through funding for MRSS infrastructure to Cuyahoga County MRSS providers in the amount of \$50,000 equally shared amongst the three MRSS providers for State Fiscal Year (SFY) 2024. Additionally, Aetna, through Ohio Department of Medicaid (ODM), has allocated \$2,000,000 in pooled funding throughout the State of Ohio available to all Alcohol, Drug Addiction and Mental Health (ADAMH) Boards to serve Non-Medicaid Youth where the Board will also serve as fiscal agent for the pass-through funding. It is anticipated that approximately 500 families will be served. Board staff is recommending that the Board Directors accept \$50,000 of pass-through funding from OhioMHAS for MRSS infrastructure and contract with the following providers for SFY2024: Bellefaire JCB – \$16,666.66 and pooled, First Alliance Healthcare of Ohio – \$16,666.67 and pooled and Life Solutions South, LLC – \$16,666.67 and pooled for the term of July 1, 2023 through June 30, 2024. Representatives from the provider agencies were present to respond to questions from the Board Directors.

- f. Consulting and Data Conversion Services
 - Clear Impact - \$8,250

Ms. Clare Rosser, Chief Strategy and Performance Officer, reported that OhioMHAS selected Clear Impact as the outcomes performance data platform that will be used for their internal, overall performance measures and with Boards across the state on tracking Community Assessment and Plan (CAP) indicators. OhioMHAS intends to grant Boards access to the platform with unlimited data scorecard capability and unlimited users. The OhioMHAS Bureau of Quality, Planning, and Research communicated that Boards will be allowed to use the platform for any projects, including data collection from vendors or performance measures from the local strategic plan, in addition to what the State will require for reporting. OhioMHAS intends to cover the cost of hosting the Clear Impact technology for Boards after the fall of 2023 through SFY2025, with possible continued funding. This \$8,250 agreement is a one-time cost that allows our Board to work with the Clear Impact researchers and data scientists who are also working with our State partners, to fully align and integrate our local data in the newly State-required Clear Impact system and leverage the investment by the State to our full advantage.

Clear Impact will provide consulting services to identify outcomes and indicators based on our local data sources and service priorities, and establish the HIPAA-compliant, secure technology platform needed to track results. The consulting services will include 20 hours of technical assistance from a Clear Impact Senior Consultant to identify outcomes (i.e. “Increased Access to Services”) and related indicators from our established data sources, which include the Great Office Solution Helper (GOSH) billing and claims system, program reports, Ohio Scales, Brief Addiction Monitor (BAM), Substance Abuse and Mental Health Services Administration’s (SAMHSA’s) National Outcome Measures (NOMs), the Mental Health Statistics Information Program (MHSIP) instrument, and other measurement tools, and design information collection and visualization methods within the Clear Impact system.

The data conversion and migration services will involve transferring data into Compyle or Scorecard (Clear Impact products) from data template spreadsheets. This process will include project scope and data template creation, pre-migration data preparation and scheduling, developer data transformation and data migration, and a quality assurance (QA) review of migration. This means that the consultant will work with ADAMHS Board staff to establish repositories for the data we collect from providers and for other projects, identify elements from those data collections to “feed up” into data scorecards related to priority outcomes, establish the technological connections to transfer and house the data, make sure that the system works to produce reports and show results, and provide training on utilizing Results-Based Accountability software. Board staff is recommending that the Board Directors allocate funds to Clear Impact in the amount of \$8,250 for the term of November 1, 2023 to December 31, 2024.

- g. Harm Reduction Vending Machine Program – \$40,500
 - Circle Health Services - \$30,375
 - Murtis Taylor Human Services System - \$10,125

Ms. Starlette Sizemore, Director of Special Projects, reported that the Board implemented a \$1.2 million dollar harm reduction pilot program using State Opioid Response (SOR) 2.0 funds in 2022. The grant did not include program administration/maintenance fees to ensure restocking and tracking of Naloxone kits for the vending machines to make free kits available to the community as a preventive measure. Circle Health Services is managing three vending machines that are located at:

- Gordon Square Office - 5209 Detroit Avenue, Cleveland, Ohio 44102
- Uptown Office - 12201 Euclid Avenue, Cleveland, Ohio 44106
- East Office East - 4400 Euclid Avenue, Cleveland, Ohio 44103

Murtis Taylor Human Services System is managing one vending machine that is located at 13422 Kinsman Road, Cleveland, Ohio 44120. Program administration funding will pay for the tracking, filling, marketing, and reporting use of vending machines, making lifesaving harm reduction resources available to Cuyahoga County residents. Board staff is recommending that the Board Directors approve program administration fees for the Harm Reduction Vending Machine Program in the amount \$40,500 for the term of October 1, 2023 through December 31, 2024 and contract with Circle Health Services for \$30,375 and Murtis Taylor Human Services System for \$10,125. Ms. Beckie Kenney, LPCC-S, Vice President of Clinical Services and Chief Quality Officer at Murtis Taylor Human Services System, was present to respond to questions from the Board Directors.

Motion to recommend approval of Contracts (as listed above) to the full Board. MOTION: S. Galloway / SECOND: R. Blue / AYES: AYES: B. Addison, A. Bhardwaj, R. Blue, G. Boehm, J. Dixon, S. Galloway, H. Snider / NAYS: None / ABSTAIN: None / **Motion passed.**

6. CONTRACT AMENDMENTS

- a. Amendment to Resolution No. 22-11-05, Cleveland Division of Police Co-Responder Program – No-cost Term Extension
 - FrontLine Service
 - Murtis Taylor Human Services System

Ms. Harrison reported that the purpose of the Cleveland Police Co-Responder Team (CRT) is to divert people in crisis to the least restrictive alternative and linkages to services where a Specialized Crisis Intervention Team (CIT) Officer responds to a mental health crisis with a Crisis Specialist. There are five Districts with CRT in place with FrontLine Service assigned to Districts 1, 2 & 3 and Murtis Taylor Human Services System assigned to District 4 & 5. The City of Cleveland applied for and received a federal grant from the U.S. Department of Justice (DOJ) Community Oriented Policing (COPS) office in November of 2021 to expand the CRT to cover the morning shift.

The City of Cleveland is extending the DOJ COPS grant through August 31, 2024 as a no-cost term extension. As an expansion of the Cleveland Police CRT Program, the COPS grant added two additional fulltime positions to cover the morning shift as a part of the Cleveland Police CRT with both FrontLine Service and Murtis Taylor Human Services

System being awarded \$119,025 for a total of \$238,050. Before the COPS grant, Cleveland Police CRT operated 40 hours per week on second shift. Board staff is recommending to the Board Directors enter into a contract amendment for a no-cost term extension with FrontLine Service and Murtis Taylor Human Services System for the term of October 1, 2021 through August 31, 2024.

- b. Amendment to Resolution No. 22-09-05, Diversity, Equity and Inclusion (DEI) Strategic Implementation Plan Consultative and Training Services
- Rice Education Consulting, LLC (REdCon) - No New Funding

Starting in October of 2021, REdCon worked with the Board to develop a DEI Strategic Implementation Plan, which was unanimously adopted at the June 22, 2022, General Meeting via Resolution No. 22-06-08. The plan was developed with the input of clients, community members, system partners, the Board of Directors and staff. The DEI Strategic Implementation Plan is an overlay to the ADAMHS Board 's 2021-2025 Strategic Plan with clearly defined goals and action steps that the ADAMHS Board will use to develop a culturally competent, culturally appropriate, and diverse mental health, addiction and recovery support system that delivers treatment, recovery and prevention services that prioritize equity and inclusion to meet the needs of the diverse residents of Cuyahoga County.

This amendment adjusts the amounts from each funding source for the work completed by REdCon. Two additional projects from the Ohio Association of County Behavioral Health Authorities (OACBHA) Grant approved in Resolution No. 22-07-02 were completed as a part of REdCon's agreement: Visual Representation of Board Diversity (\$500) and the Workforce Recruitment Materials for Provider Network (\$3,750) but were not included in the original Agenda Process Sheet. The total amount remains the same, with no other changes.

REdCon will work with the ADAMHS Board to provide consultation and training to implement action items from the DEI Strategic Implementation Plan, as well as initiatives from the Health Equity and Cultural Competency (HECC) Plan developed through a partnership with OACBHA. REdCon will:

- Assist with the implementation of the DEI Strategic Implementation Plan goals and actions including creating tracking mechanisms to measure success and evaluate outcomes.
- Review Board policies for equity, including:
 - Clients Rights and Grievance Policy
 - Contract Modification Due to Change in Funding
 - Non-Discrimination & Cultural Competence Policy
 - Recruitment of ADAMHS Board of Directors
 - Probationary Period for New Providers and or Programs
 - Waiting list Management Policy
 - Social Media Policy
- Work with Board staff to co-lead the following DEI Strategic Implementation Plan actions:
 - 1.1.A.2: Identify DEI priorities for the Board and the network
 - 1.1.B: Establish and implement DEI metrics for providers
 - 1.1.B.4: Provide learning opportunities and/or develop educational materials for agencies to ensure they have the knowledge and resources to collect the necessary information for tracking DEI progress
 - 1.2.A: Establish DEI metrics to include in evaluating the effectiveness of providers and overall service areas
 - 1.3.B: Evaluate the cultural competency practices and outcomes of providers
 - 4.1.A.1: Develop standard processes for implementing and upholding policies in an equitable manner
 - 5.1.A.2: Create educational materials to assist providers with diverse recruitment strategies
 - 6.1.A.3: Develop materials for communicating DEI (representation, language and thinking, channels of communication)
- Lead the following HECC Plan actions:
 - Provider Job Description Review to Identify Bias/Improve Equitable Hiring, which will include:
 - Conducting reviews of a random sampling of job descriptions from the provider network, looking for bias and providing recommendations to support more equitable hiring and employment practices.

- Submitting a general report of suggested improvements that the ADAMHS Board can make available to all providers.
 - Provider Workforce Review to Identify Gaps/Establish Baseline Data for Equitable Hiring, which will include:
 - Conducting a workforce diversity analytics survey or process to capture the current demographics and credentials of our provider network and how they compare to the Northeast Ohio labor market, as well as baseline data on the filled/vacant positions within the local provider network.
 - Submitting a report clearly showing all data plus an analysis of gaps/needs and recommendations.
 - Visual Representation of Board Diversity
 - Workforce Recruitment Materials for Provider Network
- Work with Executive Staff on other organizational development and DEI initiatives.
- Conduct up to 18 hours of live face-to-face and/or virtual training facilitation for the ADAMHS Board, staff and/or network.
- Develop up to 100 minutes of new online or in-person training content that can be offered through our website for the ADAMHS Board staff and/or members of our network.
- Design learning and educational material regarding DEI for the ADAMHS Board (1-2 page visual).

Board staff is recommending that the Board Directors amend Resolution No. 22-09-05 to update the totals for each funding source related to the REdCon contract for the term of October 1, 2022 through September 30, 2023. No new funding is involved in this request.

- c. Amendment to Resolution No. 23-01-03, Naloxone Emergency Cabinets Administration
- The MetroHealth System - \$41,250 (\$26,250 New Funding)

In January 2023, the Board Directors approved a \$15,000 contract with The MetroHealth System for the Naloxone Emergency Cabinets Administration Program. In September 2022, the Board Directors approved a \$51,300 contract to administer the entire emergency naloxone cabinets programs and one vending machine.

The MetroHealth System is the Board's administrator of the Naloxone Emergency Cabinets Administration Program. Additionally, The MetroHealth System was also the Board's administrator of the Naloxone Cabinets and Vending Machine Program with an agreement that ended September 30, 2023. In order to reduce duplication and redundancy, the Naloxone Cabinets and Vending Machine Program will be added to Naloxone Emergency Cabinets Administration Program in the amount of \$26,250 through March 31, 2024. The MetroHealth System will be responsible for ongoing planning for locations, contents, and administration and maintenance for cabinets at various locations and a vending machine located at 2500 MetroHealth Drive, Cleveland, Ohio 44109. Board staff is recommending that the Board Directors amend Resolution No. 23-01-03 to add \$26,250 for a total of \$41,250 and enter into a contract addendum with The MetroHealth System for the term of January 26, 2023 through March 31, 2024.

- d. Amendment to Resolution No. 23-04-02, Project AWARE Behavioral Health & Wellness Coordinator (BHWC) Funding for The Ohio School Wellness Initiative (OSWI)
- Educational Service Center (ESC) of Northeast Ohio - No-cost Term Extension

The OSWI was designed to explore, implement, and sustain a full continuum of care including prevention, early intervention, and treatment practices for K-12 students within local districts who adopt student assistance programs (SAP), multi-tiered systems of support, and staff wellness frameworks. The BHWC will provide systematic approaches to support behavioral health promotion, prevention, early identification, intervention, referral processes, and guided support services for K-12 students who are exhibiting a range of substance use, mental and behavioral health risk factors. The positions will also provide resources, online training, and guidance related to processes within the schools and with continuous improvement strategies for services to students. The cornerstone of the OSWI is the development of an Ohio Model SAP that can serve as a best practice standard for Ohio's K-12 schools.

OhioMHAS has extended the timeframe for the use of funding to June 30, 2024. The extension will support and sustain the OSWI. Project AWARE funding will support BHWC and Student Assistance Programming for evidence-informed practices. Board staff is recommending that the Board Directors amend Resolution No. 23-04-02, to extend the term of the contract with the ESC of Northeast Ohio for Project AWARE until June 30, 2024. A representative of the ESC of Northeast Ohio was present to respond to questions from the Board Directors.

Motion to recommend approval of Contract Amendment (as listed above) to the full Board. MOTION: H. Snider / SECOND: G. Boehm / AYES: B. Addison, A. Bhardwaj, R. Blue, G. Boehm, J. Dixon, S. Galloway, H. Snider / NAYS: None / ABSTAIN: None / **Motion passed.**

7. IDENTIFY CONSENT AGENDA

Dr. Fowler recommended including the September 2023 Finance Reports, Contracts; with the exception of the Piloting a Mental Health Docket Incorporating a Drug Court Model to Improve Outcomes for Adults with Co-Occurring Disorders, and Contract Amendments into the Consent Agenda to be recommended for approval to the full Board.

8. DIVERSION CENTER UPDATE

Mr. Osiecki provided a Diversion Center update. He reported that on Tuesday, October 10, 2023, Board staff met with representatives of Cuyahoga County, Oriana House and FrontLine Service to discuss the extension of a contract for the Cuyahoga County Diversion Center. As a result, Board staff are presently waiting to hear back from Cuyahoga County's representatives.

9. BEHAVIORAL HEALTH CRISIS CENTER UPDATE

Mr. Osiecki also provided a Behavioral Health Crisis Center update. He reported that with any extensive planning process, there have been a few bumps in the road, such as the initial location identified at St. Vincent may not work. Mr. Osiecki reported that there are also a few other options on the St. Vincent Campus that might work; and shared that representatives of St. Vincent will inform the Board of this status by the end of October.

Mr. Osiecki reported that discussion has transpired with OhioMHAS regarding the American Rescue Plan Act (ARPA) funding. He shared that he recently received a memorandum clarifying the use of the ARPA funding; and noted that a meeting was had with Signature Health regarding the "Adam – Amanda" Center.

10. PRESENTATION OF CY2024 ADAMHS BOARD BUDGET

Mr. Osiecki distributed to the Board Directors a working document detailing the CY2024 Budget material; and highlighted that the ADAMHS Board of Cuyahoga County is statutorily responsible in Ohio Revised Code (ORC) 340 for planning, funding and monitoring/evaluating public mental health and addiction treatment services, as well as prevention, treatment and recovery support services for the residents of Cuyahoga County.

He reported that this CY2024 budget includes funding at CY2023 levels to most providers, although there are some changes to individual providers and/or programs including decreased or increased funding. The budget strives to maintain a continuum of care that provides cost-effective, quality, diverse and inclusive services with accountability to the public ensuring that federal, state, and local funds are effectively utilized. A Needs Assessment will be concluded in mid-CY2024 and requests for proposals may be issued for services that are identified as unmet needs. During CY2024, Board staff will work to enhance our data collection to gather meaningful information to make future informed decisions. Contracts with our CY2024 providers will include uniform service outcomes indicators appropriate to the services to measure outcomes, such as Devereux Early Childhood Assessment (DECA), Devereux Student Strengths Assessment (DESSA), Devereux Adult Resilience Survey (DARS), Brief Addiction Monitor (BAM), Ohio Scales and National Outcomes Measures (NOMS).

The ADAMHS Board has made a commitment to make culturally specific prevention, crisis, treatment, and recovery support services available to the residents of Cuyahoga County. We are also collaborating with providers and partners to attract and retain motivated, diverse and skilled professionals to staff our system. Mr. Osiecki shared that the next page of the packet illustrates demographics across our provider network including clients and staff compared to Cuyahoga County census data.

The CY2024 budget is reviewed by the ADAMHS Board Directors on October 18, 2023, October 25, 2023 and November 8, 2023, prior to its passage during the November 15, 2023 General Meeting.

Ms. Rosser reported on the Board's DEI vision, which is an inclusive mental health, addiction and recovery services network that ensures the highest quality of person-centered and culturally responsive care. She shared that in 2023, the Board contracted with REdCon to conduct data analysis on the distribution of services by race and ethnicity throughout the 70+ provider agency network, based on 2022 Outcomes Narrative reports. Based on this analysis, REdCon developed demographic insights that are available in detail within a full report. Ms. Rosser highlighted a chart identifying the percentage of clients within each racial or ethnic group that accessed services by program type.

Ms Rosser also reported on the provider/program outcomes review process to determine CY2024 funding. Agencies that are being recommended for continued funding in CY2024 have been reviewed by staff for the following information for the first six months of CY2023 and all of CY2022:

- Number of clients proposed to be served, actually served, and completed the program.
- Average number of times clients were seen by staff.
- Average client caseload per staff member.
- Program/service goals completed.
- Metrics used to measure success.
- Program/service outcomes.
- Average cost per client.

The ADAMHS Board seeks to fund high quality, cost efficient, appropriate and accessible client care. To achieve these goals the Board also uses several review processes for the programs it funds, such as Quality Performance Reviews and Program Reviews, which may periodically result in a Performance Improvement Plan. Additionally, Board Finance staff monitor provider agency spending throughout the year to make sure providers are spending within the contract funding allocations. Providers agree in their contracts to work towards achieving quality outcomes for their Board funded programs based on the ADAMHS Board Quality Performance Indicators. Indicators are designed to align the local behavioral health system with state and national strategic indicators and includes the Substance Abuse and Mental Health Services (SAMHSA) National Outcomes Measures (NOMs).

Ms. Harrison reported on the financial stability of provider agencies. She reported that financial stability means the ability of an organization to anticipate, prepare for, respond, and adapt to incremental change and sudden financial disruptions. Through the most recent RFP process the Board asked provider agencies to explain how they ensure the long-term financial stability of their organization. The Board will collect yearly financial audits for each agency receiving over one hundred thousand dollars (\$100,000) per ORC 9.234. Financial stability is ensured using strategies including, but not limited to, the following:

- Monitoring agency expenses, revenues, and cash flows continually by staff with monthly presentations of financial status reports to the agency Board of Directors.
- Aggressively seeking to diversify revenue streams through government and foundation grant dollars, as well as private donations.
- Annual fund-raising campaigns to supplement business operations.
- Maintaining a cash reserve to cover expenses for 60-90 days of agency operations.
- Establishing a bank line of credit to sustain operations during emergent situations.
- Employing consultants to assist with financial record keeping and report generation.
- Annual audits of the agency by an independent accounting firm.

Ms. Harrison highlighted the proposed CY2024 ADAMHS Board budget. The budget is to be used in the following areas based on the anticipated revenues at this time: CY2024 Board Administrative Budget, CY2024 Provider Direct Services Budget, CY2024 Other Behavioral Health Services Budget, CY2024 Opportunities for Ohioans with Disabilities (OOD) – Employment Case Services Contract and CY2024 Federal Grants. She shared a list of projected revenues to be received during CY2024, whether federal, state or local. The revenues show the amount received in CY2023; and the projected revenue to be received in CY2024. Some revenue increased, while other revenue decreased. The biggest change in the projected revenue is the amount intended to be utilized from the Board's cash balance or reserve; and in order to meet the budget, \$21,000,000 will be utilized from the Board's reserve. Ms. Harrison also highlighted the CY2024 Budget at a Glance, which included CY2024 Funding by Provider, CY2024 Funding Recommendations by Service and CY2024 Recommended Program Changes.

Ms. Harrison shared that pooled funding is a client-centered funding strategy for mental health and addiction treatment services. Since Medicaid Expansion and Behavioral Health Redesign, mental health and addiction treatment services for more and more individuals are being covered. The ADAMHS Board has found that there is no longer a need to allocate and encumber funding by agency for treatment services.

Agencies providing treatment services will not receive a specific allocation. The treatment services for individuals who are not eligible or waiting for Medicaid will be paid from a pooled funding source through fee for service billing. The available pool of funding was determined by CY2023 treatment funding usage. The Board will monitor the funding pool through monthly utilization reviews. After a brief discussion of the CY2024 ADAMHS Board budget, Ms. Harrison responded to questions from the Board of Directors.

Ms. Rosser shared program locations and highlighted maps, which were broken down by program type.

When additional county, state and/or federal funding is received, including grants, the Board will issue RFPs and/or select providers for targeted programs and/or services. Mr. Osiecki thanked the Board Directors for their time and continued dedication and commitment to our Board and the community. He asked Board Directors to e-mail or call him directly with questions or concerns regarding the CY2024 funding recommendations so that answers to questions can be provided before the next Board meeting.

Ms. Sadigoh Galloway and Dr. Fowler commended Board staff for their efforts with the CY2024 ADAMHS Board budget.

11. NEW BUSINESS

No new business was received.

12. FOLLOW-UP

No follow-up was received.

13. PUBLIC COMMENT PERIOD

No public comment was received.

14. UPCOMING OCTOBER AND NOVEMBER BOARD MEETINGS:

- General Meeting: October 25, 2023 at May Dugan, 4115 Bridge Avenue, Cleveland, Ohio 44113
- Community Relations & Advocacy Committee Meeting: November 1, 2023
- Committee of the Whole Meeting: November 8, 2023
- General Meeting: November 15, 2023

There being no further business, the meeting adjourned at 5:43 p.m.

Submitted by: Linda Lamp, Executive Assistant

Approved by: J. Robert Fowler, Ph.D., Board Chair, ADAMHS Board of Cuyahoga County

Data Analysis: Barriers and Assets that may impact access to services

Based on ADAMHS Board Provider Outcome Narratives

EXCERPT – FULL REPORT TO BE PUBLISHED SOON

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Project Deliverable

2.2 Establish DEI metrics to include in evaluating the effectiveness of providers and overall service areas

The following methodology was used to establish DEI metrics:

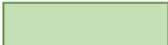
Analyze the distribution of services and programs by client demographic to identify:

- Service trends by race/ethnic group
 - Research questions: *What services are being utilized disaggregated by demographic? What services are not being utilized disaggregated by demographic?*
- Barriers that may impact access to services
 - Research questions: *Are there cultural factors that impact service utilization?*
- Assets that can be leveraged to remove barriers
 - Research question: *What do we need to do to enable the best outcomes for clients?*

Recommendation: Utilize measures highlighted for the data dashboard to evaluate the effectiveness of DEI across service areas.

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Percentage of clients within each racial or ethnic group that accessed services by program type							
Program Type	American Indian or Alaska Native	Black or African American	Native Hawaiian or Other Pacific Islander **	White	Other	Hispanic (Latinx)	Non-Hispanic (Non-Latinx)
Adult BH Services	1.42%	2.08%	0.19%	1.47%	0.30%	1.42%	1.25%
Adult Crisis	0.89%	3.44%	1.71%	4.31%	3.29%	5.08%	4.00%
Adult MH Services	3.56%	3.46%	0.00%	1.09%	0.49%	1.36%	2.19%
AOD Prevention	7.11%	1.57%	0.00%	4.08%	0.65%	1.88%	2.95%
Children's MH	0.44%	1.36%	1.87%	1.83%	1.90%	1.51%	1.71%
Children's Residential	0.00%	9.50%	4.68%	1.56%	21.90%	19.66%	5.92%
Criminal Justice	0.89%	7.74%	0.38%	4.95%	4.36%	4.23%	6.41%
Employment	0.20%	1.62%	0.16%	3.55%	0.94%	1.68%	0.05%
Faith-based	0.00%	1.75%	3.12%	2.20%	2.07%	1.97%	2.10%
Housing RCFs	0.00%	2.63%	0.00%	3.70%	4.17%	4.97%	1.81%
Housing/Homelessness	1.33%	4.06%	0.19%	2.60%	2.24%	2.67%	3.25%
Other (Peer Support)	10.23%	1.84%	0.78%	1.10%	1.31%	1.69%	1.33%
Peer Run Organizations	6.22%	1.22%	0.03%	0.64%	0.19%	0.43%	0.65%
Peer Support	40.91%	0.03%	0.00%	0.01%	0.03%	0.00%	0.02%
Prevention	3.13%	1.49%	2.18%	0.63%	0.71%	0.92%	0.96%
Recovery/Sober Housing	5.00%	2.17%	0.00%	0.55%	0.75%	0.80%	1.33%
School-based	8.11%	3.13%	0.78%	1.42%	1.40%	1.81%	1.99%
SUD Outpatient Treatment	1.97%	3.20%	0.62%	3.72%	3.15%	3.40%	3.45%
SUD Residential	1.33%	9.31%	1.87%	8.85%	7.73%	5.61%	9.61%
Transportation	2.42%	1.50%	0.00%	1.07%	2.11%	2.12%	1.05%
Unspecified	4.84%	4.94%	0.47%	2.68%	1.11%	0.92%	3.89%
Withdrawal Management	0.00%	31.98%	80.96%	47.98%	39.20%	35.85%	44.07%

 Services accessed most
 Services accessed least

***Data Analysis Assumption: Clients of Asian race/ethnicity are classified as either Native Hawaiian/ Other Pacific Islander or Other. This particular data set used categories from past U.S. Census collections, which have since been updated.*

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Demographic Insights: American Indian or Alaska Native

- According to the [Indian Health Service](#), Indigenous people have disproportionately higher rates of mental health concerns such as suicide, post-traumatic stress disorder, and substance use disorders.
- 57.3% of services sought in Cuyahoga County by American Indian or Alaska Native were peer support and peer run organizations.
- Beyond peer support, AOD prevention and school-based services made up 15% of the remaining services sought by this demographic. Prevention strategies seem to be effectively reaching the youth population.
- Whereas other ethnic groups has significant utilization of withdrawal management (detox) services, this group had little to no interaction with withdrawal management (detox) or crisis management services.

DEI Metrics:

1. Increase in utilization of prevention and crisis services among the American Indian or Alaska Native population
 - Leverage peer support and peer led services to do this

<https://www.ihs.gov/newsroom/factsheets/behavioralhealth/>
https://repository.upenn.edu/cgi/viewcontent.cgi?article=1164&context=edissertations_sp2
https://www.ihs.gov/sites/newsroom/themes/responsive2017/display_objects/documents/factsheets/BehavioralHealth.pdf

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Demographic Insights: Black/African American

- The over-index in utilizing housing and SUD services indicates that there may be significantly negative impacts to stability for clients and their families (based on Social Determinants of Health)
- Comparatively, this group seems to be under-utilizing peer support groups, AOD Prevention, children and adult mental health services and prevention services, which could have a significant impact on SDoH.

DEI Metrics:

1. Increase in the utilization of AOD Prevention programs for Black/African American youth
2. Promote access to prevention services overall for Black/African American demographic
3. A Social Determinants of Health (SDoH) intervention may be needed as higher utilization of SUD programs, residential programs and housing/homelessness assistance impact each of these determinants negatively for Black/African American clients

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Demographic Insights: Native Hawaiian or Other Pacific Islander

- The relatively high utilization of withdrawal management (detox) services indicates that SDoH interventions may be needed.
- The utilization of faith-based services is slightly higher than other ethnic groups.

DEI Metrics:

1. Increase in the utilization of AOD Prevention programs for Native Hawaiian or Other Pacific Islander youth
2. Promote access to prevention services overall for this demographic

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Demographic Insights: Hispanic (Latinx)

- The higher utilization (than other ethnic groups) of housing and SUD services indicates that there may be significantly negative impacts to stability for clients and their families (based on Social Determinants of Health)
- Comparatively, this group seems to be under-utilizing peer support groups, AOD Prevention, children and adult mental health services and prevention services which could have a significant impact on SDoH.

DEI Metrics:

1. Increase in the utilization of AOD Prevention programs for Hispanic (Latinx) youth
2. Promote access to prevention services overall for Hispanic (Latinx) demographic
3. A Social Determinants of Health (SDoH) intervention may be needed as higher utilization of SUD programs, residential programs and housing/homelessness assistance impact each of these determinants negatively for Hispanic (Latinx) clients.

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DEI Objectives Summary

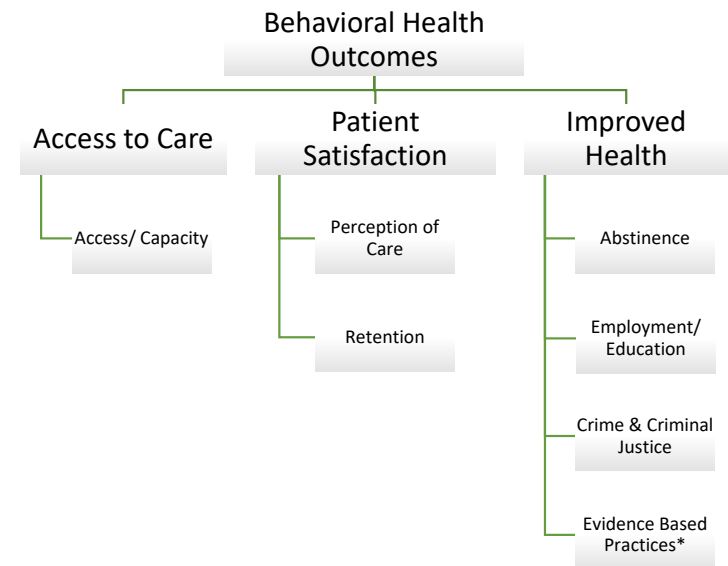
The following table is a summary of suggested areas of focus related to DEI for each demographic that may support the best possible outcomes for clients.

Demographic	Recommendations to promote DEI
American Indian or Alaska Native	<ul style="list-style-type: none"> ▪ Increase in utilization of prevention and crisis services leveraging peer support and peer led services
Black/African American	<ul style="list-style-type: none"> ▪ Increase in the utilization of AOD Prevention programs for Black/African American youth (Connect to Devereux Assessments) ▪ Promote access to prevention services overall to the Black/African American demographic (Connect to Devereux Assessments)
Hispanic (Latinx)	<ul style="list-style-type: none"> ▪ Increase in the utilization of AOD Prevention programs for Hispanic (Latinx) youth (Connect to Devereux Assessments) ▪ Increase promotion of prevention services overall for Hispanic (Latinx) demographic (Connect to Devereux Assessments)
Non-Hispanic (Non-Latinx)	<ul style="list-style-type: none"> ▪ Expansion of ethnic categories in all client data collection tools
White	<ul style="list-style-type: none"> ▪ Increase promotion of prevention programs
Native Hawaiian or Other Pacific Islander	<ul style="list-style-type: none"> ▪ Increase in the utilization of AOD Prevention programs ▪ Increase in promotion of prevention programs overall for Native Hawaiian or Other Pacific Islander
All demographics	<ul style="list-style-type: none"> ▪ A Social Determinants of Health (SDoH) intervention may be needed as higher utilization of SUD programs, residential programs and housing/homelessness assistance impact each of these determinants negatively for Black/African American and Hispanic (Latinx) clients and their families ▪ Develop targeted requests to address these DEI measures

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Behavioral Health Outcomes that drive DEI

- SAMHSA (2023), defines behavioral health equity as the right of all individuals, regardless of race, age, ethnicity, gender, disability, socioeconomic status, sexual orientation, or geographical location, to access high-quality and affordable healthcare services and support
- SAMHSA groups Social Determinants of Health into 5 domains with healthcare access and quality being a domain. The following 3 behavioral health outcomes will support ADAMHS will measuring healthcare access and quality to drive behavioral health equity.



The chart includes REdCon recommendations on the most meaningful measures from NOMS that will support behavioral health outcomes that drive DEI. If possible, each of these domains should be reviewed by demographic to help identify progress toward behavioral health equity.

<https://bhsd.sccgov.org/sites/g/files/exjcpb711/files/SAMHSA-National-Outcome-Measure-Domains.pdf>

*Evidence-based practices must be applicable to the race/ethnicity/culture of the clients who are receiving services.

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2023 Workforce Survey ADAMHS

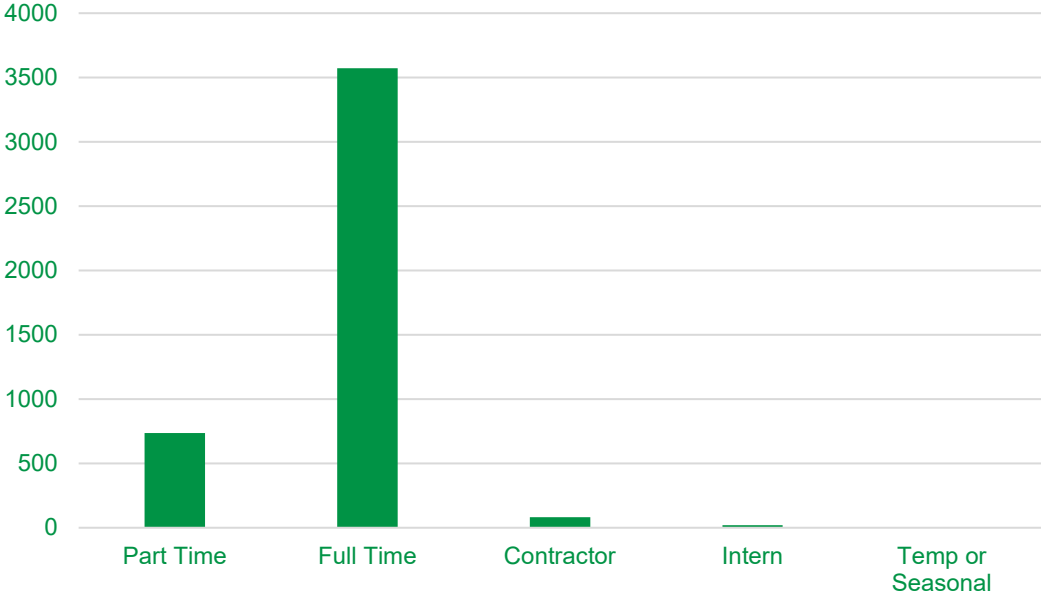
This document provides key data outcomes from the workforce data survey.

Submitted by: Rice Education Consulting, LLC 2023



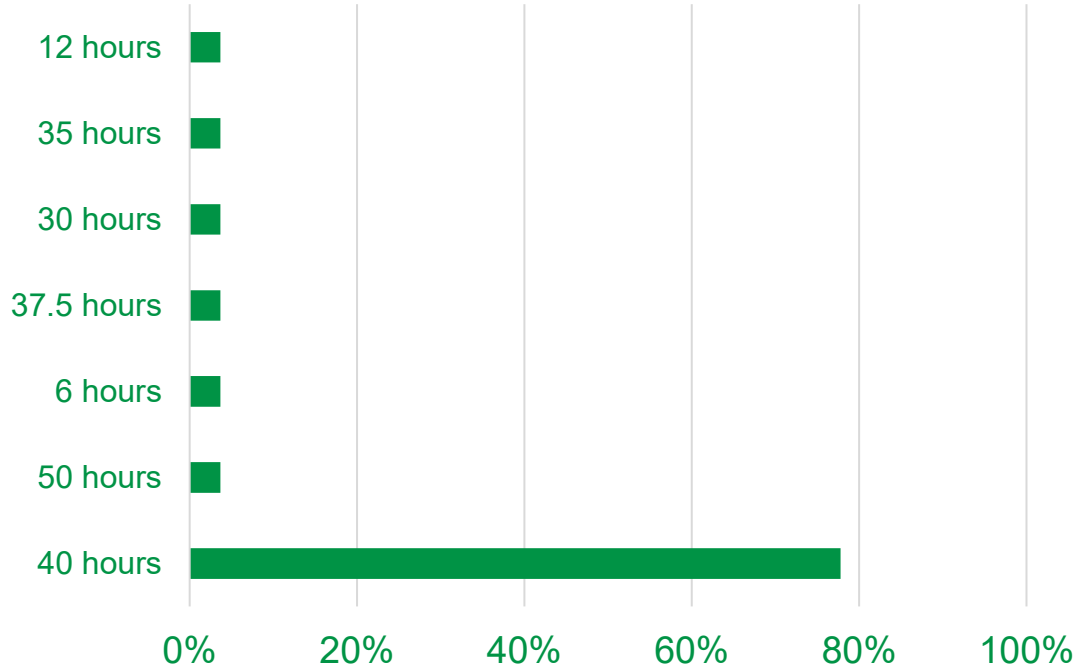
Workforce

Current Number of Employees by Classification



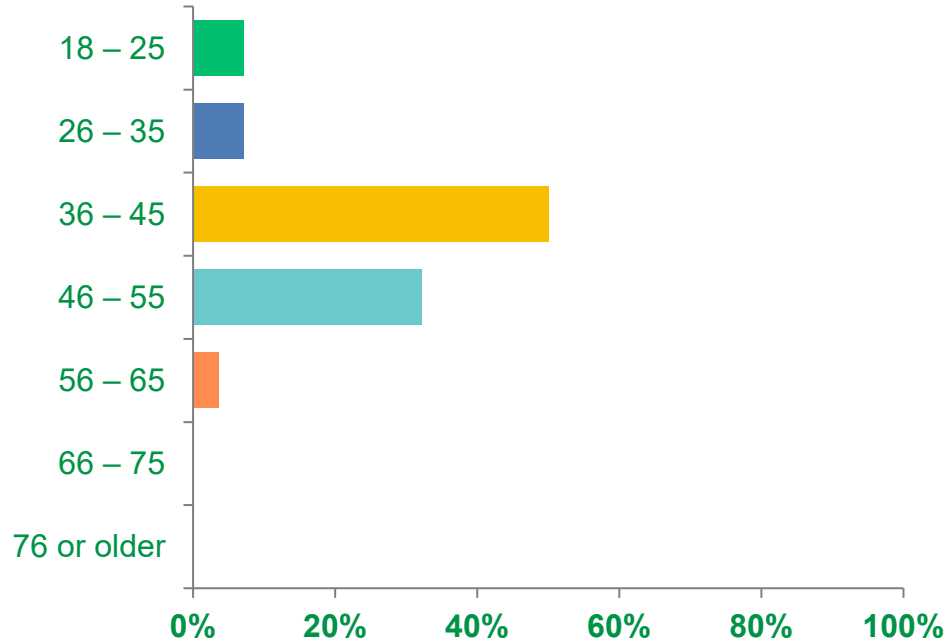
Part Time	735
Full Time	3572
Contractor	80
Intern	20
Temp or Seasonal	0

Standard Number of Hours in a Work Week



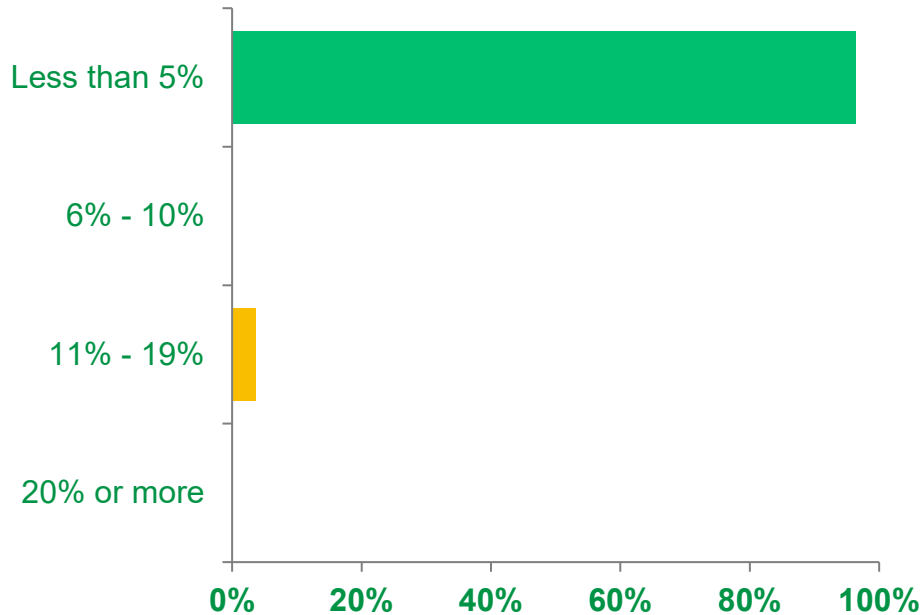
Standard Work Week Hours	
40 hours	78%
50 hours	4%
37.5 hours	4%
35 hours	4%
30 hours	4%
12 hours	4%
6 hours	4%

Average Age range of Employees



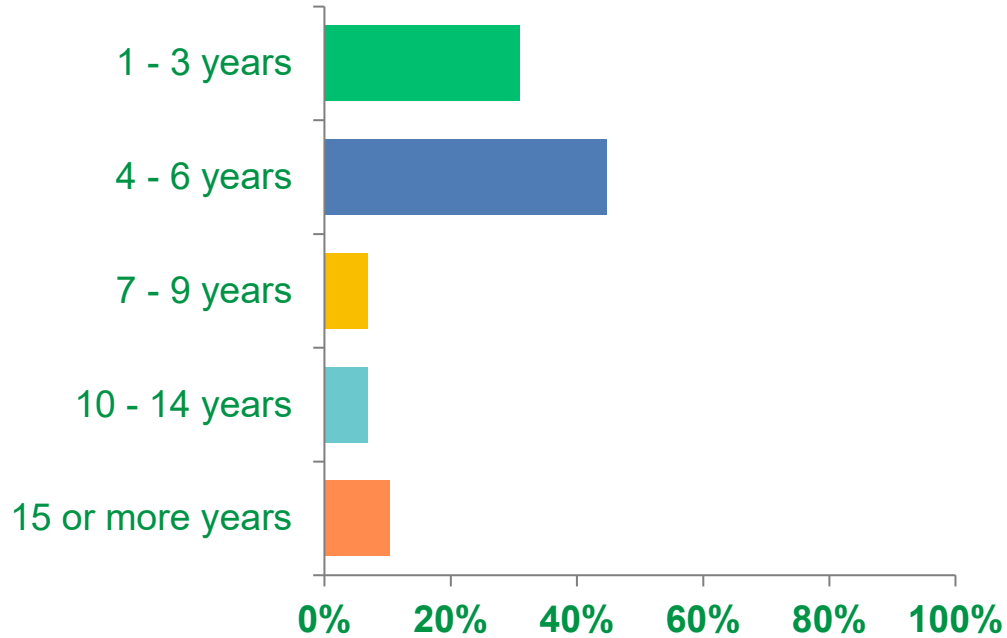
ANSWER CHOICES	RESPONSES
18 – 25	7.14%
26 – 35	7.14%
36 – 45	50.0%
46 – 55	32.14%
56 – 65	3.57%
66 – 75	0%
76 or older	0%

Current percentage of employees who are Veterans or currently serving in the US Military



ANSWER CHOICES	RESPONSES
Less than 5%	96.43%
6% - 10%	0%
11% - 19%	3.57%
20% or more	0%

Average Tenure of Workforce



ANSWER CHOICES	RESPONSES
1 - 3 years	31.03%
4 - 6 years	44.83%
7 - 9 years	6.90%
10 - 14 years	6.90%
15 or more years	10.34%

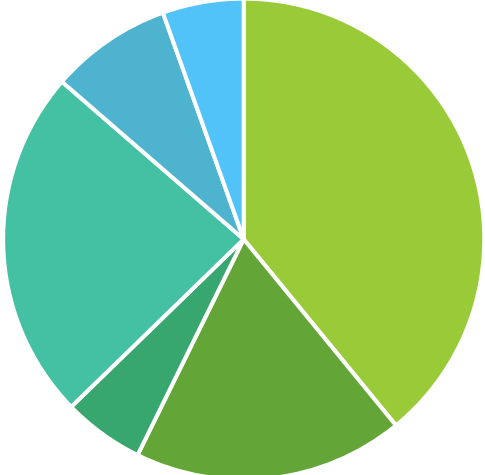
Salary Information

Each survey participant provided their agency's salary information including the lowest salary and highest annual salaries earned. The table below provides the averages of all survey responses, as well as, the lowest and highest data points.

The average annual salary earned is \$43,054.90

Lowest Salary Earned	\$17,472.00	Highest Salary Earned	\$425,000
Average Lowest Salary Earned	\$29,014.18	Average Highest Salary Earned	\$120,182.43

Residency of the Workforce by Geographic Area:



- Cleveland
- Inner Ring West
- Suburban East
- Inner Ring East
- Outside of Cuyahoga County
- Suburban West

Geographic Area	Percentage
Cleveland	43%
Inner Ring East	20%
Inner Ring West	6%
Outside of Cuyahoga County	26%
Suburban East	9%
Suburban West	6%



Talent

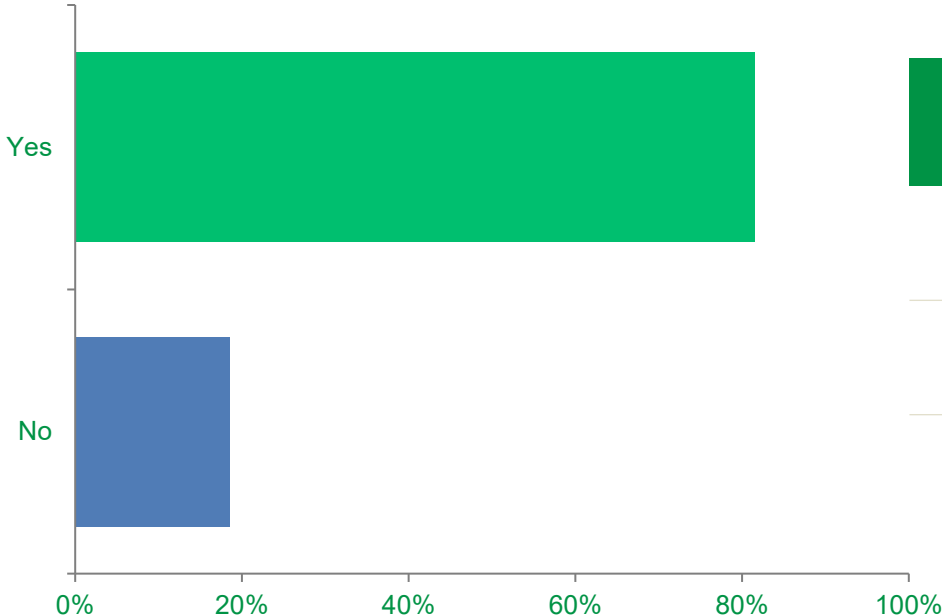
Year-to-Date Turnover

Each survey participant provided their agency's year-to-date turnover rate. Turnover rate was calculated by dividing *the total number of separations that occurred during the year by the number of employees at the beginning of the calendar year*. The table below provides the average turnover rate of all survey responses.

Average Year-to-Date Turnover

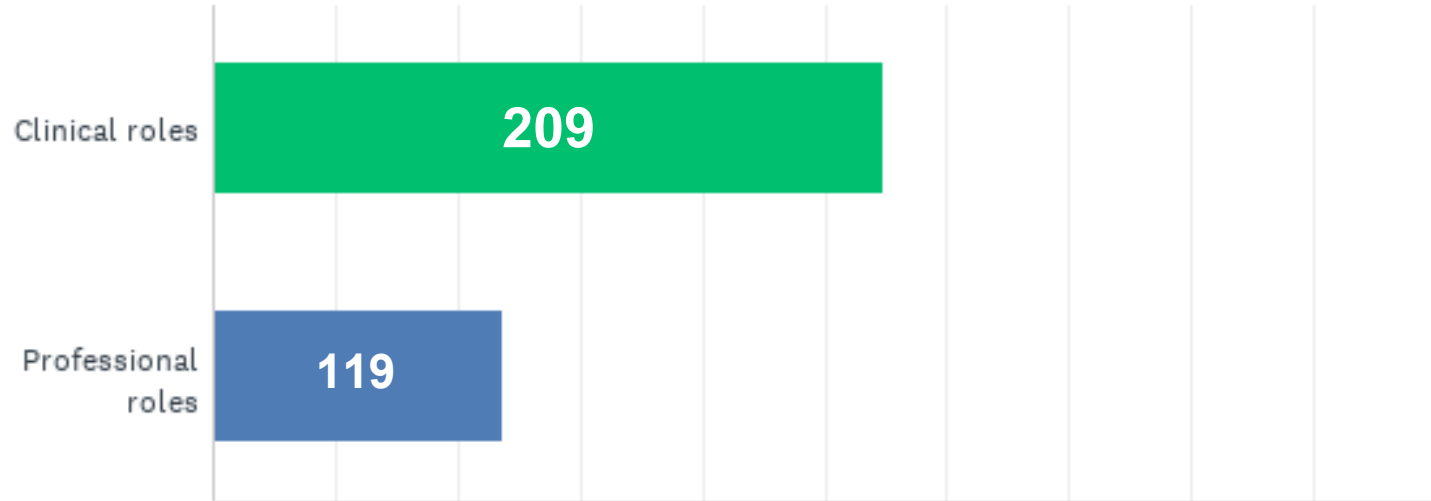
15%

Agencies with Job Vacancies

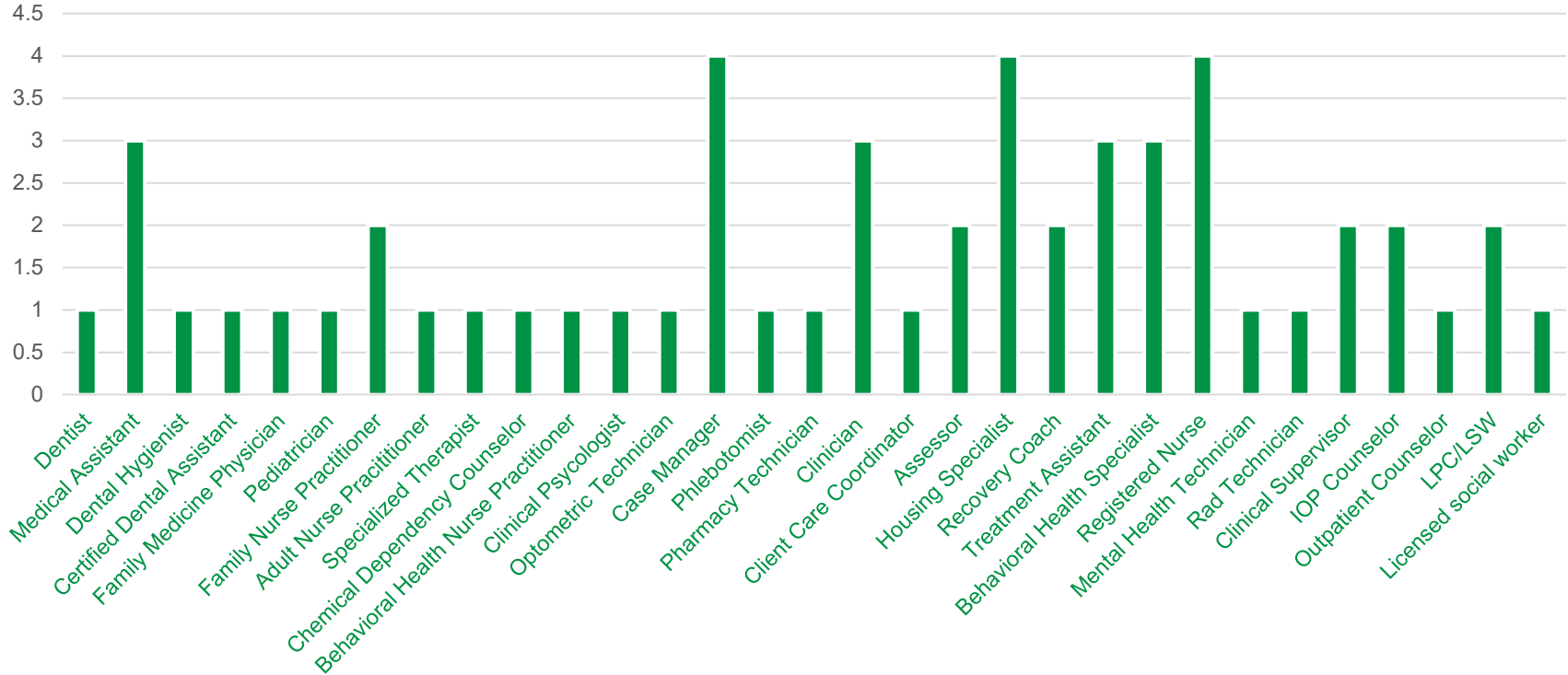


ANSWER CHOICES	RESPONSES
Yes	81.48%
No	18.52%

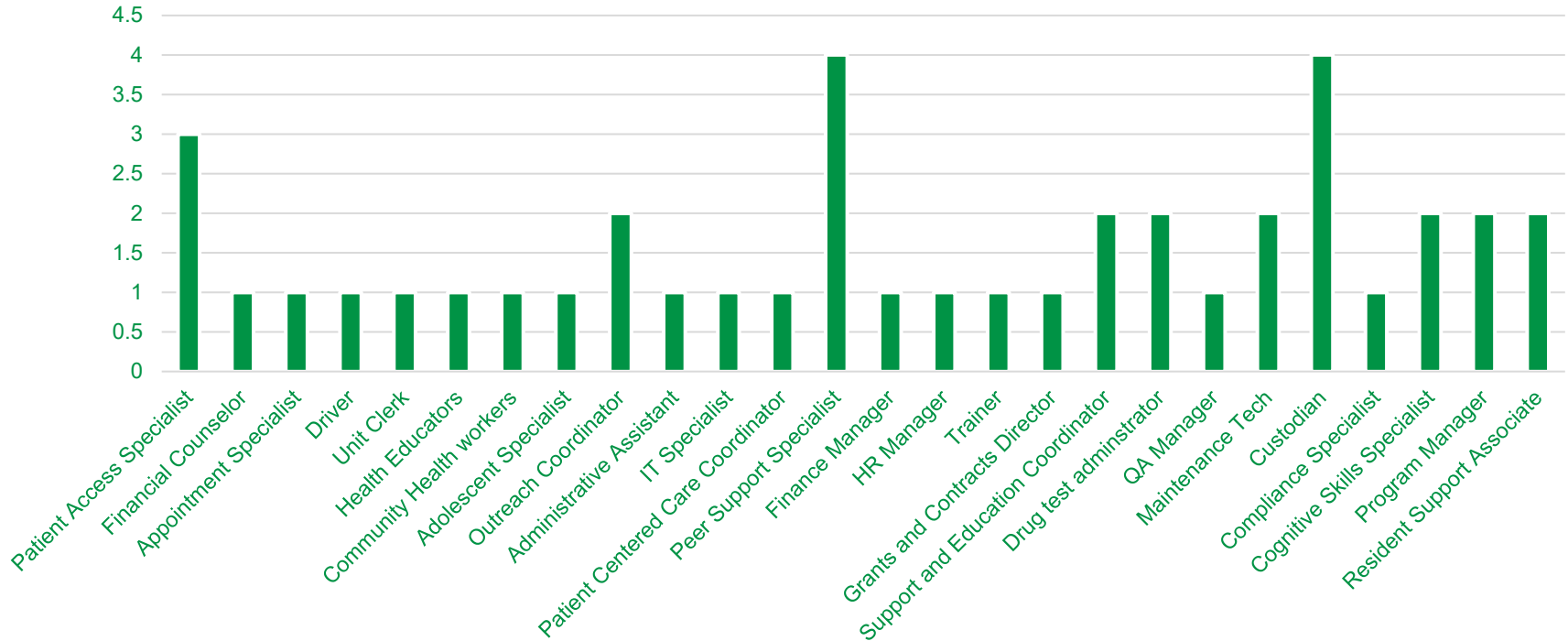
Number of Vacancies by Job Category



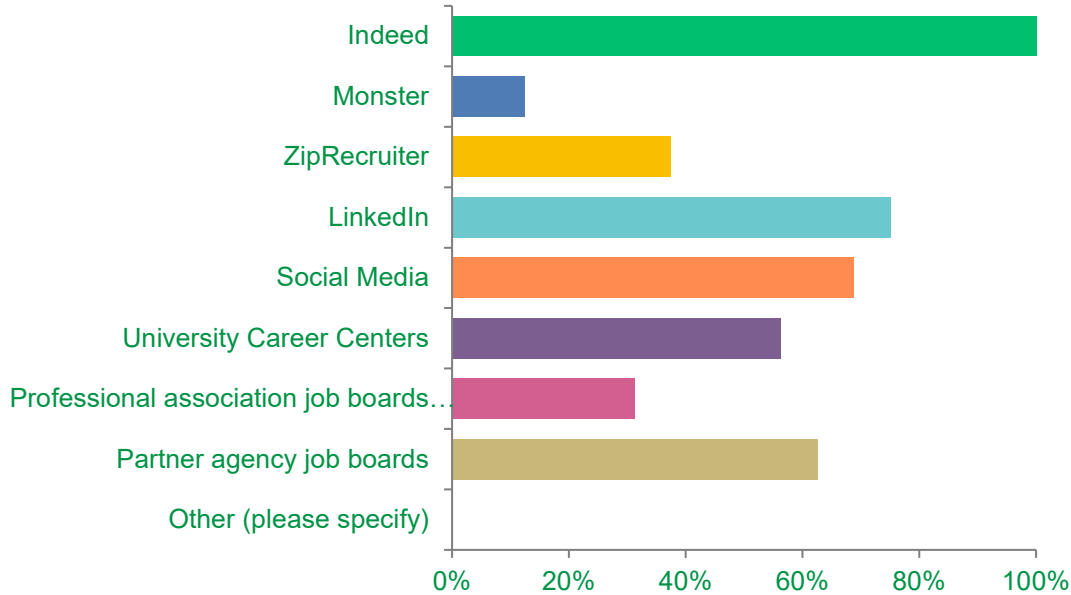
Clinical Job Vacancies by Title



Professional Roles Job Vacancies by Title

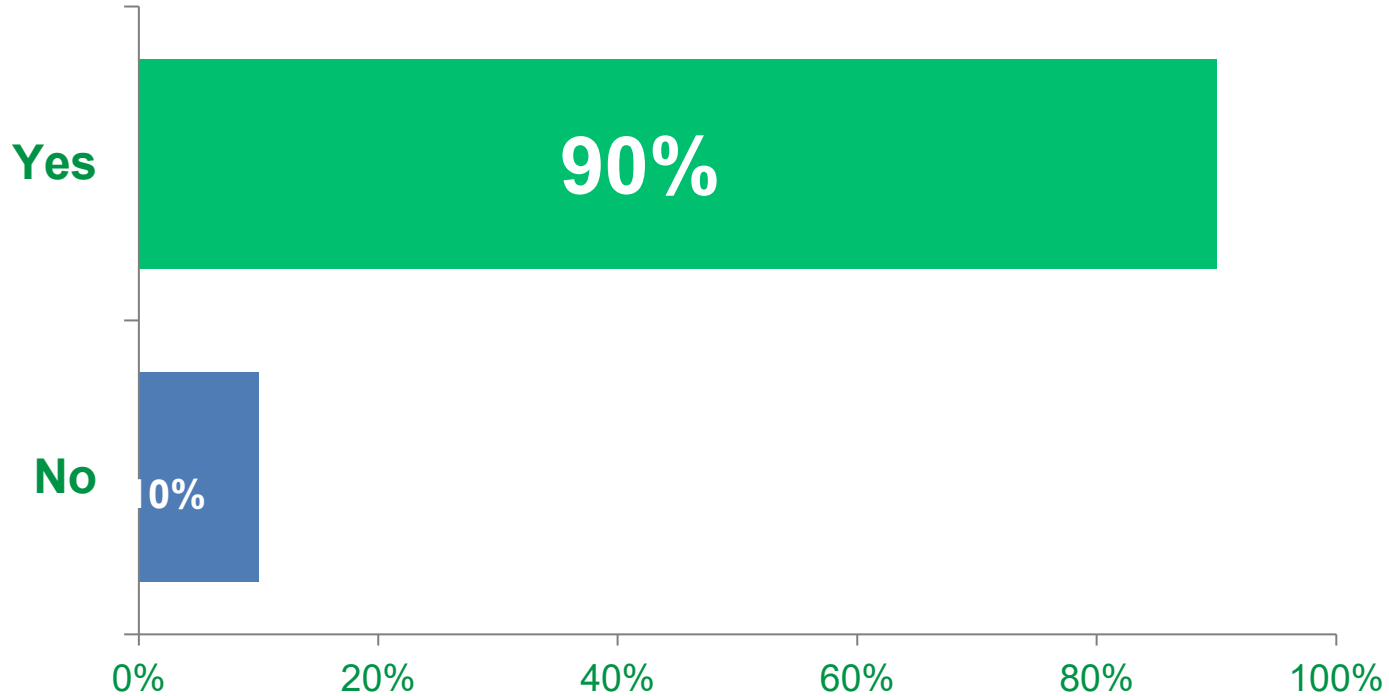


How does your agency advertise job openings?

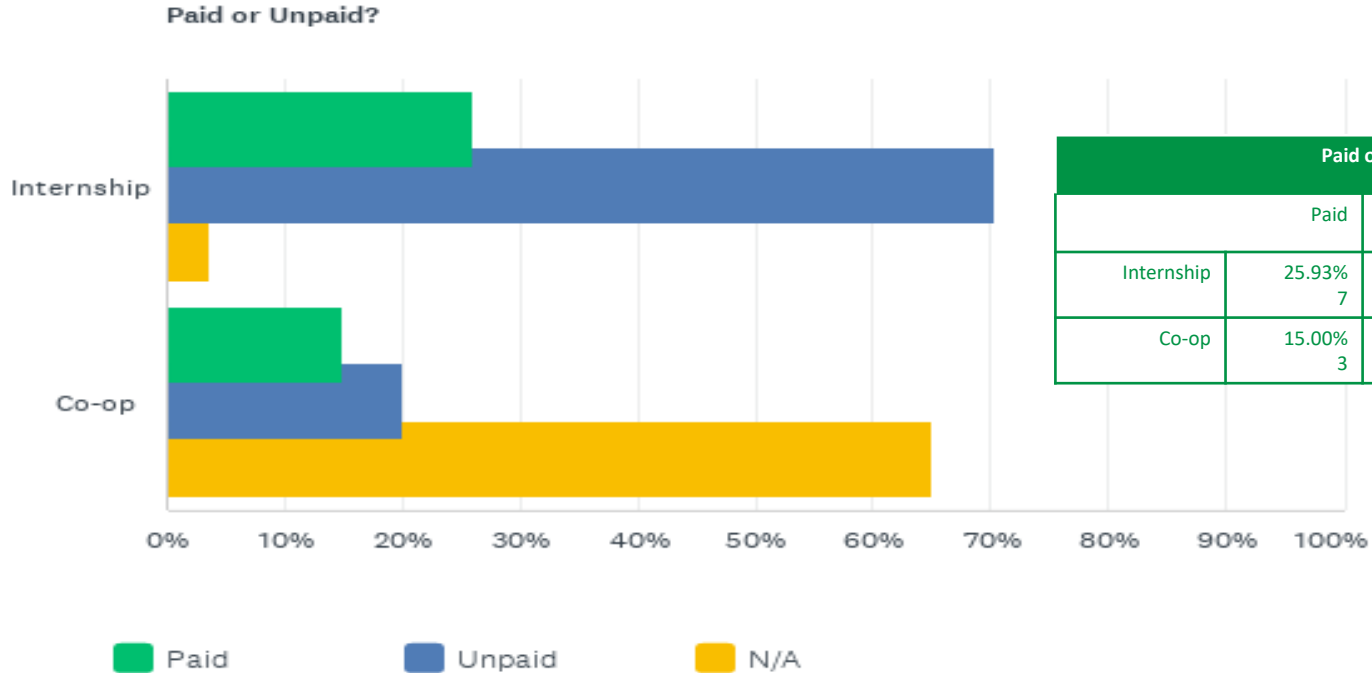


ANSWER CHOICES	RESPONSES
Indeed	100%
Monster	12.50%
ZipRecruiter	37.50%
LinkedIn	75.00%
Social Media	68.75%
University Career Centers	56.25%
Professional association job boards	31.25%
Partner agency job boards	62.50%
Other (please specify)	0%

Agencies who offer Internships or Co-Ops

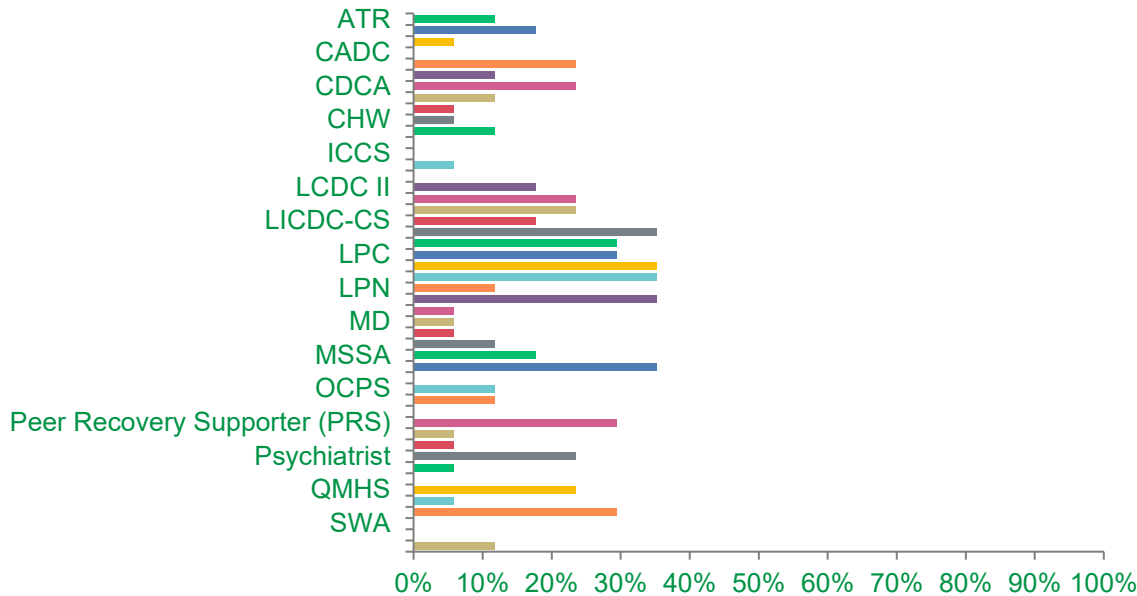


Paid or Unpaid Internships or Co-Ops



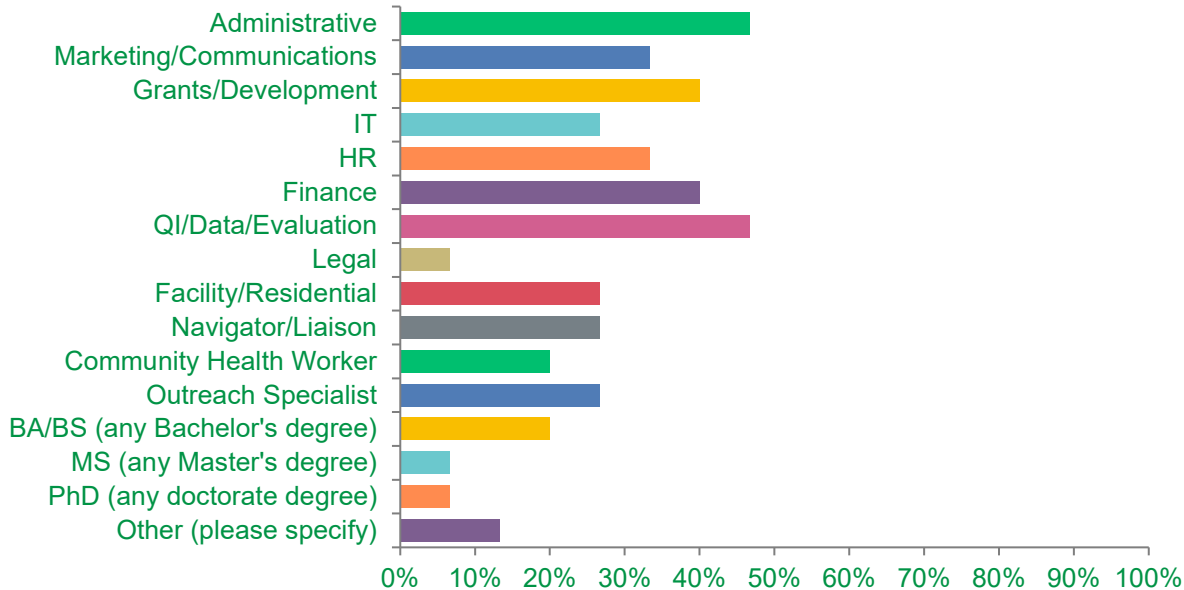
Paid or Unpaid?				
	Paid	Unpaid	N/A	Total
Internship	25.93% 7	70.37% 19	3.70% 1	27
Co-op	15.00% 3	20.00% 4	65.00% 13	20

What level (certification, licensure, expertise, etc.) of clinician do you need?



ANSWER CHOICES	RESPONSES
LISW	35.29%
LPCC	35.29%
LPCC-S	35.29%
LSW	35.29%
MSW	35.29%
LISW-S	29.41%
LPC	29.41%
Peer Recovery Supporter (PRS)	29.41%
RN	29.41%
Case Manager (BA/BS only)	23.53%
CDCA	23.53%
LCDC III	23.53%
LICDC	23.53%
Psychiatrist	23.53%
QMHS	23.53%
BA/BS (any Bachelor's degree)	17.65%

Types of non-clinical professionals needed in your workforce?



ANSWER CHOICES	RESPONSES
Administrative	46.67%
QI/Data/Evaluation	46.67%
Grants/Development	40.00%
Finance	40.00%
Marketing/Communications	33.33%
HR	33.33%
IT	26.67%
Facility/Residential	26.67%
Navigator/Liaison	26.67%
Outreach Specialist	26.67%
Community Health Worker	20.00%
BA/BS (any Bachelor's degree)	20.00%

EMPLOYEE BENEFITS



EMPLOYEES
ALLOWANCE



SOCIAL
SECURITY



PAY RAISE



HEALTH
INSURANCE



PAID
VACATION

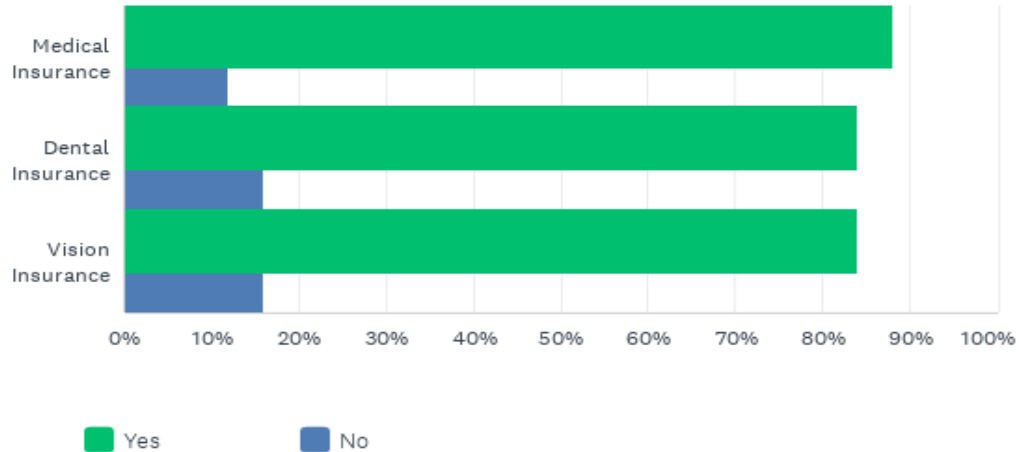


ACHIEVEMENT
AWARD

Benefits

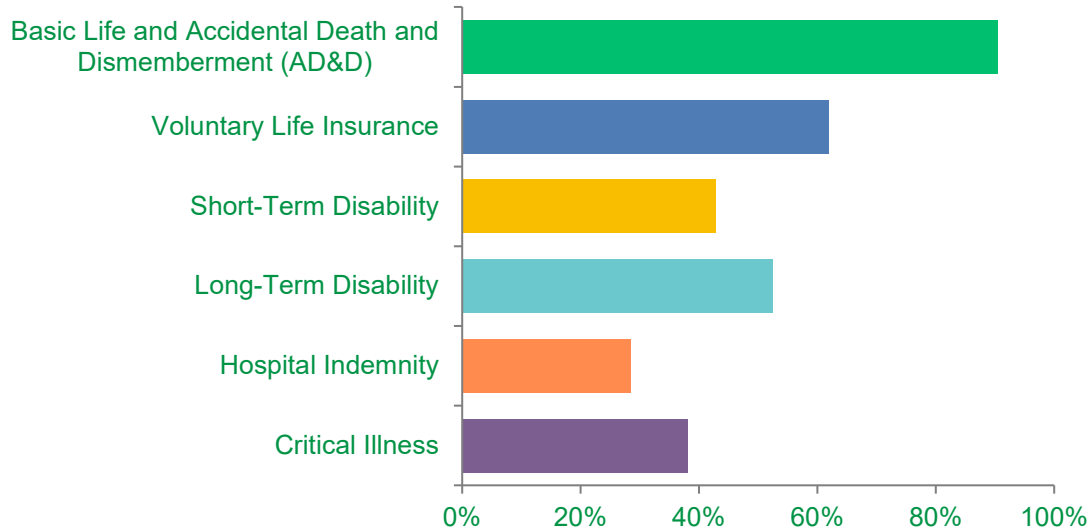
Agencies that offer health insurance

Types of Insurance offered:



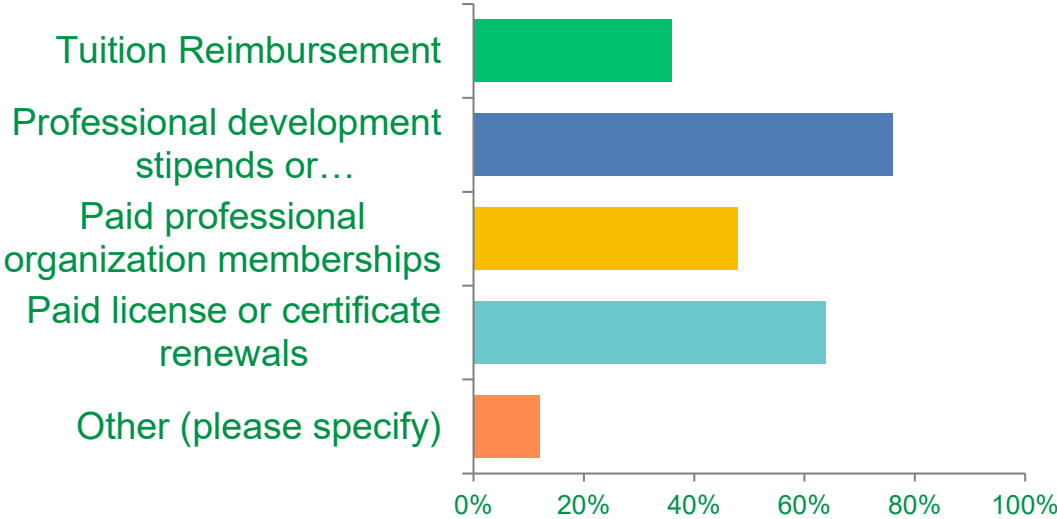
Do you offer this benefit?		
	YES	No
Medical Insurance	88.00% 22	12.00% 3
Dental Insurance	84.00% 21	16.00% 4
Vision Insurance	84.00% 21	16.00% 4

Agencies that offer Ancillary Benefits



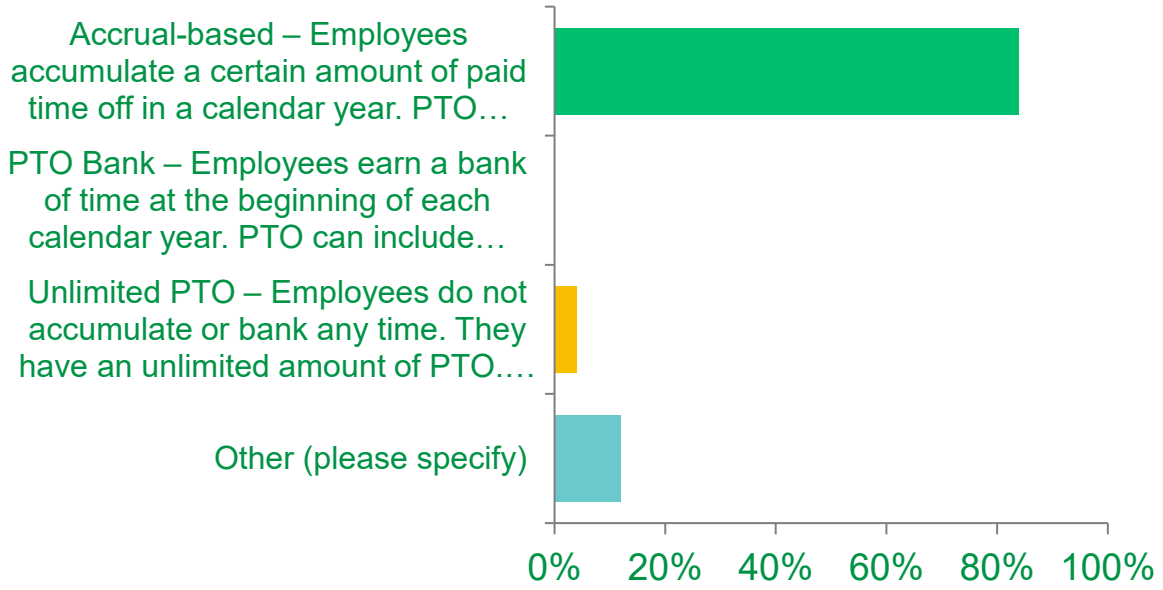
ANSWER CHOICES	RESPONSES
Basic Life and Accidental Death and Dismemberment (AD&D)	90.48%
Voluntary Life Insurance	61.90%
Short-Term Disability	42.86%
Long-Term Disability	52.38%
Hospital Indemnity	28.57%
Critical Illness	38.10%

Agencies that offer Professional Development Opportunities



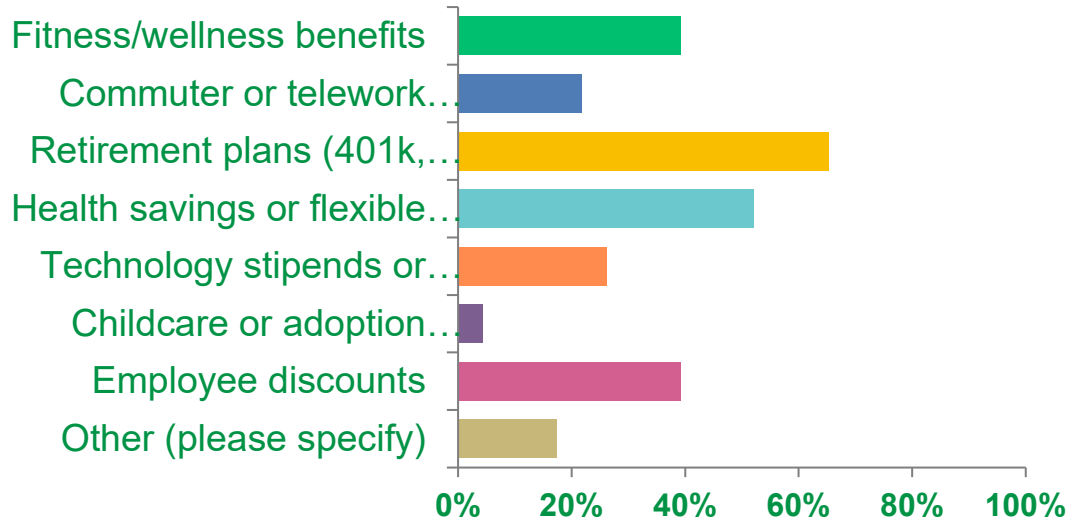
ANSWER CHOICES	RESPONSES
Tuition Reimbursement	36.00%
Professional development stipends or reimbursements (includes trainings, conferences, and leadership programs)	76.00%
Paid professional organization memberships	48.00%
Paid license or certificate renewals	64.00%
Other (please specify)	12.00%
“We do trainings once a year with ADAMHS for prevention”	
“none”	
“Paid time off for self directed training”	

PTO Policies



ANSWER CHOICES	RESPONSES
Accrual-based	84.00%
PTO Bank	0%
Unlimited PTO –	4.00%
Other (please specify) “Employees are hourly; no PTO” “none” Limited PTO based on years at agency	12.00%

Other Fringe Benefits

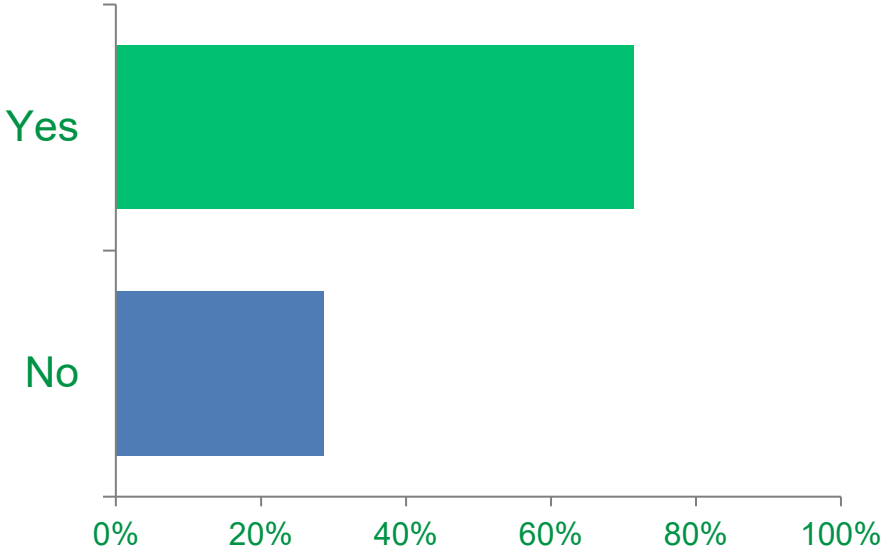


ANSWER CHOICES	RESPONSES
Fitness/wellness benefits	39.13%
Commuter or telework benefits	21.74%
Retirement plans (401k, 403b, etc.)	65.22%
Health savings or flexible spending accounts	52.17%
Technology stipends or reimbursements	26.09%
Childcare or adoption services	4.35%
Employee discounts	39.13%
Other (please specify) "EAP" "none"	17.39%



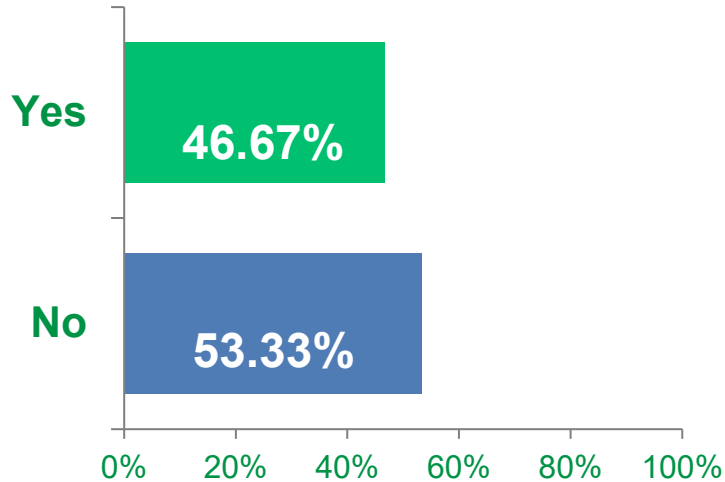
Digital Tools & AI

Agencies that offer Telehealth Services



ANSWER CHOICES	RESPONSES
Yes	71.43%
No	28.57%

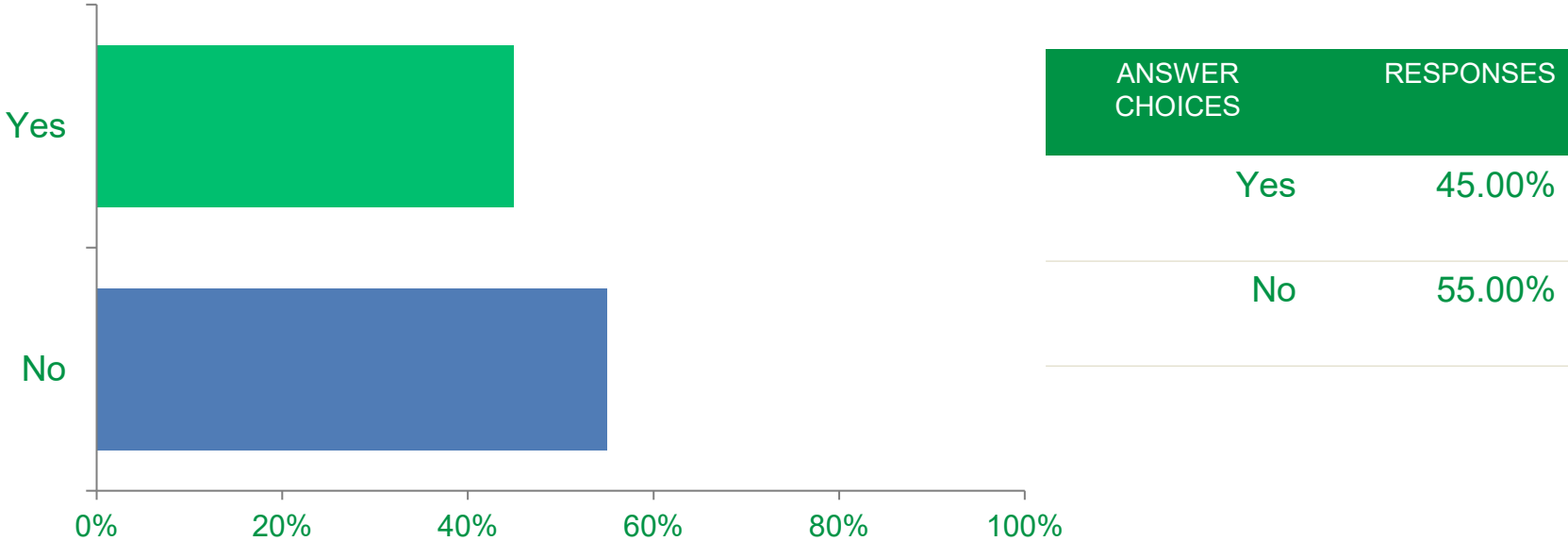
Has your agency increased the use of telehealth in the current year?



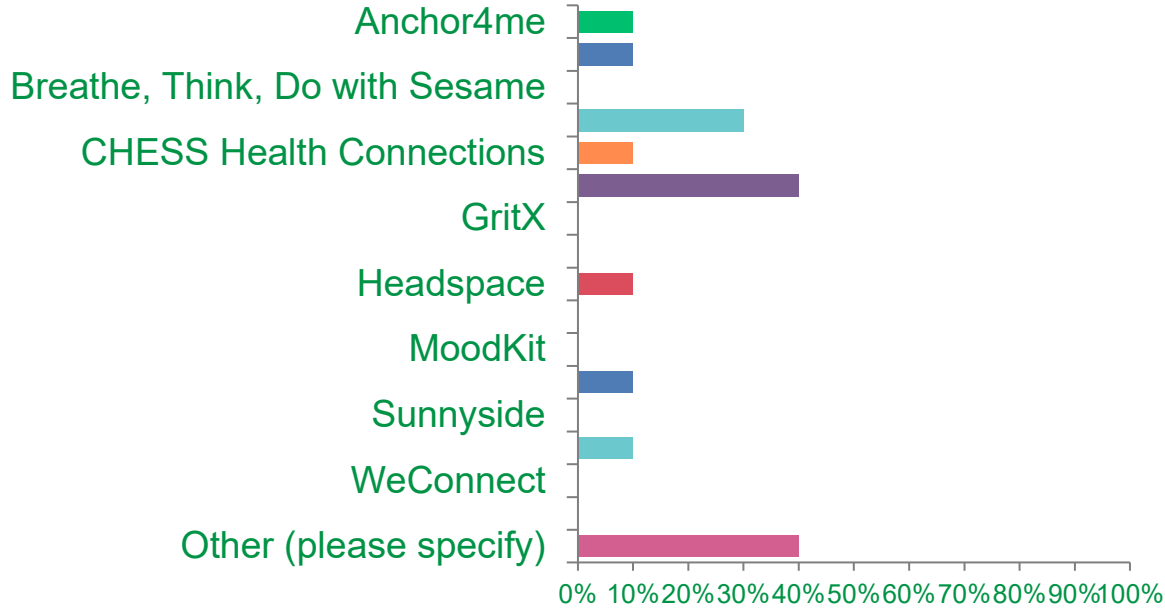
If yes, in what ways?

- Our clients prefer a blended method, so we offer both in-person and telehealth appointments through phone and video.
- Increase use with client service provision and client request
- Diagnostic assessments, individual counseling, family counseling, psychiatric evaluations and follow-ups, group therapy, case management
- Telephone, video
- Online activities, Facebook access

Does your agency's direct care workers encourage clients to use apps, online support tools, or any other AI/digital support to “bridge” between appointments, or to find support in their everyday lives?



What apps or digital supports do you encourage clients to use?

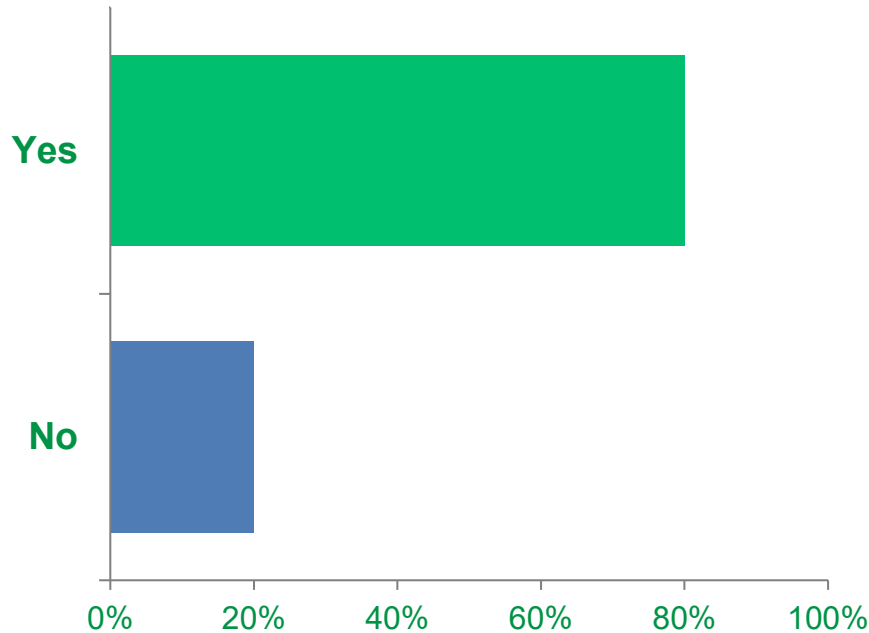


ANSWER CHOICES	RESPONSES
Crisis Text Line	40.00%
Other (please specify)	40.00%
Calm	30.00%
Anchor4me	10.00%
BetterHelp	10.00%
CHES Health Connections	10.00%
Headspace	10.00%
SMART Recovery	10.00%

“Other” responses:

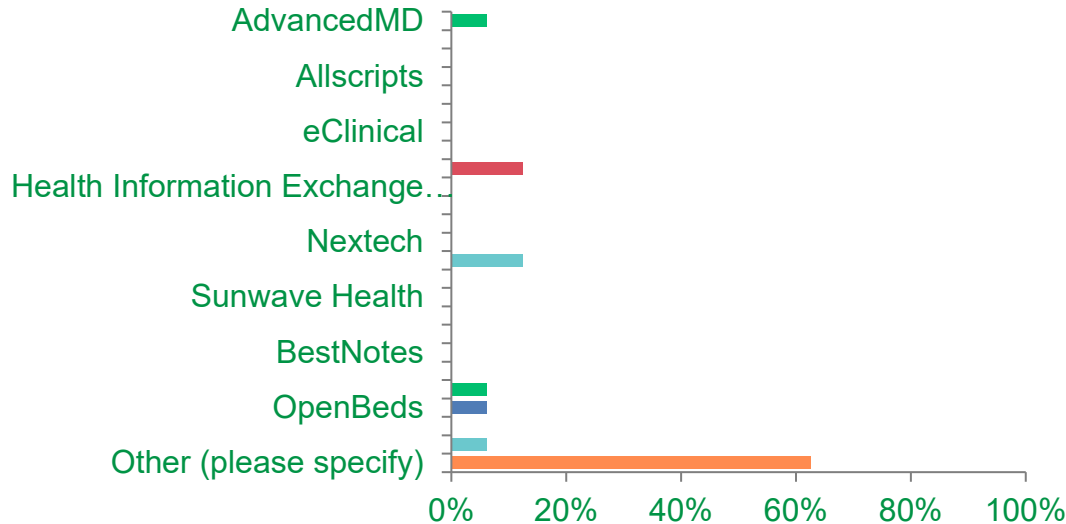
- In house developed videos and some limited internet access
- In the room, recovery grid, online AA app
- Prayer and support calls

Does your agency use a digital information system for client, care, or charting information, like an electronic health/medical record (EHR/EMR) system?



ANSWER CHOICES	RESPONSES
Yes	80.0%
No	20.0%

What electronic health/medical record (EHR/EMR) or digital information tools does your organization use?

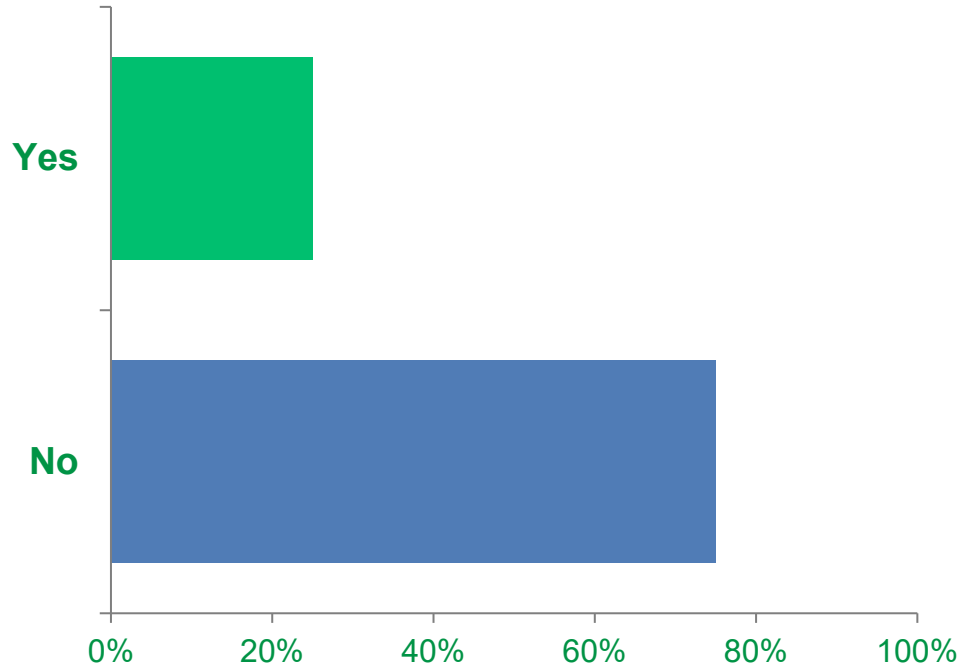


ANSWER CHOICES	RESPONSES
Other (please specify)	62.50%
Epic	12.50%
Nextgen	12.50%
AdvancedMD	6.25%
Evolv	6.25%
OpenBeds	6.25%
Unite Us	6.25%

"Other" responses:

- Apricot/Bonterra case management
- Carelogic (3x)
- Centricity
- Jot forms
- Netsmart
- Microsoft Access
- Aura
- NotelHouse
- Simple practice

Does your agency use AI productivity tools internally?



ANSWER CHOICES	RESPONSES
Yes	25.00%
No	75.00%

If yes, which tools?

- Hootsuite
- Grammarly
- PowerBI



Agenda Process Sheet
Date: November 8, 2023

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

Topic: CY2024 Agreements with Class 2 Residential Facilities (Adult Care Facilities/ACF)

Contractual Parties: See list of Class 2 Residential Facilities (Attachment A)

Term: January 1, 2024 - December 31, 2024

Funding Source(s): ADAMHS Board Funds

Amount: \$2,500,000

- New Program** **Continuing Program** **Expanding Program** **Other** _____

Service Description:

- The ADAMHS Board of Cuyahoga County has developed a list of Class 2 Residential Facilities (Adult Care Facilities/Group Homes) to provide safe, decent and affordable housing for individuals living with mental illness.
- The ADAMHS Board of Cuyahoga County utilizes its Residential Assistance Program (RAP) funds to provide up to \$1,600 per month per client to the operators of Class 2 Residential Facilities. The Board also provides \$200 per RAP client (not receiving SSI/SSDI) for personal living expenses.

Background Information:

- RAP is intended to provide financial rental assistance to indigent/low-income adult clients (18 and over) receiving Therapeutic Behavioral Services (TBS) and/or Community Psychiatric Supportive Treatment (CPST) services from a contract agency of the ADAMHS Board so that the client can live in a Class 2 Residential Facility in the community.
- RAP is targeted for indigent/low-income adult clients that are discharge ready from an institutional environment such as a hospital, nursing home, jail, Class 1 Residential Facility (RCF), Cuyahoga County Diversion Center or Crisis Stabilization Unit.
- Once the RAP recipient starts receiving SSI/SSDI, they are required to apply for the Ohio Department of Mental Health and Addiction Services (OhioMHAS) Residential State Supplement (RSS) program, which requires the client to have Social Security and Medicaid. Once approved, the client transitions off of the RAP program, and onto the OhioMHAS funded RSS program.
- In July of 2023, the ADAMHS Board of Directors approved (not to exceed) \$3,500 to contract with Thrive Behavioral Health Center, Inc to assist the ADAMHS Board in providing each ACF with a Peer Seal of Quality. Each listed Class 2 Residential Facility has been visited in 2023 and meets Peer Seal of Quality standards.

Number of Individuals to be served:

- Temporary assistance to over 200 clients living with mental illness.

Funding Use:

- To assist clients living with mental illness help transition to a less restrictive setting in the community.

Client & System Impact:

- Clients will have safe, decent and affordable housing while waiting to receive RSS.

Metrics <i>(How will goals be measured)</i>	<ul style="list-style-type: none">• Monitoring of eligibility and number of clients served by RAP program.• Number of clients obtaining RSS/transitioning to alternative housing each month.• Number of new clients receiving RAP assistance each month.
Evaluation/ Outcome Data <i>(Actual results from program)</i>	Between January 1, 2023 and September 30, 2023 <ul style="list-style-type: none">• 159 clients served by RAP program• 68 clients transitioned off of RAP• 83 new clients admitted into RAP

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

- Approval to enter into agreements with the 61 Class 2 Residential Facilities listed on (Attachment A) for CY2024.

ATTACHMENT A

CY 2024 list of recommended Class 2 Residential Facilities (ACF's) for contracting

63 rd Family Home	LOC's
Adult Care of Parma	LOC's I
Adult Care of Parma II	LOC's II
Angels for Care Group Home I	LOC's III
Angels for Care Group Home II	LOC's IV
Annette Place Adult Family Home	LOC's V
Aspire to be Great	LOC's VI
Atir's Place	LOC's VII
Braveheart Manor	LOC's VIII
Braveheart Manor IV	LOC's IX
Bumble Bee Place I	London Bridges Adult Care Facility LLC (down)
Bumble Bee Place II	London Bridges Adult Care Facility LLC (up)
Bumble Bee III	Longbrook Loving Cottage Living
Care Circle, LLC	Longbrook Loving Cottage Living II
Christburg's Place I	Loving Care Assistance Living
Christburg's Place II	Madison Commons Group Home I
Ecar House	Madison Commons Group Home II
Eve's Place	Madison Commons Group Home III
Eve's Place II	Madison Commons Group Home IV
Eve's Place III	Madison Commons Group Home V
Heavenia's Humble Heart	Mytyme Adult Home Care Facility
Integrity Homes Adult Living Care 1, LLP	Rest & Restore
Integrity Homes Adult Living Care 2, LLP	Royal Haven
Integrity Homes Adult Living Care 3, LLP	Shore Acres
Integrity Homes Adult Living Care 4, LLP	Tender Love & Care I
Kareema Darby Memorial Home	Tender Love & Care II
Kareema Darby Memorial Home II	The Tranquility House
Lawrence Adult family Living Home	Winds of Change & Hope, LLC
Lili's Place	Winds of Hope & Change
Lili's Place II	Wright Family Home
Lili's Place III	

Contracting is subject to Insurance and OhioMHAS licensing requirements being met and continued compliance throughout the contracting period.



CONTRACTS

&

CONTRACT AMENDMENT

Committee of the Whole Meeting
November 8, 2023



Agenda Process Sheet
Date: November 8, 2023

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

Topic: Parole Assertive Community Treatment (PACT)

Contractual Parties: Recovery Resources

Term: July 1, 2023 to June 30, 2024

Funding Source(s): Ohio Department of Rehabilitation and Corrections (ODRC)

Amount: \$275,000

- New Program**
 Continuing Program
 Expanding Program
 Other _____

Service Description:

- The Parole Assertive Community Treatment (PACT) Program operated by Recovery Resources provides comprehensive community treatment and wrap around services for mentally ill individuals being released from Prison on Parole or Post Release Control.
- The Parole Assertive Community Treatment (PACT) Program maintains an active caseload for up to 50 people at any given time. The program provides intensive community support services, assistance with housing and other supports.
- Collaboration is a key component of this program, and a designated Officer from Adult Parole Authority (APA) is assigned to the Team in order to assist and support the team.

Background Information:

- PACT is based on the evidence based Assertive Community Treatment (ACT) model.
- ODRC started PACT as a pilot program, and it has now developed into an ongoing program to meet the needs of this population. The program was established to develop a specialized system of care and treatment for clients diagnosed with serious mental illness who are on parole of post release control.
- Clinical interventions include psychopharmacologic treatment, individual supportive therapy, case management, crisis intervention, housing support, activities of daily living support, social and interpersonal relationship support, assistance with entitlements and benefits and if needed, sex offender services.

Number of Individuals to be served: 50

Funding Use:

- To provide intensive community support services to the mentally ill population being released from prison that are on Parole and/or Post Release Control.

Client & System Impact:

- Improved functioning in social skills and employment, secure housing.
- Reduction of psychiatric hospitalizations and improvement in overall stabilization of clients served.
- Reduction of parole violations.

Program/Service Goals:

- Improved social functioning.
- Secure housing and employment for clients served.
- Decrease parole violations and new charges.
- Reduce utilization of psychiatric hospitalizations.

Metrics <i>(How will success be measured)</i>	<ul style="list-style-type: none">• Number of clients to receive PACT services• Successful program completions• Number of participants employed• Number of participants with secure housing• Recidivism• Number of clients hospitalized for psychiatric reasons
Evaluation/ Outcome Data <i>(Actual results from program)</i>	In SFY 23: <ul style="list-style-type: none">• PACT served 58 clients• 6 clients successfully graduated from the program• 20 clients obtained employment• 57 clients had/obtained secure housing• 4 clients returned to prison• 1 client was hospitalized for psychiatric reasons

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

- To accept the amount of \$275,000 from ODRC and contract with Recovery Resources for the period July 1, 2023, through June 30, 2024 for the Parole Assertive Community Treatment (PACT) Team.



Agenda Process Sheet
Date: November 8, 2023

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

Topic: Piloting a Mental Health Docket Incorporating a Drug Court Model to Improve Outcomes for Adults with Co-Occurring Disorders

Contractual Parties: Catholic Charities – \$340,000
 Signature Health – \$275,000

Term: October 1, 2023 – September 30, 2027

Funding Source(s): Corrections Planning Board Court of Common Pleas Fund
 U.S. Department of Justice, Bureau of Justice Assistance

Amount: \$615,000

- New Program Continuing Program Expanding Program Other _____

Service Description:

- Provide Community Psychiatric Supportive Treatment (CPST), Case Management and Consulting Services benefitting clients participating in the Cuyahoga County “Piloting a Mental Health Docket Incorporating a Drug Court Model to Improve Outcomes for Adults with Co-Occurring Disorders” program, also known as the Mental Health – Adult Drug Court Pilot Program (MH – ADC Pilot Program).
 - Catholic Charities will provide case management to Substance Use Disorder (SUD) clients and CPST services to mental health clients in the MH – ADC Pilot Program. Clients will be supported to ensure successful transition into the community once they complete residential treatment services.
 - Signature Health will provide case management services to clients in the MH- ADC Pilot Program. A Case Manager will provide the following services:
 - Attend all court team meetings, hearings, etc.;
 - Provide recommendations for therapeutic approaches and interventions while having a firm understanding of treatment court’s best practices;
 - Collaborate with the Court and treatment teams;
 - Meet with clients in the community setting at minimum once/month;
 - Link clients with needed behavioral health outpatient services;
 - Provide clinical services at Signature Health's outpatient centers;
 - Attend necessary trainings and partnership meetings;

- Engage and outreach clients, at minimum once per week;
- Liaise with Matt Talbot Inpatient Treatment for discharge planning efforts of clients exiting treatment; and
- Liaise with other community medical and behavioral health agencies where clients may be receiving mental and physical health services.

Background Information:

- Cuyahoga County Court of Common Pleas/Correction Planning Board was awarded the U.S. Department of Justice (DOJ), Bureau of Justice Assistance (BJA) Adult Drug Court Discretionary Grant in the amount of \$700,000 for the time period of October 1, 2022 through September 30, 2026. Due to getting started late on the grant, Correction Planning Board anticipates getting a one-year extension.

Number of Individuals to be served:

- Catholic Charities – 50 to 65 unduplicated clients per year
- Signature Health – 50 to 65 unduplicated clients per year

Funding Use:

- Funding will be used to support clients with co-occurring disorders in the Mental Health/Adult Drug Court.

Client & System Impact:

- This program will improve outcomes for clients with co-occurring disorders participating in the Mental Health/Adult Drug Court by reducing relapse and recidivism.

<p>Metrics <i>(How will goals be measured)</i></p>	<p>Performance Measurement Protocols will be developed and may include:</p> <ul style="list-style-type: none"> • Total number of unduplicated clients • Total number of programming referrals • Total number of clinical dosage hours • Total number of clients that complete treatment • Total number of relapses
<p>Evaluation/ Outcome Data <i>(Actual results from program)</i></p>	<p>Not Applicable – New Program</p>

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

- To accept funding from the Corrections Planning Board in the amount of \$615,000 and enter into a contract with Catholic Charities in the amount of \$340,000 and Signature Health in the amount of \$275,000 for the term of October 1, 2023 through September 30, 2027.



Agenda Process Sheet
Date: November 8, 2023

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

Topic: State Opioid & Stimulant Response (SOS) Grant, Year 02

Contractual Parties:	12 Step Life/Ethel Hardy House	\$200,000.00
	B. Riley Homes	\$165,000.00
	Briermost Foundation	\$150,000.00
	Griffin Homes Sober Living, Inc.	\$150,000.00
	I'm In Transition Ministries	\$160,000.00
	The MetroHealth System	\$280,000.00
	NORA (Peer Support)	\$150,000.00
	NORA (Recovery Housing)	\$275,000.00
	Point of Freedom (Peer Support)	\$218,527.95
	Recovery First-A Better Way	\$170,000.00
	Road to Hope	\$150,000.00
	Thrive for Change	\$105,000.00
	White Butterfly Peer Support (Woodrow)	\$ 68,000.00
	Women of Hope	\$100,000.00
	Woodrow Project (Peer Support)	\$ 65,000.00
	Woodrow Project (Recovery Housing)	\$141,000.00
	Ohio Pharmacy Services (Naloxone)	\$162,000.00

Term: September 30, 2023 – September 29, 2024

Funding Source(s): Ohio Department of Mental Health and Addiction Services (OhioMHAS) SOS 3.2 through the Substance Abuse Mental Health Services Administration (SAMHSA)

Amount: \$2,709,527.95

- New Program Continuing Program Expanding Program Other _____

Service Description:

- The ADAMHS Board has partnered with the providers listed above to expand access to Medication-Assisted Treatment (MAT) and recovery support services to persons in Cuyahoga County with Opioid Use Disorder (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.

Background Information:

- OhioMHAS has received a biannual State Opioid Response award from SAMHSA. OhioMHAS now refers to this as the State Opioid and Stimulant Response (SOS) grant.
- OhioMHAS is partnering with local ADAMHS boards to implement treatment and recovery programs that expand access to MAT, as well as access to housing and peer support for those with 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.

Number of Individuals to be served:

- Over 5,000 individuals to be served across all programs.

Funding Use:

- Increase access to MAT and recovery supports for persons with OUD and stimulant use disorders.

Client & System Impact:

- Reduce unmet treatment need for OUD and stimulant disorders; ensure recovery supports are available to persons with an OUD or stimulant disorder diagnosis, particularly those who may be using MAT in recovery.

<p>Metrics <i>(How will goals be measured)</i></p>	<p>Targets set for the SOS 3.2 grant year are:</p> <ul style="list-style-type: none"> • Serve 789 individuals with direct services such as MAT and recovery housing • Reach 4,120 through outreach and overdoes prevention education • Provide 3,200 overdose reversal kits in the community through naloxone emergency cabinets, vending machines and community distribution
<p>Evaluation/ Outcome Data <i>(Actual results from program)</i></p>	<p>At the close of the SOS 3.0 grant year on 9/29/23:</p> <ul style="list-style-type: none"> • Served 1,363 individuals with direct services such as MAT and recovery housing (out of a target of 900) • Reached 5,013 through outreach and overdose prevention education (out of a target of 4,120) • Provided 4,400 overdose reversal kits in the community through naloxone emergency cabinets, vending machines and community distribution

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

- To accept funding from OhioMHAS as part of the SOS 3.2 grant for the period September 30, 2023 through September 29, 2024 in the amount of \$2,709,527.95 and enter into contracts with the providers listed in this Agenda Process Sheet for the specified amounts.

Agenda Process Sheet
Date: November 8, 2023

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

Topic: Agreements with Attorneys for Civil Commitment Hearings

Contractual Parties: Attorneys: Ronald Balbier, Steve Canfil, Mark DeFranco, Paul Friedman, Scott Friedman, and Ted Friedman

Term: January 1, 2024 through December 31, 2024

Funding Sources: ADAMHS Board Funding

Amount: \$200 per hearing/motion/hour

- New Program** **Continuing Program** **Expanding Program** **Other**

Service Description:

- Attorneys represent the ADAMHS Board at civil commitment hearings, involuntary treatment hearings, special hearings and file motions on behalf of the ADAMHS Board.
- Attorneys will be compensated \$200 per hearing and motion.
 - Attorneys may also be compensated \$200 per hour for additional services, so long as those additional services receive prior approval from the ADAMHS Board CEO and or designated Clinical Staff.

Background Information

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

Number of Individuals to be Served:

- Attorneys represent the Board at over 1,000 hearings per year.

Funding Use:

- Attorneys represent the ADAMHS Board at civil commitment hearings and prepare and file motions as needed.

Program Goals or Objectives <i>(How will goals be measured)</i>	1. Attorneys – Competent and professional legal representation.
Evaluation/ Outcome Data <i>(Actual results from program)</i>	YTD Attorney Probate Court Hearings (January 1 – October 31): 1050 1. 100% were considered to be competent and professional representation.

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

- To recommend approval of contracting with the Attorneys identified above for \$200 per hearing/motion/hour.

Agenda Process Sheet
Date: November 8, 2023

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

Topic: Crisis Intervention Team (CIT) Training Supplemental Contracts for the Diversion Center

Contractual Parties: Traumatic Players of Cleveland, Inc. - \$19,800
Cuyahoga Community College - \$43,550

Term: January 1, 2024 to December 15, 2024

Funding Source(s): ADAMHS Board Funding

Amount: \$63,350

- New Program** **Continuing Program** **Expanding Program** **Other**

Service Description:

- The purpose of these contracts is to enhance the Countywide CIT 40 Hour Training by contracting for supplemental resources like actors for scenario-based activities and use of the Cuyahoga Community College Public Safety Training Scenario Village.
- These contracts will serve up to 500 or more officers for the second year of training.

Background Information:

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

Number of Individuals to be served:

- Up to 300 officers served per year.

Funding Use:

- To contract with Traumatic Players of Cleveland to serve as “actors” for scenario activities. To contract with
- Cuyahoga Community College Public Safety Training Center for the use of Scenario Village.

Client & System Impact:

- To improve officer communication and de-escalation skills for people in crisis.

Metrics <i>(How will goals be measured)</i>	CIT Training along with CIT Partnership Training will be offered once a month from January 2024 to December 2024. The use of these resources will be for the week. <ul style="list-style-type: none">• Number of officers enrolled in the training.• Number of community members enrolled in the training.
Evaluation/ Outcome Data <i>(Actual results from program)</i>	The ADAMHS Board has provided training to 100 officers representing over 22 law enforcement departments throughout Cuyahoga County. We have also provided CIT Partnership Training to over 50 community members throughout the county.

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

- To recommend approval of the following contracts in the amount of \$63,350 to enhance the Countywide CIT Training with law enforcement officers throughout Cuyahoga County.
 - Traumatic Players of Cleveland for \$19,800 for the use of “actors” for scenario-based activities.
 - Cuyahoga Community College for the use of Scenario Village for \$43,550.



Agenda Process Sheet
Date: November 8, 2023

- Community Relations & Advocacy Committee
- Faith-Based Outreach Committee
- Planning & Oversight Committee
- Finance & Operations Committee
- Committee of the Whole
- General Meeting

Topic: Cuyahoga County Suicide Prevention Coalition (CCSPC) Community Outreach to Vulnerable Youth

Contractual Parties: Removing the Stigma - \$25,000
Colors+ Youth Center - \$25,000

Term: November 15, 2023 to November 14, 2024

Funding Source(s): Public Health Fund of Ohio

Amount: \$50,000

New Program **Continuing Program** **Expanding Program** **Other** _____

Service Description:

- Removing the Stigma (RTS) and Colors+ Youth Center (Colors+), two partners from Cuyahoga County’s Suicide Prevention Coalition (CCSPC), will work together to create a pilot population health event program embedded in the local community to promote the removal of stigma around suicide; creation of a safe environment for youth to connect with peers, parents and supporters; and identification of resources for ongoing help and support.
- The target population is youth/families who are part of two highly vulnerable groups, African-Americans and the LGBTQ+ community.
- The program will begin with a community survey/focus groups to determine comprehension and stereotypes related to suicide and suicide prevention in the community. Removing the Stigma and Colors+ will facilitate a series of 6-8 community outreach and engagement activities that will be held at a location where the target populations are already engaged, such as a city recreation center or library.
- The series will use both experts and peers to lead interactive learning activities to build a safe, supportive environment around the discussion of mental health and suicide prevention.

Background Information:

- The CCSPC was awarded Public Health Fund of Ohio’s (PHFO) Youth Suicide Prevention grant, which is an opportunity specifically targeted for twenty-seven Ohio counties based on suicide death and attempts data. Eligible applicants were Suicide Prevention Coalitions in those counties.
- The PHFO facilitates public/private partnerships and conducts critical, enduring, sustainable, and cost-effective public health projects and programming. The PHFO issues grants and conducts work related to

public health awareness and educational campaigns, implementation and administration of innovative public health programs and prevention strategies, and priority public health issues.

- The ADAMHS Board serves as the fiscal agent for the CCSPC.

Number of Individuals to be served:

- Services will be provided to at least 15 youth/families in one Cleveland neighborhood based on the most current epidemiological data showing the highest rate of suicidal ideation among youth at ER visits.

Funding Use:

- Funds will be used to provide a series of 6-8 community outreach and engagement sessions.

Client & System Impact:

- Provide a population health promotion event embedded in the local community to promote the removal of stigma around suicide; creation of a safe environment for youth to connect with peers, parents and supporters; and identification of resources for ongoing help and support.

<p>Metrics <i>(How will goals be measured)</i></p>	<p>At least 2 community surveys/focus groups completed.</p> <p>6-8 community sessions completed.</p> <p>By month 12:</p> <ul style="list-style-type: none"> • At least 75% of participants will complete the entire series of sessions. • Each youth will be able to identify at least 1-2 adults they feel safe talking to if they need mental health help or support. • Each adult participant will be able to identify at least 1-3 supportive strategies to help youth that come to them for mental health help or support. <p>During month 12, report pilot successes, necessary adjustments and plans for continuation and replication.</p>
<p>Evaluation/ Outcome Data <i>(Actual results from program)</i></p>	<p>N/A – new program</p>

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

- To accept \$50,000 of funding from PHFO and contract with RTS and Colors+, each for \$25,000, for the term of November 15, 2023 to November 14, 2024.

**Agenda Process Sheet
Date: November 8, 2023**

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

Topic: Amendment to Resolution No. 22-11-08, Crisis Intervention and Harm Reduction Services

Contractual Parties: Northern Ohio Recovery Association (NORA)

Term: January 1, 2023 – December 31, 2023

Funding Source(s): ADAMHS Board

Amount: \$108,000

- New Program**
 Continuing Program
 Expanding Program
 Other

Service Description:

- NORA operates the Crisis Intervention & Harm Reduction Program consisting of a 24-hour hotline (providing behavioral health assessment, linkage & referral) and community outreach Wednesday – Saturday from 5pm until 1am.
- The community outreach consists of a multidisciplinary team including peer supporters, nursing staff and other behavioral health professionals and serves all zip codes in Cuyahoga County, with a focus on underserved areas.
- The community outreach team provides behavioral health assessments, linkages & referrals, health screenings, behavioral health & harm reduction education, harm reduction supplies (including Narcan & Fentanyl Test Strips), and transportation to behavioral health providers.

Background Information:

- NORA’s Crisis Intervention and Harm Reduction Services program started at the end of 2022 through State Opioid Response (SOR) funds. The ADAMHS Board included funding for a portion of the program during the 2023 budget cycle.
- The SOR funding covered specific peer positions that are integral to the implementation of the crisis program.
- This amendment is to provide funding to cover peer positions through the end of the current year in order to maintain the current level of services provided by the crisis program.

Number of Individuals to be served: Approximately 5,000 individuals will be served/outreached in 2023.

Funding Use:

- Funds will be utilized to provide assessment, linkage, education, referrals and outreach in the community.

Client & System Impact:

- Connecting individuals in Cuyahoga County with resources, education and behavioral health providers that may assist them.

<p>Metrics <i>(How will goals be measured)</i></p>	<ul style="list-style-type: none"> • Number of hotline calls received • Number of behavioral health assessments • Number of behavioral health referrals • Number of community outreach interactions • Number of Narcan kits distributed • Number of Fentanyl Test Strips distributed • Number of health screenings conducted • Number of referrals to hospitals for primary care
<p>Evaluation/ Outcome Data <i>(Actual results from program)</i></p>	<p>January 1, 2023 – August 31, 2023:</p> <ul style="list-style-type: none"> • Number of hotline calls received: 65 • Number of behavioral health assessments: 37 • Number of behavioral health referrals: 87 • Number of community outreach interactions: 3,014 • Number of Narcan kits distributed: 1,968 • Number of Fentanyl Test Strips distributed: 1,941 • Number of health screenings conducted: 132 • Number of referrals to hospitals for primary care: 51

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

- Board staff recommends amending Resolution No. 22-11-08 to increase funding for the Crisis Intervention and Harm Reduction Services program with NORA for the term of January 1, 2023 to December 31, 2023.