

**LAKE COUNTY ADAMHS BOARD**

Regular Board Meeting

Monday, April 18, 2022

6:00 p.m.

Lake County ADAMHS Board, One Victoria Place, Suite 201, Painesville

Mr. Meinhold called the meeting to order 6:00 p.m.

**ROLL CALL:**

Members Present: Chair -- Andy Meinhold

Nancy Brown	Kim Collise
Dave Enzerra	Pam Kurt
Nicole Parker	Matt Sabo
Amber Torres Gonzalez	Joanne Zeroske

Members Excused:

Roberta Kalb	Curtis Lau
Julia McGruder	

Staff Present:

Kim Fraser, Executive Director  
 Jackie Bruner, Director of Business Operations  
 Greg Markell, Director of Community and Public Relations  
 Kelly Tuttle, Secretary/Receptionist  
 Eryn Medved, Staff Accountant  
 Dan Rowles, Behavioral Health Project Manager

Guests:

Damir Pavicic	Bridges	Alexandria Suchetka	Lakeland/HMSV Student
Emily Currie-Manring	Catholic Charities	Melanie Blasko	Lake-Geauga
Mike Matoney	Crossroads Health	Kim Hearn-Vance	Lake Health
Shayna Jackson	Crossroads Health	Carrie Dotson	Lifeline, Inc.
Brittani Lawrence	Lakeland/HMSV Student	Samantha Miner	Torchlight (intern)

**MINUTES OF MEETING:**

Ms. Zeroske moved to accept the minutes of the March 21, 2022, regular Board meeting as mailed. The motion was seconded by Mr. Enzerra and the Motion Passed Unanimously. (22-077)

**CORRESPONDENCE:**

Ms. Fraser noted a letter was received from the Executive Director at LGBTQ+ Allies thanking the Board for their support and collaboration since their inception. The connection is meaningful to them and they appreciate that services are readily available to refer those in the LGBTQ+ community.

**FINANCIAL REPORT:**

Ms. Medved read the financial report of Board operations for the month of March 2022 as follows:

Beginning Cash Balance	.....	\$4,508,679.92
Plus: Cash Receipts for the Month	.....	\$5,165,971.88
Total to Account For	.....	\$9,674,651.80
Minus: Cash Disbursements for the Month	.....	\$1,850,754.92
Ending Period Adjustments		\$ 0.00
Ending Cash Journal Balance	.....	\$7,823,896.88

Ms. Collise moved to accept the financial report for the month of March as read. The motion was seconded by Ms. Brown. After discussion the Board voted and the Motion Passed Unanimously. (22-078)

### **PUBLIC COMMENT ON AGENDA ITEMS & INTRODUCTIONS OF GUESTS:**

Guests were welcomed and invited to comment on any agenda items.

### **EXECUTIVE DIRECTOR'S REPORT:**

Ms. Fraser shared that the Board will hold our Annual Dinner meeting in person this year on Monday, June 27<sup>th</sup> at the American-Croatian Lodge. Annual awards will be presented at the dinner for the Unsung Hero (provider employee), Recovery Award (a client who receives services) and an Advocate Award (community partner). Nominations can be submitted online at [helpthatworks.us](http://helpthatworks.us) or a nomination form can be requested from Mr. Markell or Ms. Fraser.

Ms. Fraser stated on Monday, May 2nd Request for Proposals (RFP) are due. At the May Board meeting an in-depth review of proposals will be presented. If there are competitive bids they will be vetted at the June committee meetings. She noted that there were a few changes for inpatient care and senior care in the requests. There have been challenges in placements for inpatient care. As a result, staff is exploring opportunities to expand partnerships with inpatient providers. There have also been challenges for in-home community services for seniors. Board staff is exploring to invest in a provider with expertise in targeted in-home community services for seniors.

Ms. Fraser gave an update on the Workforce Initiative stating that in three months, 360 staff has been impacted at eight provider agencies. Since the workforce investment; provider agencies have noted it has helped offset inflationary costs, helped them to recognize staff that have worked through the pandemic, and they have seen an increase in qualified job applicants due to the inclusion of healthcare benefits. Since the investment the retention rate among providers is 97-100%.

Ms. Fraser reported that the 988 National Lifeline in July 2022 will go live across the state expanding existing crisis hotlines. Portage Path in Summit County will become the 988 call center for Summit, Lake and Geauga Counties with all calls being routed to that site. Portage Path will manage the crisis or refer to existing hotlines/providers in the appropriate county. Lake County's Crisis hotline makes follow-up calls, refers to mobile crisis and dispatch to the Trauma Response Team. Our investment in the Crisis hotline is still needed since they do more than just answer calls.

Ms. Fraser announced the Data Spotlight this month is on the Cleveland Rape Crisis Center. Before Cleveland Rape Crisis Center was in Lake County, survivors of sexual assault had to drive to downtown Cleveland to receive services. Several years ago the Board reached out to them requesting that they establish a home in Lake County to provide vital services. Since then there has been a 64% increase in direct service with clients. Their depth of service is significant. Not only do they provide therapeutic services but they also provide: prevention, outreach, professional trainings, anti-human trafficking, advocacy, case management and 24-hour services. The Lake County ADAMHS Board's annual investment is only 27% of their total Lake County budget. Our workforce development investment initiative of \$33,000 was matched with \$154,000 agency contribution. Overall the county garners a significant benefit from a relatively small investment. Ms. Fraser noted the one-pager from this presentation would be available for Board members review on the Board member portal.

### **EXECUTIVE COMMITTEE REPORT:**

Mr. Meinhold reported that the Executive Committee met prior to the Board meeting and the following items were discussed:

On behalf of the Executive Committee, Ms. Zeroske moved that the full Board approve the SFY2022 Health Officers as recommended by the Director of Quality and Clinical Operations. The motion was seconded by Mr.ENZERRA and the Motion Passed Unanimously. (22-079)

Ms. Fraser noted she has a list of approved Health Officers if Board members would like to review.

#### **EVALUATION/QUALITY IMPROVEMENT COMMITTEE REPORT:**

Ms. Kurt reported that the EQI Committee met on April 11th and the following items were discussed:

Quality Improvement Review of Bridges Bridges is a non-clinical consumer operated agency that provides a variety of educational and social activities for severely mentally disabled adults through the Drop-In Center and also offer support through the Warm Line. Bridges is guided and directed by an active and responsive volunteer governing body. The Board is comprised of members living with a mental health challenge.

Mr. Pavicic explained Bridges service model which is orientation, socialization, topic groups, in house curriculum (Person Development, Wellness & Me, Food Management Program and Aging) and community events. Bridges provides a positive environment and helps expand their clients comfort zone.

Bridges has many community partners who provide activities for clients and speakers to reinforce the positives such as Auburn Career Center, Ohio State Ext. office, UH/Lake Health, Lake Farm Parks, Atlas Cinema, Flavors Restaurant, Wickliffe Bowling Lanes, and Mentor-on-the-Lake Putt-Putt.

Discussion: Are there goals you want to reach in the next year? Clients are weary about coming back. After they are comfortable they become regulars fairly easily. Mr. Pavicic would like to see the number of clients back to where they were before the pandemic.

Mr. Lau noted he would like to see concrete goals set and how they are met. Ms. Lakomiak responded all of the data is available for each program in the provider agencies RFP.

Ms. Lakomiak has reviewed the agency's QI plan. It is in compliance with their certification through OhioMHAS and it is her recommendation that we approve their plan.

On behalf of the Evaluation/Quality Improvement Committee, Ms. Kurt moved that the full Board accept Bridges Quality Improvement Plan. Seconded by Ms. Parker the Motion Passed Unanimously. (22-080)

Quality Improvement Review of Signature Health Ms. Harrington reported that Signature Health has three locations in Lake County that include Painesville, Willoughby and Mentor Administrative Offices.

From CY20 to CY21, they increased unduplicated patients by 6.4% in Lake County. From CY20 to CY21, they increased staffing by 69 FTE's (had 900 in 2019 but lost 12% of their workforce in 2020 and are now around 800 employees). Professional staffing remains very challenging; particularly in BH and SUD.

Ms. Harrington was proud to present the Patient Navigator position where they engage clients early and often to address barriers, hesitations and stigmas. The goal is to retain patients in care and achieve treatment goals.

Signature Health will soon be opening the C.H. Everett Clinic; a 16-bed residential facility for adult males. The opening was to take place around two years ago but was postponed due to the pandemic. Funding for this facility was provided by the Lake County ADAMHS Board, Lake Health and the Cleveland Foundation. Services

will include: Medication Assisted Treatment, Nursing, Pharmacy, Lab, Group & Individual Counseling and Infection Disease Screening and Treatment. They will now be able to offer co-occurring residential SUD treatment and infectious disease screening and treatment.

Ms. Harrington was excited to announce the grand opening of their new Painesville location at 54 S. State Street. At this site they will be able to increase access to mental health, substance use disorder and sexual reproductive health services. They will also be adding medication assisted treatment services, dental services and an on-site pharmacy. An open house will be held on May 2<sup>nd</sup> and the facility will open on May 9<sup>th</sup>.

Ms. Harrington shared the following milestones:

- \* In 2021, they administered 9,664 COVID vaccinations to 4,941 patients; 65% in Lake County.
- \* In May, 2021, Family Planning came into "scope" becoming fully integrated with Signature Health, now Reproductive Health Services.
- \* Implementation of Zero Suicide Institute best practices.
- \* May 25, 2021, implemented new Electronic Health Records OCHIN Epic.

Ms. Lakomiak has reviewed the agency's QI plan. It is in compliance with their certification through OhioMHAS and it is her recommendation that we approve their plan.

On behalf of the Evaluation/Quality Improvement Committee, Ms. Kurt moved that the full Board accept Signature Health's Quality Improvement Plan. Seconded by Ms. Torres Gonzalez the Motion Passed Unanimously. (22-081)

Quality Improvement Review of NBHS Ms. Torbert stated Northcoast Behavioral Healthcare is a state entity under the auspices of the Ohio Department of Mental Health and Addiction Services. Its' services have been in place for over six decades as an inpatient psychiatric hospital. The Community Services Network (CSN) of NBH currently provides a variety of community based mental health services. In Lake County CSN has two residential care facilities; Willoughby Place and Madison Place. The two homes provide temporary, transitional housing with treatment and supportive services for 16 adults who are severely mentally disabled. Referrals are received from the state hospital, private nursing homes, jails and prisons. Patients coming out of the state hospital are prioritized.

Mr. Cummings stated that residents must be 18 years of age or older, severely mentally ill with co-occurring disorders living in the community with a high risk of psychotic hospitalization or those psychiatrically hospitalized and/or incarcerated needing transition back into the community. The group homes are staffed 24 hours/7 days a week by a trained and skillful staff. They monitor and reinforce skills and interventions through 1:1 and groups. Residential staff assist with personal care services such as: bathing, oral hygiene, grooming, dressing, and toileting; meal preparation, household skills (chores, laundry); medication monitoring; care of minor illness; care for medical condition (i.e. diabetes, arthritis) and socialization/leisure skills.

Mr. Cummings noted he was appreciative for the collaboration he has with Signature Health and Crossroads Health staff.

Mr. Cummings reported there were 11 total discharges in SFY21. The average length of stay was 13 months and 15 days. 8 were discharged into independent living and 3 into the hospital due to the acuity of the individuals.

Ms. Torbert reported that 72% of residents served were discharged to a less restrictive environment and 75% of residents served attained skills necessary to transition to a less restrictive environment. 100% of residents discharged from the program were not referred back/readmitted.

Ms. Lakomiak has reviewed the agency's QI plan. It is in compliance with their certification through OhioMHAS and it is her recommendation that we approve their plan.

On behalf of the Evaluation/Quality Improvement Committee, Ms. Kurt moved that the full Board accept Northcoast Behavioral Healthcare's Quality Improvement Plan. Seconded by Ms. Zeroske the Motion Passed Unanimously. (22-082)

Next Meeting Date: Monday, May 9, 2022 at 5:30 p.m. at the Lake County ADAMHS Board

Agencies being reviewed: Catholic Charities, Cleveland Rape Crisis, UH/Lake Health, Torchlight and WomenSafe

*As the **PROGRAM COMMITTEE** did not meet since the last full Board meeting, the Board moved on to the next agenda item*

#### **ALLOCATION COMMITTEE MEETING REPORT:**

Ms. Zeroske reported that the Allocation Committee met on April 13th and the following items were discussed:

#### **Virtual Training Equipment**

Ms. Tenkku gave a presentation on the SURVIVR Virtual Reality simulator which is a training tool used for protocol, decision making, safety, crisis intervention and de-escalation. Until now this has been available only to law enforcement. We would be the first to utilize this for community and crisis services. If the system was purchased, the Board would be able to train the mobile crisis team, emergency department crisis team, hotline staff, school based counselors, school resource officers, and community clinicians. It would also be used for the first responder Crisis Intervention Trainings. The total investment is \$62,500 which includes two head mounted displays, two VR optimized computer systems with wireless adaptor/ batteries, two portable tracking systems, two VR toolsets and two desktop computers with keyboard, keypad, audio, etc. It includes a two year service package and a two year warranty that will cover hardware. It also includes in-person train the trainer for five people in our system to be able to operate the software. A \$34,500 discount was given by the company Inveris because we brought the idea that this can be used for those who provide crisis de-escalation besides law enforcement and it has opened up a whole new area to promote their equipment. Several simulators were researched and this system is the best fit for Lake County. Staff recommendation is to enter into a contract with Inveris in the amount of \$62,500 for virtual training equipment.

Discussion: Will the equipment be housed at the Board office? Who will we trained? Yes, it will be housed at the Board office. At least one Board staff member will be trained along with the First Responder Liaison, someone with a relationship in the schools and a crisis team supervisor.

What is the cost after two years? It will be \$1,300.00 for the warranty and software updates.

On behalf of the Allocation Committee, Ms. Zeroske moved that the full Board enter into a grant type contract with Inveris for Virtual Training Equipment for an amount not to exceed \$62,500. Funding out of Capital line

item (account #811) will be used. The motion was seconded by Mr. Sabo and the Motion Passed Unanimously. (22-083)

### **Funding Overview**

Ms. Fraser reviewed 'Lake County ADAMHS Board SFY2022 Revenue' reviewing the new funding streams. Each has its' own tracking and accountability. Mr. Rowles has taken the lead on reporting and bringing new funding opportunities into the system. This was informational and no committee action was required.

### **SFY2023 Board Operating Budget**

Ms. Fraser reviewed the 'SFY2023 Board Operating Budget.' She noted the increase in the salaries line-item is due to the addition of a new staff member and vacation payment for an upcoming retirement. The professional dues and memberships line-item had a slight increase. The overall small increase was \$48,000.

Discussion: Does this factor inflation? Yes.

On behalf of the Allocation Committee, Ms. Zeroske moved that the full Board approve the SFY2023 Board Operating Budget as presented. The motion was seconded by Ms. Collise and the Motion Passed Unanimously. (22-084)

### **Crossroads Line Item Adjustment**

Ms. Fraser brought before the committee line-item adjustments that Crossroads Health is requesting. The adjustments are budget neutral and there is no decrease to the service provision. Decreases are due to the agency being able to generate Medicaid funding. Staff recommendation is to approve the adjustments as presented.

On behalf of the Allocation Committee, Ms. Zeroske moved that the full Board approve the following line item adjustments to the SFY2022 Non-Medicaid Crossroads Health contract: decrease MH Diagnostic Evaluation w/o Medical \$35,000; decrease MH Evaluation & Management \$20,000; decrease MH Psychotherapy \$90,000; decrease Psychotherapy for Crisis \$30,000; decrease SUD Assessment \$4,700; decrease SUD Psychotherapy \$4,000; decrease SUD Case Management \$6,000; decrease SUD Drug Screen \$4,000; decrease Intensive Outpatient Services \$9,000; increase MH Community Services \$202,700 for a budget neutral line item adjustment. The motion was seconded by Ms. Kurt and the Motion Passed Unanimously. (22-085)

Ms. Fraser brought before the committee line-item adjustments that WomenSafe is requesting. The adjustments are budget neutral and there is no decrease to the service provision. She noted that 30% of their shelter days are for Lake County residents and they have become an established partner in the community. Staff recommendation is to approve the adjustments as presented.

On behalf of the Allocation Committee, Ms. Zeroske moved that the full Board approve the following line item adjustments to the SFY2022 Non-Medicaid WomenSafe contract: decrease MH Diagnostic Evaluation w/o Medical \$1,000; decrease MH Psychotherapy \$3,000; decrease MH Community Services \$1,000; decrease Advocacy \$5,000; increase Shelter days \$10,000 for a budget neutral adjustment. The motion was seconded by Mr. Sabo and the Motion Passed Unanimously. (22-086)

Next meeting date – Wednesday, June 13, 2022 at 5:30 p.m.

*As the **LONG RANGE PLANNING COMMITTEE** did not meet since the last full Board meeting, the Board moved on to the next agenda item*

**OLD BUSINESS:**

There was no old business.

**NEW BUSINESS:**

Payment of Bills Ms. Brown moved that the Board approve the April bills totaling \$1,341,074.60 be paid as presented. The motion was seconded by Mr. Enzerra. After discussion the Board voted and the Motion Passed Unanimously. (22-087)

**GOOD OF THE GROUP:**

Ms. Collise asked if those that were placed on Medicaid during the pandemic would be affected if the funding were to go away. Ms. Fraser responded there is a redetermination process that the provider agencies are aware of.

As there was no further business, Mr. Sabo moved for adjournment at 6:55 p.m. The motion was seconded by Ms. Zeroske and the Motion Passed Unanimously. (22-088)

Respectfully submitted,

Andy Meinhold  
Chair

Joanne Zeroske  
Secretary