

**LAKE COUNTY ADAMHS BOARD**

Regular Board Meeting

Monday, October 17, 2022

6:00 p.m.

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

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

**ROLL CALL:**

Members Present: Chair -- Matt Sabo

Kim Collise	Dave Enzerra
Mike Hatton	Roberta Kalb
Stacy Kramer	Pam Kurt
Curtis Lau	Andy Meinhold
Nicole Parker	Martin Phillips
Jeffrey Taylor	Amber Torres Gonzalez

Members Excused:

Joanne Zeroske

Staff Present:

Kim Fraser, Executive Director  
 Jackie Bruner, Director of Business Operations  
 David Schick, Director of Marketing & Communications  
 Kelly Tuttle, Secretary/Receptionist  
 Dan Rowles, Behavioral Health Project Manager  
 Milica Radivojevic, Staff Accountant

Guests:

Damir Pavicic	Bridges	Charlotte Davis	Public
Jessica Martin	Cleveland Rape Crisis	Renwick Davis	Public
Shayna Jackson	Crossroads Health	Jonathan Lee	Signature Health
Angi Daugherty	Family Pride	Tia Lawrence	Torchlight
Jim Levine	Forbes House	Jackie Smith	UH/Lake Health
Marie Pollard	Forbes House	Michelle Giancola	Windsor-Laurelwood
Melanie Blasko	Lake-Geauga Recovery	Andrea Gutka	WomenSafe
Vincent Benton	Public		

**MINUTES OF MEETING:**

Mr. Enzerra moved to accept the minutes of the September 19, 2022 regular Board meeting as mailed. The motion was seconded by Mr. Phillips and the Motion Passed with Ms. Kurt abstaining. (23-021)

**FINANCIAL REPORT:**

Ms. Radivojevic read the financial report of Board operations for the month of September, 2022 as follows:

Beginning Cash Balance	\$7,406,674.49
Plus: Cash Receipts for the Month	\$ 759,863.71
Total to Account For	\$8,166,538.20
Minus: Cash Disbursements for the Month	\$2,138,735.83
Ending Period Adjustments	\$ 00.00
Ending Cash Journal Balance	\$6,027,802.37

Mr. Meinhold moved to accept the financial report for the month of September as read. The motion was seconded by Mr. Lau and the Motion Passed Unanimously. (23-022)

**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 thanked Board members for their recent participation in the NAMI walk and Bridges Clambake. There are more fundraisers upcoming. On December 5<sup>th</sup> the Fine Arts Association's Creative Arts Therapies Program will be hosting "Share Day". More information to follow.

Ms. Fraser announced that the Board Retreat will be held on Monday, November 14<sup>th</sup> after a brief Board meeting that will start at 5:00 p.m.

Ms. Fraser gave an update on marketing and communications noting what a success the Week of Appreciation was recognizing First Responders. Mr. Schick did a phenomenal job spearheading this and the ice cream truck is already reserved for next year. Family Pride of Northeast Ohio and the Lake-Geauga Recovery Centers recently both had stories covered by WEWS – Channel 5. Clients spoke about the services they have received and the difference it has made in their lives.

Ms. Fraser reported that the Culture of Quality (COQ) certification is a voluntary process conducted by peers and board association staff that verifies conformance with COQ standards. There are 142 standards that were developed after review of pertinent Federal and State laws, rules and regulations or identified as quality practices within the system. Standards are broken down in eight sections which include Public Affairs/Education/Community Relations/Policy/Advocacy, Risk Management and Insurance, Board Health & Safety, Human Resources, Mission & Program, Governance, Board Finance & Operations and Ethics.

Ms. Fraser stated that tonight's data spotlight is on Lake County's Housing Continuum. Safe affordable housing can be a significant barrier for individuals with mental illness and/or substance-use disorders. In Lake County there is one homeless shelter; Project Hope. Over the last 5 years an average of 61% of their residents have mental illness or substance use disorder. The Board supports a variety of options to offer individuals who are not ready for independent living which include 30 mental health residential treatment beds, 53 permanent supportive housing units, and 64 adult substance use disorder residential treatment beds. For those ready to move into independent living the Board provided 91 housing and emergency housing vouchers. Unfortunately finding affordable housing in the community is an ongoing challenge. Two-bedroom rent has increased in Ohio 12.3% over the past year and 23% in two years. The Board continues to search for housing solutions. We are committed to being a ready and willing partner with our current providers as well as outside partners to search for and secure good housing solutions for our clients.

**EXECUTIVE COMMITTEE REPORT:**

Mr. Sabo reported that the Executive Committee met prior to the Board meeting and the following item was discussed:

On behalf of the Executive Committee, Ms. Kalb moved that the full Board approve the FY2023 Health Officers as recommended by the Director of Quality and Clinical Operations. The motion was seconded by Mr. Meinhold. After discussion the Board voted and the Motion Passed Unanimously. (23-023)

Ms. Fraser noted a complete list of health officers is available for review. Health officers complete a comprehensive training and upon completion have the authority to administer pink slips.

On behalf of the Executive Committee, Ms. Collise moved that the full Board enter into an FY23 non-Medicaid grant type contract with Crossroads Health in an amount not to exceed \$135,000 for the provision of Vivitrol

injections in the Lake County Jail. The motion was seconded by Mr. Lau. After discussion the Board voted and Motion Passed Unanimously. (23-024)

Ms. Fraser noted that funding will be a combination of Regional COVID Emergency Supplemental Funding and local dollars. This would be an expansion of the current contract and enable those incarcerated to be more successful upon release.

On behalf of the Executive Committee, Mr. Meinhold moved that the full Board enter into an FY23 non-Medicaid grant type contract with Cleveland Rape Crisis Center in an amount not to exceed \$23,861 for expenses associated with the office relocation. The motion was seconded by Ms. Parker. After discussion the Board voted and the Motion Passed Unanimously. (23-025)

Ms. Fraser noted that expenses include technology, moving expense, office updates and installation of a security system. The agency co-locates with WomenSafe.

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

Mr. Lau reported that the Evaluation/Quality Improvement Committee met on October 3rd and the following item was discussed:

Quality Improvement Review of the Cleveland Rape Crisis Center Ms. Martin presented a power point on the Cleveland Rape Crisis Center. Their mission is to support survivors of rape and sexual abuse, promote healing and prevention and advocate for social change.

The Cleveland Rape Crisis Center serves anyone affected by rape or sexual abuse no matter how long ago the assault occurred to women, men, children, loved ones and people of all ages, gender identities and walks of life.

Ms. Martin noted there was a 21% increase in Lake County in the number of survivors served in therapeutic services from SFY20 to SFY21. 100% of acute clients were offered an appointment within 1-3 business days. 100% of non-acute mental health counseling clients were offered an appointment within 10 business days. 96% of clients reported that they are satisfied with services they received.

The Cleveland Rape Crisis Center provides crisis counseling, short term individual counseling, support sessions, group therapy, 24-hour crisis hotline, hospital and police station support, human trafficking services, professional training and community education and justice system assistance. They also offer a drop-in center which you do not have to be a client to stop in. All services are provided at no cost to the survivor.

Cleveland Rape Crisis Center's priority populations include: the Spanish speaking community, LGBTQ+ and hearing impaired. The agency is Safe Zone certified.

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, Mr. Lau moved that the full Board accept Cleveland Rape Crisis Center's Quality Improvement Plan. Seconded by Ms. Kalb the Motion Passed Unanimously. (23-026)

Quality Improvement Review of WomenSafe Ms. Brant presented a power point highlighting services at WomenSafe. The agency's mission is to provide emergency shelter and support services to survivors of domestic violence throughout Northeast Ohio. WomenSafe provides 24-hour crisis hotline, emergency shelter, diagnostic assessment, individualized service planning, counseling, art therapy, play therapy, CPST, education, prevention and outreach.

WomenSafe's shelter provides state of the art security with a trauma informed care design from entry to exit. In SFY2022, they provided emergency shelter services to 44 Lake County residents comprising of over 1,468 nights of shelter and 32% of their total shelter nights for the year. The maximum occupancy is 32. All services at WomenSafe are elective and tailored to best meet the needs of their clients.

Ms. Brant reviewed prevention and education services that WomenSafe provide in Lake County. 2,647 students were reached through several school districts with Healthy Relationships, Domestic Violence Task Force and Professional Education. She will follow up with Ms. Lakomiak on school districts/specific schools that were presented too. The agency also does outreach through Rock the Purple Ribbon, Shine a Light Campaign, and a number of outreach events where information and resources are distributed.

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, Mr. Lau moved that the full Board accept WomenSafe's Quality Improvement Plan. Seconded by Mr. Phillips the Motion Passed Unanimously. (23-027)

Other Ms. Lakomiak reminded that a motion to approve UH/Lake Health's Quality Improvement Plan was tabled from the August meeting. Ms. Fraser forwarded the financial information requested to Board members and they were satisfied with the information and were ready to move forward. A motion was passed to take from the table their QI plan.

On behalf of the Evaluation/Quality Improvement Committee, Mr. Lau moved that the full Board accept UH/Lake Health's Quality Improvement Plan. The motion was seconded by Mr. Phillips and the Motion Passed Unanimously. (23-028)

Next meeting date – Monday, November 7, 2022 at 5:30 p.m.

### **OPERATIONS COMMITTEE REPORT:**

Ms. Kalb reported that the Operations Committee met on October 4th and the following item was discussed:

Ms. Fraser reminded that the Operations Committee is a combination of the Program and Allocation Committees. This committee is now looking at both the fiscal and clinical services.

State Updates Ms. Fraser stated that ADAMHS Boards are starting to engage with the state looking at the next biennium budget. We do not anticipate major changes but are on alert for potential changes. A majority of our funding comes from local levy dollars; about 65%. This was informational and no committee action was required.

Lifeline – Assist Homeless Population Ms. Fraser reported that the Board received a request from Lifeline for \$15,000 for the period of August – December 2022. Lifeline works closely with Project Hope; the shelter temporarily suspended admissions recently due to COVID. In the past when the shelter had a COVID crisis, Lake ADAMHS was able to invest dollars through Lifeline; funding supported hotel stays for individuals who

would have otherwise resided in the shelter. The \$15,000 will go to both support the shelter through hotel stays and provide additional funding to do a deep cleaning. Funding will support the shelter minimally through December. A motion was forwarded from the Operations Committee to the full Board to enter into a contract with Lifeline to assist the homeless population.

On behalf of the Operations Committee, Ms. Kalb moved that the full Board enter into a SFY2023 grant type contract with Lifeline to assist the homeless population for an amount not to exceed \$15,000. The motion was seconded by Ms. Parker and the Motion Passed Unanimously. (23-029)

Cleveland Rape Crisis Center – increase in SFY2023 Contract Ms. Fraser stated that the Board invests \$116,000 into services with the Cleveland Rape Crisis Center for Lake County residents. The agency invests additional funding for Lake County services as well. The Ohio legislature allocated Rape Crisis Trust Funds for a two-year budget cycle pushing out substantial dollars in year one, then fewer dollars for year two. Funding flows through the Prosecutor's office. CRCC will receive a \$34,000 cut in FY23. In order to address the cut in Lake County, the Cleveland Rape Crisis Center is requesting an increase in FY23 grant funds from Lake ADAMHS. A motion was forwarded to the full Board to enter into a contract with the Cleveland Rape Crisis Center.

On behalf of the Operations Committee, Ms. Kalb moved that the full Board enter into a SFY2023 grant type contract with Cleveland Rape Crisis Center for an amount not to exceed \$34,000. The motion was seconded by Mr. Enzerra and the Motion Passed Unanimously. (23-030)

SFY2022 Non-Medicaid Contract Reconciliation Ms. Fraser stated that grant contracts are for programs that can't be broken easily into a unit of service. ADAMHS allocates 1/12 of grant contracts at the beginning of each month. Unused dollars are invoiced and returned back to the Board via the reconciliation process. Purchase of service (POS) contract dollars are paid when the agency submits a bill for the units of service provided.

Ms. Fraser noted that providers file financial quarterly reports with the Board to determine funds utilized and the potential need to adjust contracts. Board staff collaboratively works with providers and they are aware of the reconciliation amounts being reviewed today.

Ms. Bruner reviewed 'SFY2022 Mental Health and Substance Use Disorder non-Medicaid Service Contract Reconciliations' explaining each column that included the contract amount, amount received per Board, amount expended at each agency, total public revenue and the grant amount to be invoiced to each agency. She stated that all other dollars are used first before using ADAMHS Board dollars.

Ms. Fraser highlighted the following contracts:

Bridges: The grant amount to be invoiced: \$1,190.09. Unspent dollars were in the Consumer Operated Services/Peer Run Organizations.

Catholic Charities Services: The grant amount to be invoiced: \$23,982.00. Unspent dollars were in the Families of Promise and Interpretation program (which is a system wide program and is hard to predict). The agency also had \$140.59 in unspent POS.

Crossroads Health: The grant amount to be invoiced: \$105,759 Unspent dollars were due to utilizing Medicaid and 3<sup>rd</sup> party payment instead of local funding. The agency also had in unspent POS \$77,706.40.

Extended Housing: The grant amount to be invoiced: \$9,814.01.

Lake-Geauga Recovery Center: The grant amount to be invoiced: \$139,194.00. Unspent dollars were due to utilizing Medicaid instead of local funding. The agency also had \$106,138.91 in unspent POS.

Lifeline: The grant amount to be invoiced: \$3,750.00. Unspent dollars were in Mental Health Prevention. She noted that carryover can be brought over into the next fiscal year if approved by the state which is shown for the Re-Entry program.

Signature Health: The grant amount to be invoiced: \$202,131.35. Unspent dollars were due to not being able to open the SUD Residential facility. The agency also had \$57,418.67 in unspent POS.

Torchlight Youth Mentoring: The grant amount to be invoiced: \$1,331.20. Unspent dollars were in School Based Mentoring.

Windsor-Laurelwood: The unspent purchase of service amount: \$563,595.00. The Board utilizes beds at Windsor-Laurelwood through purchase of service for adults and children. If beds are not available at the state hospital, bed days are used at Windsor-Laurelwood. An indigent hospitalization grant opportunity from OhioMHAS gave Boards the ability to apply for funding to help with indigent inpatient care. Lake ADAMHS has accessed the grant to pay for inpatient care at Windsor-Laurelwood; as a result, local dollars were not utilized. Staff recommends the Board continue to allocated local dollars for inpatient care as the state's indigent hospitalization program is not guaranteed moving forward.

Ms. Fraser stated that reconciled dollars go back into general revenue for further investments. Staff recommendation is to send invoices as stated to Bridges, Catholic Charities, Crossroads Health, Extended Housing, Lake-Geauga Recovery Centers, Lifeline, Inc., Signature Health and Torchlight for unspent grant non-Medicaid service contracts.

On behalf of the Operations Committee, Ms. Kalb moved that the full Board reconcile SFY2022 Non-Medicaid grant type contracts as follows: Bridges \$1,190.09; Catholic Charities \$23,982; Crossroads Health \$105,759; Extended Housing \$9,814.01; Lake Geauga Recovery Centers \$139,194; Lifeline \$3,750; Signature Health \$202,131.35 and Torchlight \$1,331.20. The motion was seconded by Mr. Hatton and the Motion Passed Unanimously. (23-031)

Zero Suicide Update Ms. Lakomiak reported that last year there were 48 deaths by suicide in Lake County which was a significant increase from the previous year. The nation also saw a large increase. Lake County was doing a lot of work in this area through the Suicide Prevention Coalition, QPR trainings, and new programming in schools. Board staff did research on Zero Suicide and requested that the Board partner with this organization last year in the amount of \$135,000. Zero Suicide is a quality improvement model that transforms system-wide suicide prevention and care to save lives. Adopting a "Zero-based" mindset happens by routinely and consistently embedding evidence-based practices focused on patient safety and offer hope and recovery for people at risk for suicide. A Zero Suicide introductory workshop and a 2-day academy have been held. Board staff meet with provider agencies monthly. Some agencies are farther along than others in this process. The completion of this project will take 18 months. Things that are meaningful sometimes take time to improve the culture working together. This was informational and no committee action was required.

Next Meeting Date: Monday, December 13, 2022 at 5:30 p.m. at the Lake County ADAMHS Board

#### **LONG-RANGE PLANNING COMMITTEE REPORT:**

Mr. Meinhold reported that the Long-Range Planning Committee met on October 4th and the following item was discussed:

**SFY23-SFY28 Strategic Plan** Ms. Fraser reminded that last April the committee went through the current plan recognizing it would expire in SFY2022. Reflecting on the discussion at this meeting, the management team have been working on updating the Strategic Plan the past six months. The previous strategic plan was about driving change. The proposed plan isn't about how we are going to change the behavioral system; it is about continuous quality improvement. The last plan included significant detail in the action steps. The recommended updates include goals that are more global.

Ms. Fraser reviewed the SFY23-SFY28 proposed Strategic Plan as follows:

The Lake County ADAMHS Board Strategic Goals and Action Steps will focus on continuous quality improvement that align statutorily mandated responsibilities with locally driven priorities.

**Guiding Principles:**

Working in partnership with individuals and families in recovery, ADAMHS providers, stakeholders, and community partners, the Board will provide an equity-informed comprehensive behavioral health system that will:

- o Utilize qualitative and quantitative data to assess emerging needs, address gaps, and establish best practice standards of care;
- o Invest in prevention, treatment and recovery services and supports prioritizing accountability and transparency;
- o Drive a local continuum of care utilizing data, outcomes, and consumer voice and choice.
- o Collaborate and advocate at the local, state and federal level to combat stigma, leverage resources and facilitate access.

**Our Goals:**

1. We will facilitate prevention, treatment and recovery services that are efficient, effective and accountable.
2. As part of the community we will provide education, outreach, and ensure accessibility and support to all.
3. We strive to continually improve internal Board operations.
4. Our use of data and technology will be a catalyst for change.

Ms. Fraser reviewed the goals and action steps. She noted that this plan is a substantial change but it is a result of previous discussion we had at the last meeting. The purpose of the plan is not to reinvent the system but to continually monitor and improve.

Board staff will continue to use the score card approach to track progress of the goals.

On behalf of the Long-Range Planning Committee, Mr. Meinhold moved that the full Board approve the SFY2023-2028 Strategic Plan as presented. The motion was seconded by Mr. Hatton and the Motion Passed Unanimously. (23-032)

**OLD BUSINESS:**

There was no old business.

**NEW BUSINESS:**

**Payment of Bills** Ms. Kalb moved that the Board approve the October bills totaling \$1,455,223.87 be paid as presented. The motion was seconded by Ms. Collise and the Motion Passed Unanimously. (23-033)

**GOOD OF THE GROUP:**

Ms. Kalb thanked Bridges for the wonderful fundraiser which was first class all of the way. Mr. Pavicic thanked the Board for their support.

**EXECUTIVE SESSION:**

Mr. Meinhold moved that the full Board, by roll call vote, enter into Executive Session for the purpose of discussing personnel matters. The motion was seconded by Ms. Collise.

The roll call was taken and the Motion Passed Unanimously. (23-034) The Board went into Executive Session at 6:47 p.m. and guests were asked to leave.

Mr. Lau moved to exit Executive Session at 6:58 p.m. The motion was seconded by Mr. Hatton and the Motion Passed Unanimously. (23-035)

Ms. Kalb moved that the full Board revise the Executive Director's Employment Contract to extend the termination date to October 31, 2031. Seconded by Mr. Phillips the Motion Passed Unanimously. (23-036)

As there was no further business, Ms. Kalb moved for adjournment at 7:00 p.m. The motion was seconded by Ms. Parker and the Motion Passed Unanimously. (23-037)

Respectfully submitted,

Matt Sabo  
Chair

Kim Collise  
Secretary