

LAKE COUNTY ADAMHS BOARD

Regular Board Meeting
Monday, March 20, 2023
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 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
Dan Rowles, Director of Quality & Clinical Operations
Kelly Tuttle, Secretary/Receptionist
Milica Radivojevic, Staff Accountant

Guests:

Carl Dondorfer	Board Member Elect	Carrie Dotson	Lifeline, Inc.
Emily Currie-Manning	Catholic Charities	Megan Zielinski	Signature Health
John Hamercheck	Commissioner	Tia Lawrence	Torchlight
Shayna Jackson	Crossroads Health	Lisa Courtot	UH/Lake Health
Karen McLeod	Extended Housing	Michelle Giancola	Windsor-Laurelwood

SWEARING IN OF NEW BOARD MEMBERS:

Commissioner Hamercheck administered the Oath of Office to Carl Dondorfer. He was warmly applauded and welcomed. Mr. Dondorfer shared some background information noting that he is the current police chief in Waite Hill Village.

MINUTES OF MEETING:

Ms. Parker moved to accept the minutes of the February 27, 2023 regular Board meeting as mailed. The motion was seconded by Mr. Phillips and the Motion Passed with Ms. Kalb abstaining. (23-077)

CORRESPONDENCE:

There was no correspondence to report.

FINANCIAL REPORT:

Ms. Radivojevic read the financial report of Board operations for the month of February 2023 as follows:

Beginning Cash Balance	.....	\$4,325,788.19
Plus: Cash Receipts for the Month	.....	\$ 157,932.65
Total to Account For	.....	\$4,483,720.84
Minus: Cash Disbursements for the Month	.....	\$1,097,080.66
Ending Period Adjustments		\$ 00.00
Ending Cash Journal Balance	.....	\$3,386,640.18

Ms. Kalb moved to accept the financial report for the month of February as read. The motion was seconded by Mr. Lau and the Motion Passed Unanimously. (23-078)

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 reported that the Request for Proposal (RFP) will be brought before the Board this evening. She emailed instructions and service specs to Board members prior to the meeting for their review. There are no major changes from last year. RFP's will be available on our website tomorrow morning and are due on May 1st by 3:00 p.m. Contracts will be voted on at the June 20th annual dinner meeting.

Ms. Fraser gave an update on Family Pride who became a new provider in our system this past fiscal year. Year to date they have served 29 seniors and provided 460 services. The Fine Arts Association who became a pilot provider this fiscal year served 182 individuals and 54 staff members to date and are looking for more staff to provide services.

Ms. Fraser reminded that the Friends of Lake ADAMHS (FOLA) Celebrity Art Auction will be held on Thursday, May 11th at St. Noel's. Channel 3 News meteorologist Jason Mikell was recruited by Mr. Taylor to be a celebrity artist and he will do a live news broadcast from the event. Board sponsorship opportunities and raffle item ideas are included in Board packets.

Ms. Fraser stated that March is Problem Gambling Awareness month. Lake Geauga Recovery Center hosted a Gambling Disorder Screening Day on March 14th and a Problem Gambling 101 seminar on March 15th which were both free and open to the public.

Ms. Fraser announced that tonight's Data Spotlight was on Crisis Services. In SFY2022, there were 81 community outreach visits to police/fire departments, senior centers, libraries, schools, YMCAs and other community partners on our crisis services. In SFY2023 we hosted the systems first Assessing and Managing Suicide Risk (AMSR) training in which 15 of the Zero Suicide pioneers in Lake County attended. We plan to host another five trainings this calendar year.

Ms. Fraser reviewed numbers for the Mobile Crisis, Caring Contacts, Pink Slips, and Emergency Department visits. She noted the Lake County Crisis Hotline received 6,153 calls. Of these calls 10% were routed for additional assistance and 2,422 received follow-up support calls. The 988 (Portage Path – Summit County) received 551 calls from Lake County (which was 26% of the total call volume). None of these calls were routed to Lake County for additional assistance or support.

Ms. Fraser stated that planning for the Tri-County Crisis Stabilization Center has been underway and includes the Lake/Geauga/Ashtabula ADAMHS Boards, UH Hospitals, UH/Lake Health Foundation, Crossroads Health, Signature Health, Lake Geauga-Recovery Center, Ravenwood and Lakeland Community College. The center would divert individuals from the emergency department or jail. Senator Cirino has spearheaded this project and is looking to get funds from the state to make this happen. Next steps include: securing a project manager (contract via Lake ADAMHS; initial funding via UH/Lake Health Foundation), scope of service, location and funding. This will be an innovative, state of the art facility. Ms. Fraser will update the Board continuously throughout the process.

EXECUTIVE COMMITTEE REPORT:

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

Mr. Sabo appointed Mr. Dondorfer to the Operations Committee.

At least forty-five (45) days prior to the annual meeting of the Board, the Board shall elect a Nominating Committee composed of at least five (5) of its member's not then officers of the Board. Such Nominating Committee shall report to the Board at the Regular Meeting prior to the Annual Meeting a list of candidates for officers to be voted for at the ensuing election of officers. At least ten (10) days before the Annual Meeting, the Secretary shall mail by first class mail, postage pre-paid, to each member of the Board at his/her last known address, the list of candidates selected by the Nominating Committee. Nominations for any office may be made from the floor with consent of the nominee. Once appointed, the Nominating Committee shall remain a standing committee until replaced in the succeeding year as set forth above.

On behalf of the Executive Committee, Ms. Kalb moved that the full Board elect the following Board members to the Nominating committee to develop a recommended slate of officers for FY24: Pam Kurt (chair), Amber Torres Gonzalez, Nicole Parker, Mike Hatton, Curt Lau. The motion was seconded by Mr. Phillips and the Motion Passed Unanimously. (23-079)

On behalf of the Executive Committee, Ms. Collise moved that the full Board authorize the Executive Director to publish the Lake County ADAMHS Board SFY2024 Request for Proposal. The motion was seconded by Ms. Kalb and the Motion Passed Unanimously. (23-080)

On behalf of the Executive Committee, Ms. Kalb moved that the full Board to approve the General & Professional Liability Insurance and the Directors and Officers Insurance as recommended by the Executive Director. The motion was seconded by Ms. Collise and the Motion Passed Unanimously. (23-081)

Ms. Fraser noted we will receive a separate quote for cyber insurance; currently covered through another carrier through 10/23.

On behalf of the Executive Committee, Ms. Collise moved that the full Board increase the Board Operating Budget: increase Accrued Leave Payout (account #512) \$16,000 and decrease Salary (account #512) for a budget neutral line item adjustment. The motion was seconded by Mr. Lau and the Motion Passed Unanimously. (23-082)

Ms. Fraser noted that this is the same account line item number but accrued payout is a liability accounted for separately.

On behalf of the Executive Committee, Ms. Kalb moved that the full Board support the Capital Project between Lake-Geauga Recovery Centers and the Ohio Department of Mental Health and Addiction Services for the Mentor Outpatient Office Renovation Project; OMHAS grant to Lake-Geauga not to exceed \$750,000.00. The Lake County ADAMHS Board approves the aforementioned project with an assurance of intent to support Lake-Geauga's project consistent with the application and to monitor the operations to assure compliance. The motion was seconded by Mr. Phillips. After discussion the Board voted and the Motion Passed Unanimously. (23-083)

EVALUATION/QUALITY IMPROVEMENT COMMITTEE REPORT:

Ms. Kurt reported that the Evaluation/Quality Improvement Committee met on March 13th and the following items were discussed:

Quality Improvement Review of Crossroads Health Ms. Thomas shared a power point on Crossroads Health reviewing the history of the agency.

Ms. Thomas stated that Crossroads Health made a data informed decision to focus on access to client care. Initial goals were to increase the rate of live answered calls to 40% with 1 dedicated FTE, decrease the time to return voicemails and identify a long-term FTE to increase to an 80% live answer rate. These goals were being met initially until the agencies CCBHC grant was not renewed and they needed to reallocate staff. Initial goals for walk-in assessments were to reduce time from general outpatient counseling staff by 50% and increase availability for long-term care, recruit 4 access clinicians to provide walk-ins, scheduled diagnostic assessments & SFBT counseling and increase % of walk-ins seen to 75%. Since January 2022 this goal has been met each month except for three. Initial goals for scheduled assessments were to schedule no more than two weeks for routine appointments, to schedule no more than one week for urgent appointments and improve kept appointment rate to 80%. Intake staff went from 3-4 to 1 making it difficult to meet these goals.

Ms. Thomas reported the following next steps:

- MTM Services Consolation kicked off in January 2023
 - MTM is providing consultation around client access and will have a timeframe of 9-12 months.
- Changes with Express Scheduling for counseling appointments.
 - A pilot was implemented last fall with two providers to increase the scheduling window from 5 business days to 10. Based on the outcome we made the decision to change our protocol for counseling appointments.

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

On behalf of the Evaluation/Quality Improvement Committee, Ms. Kurt moved that the full Board accept Crossroads Health's Quality Improvement Plan. The motion was seconded by Ms. Collise and the Motion Passed Unanimously. (23-084)

Quality Improvement Review of Family Pride of Northeast Ohio Ms. Daugherty reviewed their mission which is to provide support and inspire our community's well-being through highly qualified, engaged staff, providing responsive and flexible behavioral health services to individuals and families.

Family Pride is a community based behavioral organization that services northeast Ohio (Lake, Geauga and Ashtabula counties). Services that they provide include counseling, therapeutic behavior support services, parent & education supports, school-based services, professional development, trauma specific services, mental health support services, senior support services and reentry program.

Ms. Daugherty stated that the Lake County ADAMHS Board provides funding for their Senior Support Services Program which provides specific, measurable, and individualized mental health services to Lake county seniors in the community and home-based settings. The purpose of the program is to increase access to care, reduce the impact of individual mental health symptoms and improve quality of life. So far 20 seniors have been in the program to date with 460 services provided with case management, mental health assessment and therapy. Challenges for the program include: mental health stigma, building program awareness amongst

community partners and potential referral sources and access to resources (housing, translation services and financial services).

Ms. Daugherty shared Family Pride's goals for SFY24 which include: continuing to work through barriers & challenges, look for new partnerships/gaps in services, develop clear clinical/program outcomes to show success, build our senior support services clinical team and continue to work through workforce issues.

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

On behalf of the Evaluation/Quality Improvement Committee, Ms. Kurt moved that the full Board accept Family Pride's Quality Improvement Plan. The motion was seconded by Ms. Kalb and the Motion Passed Unanimously. (23-084)

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 CY21 to CY22, they increased unduplicated patients by 25% in Lake County. From CY21 to CY22, they increased staffing by 166 FTE's; an increase of 24%. Professional staffing remains very challenging; particularly in behavioral health and substance use disorder.

Ms. Harrington shared that their new Painesville location at 54 S. State Street opened on May 9, 2022. At this site they increased access to mental health, substance use disorder and sexual reproductive health services. There is an on-site pharmacy and they will be offering medication assisted treatment services and dental services.

Signature Health is currently hiring staff and hope to open soon 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. 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 reported that Signature Health is building their own facility from the ground up. It is 48,000 sq. ft. and they expect to open in the fall of 2023.

Ms. Harrington shared the following milestones/goals:

- * Resumed in-house training and expanded provision of EMDR therapy for survivors of trauma; trainings resumed in 2022 adding 25 EMDR providers in Lake County
- * Re-introduced the BASIS-24 Assessment tool for BH outcomes measurement
- * The Life Skills program implemented community-based HIV and HepC testing in SUD groups and provided programming for many collaborating organizations (Bridges, Crossroads, Health, Lake-Geauga, Lake County Jail and local schools and universities)
- * Patient Navigator program
- * Employee Wellness program

Discussion: Mr. Lau asked for specific goals/outcomes numbers. Mr. Rowles will obtain this information and follow-up with him.

Ms. Torres-Gonzalez noted she appreciated the services provided by Signature Health; she knows when she refers someone they will be seen quickly and be well taken care of.

Mr. Rowles has reviewed the agency's QI plan. It is in compliance with their certification through OhioMHAS and it is his 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. The motion was seconded by Ms. Kalb and the Motion Passed Unanimously. (23-085)

Next meeting date: Monday, April 10th at 5:30 p.m. at the Lake County ADAMHS Board

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

*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 Mr. Phillips moved that the Board approve the March bills totaling \$1,210,019.95 be paid as presented. The motion was seconded by Mr. Lau and the Motion Passed Unanimously. (23-086)

GOOD OF THE GROUP:

Mr. Philips asked about OhioMHAS launching a new dashboard to report overdose and substance abuse measures. Ms. Fraser stated that Mr. Rowles has taken the lead on this in our office and next month the data spotlight will be on our data management system. The team is doing a remarkable job of collecting and analyzing data.

As there was no further business, Mr. Lau moved for adjournment at 6:50 p.m. The motion was seconded by Mr. Hatton and the Motion Passed Unanimously. (23-087)

Respectfully submitted,

Matt Sabo
Chair

Kim Collise
Secretary