

LAKE COUNTY ADAMHS BOARD

Regular Board Meeting

Monday, December 18, 2023

6:00 p.m.

Lake County ADAMHS Board, 9237 Mentor Ave, Unit B, Mentor

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

ROLL CALL:

Members Present: Acting Chair – Pam Kurt

Dave Enzerra	Stacy Kramer
Curtis Lau	Nicole Parker
Marty Phillips	Jeff Taylor
Matt Sabo	Beverly Schilero
Amber Torres Gonzalez	William Wilson

Members Excused:

Carl Dondorfer	Roberta Kalb
Mike Hatton	

Staff Present:

Kim Fraser, Executive Director
 Jackie Bruner, Director of Business Operations
 Dan Rowles, Director of Quality & Clinical Operations
 David Schick, Director of Marketing & Communications
 Kelly Tuttle, Secretary/Receptionist
 Milica Fiedler, Staff Accountant

Guests:

Laura McIntosh	Bridges	Michelle Bertram	Catholic Charities
Ed Trevena	Bridges	Charles Tong	Lake-Geauga
Barb Ferritto	Bridges	Melanie Blasko	Lake-Geauga
Shayna Jackson	Crossroads Health	Andrea Gutka	WomenSafe

MINUTES OF MEETING:

Ms. Torres Gonzalez moved to accept the minutes of the October 16, 2023 regular Board meeting as mailed. The motion was seconded by Mr. Phillips and the Motion Passed Unanimously. (24-032)

CORRESPONDENCE:

There was no correspondence to report.

FINANCIAL REPORT:

Ms. Fiedler read the financial report of Board operations for the month of October, 2023 as follows:

Beginning Cash Balance	.....	\$5,353,185.54
Plus: Cash Receipts for the Month	.....	\$1,202,702.20
Total to Account For	.....	\$6,555,887.74
Minus: Cash Disbursements for the Month	.....	\$1,364,592.83
Ending Period Adjustments		\$ 0.00
Ending Cash Journal Balance	.....	\$5,191,294.91

Mr. Sabo moved to accept the financial report for the month of October as read. The motion was seconded by Ms. Torres Gonzalez and the Motion Passed Unanimously. (24-033)

Ms. Fiedler read the financial report of Board operations for the month of November, 2023 as follows:

Beginning Cash Balance	\$5,191,294.91
Plus: Cash Receipts for the Month	\$ 721,352.41
Total to Account For	\$5,912,647.32
Minus: Cash Disbursements for the Month	\$1,416,219.67
Ending Period Adjustments	\$ 0.00
Ending Cash Journal Balance	\$4,496,427.65

Mr. Phillips moved to accept the financial report for the month of November as read. The motion was seconded by Mr. Sabo and the Motion Passed Unanimously. (24-034)

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 support during the moving process and that we are delighted to be in our new home.

EXECUTIVE COMMITTEE REPORT:

On behalf of the Executive Committee, Ms. Torres Gonzalez moved that the full Board enter into a SFY2024 Non-Medicaid contract for SOS Year 2 for the period of September 30, 2023 through September 29, 2024 with the following agencies: Crossroads Health \$265,938; Lake Geauga Recovery Centers \$216,940; Signature Health \$308,000; Windsor Laurelwood \$239,962; and WomenSafe \$43,200. The motion was seconded by Ms. Parker and the Motion Passed Unanimously. (24-035)

Ms. Fraser noted that the opiate funding is award by OhioMHAS and is invested in a range of services.

On behalf of the Executive Committee, Ms. Parker moved that the full Board enter into a SFY2024 Non-Medicaid contract for ARPA 2 funding for operational costs for the Everett Center for an amount not to exceed \$495,000. The motion was seconded by Mr. Sabo and the Motion Passed Unanimously. (24-036)

Ms. Fraser noted the funding for the mental health group home was awarded by OhioMHAS for start up funds and initial operations. This will double the capacity for mental health transitional beds in the county.

On behalf of the Executive Committee, Mr. Sabo moved that the full Board to approve SFY2024 Health Officers as recommended by the Director of Quality and Clinical Operations. The motion was seconded by Mr. Lau and the Motion Passed Unanimously. (24-037)

Ms. Fraser reminded that Health Officers go through a thorough training and the endorsement of their Executive Director to become a health officer.

On behalf of the Executive Committee, Ms. Torres Gonzalez moved that the full Board to approve the six-month calendar of Board meeting dates as presented. The motion was seconded by Ms. Parker and the Motion Passed Unanimously. (24-038)

EVALUATION/QUALITY IMPROVEMENT COMMITTEE REPORT:

Mr. Enzerra reported that the Evaluation/Quality Improvement Committee met on November 13th and December 11th and the following agenda items were discussed:

Mr. Rowles thanked Windsor Laurelwood for hosting the meeting this evening. He shared that due to unforeseen circumstances Fine Arts were not able to present this evening but would in December.

Quality Improvement Review of Windsor-Laurelwood Ms. Giancola gave an overview of facility information, programming and the medical staff. Windsor-Laurelwood provides inpatient treatment to adults, adolescents and children. The facility provides: adult inpatient treatment (mental health, dual diagnosis and substance use disorder), child/adolescent inpatient treatment (mental health) partial hospitalization and outpatient services. The adult recovery 'Center for Hope' is currently closed but they are still able to provide 3.7 level of care on the mental health unit. Assessments are offered 24/7. If a patient is not clinically indicated they do not need to go to the emergency department for medical clearance.

A team of social workers are dedicated to discharge planning. As part of the discharge plan all patients will create a crisis safety plan that identifies: individual warning signs, triggers and identified support persons as well as a continuing care plan, discharge order, crisis safety plan and medication reconciliation list.

Ms. Giancola gave an overview of outpatient care noting that there are two levels of care; Partial Hospitalization (PHP) and Intensive Outpatient (IOP). Adolescent PHP is currently on hold. PHP care consists of ten 6-hour sessions 3 days a week. Transportation is provided for adult residents throughout Cuyahoga and Lake Counties. IOP care consists of eighteen 3-hour sessions with either in person or virtual sessions and is provided both in the day and evening. Transportation is offered for day sessions within a 20-mile radius for Lake and Eastern Cuyahoga County. It is not provided for evening sessions.

There were 252 Lake County child/adolescents admitted into inpatient, 643 residents into outpatient, and 306 into outpatient totaling 1201. The Lake County ADAMHS Board funded 96 admits. Mr. Rowles thanked Windsor-Laurelwood on their partnership for the Opiate Recovery Transition program and admitting patients with no insurance when the state hospital is at capacity. It is a huge asset to those who need help in the county.

Ms. Giancola stated that goals for the upcoming year include: staffing, re-opening the 'Recovery Center for Hope,' Pet Therapy, website redesign, time tap (on-line scheduling for PHP/IOP) and CEU Program. She noted that in partnership with Crossroads Health they will presenting a lunch and learn 1-hour CEU event.

Mr. Walters reported that scheduled/actual attendance for patients and family is 65%. They are working to get to 85% and are currently at 79%; which might allow them to meet the goal at the end of the year. The safety rounds are one of their initiatives they were underperforming. They standardized and the data changed dramatically. They started at 55% and right now they are at 84%. They also lowered times for overnight hospital rounds. Patient satisfaction scores fluctuate greatly. They are working on clean and comfortable environment, patient rights and food. Outpatient scores are in the top 10 percentile in all of UHS. Inpatient scores are in the lower 50th percentile. Mr. Rowles noted that a lot of times patients are there against there will being pink slipped so they are dissatisfied upon admittance.

Mr. Enzerra thanked Windsor-Laurelwood for hosting this evening and all the great work they do for the community.

Ms. Rowles has reviewed the agency's QI plans. They are in compliance with their certification through OhioMHAS and it is his recommendation to approve their plan.

On behalf of the Evaluation/Quality Improvement Committee, Mr. Enzerra moved that the full Board accept Windsor-Laurelwood's Quality Improvement Plan. Seconded by Mr. Lau the Motion Passed Unanimously. (24-039)

Quality Improvement Review of Fine Arts Association Ms. Raddell reviewed the mission and values of the Fine Arts Association. She stated that they provide creative arts therapy through music, art and drama therapy. Currently they are not able to provide drama therapy since there are only two therapists in the state who are licensed to provide this service so they are not able to fill the position.

Fine Arts provides services to all ages, abilities and levels of functioning. They also provide adapted services to allow for a more individualized class. The Early Childhood program is for children ages 0-6 years where they learn social skills and fundamentals.

Ms. Raddell stated that due to their growth they now have three sites that include Willoughby, Painesville and Euclid. They do not turn anyone away who is unable to pay.

Ms. Raddell reported that they received referrals from Signature Health, Catholic Charities, Crossroads Health, Bridges and Lake-Geauga Recovery Centers totaling 55 in September and 77 in October. The number of new referrals each month was four.

Ms. Raddell listed some strengths which include: quality of services and programming, understanding of DEI, uniqueness of services, strong personnel of art and music therapists and mental health experience, enthusiasm amongst faculty & staff and ability to advocate for the importance of creative therapies. Weaknesses include limited availability of personnel, creation of new systems, lack of desk administration, competitive salaries leading to retention issues and lack of desk administration.

Mr. Rowles 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. He noted that Fine Arts also provide services to provider agency staff.

On behalf of the Evaluation/Quality Improvement Committee, Mr. Enzerra moved that the full Board accept Fine Art Association's Quality Improvement Plan. Seconded by Mr. Sabo the Motion Passed Unanimously. (24-040)

Quality Improvement Review of North Coast Behavioral Healthcare Services (NBHS) Ms. Torbert presented a power point stating that NBHS provides residential treatment services and med/som services at Willoughby Place and Madison Place. The two homes safe supportive transitional housing along with needed residential support services for up to 8 mental health clients at each site. Referrals are received from the state hospital, private hospitals, private nursing homes, jails and prisons. Patients coming out of the state hospital are prioritized. A resident must be at least 18 years-old, severely mentally ill with co-occurring disorders living in the community and at high risk of psychiatric hospitalization or psychiatrically hospitalized or incarcerated needing to transition back into the community.

The group homes are licensed by OhioMHAS and accredited by the Joint Commission under Behavioral Healthcare Standards. They 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 stated that 75% of their residents will transition to a more independent or supported environment within 18 months. In SFY23 there were 9 discharges from the two homes. Bed utilization was at 88%; above the target of 85%. Of the 9 discharged residents 100% were not re-referred or readmitted within 30 days. The success is a result of direct skills teaching in the program and increased support and collaboration with case management agencies and Extended Housing.

Some challenges the group homes face include: less restrictive housing options, wait times, stigma and staffing stability. Strengths include: evidence-based programming, collaborative, trained staff, good stewards of public funds and strong leadership.

Discussion: What is the length of stay goal and how long is the wait list? The length of stay goal is 18 months. Sometimes the stay is longer based on clients meeting goals and finding housing. The wait list is 4-6 months.

If there is a wait list, why is the goal 85% for bed utilization? After a resident is discharged their bed must be held for 30 days in case they are not successful and need to return.

Mr. Rowles 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. He noted that NBHS is valuable to the community and serve challenging clients.

On behalf of the Evaluation/Quality Improvement Committee, Mr. Enzerra moved that the full Board accept Northcoast Behavioral Healthcare's Quality Improvement Plan. Seconded by Mr. Taylor the Motion Passed Unanimously. (24-041)

Next Meeting Date: Monday, January 8, 2024 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. Enzerra moved that the Board approve the December bills totaling \$1,920,746.66 be paid as presented. The motion was seconded by Mr. Phillips and the Motion Passed Unanimously. (24-042)

GOOD OF THE GROUP:

Mr. Lau asked for more information on the Lake ADAMHS Elected Officials guide. Ms. Fraser noted that the guide is formulated two times per year highlighting three topics that are relevant to their constituents.

Ms. Kurt thanked Ms. Fraser and staff for all your hard efforts in the moving process which is appreciated and respected.

As there was no further business, Mr. Lau moved for adjournment at 6:19 p.m. The motion was seconded by Mr. Sabo and the Motion Passed Unanimously. (23-043)

Respectfully submitted,

Pam Kurt
Acting Chair

Nicole Parker
Secretary