

**LAKE COUNTY ADAMHS BOARD**

Regular Board Meeting

Monday, October 21, 2024

6:00 p.m.

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

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

**ROLL CALL:**

Members Present: Chair – Roberta Kalb  
Stacy Kramer Pam Kurt  
Nicole Parker Marty Phillips  
Amber Torres Gonzalez Beverly Schilero  
Jeff Taylor William Wilson

Members Excused:  
Carl Dondorfer Mike Hatton  
Matt Sabo

Staff Present:  
Kim Fraser, Executive Director  
Jackie Bruner, Director of Business Operations  
David Schick, Director of Marketing & Communications  
Kelly Tuttle, Secretary & Receptionist  
Milica Fiedler, Staff Accountant

Guests:  
Michelle Bertman Catholic Charities Charles Tong Lake-Geauga  
Mike Matoney Crossroads Health Kelli Jo Parr NBHS  
Brandon Ford Crossroads Health Tia Lawrence Torchlight  
Karen McLeod Extended Housing Kim Hearn-Vance UH/Lake Health  
Sherri Sullivan Family Pride Michelle Giancola Windsor-Laurelwood

Ms. Kalb welcomed back Ms. Fiedler from maternity leave.

Ms. Kalb shared that on behalf of the Lake County Commissioners, Commissioner Plecnik gifted the board an engraved gavel to commemorate the increase in the number of board members from 14 to 15.

**MINUTES OF MEETING:**

Ms. Parker moved to accept the minutes of the September 16, 2024 regular Board meeting as mailed. The motion was seconded by Mr. Phillips and the Motion Passed Unanimously. (25-017)

**CORRESPONDENCE:**

There was no correspondence to report.

**FINANCIAL REPORT:**

Ms. Fiedler read the financial report of Board operations for the month of September, 2024 as follows:

Beginning Cash Balance	\$6,418,211.49
Plus: Cash Receipts for the Month	\$ 491,450.81
Total to Account For	\$6,909,662.30
Minus: Cash Disbursements for the Month	\$1,714,763.74
Ending Period Adjustments	\$ 0.00
Ending Cash Journal Balance	\$5,194,898.56

Ms. Kurt moved to accept the financial report for the month of September as read. The motion was seconded by Mr. Taylor and the Motion Passed Unanimously. (25-018)

**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 stated that this past weekend Bridges held a very successful fundraising event. The next fundraiser being held is Torchlight's Festival of Trees. The board purchased a table for the event that is full.

Ms. Fraser was excited to announce that Lake-Geauga Recovery Center's Board has decided to take-action to serve adolescents and teens; serving individuals ages 10 and up. They will start with counseling services and then expand as appropriate. This is a much-needed service.

Ms. Fraser shared that the Crisis Stabilization Center is moving forward and they are making good progress. They are working closely to look at what they can do to establish a regional center.

Ms. Fraser thanked everyone for their attendance at the Celebrity Art Auction. She also thanked Board members for their participation in buying tables and donations. This was the most successful one to date from a financial standpoint raising over \$35,000. There were a record number of sponsors this year primarily brought in by Jonathan Lee from Signature Health. The dollars raised are used to promote the board and support the levy campaign. There were more new friends in attendance than in the past. The next Celebrity Art Auction will be held in the spring of 2026 and then the fall of 2027; allowing 18 months between events and coincide with next levy campaign.

Ms. Fraser stated that Chris Herren from The Herren Project spoke to 7<sup>th</sup> and 8<sup>th</sup> graders throughout the county about his experience as a professional athlete and the impact of addiction on his life and career; speaking to 3,000 students at 11 middle schools. He was very impactful and she hopes to bring him back in the spring so that schools who were not able to participate can do so.

Ms. Fraser presented levy updates announcing over 50 speaking engagements, festivals, events and radio shows have been done so far. Two of the three levy mailers have been mailed to date. There have been countless social media posts, the 10+ email campaign and lapel stickers have been created to wear in the community. A letter to the editor is coming out soon. If any Board members are interested in volunteering on Election Day at a voting location, please contact Ms. Tuttle. This would entail holding an Issue 10 sign, thanking residents for voting, and answering any questions someone might have about Issue 10. Ms. Fraser reminded everyone that individuals cannot work the polls on behalf of Issue 10 and a candidate at the same time.

Ms. Fraser announced that early voting started on October 8<sup>th</sup>. The last presidential campaign there were 164,000 registered voters and there was an 80% turnout. This year there are just north of 165,000 registered voters. The prediction was that 30% of voters would turn out early which is 49,000. In just the first nine days of early voting 36,000 people have voted or 22%. This is looking like it is going to be a major turnout.

Ms. Fraser reviewed the annual process for planning, funding, monitoring and evaluating the ADAMHS system of care noting that a balanced budget is required for each program. The Request for Proposals process is a competitive bidding process; and OhioMHAS certified provider can propose for any program, as long as the program is licensed/certified. Grant programs must include balanced revenue/expense budgets, and Purchase

of Service programs must demonstrate Lake ADAMHS as last dollars in. A program summary is required for each program and provider agencies are required to submit projections (with initial proposal), mid-year reports and year-end reports. This allows Board staff to compare projected numbers versus actual numbers. If numbers reflect greater than a 20% deviation from projections, it will trigger a discussion between the agency and board to ensure programs are on track and meeting the intended purpose. There are also two operations meetings with each agency scheduled annually to discuss issues and/or challenges and to make programming and/or fiscal adjustments. Mid-year reconciliations can also be determined if there is significant underspending in a particular program so the year end reconciliation isn't as substantial. Providers can bring line-item adjustments to the board any time prior to the April Board meeting. During the reconciliation process if line-items are discovered to be overspent by more than 10% and \$1,000 that line-item will be considered an unallowable expense and paid back to the board. Grant reports are due by July 31<sup>st</sup> then board staff works with providers through August and September to reach an agreed amount to be reconciled for grant funds. Purchase of service (POS) billings are allowed through September 30<sup>th</sup> to allow time to bill all other funding sources so the Board is the payor of last resort. The board continues to deficit finance so that unspent POS and reconciled grant funds will bring us closer to a balanced budget.

Ms. Fraser stated that all other public funding streams are used first before using ADAMHS Board dollars. The board 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. Unspent POS indicates units did not meet projections or additional payor sources were accessed and Board funds were not paid to the agency.

#### **EXECUTIVE COMMITTEE REPORT:**

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

On behalf of the Executive Committee, Ms. Parker moved that the full Board to approve changes to the by-laws as presented. The motion was seconded by Mr. Phillips and the Motion Passed Unanimously. (25-019)

Ms. Fraser noted the changes included the increase in Board members as well as minor language changes.

On behalf of the Executive Committee, Ms. Torres Gonzalez moved that the full Board approve the FY25 Health Officers as presented by the Director of Quality and Clinical Operations. The motion was seconded by Mr. Taylor and the Motion Passed Unanimously. (25-020)

Ms. Fraser noted that UH/Lake Health, Crossroads Health and Signature Health all had staff who went through the health officer training.

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

Mr. Taylor reported that the Evaluation/Quality Improvement Committee met on Monday, October 7th and the following agenda items were discussed:

Quality Improvement Review of Windsor-Laurelwood Ms. Mastrojohn gave an overview of facility information and programming. 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 for adults.

Ms. Giancola shared some of Windsor-Laurelwood's strengths which include:

- Their patient satisfaction is in the top 10% of the organization

- Adjacent to Lake West Medical Hospital
- Offer a continuum of services from partial hospitalization to outpatient services
- Collaboration with community social service organizations to serve the patient population
- Mechanical restraint free psychiatric hospital

Ms. Giancola reported that Windsor-Laurelwood served 1,284 Lake County residents in FY24. The Board funded withdrawal management for 37 adults (230 bed days) and inpatient services for 89 children/adolescents/adults (646 bed days). Mr. Rowles noted that these programs are vital for those in need.

Ms. Giancola reviewed goals for the upcoming year include: staffing, re-opening the 'Recovery Center for Hope' with residential services, yoga therapy for all units, website redesign, and to find a partner to help them continue the lunch and learn 1-hour CEU event.

Mr. 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. Taylor moved that the full Board accept Windsor-Laurelwood's Quality Improvement Plan. Seconded by Ms. Kurt the Motion Passed Unanimously. (25-021)

Quality Improvement Review of Lake Health Ms. Hearn-Vance stated that the Emergency Based Behavioral Health Crisis Intervention Team provides assessments 24/7 to all patients who enter the UH/Lake Health Emergency Departments who are in a behavioral health crisis. The Crisis team collaborates with community partners to provide services and develop plans of care, they are the point of contact for inpatient admissions for uninsured Lake County residents, they notify hospital liaisons of admissions to allow for follow-up, facilitate admission to the Opiate Recovery Transition program or alcohol detox program, and provide community education.

Ms. Hearn-Vance stated their Peer Support Services are provided by a peer supporter who puts focus on a patient with SUD concerns in the emergency department; sitting with them during wait times, helping explore recovery goals, reviewing treatment options, sharing lived experiences, removing barriers and following-up with the patient after discharge. The Peer Support program is available Monday-Friday from 1:00 p.m. to 10:00 p.m. In FY24, 193 individuals were served; 128 which were Lake County residents.

Ms. Hearn-Vance shared that at the end of FY24, UH Concord opened up a behavioral health unit for uninsured Lake County adults in need of inpatient admission. Two patients were admitted on board beds in FY24 (April-June). Neither patient has returned to the emergency department since their discharge.

Ms. Hearn-Vance stated that the crisis team had 2,900 visits in FY24. 77% or 2,240 visits were from Lake County residents. 722 visits were with patients seen more than one time in the fiscal year (24%) and 181 patients had more than one inpatient admission (8%).

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, Mr. Taylor moved that the full Board accept UH/Lake Health's Quality Improvement Plan. Seconded by Ms. Schilero the Motion Passed Unanimously. (25-022)

Next Meeting Date: Monday, November 4, 2024 at 5:30 p.m. at the Lake County ADAMHS Board

### **OPERATIONS COMMITTEE MEETING REPORT:**

Ms. Kurt reported that the Operations Committee met on Tuesday, October 8th and the following items were discussed:

SFY2024 Non-Medicaid Contract Reconciliation Ms. Fraser reviewed 'SFY2024 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, POS unspent and the grant amount to be invoiced to each agency.

Ms. Fraser highlighted the following contracts:

Catholic Charities Services: The grant amount to be invoiced: \$16,125.00. Unspent dollars were primarily in the Interpretation program (which is a system wide program and is hard to predict). The agency also had \$6,823.81 in unspent POS.

Crossroads Health: The grant amount to be invoiced: \$153,174.00. The agency also had \$490,506.56 in unspent POS. There were mid-year reconciliations. The reconciliation amount was less than the previous two years; it is trending down.

Extended Housing: The grant amount to be invoiced: \$5.00.

Lake-Geauga Recovery Centers: The grant amount to be invoiced: \$37,186.00. The agency also had \$90,432.63 in unspent POS. They get the most individuals enrolled on Medicaid in our system. POS unspent was due to them using other payors and Alcohol Use Disorder (AUD) funding. AUD funding was discontinued for FY25.

Lifeline: The grant amount to be invoiced: \$2,480.72.

Signature Health: The grant amount to be invoiced: \$73,930.94. The agency also had \$17,343.93 in unspent POS. A portion of the funding unspent was due to being down a staff member. The carryover in their line-item is where we received a federal and/or a state grant to support part or all of a program. At the end of the year if there are unused funds we can make a request to OhioMHAS to carry over funds. The request must include a plan on how the funds will be spent in the next year. Where it is noted carryover, it has already been approved by OhioMHAS.

Windsor-Laurelwood: The unspent purchase of service amount: \$601,375.00. 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. The board 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 allocate local dollars for inpatient care as the state's indigent hospitalization program is not guaranteed moving forward.

On behalf of the Operations Committee, Ms. Kurt moved that the full Board reconcile SFY2024 Non-Medicaid grant type contracts as follows: Catholic Charities \$16,125.00; Crossroads Health \$153,174.00; Extended Housing \$5.00; Lake Geauga Recovery Centers \$37,186.00; Lifeline \$2,480.72; and Signature Health \$73,930.94. The motion was seconded by Ms. Kramer and the Motion Passed Unanimously. (25-023)

SOS 4.0 Award Ms. Fraser reminded that the Board has consistently received SOR/SOS funding for the last several years. These dollars are primarily invested in inpatient detox services, liaisons for the courts, housing support services and medication assisted treatment. This year OhioMHAS put out an RFP to have a competitive funding process. Instead of dollars flowing solely through the Boards, they will go to the providers and Boards based on awards from the RFPs received. This year provider agencies applied directly for the funding instead of the Board submitting. Last month the board voted to provide sunset funding to bridge services until they find out what their funding is for this program. The state is currently vetting RFP's and no funding decisions have been made to date. This was informational and no committee action was required.

Other Mr. Hatton stated there have been a lot of changes in the VA eligibility criteria for insurance and the clearest information is not being put out. There a lot of different things being approved that were not in the past. Please refer any clients to the VA office who do not have other health care. There are a lot of tools they can use to help.

Next Meeting Date: Tuesday, December 10, 2024, at 5:30 p.m. at the Lake County ADAMHS Board

*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 to bring before the Board.

**NEW BUSINESS:**

Payment of Bills Ms. Kurt moved that the Board approve the September bills totaling \$1,071,037.47 be paid as presented. The motion was seconded by Mr. Phillips and the Motion Passed Unanimously. (25-024)

**GOOD OF THE GROUP:**

Ms. Fraser reminded that traditionally the full Board meets 11 times per year (the Board does not meet in July). In speaking with the Executive Committee, a lot of other ADAMHS Boards do not meet two months during the year. Given the amount of work around the levy, the Executive Committee was considering canceling the November meeting. Consensus of the Board members was to cancel the November 2024 Board meeting.

Ms. Torres Gonzalez thanked Board members who donated gift cards for the ADAMHS staff wellness initiative.

As there was no further business, Mr. Phillips moved for adjournment at 6:30 p.m. The motion was seconded by Mr. Sabo and the Motion Passed Unanimously. (25-025)

Respectfully submitted,

Roberta Kalb  
Chair

Nicole Parker  
Secretary