

Long-Range Planning Committee Meeting Minutes

Lake County ADAMHS Board, One Victoria Place, Painesville

Wednesday, October 9, 2013

6:00 p.m.

Members Present:

Dave Enzerra	Chair
Dione DeMitro	
Tricia Hart	
Jim Garrett	
Roberta Kalb	

Staff Present:

Kim Fraser	Executive Director
Jackie Bruner	Director of Business Operations
Kelly Tuttle	Secretary/Receptionist

Guests:

Melanie Blasko	Lake Geauga Recovery
Paul Brickman	Signature Health
Spence Kline	Beacon Health

Mr. Enzerra called the meeting to order at 6:00.

Review of Strategic Plan Ms. Fraser sent out the original Strategic Plan that was developed in 2002-2003 for committee members to review after the last meeting. The planning process was facilitated by Mr. Cowen and Mr. Enzerra and involved input from agency personnel, Board members, consumers, community partners and family members. Three main strategies were determined along with a number of goals and objectives. The Board reexamined the document in 2009 to see what was still relevant and identify specific focus areas. To prepare for this evening, staff reviewed these focus areas and how we are doing on taking action as a Board and system to meet goals.

Ms. Fraser presented 'Strategic Plan Review/Update' as a power point (attached); highlighting 2003 goals, the 2009 update and 2013/2014 outcomes.

Strategy 1.0 – Increase productivity through revenue enhancement, staff development, technical support, resource sharing and cost containment. Direct a greater percent of available dollars to “face to face” care.

2013/2014 Outcomes

- Conversion to purchase of service for direct service programs (complete)
 - The Board is no longer fronting dollars but instead paying for a service after it is provided which is more fiscally responsible.
- Elevation of Medicaid (complete)
- Conversion to electronic health records (in progress)

- The conversion was federally mandated and the goal is for the agencies to share information with the client's permission. This will eliminate duplication of services such as intake, assessment, etc.
- Conversion to GOSH system for data/billing management (in progress)
 - The new system will be maintained at the local level and is responsible for determining billings that are non-Medicaid.
- Maintain <5% administrative overhead (ongoing)
- Partner with community organizations to leverage additional funding (ongoing)
 - Leveraging additional dollars from other organizations stretches ADAMHS funding farther.
- Fiscal planning including 5-year projections (ongoing)

Discussion:

- The Board needs to underline the success of maintaining less than a 5% administrative overhead. This goal means a lot and should be recognized.
- A suggestion was made to incorporate the Board operations overhead in messaging when planning for the levy.

Strategy 2.0 – Establish an integrated system of services that emphasizes prevention, early intervention, clinical best practices and recovery.

2013/2014 Outcomes

- Pathways/Neighboring consolidation (complete)
- Beacon Health relocation (in progress – spring 2014)
 - Physical health will be incorporated
- Beacon Health/Western Reserve consolidation (in progress – April 2014)
 - The partnering will make services more comprehensive.
 - This is a proactive move that is critical to the system.
- Extended Housing/Bridges co-location (in progress)
 - The non-clinical campus will be complete in February.
- Forbes House/Women Safe collaboration (in progress)
 - Women Safe is equipped to house men allowing Forbes House to access this service.
- Partner with other community organizations to enhance service options (ongoing)
- New program development (ongoing)
 - Lake-Geauga Recovery Centers has developed new programming to meet the needs of those suffering from Opiate addiction and are opening a group home for women with children.

Discussion:

- In the past the possibility of partnering/consolidating seemed impossible. Mr. Garret complimented all of those involved.
- Continue to create and sustain integration of care through mergers. The role of the Board is to support agencies that have merged and maintain momentum.

Strategy 3.0 – Establish leadership, advocacy and community outreach to increase understanding and support for effective behavioral health care services at the local, state and national level.

2013/2014 Outcomes

- Establish and/or continue to develop system-wide initiatives (ongoing)
 - Initiatives include: Victim Assistance Program, Suicide Prevention Coalition, Trauma Response Team, Opiate Task Force, Re-Entry Coalition.
 - The Board will become part of or develop system initiatives as the need arises.
- Establish centralized behavioral health information/referral line (complete)
- Establish centralized coordination of system-wide initiatives (in progress)
 - The Board created a position to manage all initiatives under one roof.
- Increase involvement with the Ohio Association of County Behavioral Health Authorities (ongoing)
 - Board staff has a strong presence in Columbus. (Executive Council, COQ, and subcommittees).
- Board to become CEU provider (in progress – Spring 2014)
 - In the past, we were not able to manage system wide education at the Board level. The new position that was created will allow us to do so.
- 2014 Levy Planning (ongoing)
 - The Board is always in levy mode; always trying to market and get the word out.

Mr. Enzerra asked for general comments we should emphasize going forward. Commentary can provide direction for staff.

- What can we do to broaden diversity & recruit diverse Board member candidates?
- A suggestion was made to create an ad hoc committee for the purpose of recruiting diverse Board member candidates.
- The Board needs to look for ways to communicate its' cost effectiveness on Board operations.
- There is no need for radical changes but instead to continue on the path we are headed.
- There was a lot of good information in the presentation to build on; such as what has been done to control costs and become more effective. Annual report material.

Consensus of the committee was that the Strategic Plan is still current and not out of date. It does not need to be torn down & rebuilt.

Mr. Enzerra thanked Board staff for the update. The information presented contained good content for messaging. Discussion followed on the importance of presenting this information to the full Board at the next retreat.

Levy Planning Ms. Fraser reviewed 'Lake County ADAMHS Board .9 Mil Levy' that included ballot language from the last levy, campaign expenses, the current cost to homeowners and what the levy generates. The first opportunity to go on the ballot is November 2014. The levy expires in December 2015.

Mr. Enzerra asked for comments/thoughts from the group about the levy information presented.

- The information looks well thought out from past & current experiences.
- At this time we do not know what other issues would be on the ballot in 2014.
- The ADAMHS Board is more visible than it was in 2008.

- Renewal plus not a good move economically. Even though there is always a need for more services, we can function effectively on the current budget.
- Friends of Lake ADAMHS have worked hard the last five years on raising dollars to fund the campaign.

Mr. Enzerra stated at the next Long-Range Planning meeting, the committee will help prepare messaging for the need to go on the ballot to present to the Commissioner's and discuss levy strategy.

As there was no further business, Ms. Hart moved for adjournment. Seconded by Mr. Garrett, the meeting was adjourned at 6:55 p.m.

Next Meeting Date: Wednesday, December 11th at 6:00 p.m., at the Lake County ADAMHS Board