

LAKE COUNTY ADAMHS BOARD

Regular Board Meeting

May 20, 2019

6:00 p.m.

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

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

ROLL CALL:

Members Present: Acting Chair -- Les Beck

Nancy Brown	Troy Hager
Roberta Kalb	Doug Klier
Jim McBride	Andy Meinhold
Matt Sabo	Karen Sippola

Members Excused:

Dione DeMitro	Dave Enzerra
Julia McGruder	Frank Sarosy

Staff Present:

Kim Fraser, Executive Director
 Jackie Bruner, Director of Business Operations
 Greg Markell, Director of Community/Public Affairs
 Kelly Tuttle, Secretary/Receptionist
 Matt Gundling, Staff Accountant

Guests:

Damir Pavicic	Bridges	Colt Hager	Guest
Laura McIntosh	Bridges	Melanie Blasko	Lake-Geauga
Ed Trevena	Bridges	Jackie Smith	Lake Health
Patty Rotert	Bridges	Carrie Dotson	Lifeline, Inc.
Ron Wright	Bridges	Katie Jenkins	NAMI
Mike Matoney	Crossroads/Beacon Health	Patty Smith	Signature Health
Rachel Truelsch	Cleveland Rape Crisis	Mary Wynne-Peaspanen	Signature/Family
Karen McLeod	Extended Housing	Courtney Stowe	WomenSafe

MINUTES OF MEETING:

Mr. McBride moved to accept the minutes of the April 15, 2019 regular Board meeting as mailed. The motion was seconded by Mr. Hager and the Motion Passed Unanimously. (19-090)

CORRESPONDENCE:

There was no correspondence.

FINANCIAL REPORT:

Mr. Gundling read the financial report of Board operations for the month of April 2019 as follows:

Beginning Cash Journal Balance	\$1,898,072.80
Plus: Cash Receipts for the Month	\$5,567,275.62
Total to Account For	\$7,465,348.42
Minus: Cash Disbursements for the Month	\$1,359,330.31
Ending Period Adjustments	\$ 0.00
Ending Cash Journal Balance	\$6,106,018.11

Mr. Sabo moved to accept the financial report for the month of April 2019 as read. Seconded by Mr. Meinhold, the Motion Passed Unanimously. (19-091)

PUBLIC COMMENT ON AGENDA ITEMS & INTRODUCTIONS OF GUESTS:

Guests were welcomed and invited to introduce themselves and comment on any agenda items.

EXECUTIVE DIRECTOR'S REPORT:

Ms. Fraser stated that she will be giving a brief overview of SFY20 Request for Proposals (RFP). No new organizations submitted a proposal. There were some negotiations behind the scenes between agency providers and ADAMHS Staff after receiving the initial proposal. What you will see is the consensus that meets the needs of the community as a result of said negotiations. Agencies were asked to submit for flat or modest increased numbers and if they see an area they can cut to do so recognizing that funding is limited. Some agencies did make cuts.

Ms. Fraser presented a power point highlighting the ADAMHS Board guiding principles, system focus of care and strategic plan. For SFY20 the plan is to continue grant type contracting guaranteeing cash flow each month and unused dollars would be reconciled against POS units at the end of the year.

The following providers are requesting to enter into a SFY20 non-Medicaid contract with the Lake County ADAMHS Board with no funding changes from SFY19: Lake County Sheriff Jail Treatment Program, Lifeline, Inc., and Torchlight.

Ms. Fraser reviewed the following agencies who proposed changes in their SFY20 RFP as follows:

Bridges (\$5,232 increase) – Annualized increased (approved December 2018) – healthcare cost.

Catholic Charities (\$211 decrease) – Increase in POS clinical services enhancing clinical face to face and a decrease in community outreach; budget neutral.

Cleveland Rape Crisis Center – Through a series of communication errors they did not submit a proposal. The agency has sustained a modest contract for several years and recently opened an office in Mentor co-locating with WomenSafe. No competitive grants were received which provide the same services. 120 day notices which are mailed to provider's state we have the right to sever contracts but are not mandated to. A motion will be coming from the Executive Committee to extend their current SFY19 contract through SFY20 so that we do not lose the integrity of services they provide in Lake County.

Crossroads Health (\$186,621 increase) – increase in criminal justice (this line item has not been increased in two decades and the needs have changed in the jail facility and they are revamping these services), new Parenting with Love and Logic (PLL) program is a high intensity family treatment provided in the home, elimination of Consumer Choice Cleaners; expansion of supported employment services and budget neutral line items adjustments reflecting changes in service demand/Medicaid revenue.

Extended Housing (\$50,000 increase) – increase in property acquisition management; this program has sustained flat decreased funding since SFY11.

Lake-Geauga Recovery Centers (\$191,004 decrease) – decrease in residential treatment due to BH redesign rate change, decrease in recovery housing due to state grant availability, new wellness and fitness residential

program (physical wellness is a huge component in recovery which is evidence based) and budget neutral line item adjustments reflecting changes in service demand/Medicaid Revenue.

Lake Health (\$15,704 increase) – annualized increase (approved October 2018) for Peer Support Recovery program which is up and running. They are looking at even more creative ways to use this program.

NAMI of Lake County (\$4,901 decrease) – reinstatement of dual diagnosis support program (the program was suspended December 2018 due to personnel changes). The reinstated program is at a slightly lower rate.

North Coast Behavioral (increase \$124,628) – increase in residential treatment to support increased staffing levels. There has not been an increase in sometime and the level of acuity has increased. Dedicated staffing in Lake County is needed to manage programs.

Signature Health – includes Family Planning (\$83,145 increase) – reinstatement of residential treatment facility (suspended October 2018 due to property acquisition timing – they now have a location in Mentor) and budget neutral line item adjustments reflecting changes in service demand/Medicaid revenue.

Windsor-Laurelwood (increase \$750) – increase in SUD per diem and decrease in MH per diem; budget neutral.

WomenSafe (increase \$76) – decrease in POS clinical outreach and increase in outreach advocacy; budget neutral.

There is an increase in funding requests totaling \$270,220. These proposals support the ADAMHS Board's Strategic Plan by expanding/improving our continuum of care.

The projected net non-Medicaid revenue is \$11,593,530 and the requested funding is \$11,644,881. Ms. Fraser stated that if proposals are accepted as presented we would be deficit financing in the amount of \$51,351. After consulting with Ms. Bruner it is in an acceptable range and she is comfortable with the amount.

Ms. Fraser stated that formal recommendations will be made at the June Program and Allocation Committee meetings and the final vote will be at the June annual meeting. If Board members have any questions, please let her know at any time. Board members are also welcome to stop in and look at the full proposals.

If a Board member does not feel comfortable voting on a certain contract agency due to personal reasons they are free to abstain from the vote.

EXECUTIVE COMMITTEE REPORT:

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

On behalf of the Executive Committee, Mr. Klier moved that the Lake County ADAMHS Board approve the CY2020 Lake County ADAMHS Board budget for submission to the county as recommended by the Executive Director. The motion was seconded by Mr. McBride and the Motion Passed Unanimously. (19-092)

On behalf of the Executive Committee, Ms. Kalb moved that the Lake County ADAMHS Board approve the following budget neutral line item adjustments for Crossroads as recommended:

decrease SUD Psychotherapy \$10,000, decrease SUD Case Management \$2,000, decrease MH Diagnostic Evaluation w/o Medical \$10,000, decrease Crisis Outreach \$10,000 and increase Parenting with Love and Logic (PLL) \$32,000 The motion was seconded by Mr. Sabo and the Motion Passed Unanimously. (19-093)

On behalf of the Executive Committee, Mr. Klier moved that the Lake County ADAMHS Board make a motion to extend Cleveland Rape Crisis Center's SFY2019 contract through SFY2020. The motion was seconded by Ms. Brown and the Motion Passed Unanimously. (19-094)

On behalf of the Executive Committee, Ms. Kalb moved that the Lake County ADAMHS Board approve the 6 month calendar of meetings as presented. The motion was seconded by Mr. McBride and the Motion Passed Unanimously. (19-095)

*As the **EVALUATION/QUALITY IMPROVEMNT COMMITTEE** did not meet since the last full Board meeting, the Board moved on to the next agenda item*

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

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

LONG-RANGE PLANNING COMMITTEE REPORT

Ms. Fraser reported that the Long-Range Planning Committee met on May 15th and the following items were discussed:

2002 Strategic Plan Ms. Fraser stated in 2002 a comprehensive strategic plan was created. Three main priorities were adopted which included:

1. Increase Productivity through revenue enhancement, staff development, technical support, resource sharing and cost containment. Direct a greater percentage of available dollars to "face to face" care.
2. Establish an integrated system of services that emphasizes prevention, early intervention, clinical best practices and recovery.
 - o The goal was to figure out a way someone could seamlessly move through the system embracing integrated service and the recovery model.
3. Enhance leadership, advocacy and community outreach to increase understanding and support for effective behavioral health care services at the local, state and national level.
 - o At the time we were not strong advocates in Columbus and there was not much community outreach. Failed levies.

The plan was reviewed in 2009 and 2013 and the strategies were still relevant. After review in 2016, the strategic focus was centered on a Recovery Oriented System of Care (ROSC). Data was gathered through surveys from a number of individuals that included consumers, families, stakeholders, Board members, and community partners. Further, we reached out to providers asking them provide 3-5 areas needed to be prioritized. After further outreach, input from stakeholders, families, consumers, agency staff, Board members and community partner's was gathered and six common priorities were presented as follows: Restructuring of system to eliminate/merge/consolidate small/medium providers and duplicative services; outreach; expansion of housing services, substance abuse detox services; integration of physical and behavioral healthcare; and technology.

2019 Strategic Update Ms. Fraser reviewed action plans to address the strategic priorities that were put in place since 2016 highlighting some of the following:

- Merger/Consolidation
 - Beacon Health/Crossroads – provide comprehensive service under one roof
 - Family Planning/ Signature Health – streamline service
 - Board financially supported mergers
- Reduction of Duplication
 - Forbes House/WomenSafe
 - Western Reserve (services incorporated at Signature Health)
 - Board streamlined prevention programming
- Outreach/collaboration – not traditional services
 - Lake Health – added Nurse Practitioner/peer support services
 - Lake-Geauga – added SUD Liaison
 - Signature Health – added BH Liaison
 - Board provided ADAMHS 101 Trainings to 400+ employees
 - Board partnered with LC Captains, RSVP, expanded collaboration with schools
- Housing Services
 - Extended Housing – greater investment in residential treatment, emergency voucher
 - Lake-Geauga – recovery housing, expanded residential treatment
 - Board applied for state capital grants, CURES, ATP
- Detox Services/SUD Services
 - Windsor-Laurelwood – provide detox services
 - Signature Health & Lake-Geauga – medication assisted treatment expansion
 - Opiate Recovery Transition Program – First in state to deliver program that transitions client from detox into outpatient care. Other counties are looking to implement this program.
- Integration of Physical & Behavioral Health
 - Beacon/Crossroads – wellness program
 - Signature Health – wellness program, on-site lab, FQHC
 - Lake Geauga—looking at some holistic approaches
- Technology
 - Beacon/Crossroads – ACHES app
 - Electronic Health records and billing updates
- Other
 - Passage of .9 mil levy

Some of the fiscal realities impacting our investment strategies included Medicaid expansion, 3rd party payers/parity, behavioral health redesign, ADAMHS acquisition of additional state and federal grants, our ability to leverage more funding through collaborations, ADAMHS increase in capital investments and ADAMHS action to spend down cash reserves.

2019 Priorities In 2016 The Lake County ADAMHS Board embarked on a five year strategic plan. This is the 3 year update that includes information from the recent state-wide ROSC survey and compass line data. The Director's Council also gave input and while all agreed that significant progress has been achieved in areas the group also identified the following additional challenges/opportunities:

1. **Restructuring of System**

- May be opportunities for further action; however there is no longer a strong push at the state or local level to take additional steps in the immediate future. Our existing providers feel we hit equilibrium at this point. Don't need to focus on consolidation.
- ROSC/CL Data: Ease of access, accountability of investment.
- Proud of progress that has been made. An affirmation of service providers.

2. **Outreach**

- As a system have done a tremendous job in this area.
- The perception is that all behavioral health services are in Painesville. As a system how do we raise awareness to accessibility?
- Marketing/PR – how can we increase collective visibility on west end of county?
- How do we utilize social media to reach Hispanic community?
- Can we offer ADAMHS 101 in evening/weekends to accommodate Board members?
- How can we increase utilization of peer supporters? Need to be attentive to training needs, establish requirements and expectations.
- ROSC/CL data: prevention programming – area of strength in county.
 - **Thoughts:** Our county has experienced multiple suicides in recent weeks. Think it is important that the Suicide Prevention Coalition continue to be a priority. Helpful to identify red flags and what does someone do with the red flag. Ms. Grady does a good job but there is more work to be done to address the epidemic.
 - ADAMHS 101 presentation is critical – makes agency staff better and shows them where they fit in. Should be a rite of passage for new employees at provider agencies.

3. **Housing Services**

- Identified the need for recovery housing for families and more recovery housing/step down.

4. **Substance Abuse Detox Services**

- Consensus was to continue with expanded services - still losing people.
- ROSC/CL data: proactively address emerging issues. Substances being abused are changing rapidly. Don't take eye off this ball.
 - **Thoughts:** Expanded programming is certainly something that has been good. Challenge –to sustain current programs while developing new programs.

5. **Integration of Physical and Behavioral Health**

- Needs to be a major area of focus. Need to continue to grow in integration.

6. **Technology**

- There is a need to continue focus here. How will changes in Telemedicine impact service delivery in county? Technology is having a greater impact on healthcare in general.
- Market is going to push agency development in this direction and how do we stay on front edge?

- Not every consumer has a smart phone or uses a computer. Can't be in a position to do an all or nothing.

Additional areas of focus were identified while speaking with the Director's Council that they are recommending we add as priorities which includes:

7. Special Populations

- Aging Population – Lake County has fastest growing aging population in the state.
 - How does aging impact wellness and recovery?
 - How are we prepared to manage physical challenges impacting our clients as they age.
 - As more clients reach 65 years old, Medicare becomes a primary payer. We don't have enough licensed professionals able to bill Medicare.
- Early Childhood – increased demand for behavioral health; greater involvement with JFS.
 - Secondary consequences of opiate addiction; how is it going to impact their behavioral health?
- LGBT – county lacks services for this population.
 - Not part of behavioral health community but challenges they face lead them to our community. What is our role as a system? There is a lot of traction on this topic so a meeting was held that included provider staff in our system and community partners. How can we be part of solution for services?
 - Thoughts: There are no support groups or community centers for the LGBT community in Lake County. There is a need for expertise about transitioning. Crossroads is seeing kids coming in for counseling with less than supportive parents.
- Other – Poverty in Lake County is beginning to diversify. There are growing levels in the west end and how are we addressing those needs?

Are there any other areas of focus that Board members feel should be addressed?

Discussion: We may want to consider another age group of 12-15 year olds (transition age). Suicide rate has risen rapidly among that age group. School shootings and the trauma they are facing after the fact. Crossroads has a big presence in the schools and also the trauma response team responds to traumatic events in the schools.

Include African Americans and Hispanics in special populations?

Things such as services for youth – trauma for youth, wellness – can this be integrated in priorities already established? Or offer an alternative whole separate category – youth, early childhood school age – how can we support suicide prevention in school, trauma. Focus on youth/preteen and make one of the priorities?

Mr. Enzerra asked do we agree the 6 priorities identified continue to add value? Suggestions made by the committee were to continue with current priorities but to also add Priority Populations (aging, early childhood, LGBT, African American and Hispanic) as a separate priority. Add youth/preteen and trauma associated to them as another additional priority. The west end poverty should be included under outreach.

Mr. Matoney noted in the next year or so as part of behavioral health redesign and Medicaid, they are looking at a 10% reduction in reimbursement. At some point this will put all Boards at crosshairs and how will they be able to provide at the same level/depth of service.

Ms. Bruner stated that we are currently leveraging every available funding source at the federal and state level since funding has been flat at those levels for several years. The only opportunities have come through specialized grants. We were able to collect an additional \$100k - \$200k of local levy dollars in the current fiscal year attributed to arrearages as we are collecting at full millage. Moving forward we must continue to advocate at the state level and let them know we cannot be the gap of Medicaid paying less. We are currently waiting for the biennium budget to be approved to see how it will impact Lake County.

Mr. Enzerra suggested that the Long-Range Planning Committee consider meeting twice a year unless something comes up that would require them to meet sooner.

Consensus of the committee is go forward with the eight priorities discussed; the previous six identified prior to the meeting plus the two new ones which include priority populations and youth/preteen and the trauma associated with this age group.

In terms of next steps – summarize what was discussed and then he will present to the full Board at the May Meeting.

Mr. Pavicic suggested partnering with drugstore chains on addressing physical health needs of our clientele via minute clinics. They are a different kind of player as health care providers. This is a creative way to think of ways to serve others.

NOMINATING COMMITTEE REPORT:

Ms. Fraser reported that the Nominating Committee met on April 15th to determine a SFY20 Slate of Officers. The SFY20 Slate of Officers that will be brought before the Board are: Les Beck (chair), Dave Enzerra (vice-chair), Andy Meinhold (Treasurer), Matt Sabo (Secretary) and Dione DeMitro (past-chair).

Mr. Sarosy will confirm with candidates their willingness to serve. If all accept, this slate of officers will be presented for consideration and vote before the full Board at the Annual Board Meeting (June 17, 2019) at which time the Board Chair will also accept nominations from the floor.

OLD BUSINESS:

There was no old business.

NEW BUSINESS:

Payment of Bills Ms. Kalb moved that the Board approve the May bills totaling \$991,997.92 be paid as presented. The motion was seconded by Mr. Hager. As there was no discussion the Board voted and the Motion Passed Unanimously. (19-096)

As there was no further business, Mr. McBride moved for adjournment at 6:40 p.m. The motion was seconded by Mr. Meinhold and the Motion Passed Unanimously. (19-097)

Respectfully submitted,

Les Beck
Acting Chair

Troy Hager
Vice Chair