Program Committee Meeting

Meeting date: Monday, September 11, 2023

Meeting time: 5:02pm-6:33pm

Meeting location: 2 Oak Street, Norwalk

Recorder: Cari Williamson

Committee Members Present:

	Katie Chieda-Zoom	X	Lenora Minor
X	Amber Boldman, Committee Chair 5:39pm	X	Laura M. Wheeler
X	Julie Landoll, First Vice Chair	X	Silvia Hernandez
X	Erin Bohne		

Board Staff Present:

X	Kristen Cardone, Executive Director	Ashley Morrow, Community Engagement & Resource Manager
X	Cari Williamson, Office & Fiscal Manager	

Gracyn Shupp, Intern

Unfinished business/updates:

- September Meeting
 - Meeting will be held at the Huron County Department of Job and Family Services on Tuesday, September 19, 2023 at 6:00pm.
 - o Board member appointment
 - Huron County Commissioners approved Wendie Parsons-Nuhn's appointment to the Board. She will be sworn in at the Board meeting.
 - When another Board member position is available, Lieutenant Bill Duncan from the Huron County Sheriff's Office would like to be considered.
 - o Executive Session
 - The Board will enter Executive Session at the beginning of the Board meeting. Ms. Lara Hozalski, Huron County Human Resources, and Mr. Randal Strickler, Huron County Prosecutor's Office will be present during the Executive Session.
- Agency Updates
 - o Governance Committee Grievance Update (Attachment I)
 - Ms. Kristen Cardone discussed the grievance that was filed on in May 2023.
 - Per the Board's policy a plan of correction is required from the agency who has received a grievance against them. Family Life Counseling submitted the plan of correction in Attachment I, which initially only included items 1 and 2. Items 3-5 were added by the Governance Committee.
 - Board members discussed putting in a process to trust but verify that an agency is following through with the action plan. Additionally, they showed concern regarding support staff handling crisis calls and not an emergency therapist.

- Board members suggested any person who presents with a crisis should have a clinical staff member do a brief assessment to determine their level of severity and all interaction with the client should be thoroughly documented.
- Ms. Cardone will change the verbiage in the grievance response and present the changes to the Governance Committee members for approval.
- The committee members had no further questions or concerns about the grievance.
- o Praxis Updates
 - Ms. Cardone shared that on September 6, 2023 there was a meeting with Praxis regarding ongoing issues and a recent fatality at their facility. Attendees included representatives from Praxis, the Huron County Prosecutor's Office, the City of Willard, Willard Mercy and Huron County MHAS. This is the third meeting with Praxis regarding concerns. Later that day the CEO of Landmark emailed everyone in attendance, except Mr. Strickler and Mr. Hamons, addressing questions and concerns from the meeting.
 - Ms. Cardone will share the email with Board members.
 - Board members engaged in discussion regarding the situation.
 - Can they be subjected to Ohio Department of Health visit since there was a death involved?
 - o Ms. Cardone was not sure but will find out.
 - Will our county health department receive the autopsy report since she resided in a different county?
 - Ms. Cardone will ask Mr. Tim Hollinger, Huron County Health Commissioner at Huron County Public Health.

• Discussion Items:

- Quarterly Reports (Attachment II)
 - o Ms. Cardone reviewed the contracted agencies quarterly reports. Attached is a summary of the reports for SFY 2023 Quarter 4 Reports.
- Plan of Correction Policy (Attachment III, Motion).
 - o Ms. Cardone shared the draft Plan of Correction Policy as reviewed and approved by Mr. Strickler. This policy outlines the steps that would be taken if a plan of correction is needed by any contracted agency. Ms. Cardone is working with Mr. Strickler on how to include this information in the Board's contracts moving forward.
 - The Committee Members had no further questions or concerns regarding the Plan of Correction Policy.
 - o The Committee Members were in favor of adding this motion to the Board meeting agenda.
- Family Resource Center of Northwest Ohio MOA (Potential Motion)
 - Motion: Authorize the Executive Director to enter into a SFY 2024 Memorandum of Agreement with Family Resource Center of Northwest Ohio.
 - Ms. Cardone shared that Family Resource Center of Northwest Ohio (FRC) provides crisis stabilization services, a level of care for clients that is not in place in our area; the facility is located in Findlay. Through our Northwest Ohio Regional Collaborative, a regional contract is in place with FRC to fund these services. This MOA states that if a resident of Huron County is receiving services in the facility at the time the funds from the regional contract run out, the Board will pay for the services for the remainder of that resident's stay. This is not an ongoing contract and only covers that specific situation. FRC contacts Ms. Cardone when a client is requesting to be admitted, at which time it will be decided if there is funding available. So far, this fiscal year there has been one client admitted.
 - Mr. Strickler is reviewing the MOA for approval.
 - The Committee Members had no further questions or concerns regarding the Family Resource Center of Northwest Ohio Memorandum of Agreement.

- o The Committee Members were in favor of adding this motion to the Board meeting agenda.
- Youth mental health and suicide discussion
 - O Ms. Cardone shared that Ohio Department of Health compiled data from local Emergency Departments in counties throughout Ohio. One of the biggest concerns was that there was a sharp increase in youth suicide attempts. Huron and Ottawa counties were the top two counties in the state for youth suicide attempts presented at Emergency Departments during a set period of time. There has been discussion with Huron County Public Health Executive Director, Mr. Tim Hollinger, around what can be done to lower these numbers. One idea is to increase services directed at building resiliency skills in youth, providing them with the skills needed to cope with any difficulties they may experience.
 - The Board recently applied for a grant which would provide funding to train community members on how to build resiliency in youth. This training could be for anyone who is willing to take the training and who works directly with the youth, such as members of PROSPER prevention coalition.
 - o Board members discussed potential causes for the increase in youth suicide attempts.
 - Some of the suggestions were social media, family structure, lack of stability, generational trauma, trauma, social determinants of health, and self-esteem.
 - Ms. Cardone will reach out to Mr. Hollinger to request demographic information to try and identify trends.
 - This is an ongoing discussion that needs to continue to be had; what is the difference in Huron County, what drives the numbers, and what can be done.
- Ms. Cardone requested Program committee members review Finance committee minutes prior to the Board meeting and reach out to her with any questions or concerns.

Attachment I

Grievance: Individual called FLC on 5/18 to schedule an appointment. Expressed SI and they said they would call her back to schedule assessment. Never received a call back.

Plan of Correction from FLC (additions made by Governance Committee in red):

We will be addressing this issue in several ways to prevent future occurrences:

- 1. We will educate our referral department to call the closest FLC office if a client indicates they have an immediate need.
- 2. We will educate our referral department to also share with the client the option for assessment in the closest ED.
- 3. FLC shall provide training for referral department on what constitutes an immediate need and will ensure questions are added to intake paperwork (if they are not already included) to ensure this information is being gathered during the first call.
- 4. Referral department will provide referrals to outside agencies if a client who is in immediate need is not able to be seen on the same day at an FLC office.
- 5. Referral department will provide all clients who call in with the following resources: Crisis Text Line (text 4HOPE to 741741) and 988.

Follow up response from FLC: We have made all of the necessary changes/adjustments noted. The questions were already part of our paperwork, but we are training staff on ways to better ask the questions to get the information needed. We have already sent all the information out via email to the necessary staff, but will also be having a zoom training this Friday, Aug. 11, that will allow us to better explain the process in person and allow them to ask further clarifying questions if needed. And this will now be made part of the training for all new necessary staff coming on board moving forward.

Attachment II

Summary of Reports

Age Exchange (p. 5)

- o 43 volunteers, 40 students served
- o Increased time spent in sharing time portion of the group throughout the year as youth seemed to have a lot they wanted to talk about
- Positive impacts on both the youth and the seniors
- Catholic Charities Adult Advocacy Services (p. 11)
 - The Adult Advocacy Program provided guardianship to a total of 13 wards referred by the Huron Mental Health Board during this quarter. Catholic Charities has assisted a total of 35 wards in the Huron County Area. There are 3 pending Huron County Probate referrals. The clients are provided access to community connections as well as support from the staff guardians.
 - Due to a pending decrease in funding, the agency will continue with 5 staff guardians. Referrals continue to come in from hospitals, facilities, as well as family referrals.
 - Catholic Charities is currently assessing the Guardians of Estate aspect of the program. A payee program
 has agreed to take the appropriate wards into their program. This will allow the guardians to establish a
 relationship with the wards that is not associated with their money. This is the most positive direction
 to go in trying to establish a strong relationship with the wards, to bets impact their lives.
- Catholic Charities Miriam House (p. 12)
 - In the 4th Quarter of SF23, Miriam House served 27 clients. Of those, 9 were adults (18 and over) and 18 were children, ages 0-17 years. Of the adults, nine had a mental health diagnosis and 3 were dual diagnosed with Substance Abuse.
 - Number of individuals who exited the program: 12.
 - Of those who exited, the number who exited successfully (to permanent housing): 8
 - Residents arriving at Miriam House are demonstrating a significant level of trauma, they are being linked with services immediately and the community is working well with getting timely response. Our residents continue to have multiple issues around health and mental health.

• Family and Children First Council (p. 14)

- 42 active cases
- o 20 families participated in Strengthening Families program
- o Seeing increase in youth substance use in homes where adults have medical marijuana card
- Continue to struggle with engagement from families
- Youth and Families Served
 - Highest served age groups are 4-9 years of age and 14-18 years of age
- Top identified needs (in order): behavior problems, developmental disability, aggression/assault, mental health

• Family Life Counseling (p. 17)

- Waitlist information
 - Childrens' Behavioral Health Center -- 3
 - Shady Lane Adult and SUD treatment 19
- Staff Openings
 - Childrens' Behavioral Health Center needs 2 hybrid (School based and office-based) clinicians or 2 office based clinicians.
 - Shady Lane Adult and SUD treatment -- needs 2 licensed (Mental health or dual diagnosis) clinicians and 1 CDCA
 - School Based Services needs 2 school-based clinicians, 1 case manager.
 - MRSS need 1 Parent peer support
 - Bellevue no openings, no active service except certified office in Bellevue schools
 - Womens' House of Hope need 1 weekend BHT shared with Mens' House of Hope

Mens' House of Hope – need 1 weekend BHT shared with Womens' House of Hope

o Updates

- Will be providing services in Willard 3 days per week in former office; actively seeking a permanent location for a satellite office in Willard
- MRSS team served 285 families since July 2022; MRSS completed their first fidelity review and was recognized as a "best practices" program.
- Recovery Housing: both men's and women's homes are consistently full; the women's home has an average waitlist of 2

Trends

- We are seeing a greater need for family therapy and a greater number of clients who have experienced trauma.
- SUD clients are down in numbers
- We are seeing an increase in Mental Health clients wishing to socialize but there are few locations for this to occur so they can establish healthy relationships.
- We are seeing an increase in referral for youth who are truant from school. We are also seeing an increase in referrals for youth who have autism and the families need help to de-escalate them.
- We notice trends both in the school and community of teachers, staff and parents wanting youth to learn to socialize with other youth more effectively. Parents and staff members both report noticing children having a difficult time with emotional regulation as well as realizing what is appropriate versus inappropriate action with peers.

• Firelands Counseling and Recovery Services (p. 22)

- o Waitlist: 0
- Staff Openings: 1 FTE Therapist
- Low referrals to vocational rehabilitation program

• Huron County Juvenile Court (p. 24)

- Total clients served during quarter: 7
 - 3 new clients
 - 1 termination
- Transportation challenges due to lack of taxi availability

Let's Get Real (p. 25)

- o 153 clients served
- o Reduction in Warm-Handoff calls from Fisher Titus and Mercy
- Jail services suspended from June 1st through end of quarter
- o Continued increase in calls from Willard PD due to Praxis clients needing transports
- Decrease in utilization of Recovery Ride
- Increased participation in jail assessments by inmates (voluntary)

NAMI (p. 29)

- o Increased participation in monthly support group
- Will be promoting QPR and RUOK to schools and businesses during FY24
- o 9 CISM callouts in Huron County in FY23
- Trained 18 Huron County officers in CIT

OhioGuidestone (p. 31)

- Number served: 39 total students through classroom consultation and 2 children through family centered consults
- o 3 new referrals
- Ongoing trend has been the lack of connection with other school districts/childcare centers identifying the need for classroom consultation

• Oriana House (p. 32)

- o NOBARS program closed as of June 30th.
 - Served 6 clients during Q4
- Rigel

- Since January 1, 2023 our average wait from referral to assessment in outpatient is 4.5 business days.
- No show rate has decreased significantly
- Upgraded our Board of Pharmacy Terminal Distribution of Dangerous Drugs license in order to store Sublocade on site and will begin Sublocade services in addition to other forms of MOUD offered.
- Family Matters has not been well attended from the Norwalk and surrounding communities. We
 are going to pilot bringing this back in person as a once monthly meeting with both families and
 their loved ones (optional) to attend in hopes of increasing attendance.
- The number of services at the jail were reduced due to concerns at the jail. Assessments and Vivitrol were still able to be completed, but groups and individuals were not.
- Reach Our Youth (p. 38)
 - 14 new mentor applications
 - Continued monthly activities

Attachment III

HCBMHAS may request a plan(s) of correction from a contracted provider for the following:

- In response to a grievance.
- Issues related to the quality of services being provided.
- Issues related to client care.

Plan of Correction Specifics:

- Length: plan of correction shall be in place for no longer than twelve (12) months.
- The contracted provider is responsible for ensuring compliance with the plan of correction to the satisfaction of the Board.
- The contracted provider shall submit an update on progress being made on the plan to the Board monthly, with a due date of the 15th of each month.
- Deliverables within the plan of correction shall follow the SMART goal format (Specific, Measurable, Achievable, Relevant, and Time Bound).
- Contracted providers shall be permitted to have no more than two (2) plans of correction within one fiscal year.
- Should a contracted provider require a third plan of correction, HCBMHAS Governance Committee shall meet with the contracted provider at which time the provider shall be given a 120 Day Notice.

Compliance

- If the contracted provider does not show at least 25% progress made toward the plan of correction for deliverables within the first three (3) months after receipt of the plan, the HCBMHAS Governance Committee shall meet with the provider. Upon completion of this meeting, the Governance Committee may recommend to the Board that a 120 Day Notice be provided to the contracted provider.
- If the contracted provider does not show at least 50% progress made toward the plan of correction for deliverables within six (6) months after receipt of the plan, the HCBMHAS Governance Committee shall meet with the provider. Upon completion of this meeting, the Governance Committee may recommend to the Board that a 120 Day Notice be provided to the contracted provider.
- If the contracted provider does not show at least 75% progress made toward the plan of correction for deliverables within nine (9) months after receipt of the plan, the HCBMHAS Governance Committee shall meet with the provider. Upon completion of this meeting, the Governance Committee may recommend to the Board that a 120 Day Notice be provided to the contracted provider.
- If the contracted provider does not show 100% progress made toward the plan of correction for deliverables
 within twelve (12) months after receipt of the plan, the HCBMHAS Governance Committee shall recommend to
 the Board that a 120 day notice shall be provided unless there are extenuating circumstances that within sound
 discretion of the Governance Committee and the Board have determined to extend the length of the plan of
 correction.
- Should the contracted provider elect to not accept the plan of correction as presented to the provider and/or as
 may be modified by agreement with HCBMHAS and provider, the HCBMHAS Governance Committee shall meet
 to discuss and approve providing a 120 Day Notice to the provider.